

2025

Public Health Impact Report

Springfield Department of Health and Human Services



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A Message from Commissioner Helen Caulton-Harris

As Commissioner of the Springfield Department of Health and Human Services, I am proud to share our Department's accomplishments in 2025. Public health is the foundation of strong communities—from the air we breathe and water we drink to the systems that protect our most vulnerable residents. While priorities may shift at the federal level, our commitment in Springfield remains steady. We continue to serve residents every day, directly in our neighborhoods.

In 2025, the Department managed 11 grants totaling more than \$5 million and generated approximately \$540,000 in local revenue through fees, permits, and fines. With 44 full-time employees, our team works to meet growing community needs while navigating workforce and system challenges.

This year we strengthened emergency preparedness efforts, revitalized our Medical Reserve Corps, and maintained vigilant oversight of communicable diseases through our Community Health Nursing and Disease Surveillance Division. Our Office of Opioid Response expanded harm reduction, recovery supports, and prevention initiatives using settlement funds. The Tobacco Control Program continued strong enforcement and education efforts to protect youth. Health Services for the Homeless expanded integrated care by adding a full-time dentist for the first time in over 2 years, improving access to oral health services for residents experiencing homelessness.

Together with the Public Health Council and our community partners, we advanced policies, strengthened partnerships, and continued equity-focused initiatives to protect the health of Springfield residents.

Public health is visible in prevention, emergency response, harm reduction, and the partnerships that strengthen our neighborhoods. I invite you to read this report to learn more about the important work taking place across our Department as we continue building a healthier Springfield for all.



*Helen Caulton-Harris, Commissioner
Springfield Department of Health and Human Services*

Environmental Health

In 2025, the Environmental Health Division continued to play a critical role in protecting the safety, sanitation, and environmental conditions affecting Springfield residents, businesses, and visitors. The division supported cross-department coordination on nuisance and environmental concerns impacting vulnerable populations. The Environmental Health team worked closely with the Departments of Public Works, Fire, Police, Code Enforcement, Engineering, Licensing, and other municipal partners to address environmental hazards, public safety considerations, and regulatory compliance for establishments throughout our community.

The division is led by Samantha Chartier, Director of Environmental Health, with support from Anthony Albano, Assistant Director of Environmental Health. The division's inspection and regulatory work is carried out by Environmental Health Inspectors Jose Hernandez, Yelena Pantus, Antoinette O'Connor, and Angel Munoz, with additional technical expertise provided by Steven Stathis, Environmental Health Consultant. Administrative and operational support is provided by Bianca Ottaviani, Environmental Health Clerical Staff, who assists with permitting, records management, and coordination with businesses and residents.

Environmental Health staff conducted inspections and regulatory oversight across a wide range of establishments to ensure compliance with state and local public health codes. Approximately 1,100 permanent food operations were inspected multiple times throughout the year, including K-12 schools, daycares and preschools, colleges and universities, hospitals, adult day programs, nursing and elder care facilities, residential kitchens, restaurants, retail grocery stores, churches, and other food service sites. Inspectors also oversaw approximately 165 mobile food trucks and carts; temporary vendors across more than 40 community events (with 1-30 vendors per event); vendors at roughly five farmers markets (with 1-15 vendors per market); about 30 public and semi-public pools and spas; approximately 20 body art establishments (with multiple practitioners per site); about 25 recreational camps; and roughly 10 health clubs and tanning salons.

Beyond routine inspections, the division carried out comprehensive permitting and regulatory responsibilities across numerous environmental health domains. Staff permitted and inspected all food establishments, body art facilities and practitioners, recreational camps, health clubs, tanning salons, and public or semi-public pools and spas, including on-site water chemistry testing. The team reviewed applications and site plans for new businesses and conducted pre-operational inspections prior to opening. Inspectors maintained an extensive database of regulated establishments and preserved both physical and digital records of inspections, permits, applications, and administrative documentation.

Environmental Health personnel also provided technical assistance and education to business owners to promote compliance with the Massachusetts Merged Food Code and other regulations. The division investigated foodborne illness complaints in collaboration with Public

Health Nursing, responded to urgent environmental emergencies such as sewage backups or fire damage, addressed nuisance complaints, and completed public records requests from the Law Department. Staff enforced Department of Environmental Protection (DEP) regulations, including Title 5 septic system requirements, plan reviews, percolation testing, and installation oversight. Additional duties included inspecting state-licensed group homes, maintaining records related to septic systems, asbestos abatement, de-leading certifications, hazardous material incidents, wells, submetering, and property damage, and permitting specialized entities such as waste installers, waste haulers, and trailer coach parks.

Seasonal and environmental protection activities were also significant. During the summer months, staff collected weekly water samples from multiple recreational beaches for laboratory testing. Mosquito control efforts included larvicide in stagnant water sources throughout the city twice annually. Inspectors maintained rabies exposure and animal quarantine records and assisted Animal Control with wildlife concerns when needed. The division fielded inquiries from residents and prospective business owners, serving as a key liaison between the public and the Health Department while providing guidance on regulations and best practices.

The Environmental Health Division operated in 2025 with a fully staffed team consisting of four Environmental Health Inspectors, a Director of Environmental Health (Registered Sanitarian), and an Assistant Director of Environmental Health (Registered Sanitarian), supported by administrative and technical staff. All team members maintained professional certifications and preparedness training, including Certified Food Protection Manager, Food Allergy Awareness, Certified Pool and Spa Operator, and FEMA Incident Command System (ICS) and National Incident Management System (NIMS) coursework. The division also continued working toward achievement of the FDA Voluntary National Retail Food Regulatory Program Standards, further strengthening Springfield's food safety infrastructure and regulatory excellence.

Community Health Nursing & Disease Surveillance

The Community Health Nursing & Disease Surveillance Division protects the health of Springfield residents through communicable disease monitoring, case investigation, clinical coordination, and preventive health services. The division serves as the City's front line for identifying, responding to, and preventing the spread of infectious diseases while supporting vulnerable populations through outreach, vaccination efforts, and community partnerships.

The division's work is supported by a multidisciplinary team that includes Dominique Taylor, Nurse Supervisor, who oversees nursing operations and clinical coordination. Fred Pearson serves as a Case Investigator, conducting follow-up on reported communicable diseases and supporting timely case investigation and reporting. Community outreach and engagement are strengthened through the work of Community Health Workers Mary Loughman and Julio Blank, who assist residents with health education, resource navigation, and connection to supportive services, including supporting the non-clinical components of tuberculosis (TB) Directly Observed Therapy (DOT) to help ensure treatment adherence and continuity of care. Administrative coordination for the division is supported by Diana Perez, Principal Clerk for the Nursing Division, who assists with records management, program logistics, and communication with healthcare providers and community partners. Working closely with the Massachusetts Department of Public Health (MDPH), healthcare providers, schools, and community organizations, the division ensures timely reporting, follow-up, and intervention in accordance with state regulations.

Through ongoing surveillance, case management, vaccination outreach, and coordination with state and local partners, the division plays a critical role in protecting community health and reducing the impact of infectious diseases. Despite ongoing workforce challenges, the division remains committed to providing timely response, maintaining continuity of care, and advancing prevention efforts that support healthier and more resilient communities.

Communicable Disease Surveillance and Reporting

In 2025, the Division maintained surveillance for reportable infectious diseases using the Massachusetts Virtual Epidemiologic Network (MAVEN), the Commonwealth's real-time disease reporting and case management system. In accordance with Massachusetts Department of Public Health regulations (105 CMR 300.100), local boards of health are required to acknowledge and conduct follow-up on reportable disease notifications for residents within their jurisdiction. All individuals diagnosed with a reportable communicable or infectious disease who report residency in Springfield are automatically reported to the Springfield Local Board of Health through MAVEN, and the Department conducts follow-up as required.

Department staff reviewed all disease notifications and conducted case investigation, monitoring, and coordination activities to support epidemiologic surveillance and public health response. Follow-up investigations are not routinely required for COVID-19 or influenza alerts unless specifically directed by the Massachusetts Department of Public Health (MDPH). For

norovirus, follow-up is conducted for individuals aged 12 years and younger or 80 years and older, consistent with state guidance.

During the reporting period, the Division managed 91 reportable disease cases requiring investigation, coordination, or monitoring. These activities were supported in part by one contracted staff member dedicated to contact tracing and case investigation. Every reportable disease notification contributes to ongoing epidemiologic monitoring and supports the Department’s ability to identify trends, prevent further transmission, and protect community health. Disease counts for Springfield residents for 2023, 2024, and 2025 are presented in the table below. Note: Cells with counts fewer than five cases are displayed as “<5” in accordance with public health confidentiality standards.

Disease	2023	2024	2025
Amebiasis	<5	<5	<5
Babesiosis	<5	<5	<5
Campylobacter-Associated Laboratory Identified (CALI)	50	102	187
Campylobacteriosis	17	20	12
Cholera	0	<5	<5
Chickenpox (Varicella)	0	<5	0
Cryptosporidiosis	5	<5	5
Cyclosporiasis	<5	7	<5
Influenza	1280	2401	4939
Group A Streptococcal Disease	24	17	20
Giardiasis	10	16	11
Hepatitis A	<5	0	<5
Hepatitis B	10	17	24
Hepatitis C	69	61	46
Hepatitis D	<5	0	0
Haemophilus influenzae Disease	<5	7	<5
Human Granulocytic Anaplasmosis	0	<5	5
Legionellosis	<5	<5	8
Listeriosis	0	<5	0
Malaria	<5	<5	0
Mpox	0	<5	0
Pertussis (Whooping Cough)	0	30	5
Salmonellosis	12	16	16
SARS-CoV-2 (COVID-19)	4299	2608	1517

Shigellosis	<5	<5	<5
Streptococcus pneumoniae	9	7	6
Shiga toxin-producing Escherichia coli (STEC)	<5	<5	<5
Group B Streptococcal Disease	8	8	<5
West Nile Virus Infection	<5	<5	0
Yersiniosis	<5	5	<5

Tuberculosis Surveillance and Directly Observed Therapy (DOT)

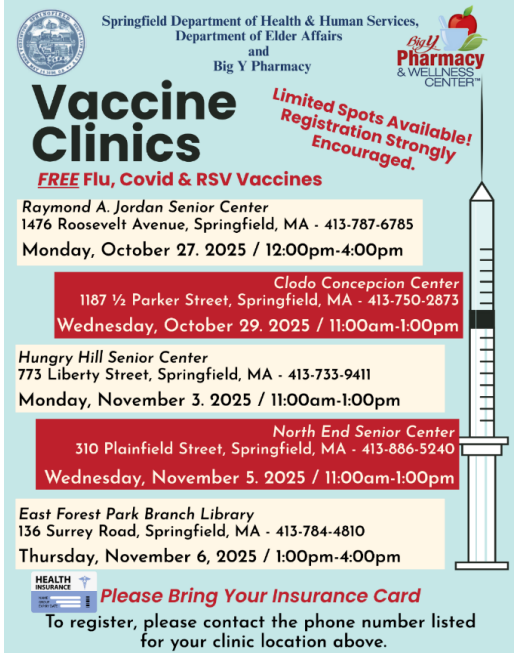
The division plays a central role in tuberculosis (TB) surveillance and case management, a shared responsibility between local public health and MDPH. TB is an immediately reportable disease requiring prompt investigation, isolation guidance when necessary, and ongoing monitoring to prevent community transmission. SDHHS administers Directly Observed Therapy (DOT) for TB patients to ensure adherence to treatment and reduce the risk of disease spread. Case management activities include coordination with healthcare providers, monitoring treatment compliance, and supporting safe discharge planning for individuals returning to the community.

Vaccination Outreach and Preventive Health Activities

The division promotes preventive health through vaccination education and community-based clinics. In fall 2025, SDHHS hosted booster clinics at multiple locations, including the Raymond Jordan Senior Center, Hungry Hill Senior Center, Greenleaf Community Center, North End Senior Center, and East Forest Park Library. Across these sites, residents received influenza, COVID-19, and respiratory syncytial virus (RSV) vaccinations, improving access for older adults and other vulnerable populations.

State Guidance and Interagency Coordination

During the 2025–2026 vaccination season, the Healey-Driscoll Administration and MDPH issued updated guidance recommending COVID-19 vaccination for adults, young children, pregnant or lactating individuals, immunocompromised persons, and others at elevated risk. The Commonwealth authorized pharmacists to administer recommended vaccines and required insurers to cover them, ensuring continued access statewide despite evolving federal recommendations. SDHHS implemented this guidance locally in coordination with regional public health partners and healthcare providers.



Springfield Department of Health & Human Services,
Department of Elder Affairs
and
Big Y Pharmacy

Vaccine Clinics
*Limited Spots Available!
Registration Strongly Encouraged.*

FREE Flu, Covid & RSV Vaccines

Raymond A. Jordan Senior Center
1476 Roosevelt Avenue, Springfield, MA - 413-787-6785
Monday, October 27, 2025 / 12:00pm-4:00pm

Clado Concepcion Center
1187 ½ Parker Street, Springfield, MA - 413-750-2873
Wednesday, October 29, 2025 / 11:00am-1:00pm

Hungry Hill Senior Center
773 Liberty Street, Springfield, MA - 413-733-9411
Monday, November 3, 2025 / 11:00am-1:00pm

North End Senior Center
310 Plainfield Street, Springfield, MA - 413-886-5240
Wednesday, November 5, 2025 / 11:00am-1:00pm

East Forest Park Branch Library
136 Surrey Road, Springfield, MA - 413-784-4810
Thursday, November 6, 2025 / 1:00pm-4:00pm

Please Bring Your Insurance Card
To register, please contact the phone number listed for your clinic location above.

2025 Vaccine Clinic Flyer

Tobacco Control

The Tobacco Control Program is responsible for the education, inspection, regulation, and enforcement of local and state tobacco laws in the City of Springfield. The program is led by Program Coordinator Neville Anglin, with enforcement activities carried out by inspectors Jeanette Quinn and Ruby Henriquez. Clerical support is provided by Chassility Pizarro and Ashley Robertson, who assist with permitting, recordkeeping, compliance documentation, and program administration. Together, the team works to reduce tobacco use, prevent youth initiation, and protect residents from secondhand smoke exposure through compliance monitoring, public education, and policy development. Staff collaborate with community organizations, healthcare partners, and state agencies to address tobacco-related health risks, particularly among populations disproportionately affected by nicotine addiction and tobacco-related disease.

The program ensures compliance among tobacco retailers and workplaces through routine inspections, youth access compliance checks, secondhand smoke investigations, and enforcement of violations. In FY25, staff issued 217 tobacco sales permits and conducted 298 investigations and onsite inspections in response to complaints and compliance needs. These activities included enforcement actions when violations were identified, as well as coordination of Board of Health hearings in partnership with the Law Department. The program maintains comprehensive retailer and inspection records and serves as the primary liaison to the Massachusetts Department of Public Health (MDPH).

Over the past year, the program maintained full regulatory oversight of licensed tobacco retailers and strengthened education efforts to promote compliance with state and local regulations. Through the recruitment and training of youth purchasers, staff conducted compliance checks in accordance with MDPH guidelines to prevent illegal sales to minors. In FY25, 301 out of 325 retailers were found to be adhering to youth access regulations, representing a compliance rate of 93 percent. Two part-time contracted inspectors were also added during the year to enhance inspection capacity and enforcement coverage. The program manages state-required data reporting and grant deliverables to ensure fiscal and programmatic accountability.

Beyond enforcement, the Tobacco Control Program plays a critical role in advancing prevention and policy initiatives. The team partners with city departments, the Public Health Council, community organizations, and statewide coalitions to promote smoke-free environments, advocate for stronger local regulations, and address emerging nicotine products such as e-cigarettes and synthetic nicotine. These efforts contribute to chronic disease prevention, reduce youth exposure to tobacco products, and support long-term reductions in tobacco-related illness.

Cannabis Control

The Cannabis Control Division oversees local regulatory compliance for cannabis establishments in coordination with municipal departments and state agencies to protect public health and safety. The program is coordinated by Xavier Williams, who serves as the Cannabis Control Program Coordinator and leads the City’s oversight and compliance activities related to licensed cannabis establishments. In 2025, the division regulated eight licensed dispensaries operating within the City of Springfield. The Cannabis Control Coordinator conducted quarterly inspections of each establishment to verify compliance with local ordinances, state regulations, and public health standards. Inspections focused on operational practices, security protocols, product handling, and safeguards intended to prevent diversion and youth access.

Throughout the year, the division also responded to complaints and reports of potential non-compliance involving dispensary operations. Staff worked closely with the Mayor’s Office, Law Department, Police Department, and other municipal partners to address emerging issues in the evolving cannabis marketplace and ensure consistent enforcement of local requirements. In addition, the division monitored community concerns related to neighborhood impacts, youth exposure, and public safety.

A major focus in 2025 was addressing the widespread availability of illegal, unregulated synthetic cannabinoid products, commonly referred to as “gas station weed,” including delta-8 and delta-10 THC items. Although prohibited under Massachusetts law, these products were widely sold in retail settings without regulatory oversight. Following review by the Public Health Council, the City advanced a proposed ordinance to prohibit the manufacture, sale, and distribution of synthetically derived cannabinoid products within Springfield.



Cannabis Control Coordinator, Xavier Williams, addressing the concerns of synthetic cannabinoids at the June 4, 2025 City Hall Press Conference

The Department of Health and Human Services conducted inspections and site visits to identify retailers selling these products. Many items were marketed with packaging resembling candy, placed in easily accessible retail locations, and lacked clear manufacturing information, ingredient labeling, or accurate THC content disclosure. These characteristics posed particular risks to youth and consumers. The proposed ordinance established local enforcement authority, including fines and confiscation of illegal products, thereby aligning municipal action with state public health protections.

In addition to synthetic cannabinoids, the division engaged with the Public Health Council in discussions regarding emerging substances such as kratom and potential future regulatory approaches.

Through ongoing inspections, complaint response, policy development, and enforcement initiatives, the Cannabis Control Division worked to ensure licensed establishments operated responsibly while addressing illegal sales that threatened community health and safety. These efforts reinforce Springfield's commitment to maintaining a regulated cannabis marketplace while proactively protecting residents, particularly children and adolescents, from harmful or unlawful products.



Synthetic cannabinoid products found in Springfield, MA

Health Services for the Homeless

Overview

The Springfield Department of Health and Human Services administers the Health Services for the Homeless (HSH) Program, a federally qualified health center supported community health center program that provides comprehensive healthcare services to individuals experiencing homelessness and housing instability across western Massachusetts.

The program is led by Deputy Commissioner Tiana Davis, who oversees program strategy, partnerships, and service delivery to ensure individuals experiencing homelessness have access to coordinated, compassionate, and high-quality care.

Founded in 1988, the program has grown into a critical safety-net service for some of the region's most vulnerable residents. As of February 1, 2026, the health center has provided care to 1,141 patients, offering primary care, behavioral health services, oral health care, and enabling support services through a collaborative network of community partners.

In FY25, the program provided healthcare services to 689 homeless adults, delivered dental care to 59 individuals, and supported 912 individuals through social services and case management. These services play an important role in improving access to care, stabilizing health conditions, and supporting recovery and long-term well-being.

The program continues to expand services to meet community needs. In 2025, HSH welcomed its first full-time dentist in nearly two years, significantly increasing access to essential oral health services for individuals experiencing homelessness. The Department is also preparing to reopen a new school based dental clinic at the Putnam site in summer 2026, further strengthening access to preventive and restorative dental care.

Program History

The Health Services for the Homeless program reflects decades of federal investment and local leadership dedicated to expanding access to healthcare for individuals experiencing homelessness.

The Community Health Center Program, established in the 1970s through Section 330 federal grants, created the foundation for community-based primary care across the country. In the 1980s, the federal Stewart B. McKinney Homeless Assistance Act established the Health Care for the Homeless Program, recognizing the urgent need for targeted healthcare services for individuals experiencing homelessness.

Locally, this work was championed by Sister Julie Crane of the Sisters of Providence. In 1983, Sister Crane approached Mercy Medical Center's President and CEO, Sister Mary Caritas, to request support to provide care for Springfield's growing homeless population. With an initial

\$10,000 investment, Sister Crane began delivering outreach-based care directly in the community.

In the early years, Sister Crane and fellow members of the Sisters of Providence provided care in shelters, parks, and along riverbanks—often working out of the trunks of their cars to reach individuals who had limited access to traditional healthcare settings.

In 1986, the City of Springfield was awarded its first HRSA Bureau of Primary Health Care Community Health Center grant, establishing the City’s formal Health Services for the Homeless Health Center Program. The program has since evolved into a comprehensive, community-based healthcare model supported by strong partnerships with hospitals and social service organizations.



Sister Julie Crane, Sisters of Providence

Service Delivery and Community Partnerships

The HSH program provides integrated primary care, behavioral health services, oral health services, and enabling support services through a coordinated network of healthcare providers, community organizations, and departmental staff.

Clinical and oral health services are delivered through partnerships with Baystate Medical Center and Mercy Medical Center, while enabling services and case management are provided through Open Door Social Services. The Springfield Department of Health and Human Services Oral Health Program also plays a key role in delivering preventive and restorative dental care.

The program’s oral health services are supported by a dedicated dental team that includes Homeless Health Dentists Eugenia Cojocar and Michael Nardi, Dental Hygienist Cheryl Pahl, and Dental Assistants Yesenia Espada and Lebiosiris Sencion. Deborah Burns served as the Oral Health Program Director until her retirement in March 2026. Adelin Rodriguez serves as the Dental Care Coordinator, helping ensure patients can access timely dental services and follow-up care.

Care coordination and support services are also central to the program’s model of care. Marsha Wallace-Thomas serves as the Homeless Health Case Manager, working closely with patients to connect them with housing resources, healthcare services, and supportive programs. Karissa Ortiz, Community Health Worker, and Gisela Davila, Medical Insurance Enrollment Specialist, assist individuals with navigating health coverage, accessing benefits, and connecting to community resources.

Operational and clinical systems are overseen by Emanuel Molina, Chief Information Officer and IT Director and supported by Lauren Lynch-Hamre, Clinical Health Manager, along with Dylan Arroyo-Silva, Clinical Systems Analyst, and Shavonne Turner, Clinical Systems Analyst.

Together, they help maintain the program’s data systems, clinical workflows, and reporting processes.

Administrative operations are supported by Michelle George, Administrative Assistant. Financial operations are managed by Paul Le, Financial Analyst, whose work helps ensure the program remains compliant with federal and state funding requirements and operates efficiently.

The program’s approved service area spans Hampden, Hampshire, and Franklin counties, with services delivered at multiple community locations including shelters, service agencies, and outreach sites.

Key service locations include:

- HSH Administrative Office – 311 State Street, Springfield
- Friends of the Homeless Shelter – 755 Worthington Street, Springfield
- The Salvation Army – 327 Liberty Street, Springfield
- Open Door Social Services – 287 State Street, Springfield
- CSO/Friends of the Homeless Northampton – Northampton
- Samaritan Inn – Westfield
- Franklin County Drop-In Center – Greenfield

In addition, the program operates a mobile medical van that provides outreach-based healthcare services across the region, helping reduce barriers related to transportation and housing instability.

Together, this multidisciplinary team and network of partners ensure that individuals experiencing homelessness can access coordinated healthcare, social supports, and recovery services that strengthen health outcomes and improve community well-being throughout western Massachusetts.

Administrative and Finance Team

Our Department's work is supported by a strong administrative and finance team whose attention to detail, coordination, and stewardship of resources are essential to our day-to-day operations and long-term success. Their work often happens behind the scenes, but it is foundational to ensuring that programs run efficiently, grants are managed responsibly, and staff have the support they need to serve the community.

Alma Stelzer is the Department's Office Manager and plays a critical role in managing procurement processes and supporting the Department's operational needs. With 33 years of service, Alma brings deep institutional knowledge and a commitment to excellence in her work. She supports staff in processing invoices and requisitions efficiently and always with a smile. Alma ensures that contracts, purchasing, and vendor coordination are handled accurately and in compliance with City requirements, helping to keep projects moving forward seamlessly.

Timothy (TJ) Williams serves as the Executive Assistant to Commissioner Helen Caulton-Harris. TJ provides high-level administrative support to the Commissioner and serves as a key point of coordination across the Department. From managing scheduling and communications to supporting strategic initiatives and event planning, TJ helps ensure alignment, organization, and effective execution across leadership priorities.

Henry Nguyen has served as the Fiscal Manager since joining the Department in November 2025. He plays a key role in overseeing fiscal management, including grant monitoring, budget tracking, and financial reporting. His work supports responsible stewardship of funds and strengthens our ability to effectively manage and facilitate grant-funded initiatives.

Together, this team ensures that the Department operates with efficiency, accountability, and strong organizational support. This work enables all divisions to carry out their work in service of the Springfield community.



Administrative and Finance Team, from left Henry Nguyen, Alma Stelzer, and Timothy (TJ) Williams.

Emergency Preparedness & Response

The Office of Emergency Preparedness and Response, led by Tony Pettaway, coordinates the City's efforts to protect residents during public health emergencies and extreme weather events. Through proactive planning, interagency collaboration, and real-time operational response, the Office works to safeguard vulnerable populations, including individuals experiencing homelessness, older adults, and residents with chronic medical conditions.

Cold Weather Emergency Response

During the 2025–2026 winter season (November through March), the Office of Emergency Preparedness and Response coordinated the City of Springfield's Cold Weather Task Force to protect residents during periods of extreme cold, with particular focus on individuals experiencing homelessness, older adults, and others at elevated risk of cold-related illness or injury.

From December 15, 2025, through February 9, 2026, the Task Force conducted 19 field deployments in response to sustained subfreezing temperatures. Each deployment began with

operational briefings, including coordination with the Springfield Police Department Watch Commander, confirmation of nightly shelter bed availability, supply restocking, and assignment of outreach areas. Teams conducted proactive patrols throughout high-need locations across the city, including Forest Park, State Street, Main Street, Boylston Street, Mill Street, Worthington Street, East Columbus Avenue, and surrounding corridors. During each activation, staff maintained direct communication with emergency shelter providers, including Friends of the Homeless, Springfield Rescue Mission, and United Methodist Church. Shelter bed capacity was verified nightly, and when facilities reached capacity, alternative placements and overflow options were identified. Outreach teams offered transportation to shelters and successfully transported individuals who accepted assistance, ensuring real-time coordination to place individuals safely indoors during dangerous conditions.

Across the 19 deployments, teams conducted outreach and welfare checks for more than 30 individuals experiencing unsheltered homelessness. Outreach activities included offering transportation to shelters, distributing blankets, winter clothing (hats, scarves, gloves), care packages, hygiene supplies, and providing information about available services and referral pathways. While some individuals declined shelter placement, many accepted supplies and continued engagement. Teams conducted repeat visits in high-visibility locations to monitor wellbeing and maintain consistent support throughout the cold weather period.



SDHHS staff members Chassility Pizarro and Diana Perez assembling care kits for distribution during cold weather outreach.

Cooling Centers and Extreme Heat Response

During the summer months, the Office also coordinated extreme heat response efforts, including activation of cooling centers across the city when temperatures reached dangerous levels. In anticipation of excessive heat, the City of Springfield opened multiple cooling centers throughout the summer at community centers, senior centers, and library locations to provide residents with safe, air-conditioned environments during peak daytime hours. Sites included the Indian Orchard Community Center, South End Community Center, Raymond A. Jordan Senior Center, North End Senior Center, Mason Square Library Community Room, Hungry Hill Senior Center, Clodo Concepcion Community Center, and Forest Park Library.

These centers prioritized access for vulnerable populations, including older adults, individuals with chronic medical conditions, and residents without access to air conditioning. Public communications emphasized preventive measures such as hydration, limiting sun exposure, and checking on neighbors, particularly those living alone. The cooling center network complemented existing public facilities and served as a critical resource to reduce heat-related illness and protect community health during extreme weather events.

Operational Readiness and Interagency Collaboration

Both cold weather and extreme heat responses were implemented through coordinated interagency planning and the City's emergency management framework. The Cold Weather Task Force operates under a phased response plan activated when temperatures are forecast to reach 20°F or below, while heat response actions are initiated during periods of excessive heat. The Mayor, in consultation with the Commissioner of Health and Human Services, may issue advisories or emergency declarations as conditions warrant, utilizing the Incident Command System to coordinate resources across departments.

The Task Force includes representatives from numerous municipal departments and community partners, including Health and Human Services, Police, Fire, Code Enforcement, Office of Housing, Elder Affairs, Pioneer Valley Transit Authority, Health Services for the Homeless, Friends of the Homeless, Springfield Rescue Mission, Catholic Charities, Massachusetts state agencies, and others. Participating agencies monitor conditions affecting their clients, share data on service needs and impacts, and coordinate interventions such as shelter operations, transportation networks, outreach, and public information dissemination.



SDHHS staff members Chassility Pizarro, Diana Perez and Efrain Colon assembling care kits for distribution during cold weather outreach.

Throughout the year, the response effort was strengthened by cross-departmental collaboration and support from partner agencies. Daily communication ensured situational awareness, resource availability, and rapid response to emerging needs.

Collectively, the Office of Emergency Preparedness and Response demonstrated strong operational readiness, coordinated planning, and a sustained commitment to protecting vulnerable residents during extreme weather conditions in both winter and summer months.



Members of the Cold Weather Outreach and Extreme Heat Response team (from left): Neville Anglin, Chassility Pizarro, Efrain Colon, Xavier Williams, Ashley Robertson, and Tony Pettaway.

Medical Reserve Corps (MRC)

The Springfield Medical Reserve Corps (MRC) strengthens the City's capacity to respond to public health emergencies through trained volunteers who support preparedness, response, and recovery efforts. In FY2026, the Springfield Department of Health and Human Services received a grant from the National Association of County and City Health Officials (NACCHO) to revitalize and reactivate the local MRC unit. Under the leadership of Deputy Commissioner Ann Kissel, Unit Leader, and Program Administrator Efrain Colon, the program focused on rebuilding a sustainable volunteer base through recruitment, onboarding, credentialing, and training.

As part of these efforts, volunteers were enrolled in the Massachusetts MA Responds system to ensure they are properly credentialed and ready for deployment during emergencies. The unit also integrated volunteers into broader public health emergency planning activities to strengthen coordination across response partners. To improve operational readiness, the MRC handbook was updated and streamlined for clarity and usability.

The MRC conducted multiple free community preparedness trainings designed to equip residents with life-saving skills and increase community resilience. Trainings included Hands-Only CPR, Naloxone (Narcan) and Overdose Prevention, and Stop the Bleed. Outreach efforts were expanded to increase public awareness of preparedness initiatives and encourage volunteer participation.

Through targeted recruitment, training, and community engagement, the revitalized MRC unit enhanced Springfield's readiness to respond to emergencies while building a stronger network of volunteers committed to protecting public health and safety.



Springfield MRC Program Administrator Efrain Colon at the Emergency Preparedness Fair held at the Raymond Jordan Senior Center in September 2025.

MassCALL3

Massachusetts Collaborative for Action, Leadership, and Learning 3 (MassCALL3) is a statewide substance use prevention initiative funded by the Massachusetts Department of Public Health (DPH), Bureau of Substance Addiction Services. The program focuses on youth and young adult prevention by addressing risk and protective factors associated with alcohol, cannabis, tobacco, and other substance use. Using evidence-based public health strategies, MassCALL3 supports community coalitions, youth leadership development, data-driven planning, and environmental prevention approaches to reduce substance misuse and promote healthy behaviors.

In 2025, the Springfield MassCALL3 program experienced a significant leadership transition. Long-time program manager Robert Crawford departed in August 2025 to pursue a Master of Public Health at the University of Michigan. Following a competitive hiring process, Henry Alston was appointed Program Manager in October 2025. Henry brings extensive qualifications aligned with the program’s mission, including two master’s degrees—an M.S. in Applied Data Science and an MBA in Innovation and Entrepreneurship—and a bachelor’s degree in Health Sciences. His prior experience includes service on Baystate Health’s HIV Prevention and Awareness Outreach Team, where he implemented grassroots outreach strategies to increase awareness, preparedness, and testing among marginalized populations. As a Springfield native with established local partnerships and a background in youth programming, Henry is uniquely positioned to advance community-based prevention efforts. His strong foundation in technology and analytics also enhances the department’s capacity to implement data-driven prevention strategies.



Outstanding Service Award presented to Robert Crawford in recognition of his work as the MassCALL3 Coordinator during his transition from the department in August 2025. The award was presented by Commissioner Helen Caulton-Harris and Deputy Commissioner Ann Kissel, as pictured.

During 2025, the program achieved several key milestones. Henry initially contributed as a consultant, helping to design and plan a Youth Leadership Development Program (YLDP) aligned with MassCALL3’s evidence-based prevention framework. The program then successfully launched its pilot implementation in Springfield in partnership with the South End Community Center and expanded to Holyoke through collaboration with Enlace de Familias. This initiative empowered youth with leadership skills, prevention education, and opportunities for civic engagement, strengthening protective factors and community resilience. Following the successful pilot, Henry transitioned into the full-time Program Manager role, ensuring continuity and expansion of prevention activities.

Looking ahead, the program has identified continued professional development and program refinement as priorities. Goals include strengthening staff expertise through targeted training and enhancing the Youth Leadership Development Program to more effectively address intervening variables identified in the three-year MassCALL3 strategic plan. These efforts will further support evidence-based prevention, youth engagement, and long-term reductions in substance use risk among Springfield’s young people.



Springfield’s Youth Leadership Development Program graduation ceremony, Summer 2025.

Mass in Motion

Mass in Motion is a Massachusetts Department of Public Health (DPH) initiative that supports cities and towns in implementing evidence-based strategies to promote healthy eating, active living, and chronic disease prevention. The program focuses on policy, systems, and environmental changes that make healthy choices more accessible for residents, particularly in communities disproportionately affected by obesity, diabetes, cardiovascular disease, and food insecurity. In Springfield, the program is coordinated by Benjamin Bland, who celebrated his 10-year anniversary with the Department of Health and Human Services in 2025, reflecting a decade of sustained leadership in community health promotion and PSE change work.



Mass in Motion Coordinator Benjamin Bland presenting at the 2025 Public Health Month Kick-Off Event.

Throughout 2025, Mass in Motion advanced initiatives that promote nutrition, physical activity, and overall community wellness. The program supported community-based efforts encouraging active lifestyles and improving access to healthy foods while collaborating with local partners to expand equitable health promotion across neighborhoods. Environmental and behavioral strategies were implemented to address chronic disease prevention, including participation in multi-sector planning efforts and regional health initiatives.

In November 2025, federal changes to The Supplemental Nutrition Assistance Program (SNAP) created an urgent challenge for Springfield residents on two fronts: new eligibility restrictions made it harder for people to get on and stay on benefits, and for the first time in the program's history, SNAP benefits were fully frozen, leaving families without access to the federal nutrition benefits they depend on. Springfield has the highest SNAP participation rate in the Commonwealth, which is why Mass in Motion mobilized quickly when these changes hit. Staff developed education and resource materials at multiple levels: a detailed explainer for service providers and partner organizations, and plain-language materials for residents. A resident-facing "Where Can I Get Help" resource in English and Spanish directed people to local pantries, the Food Bank of Western Massachusetts, DTA contact information, and guidance on using the Healthy Incentives Program (HIP). A key message embedded in the outreach was that even with one cent remaining on a SNAP card, residents could still access their full HIP benefit, and thanks to a DTA system improvement, that benefit could be applied in a single transaction rather than requiring multiple swipes. That resource was posted publicly on the City of Springfield's website and shared through the City's intranet so municipal employees could connect residents to accurate information. Staff also conducted in-person community outreach to get these

messages directly to residents. The SNAP changes explainer for providers was used in outreach and presented to the Public Health Council. This work was informed by trainings through The Massachusetts Law Reform Institute (MLRI) and consultation with MLRI's statewide SNAP policy team.

As part of the City's broader response, the Department of Health and Human Services administered a \$45,000 emergency grant program supporting nine local food pantries with \$5,000 each to strengthen distribution capacity and respond to the sudden surge in need.

Community engagement remained central to the program's work in 2025. A new cycle of the Resident Health Advocate (RHA) program launched in partnership with the Bay Area Neighborhood Council, with a Springfield native and longtime community member elevated into a leadership role, coordinating resident feedback and working alongside program staff in a way that reflects the program's commitment to centering lived experience. The RHA group, working with Mass in Motion and the Bay Area Neighborhood Council, also helped advance a Community Development Block Grant application in partnership with the Parks Department to fund built environment improvements to the Blunt Park pass-through area, a high-traffic pedestrian corridor identified through prior community organizing as unsafe and inaccessible. The application represented a meaningful organizing effort: residents identified a priority, built a coalition, and moved a formal funding request through municipal channels.



Aprendiendo de los Abuelos program hosted by Mass in Motion at the North End Senior Center in Springfield.

Mass in Motion also continued its intergenerational food and culture programming in 2025. In March, the program hosted *Aprendiendo de los Abuelos*, a fully Spanish-language event at the North End Senior Center honoring the food traditions and lived experiences of Springfield's Latiné elders. Approximately 25 community members gathered for a hot Puerto Rican lunch from local restaurant *El Sazón Criollo*, live visual scribing by *Dpict* capturing participants' stories in real time, and bilingual facilitation that created a warm, culturally resonant space for dialogue. The event was planned in partnership with New North Citizens Council and North End Senior Center staff, and a print of the graphic scribe was later installed permanently at the center to honor the stories shared there.

Mass in Motion also deepened its investment in youth engagement in 2025. Staff designed and taught a multi-week public health enrichment curriculum at Springfield Honors Academy, bringing weekly sessions tailored to sophomore students that explored public health concepts, the role of local government in shaping health, and pathways into community-focused careers. Health Resources in Action (HRIA), the program's DPH technical assistance provider, supported delivery of the curriculum as well. That relationship with Springfield Honors Academy directly led to the Department's participation in the school's first Career Day in early 2026, with Mass in Motion coordinating SDHHS involvement and serving as the point of contact.

Mass in Motion also joined the leadership team for Root Mason Square, a community-centered effort to develop an intergenerational drop-in space for residents in the Mason Square neighborhood. More information about the project is available at <https://therootmasonsquare.com/>

Regionally, Mass in Motion contributed to broader public health and food systems planning. Staff participated on the Hampden County Community Health Improvement Plan (CHIP) design team and served on the board of Community Involved in Sustaining Agriculture (CISA), elevating Springfield's voice in Western Massachusetts food access and agricultural sustainability conversations.



SDHHS Staff Theresa Glenn, Chrismery Gonzalez, and Benjamin Bland tabling at a City Hall Wellness Event.

Office of Opioid Response

The Office of Opioid Response coordinates the City’s comprehensive approach to addressing opioid use disorder and overdose through prevention, harm reduction, treatment access, recovery supports, and strategic investment of settlement resources. Led by Program Manager Justin Chellman, the office works collaboratively with healthcare providers, public safety agencies, community organizations, and residents to implement data-driven strategies that reduce overdose risk and strengthen long-term recovery outcomes. Through cross-sector partnerships and community engagement, the program advances Springfield’s commitment to saving lives, reducing stigma, and addressing the root causes of substance use disorder.

ORRF Implementation Funding and Strategic Investments

In 2025, the Office strengthened community partnerships and expanded access to prevention and recovery services through administration of the Opioid Recovery and Remediation Fund (ORRF), a multi-year settlement fund dedicated to prevention, harm reduction, treatment, and recovery initiatives. Investment decisions were guided by findings from a comprehensive 2023–2024 community needs assessment that incorporated input from residents, service providers, and individuals with lived and living experience of substance use disorder. In April 2025, SDHHS released the first round of multi-year implementation funding to key local partners, including Tapestry Health, Gandara Center, and New North Citizens Council. Funded programs expanded mobile outreach, resource navigation, comprehensive case management, and person-centered harm reduction services, prioritizing populations disproportionately impacted by opioid use disorder, including communities of color, immigrant populations, and individuals experiencing housing instability.

These investments supported coordinated service delivery across healthcare providers, social service agencies, and community organizations to strengthen Springfield’s prevention-to-recovery continuum. Efforts focused on reducing barriers to care through warm handoffs to treatment, access to behavioral health services, transportation assistance, employment supports, and housing stabilization.

ORRF Mini-Grant Program Administration

In November 2025, SDHHS launched an ORRF mini-grant Request for Proposals (RFP) to support community-based organizations implementing upstream prevention and community resilience



Opioid Response Program Manager Justin Chellman (center) at a tabling event with Mayor Sarno.

initiatives. The Department administered the full grantmaking process, including RFP development, application review, award recommendations, contract preparation, and compliance monitoring in accordance with municipal procurement requirements. Fifteen organizations were awarded mini-grants in February 2026, with program implementation scheduled to begin in April 2026.

Overdose Prevention and Harm Reduction Initiatives

The Office expanded overdose prevention infrastructure through naloxone (Narcan) distribution, training, and public access supply initiatives. SDHHS administered the Community Naloxone Program (CNP), overseeing procurement, inventory management, distribution to partner organizations, and required reporting to the Massachusetts Department of Public Health. Outreach efforts targeted individuals at highest risk of overdose and those likely to witness an overdose, increasing access to life-saving resources across the community.



One of many NaloxBoxes in Springfield providing free, immediately accessible overdose reversal medication (left); safety kits distributed by SDHHS at community events, which include naloxone, a breathing mask, fentanyl test strips, and multilingual instructions on how to use these resources (right).

The Program Manager also co-chairs the Greater Springfield Opioid Crisis Collaborative (GSOCC). GSOCC is a collaborative comprised of individuals and agencies invested in combating the opioid and opioid related crisis in Springfield. Their collective goal is to reduce overdose and opioid related deaths for people located in Springfield effected by Opioid Use Disorder, their

families and loved ones. GSOCC was formed in 2019 as a response to the rise in overdose-related deaths and is rooted in the values of equity, collaboration, commitment, and safety. GSOCC works to ensure that every decision made in response to this crisis centers the wellbeing of those most impacted.

Community Awareness and Engagement

In August 2025, the Office led Springfield’s annual Overdose Awareness Day event, held in advance of National Overdose Awareness Day. The event featured a resource fair, remembrance activities, educational speakers, and opportunities for community engagement aimed at raising awareness, reducing stigma, and connecting residents with prevention, treatment, and recovery resources.

Through coordinated funding, prevention initiatives, harm reduction efforts, and community partnerships, the Office of Opioid Response enhanced Springfield’s capacity to address the opioid crisis. These efforts expanded access to essential services, strengthened cross-sector collaboration, and advanced long-term strategies to reduce overdose deaths and support recovery for individuals and families across the community.



Springfield’s annual Overdose Awareness Day event, held in August 2025 at Springfield City Hall.

Office of Health & Racial Equity

The Office of Health & Racial Equity (OHRE) works to reduce health disparities and advance equitable outcomes for all Springfield residents by addressing inequities related to race, ethnicity, disability status, age, gender identity, sexual orientation, religion, economic status, and nationality. Grounded in the understanding that equity differs from equality, the Office focuses on allocating resources and designing programs based on community needs and lived experiences, recognizing the significant impact of social determinants of health (such as housing, education, income, and access to care) on health outcomes. This work reflects the department's commitment to ensuring that an equitable Springfield is a healthier Springfield.



Birth Justice Community Forum led by SDHHS Office of Health and Racial Equity Coordinator Shenell Ford, with opening remarks provided by Mayor Sarno.

Established by Mayor Sarno and Commissioner Caulton-Harris following the American Public Health Association's declaration that racism is a public health issue, the Office continued its mission in 2025 through leadership transition and program development. Long-time staff member Chrismery Gonzalez departed in May 2025 after approximately five years of service, and Shenell Ford, IBCLC, joined the department in August 2025, working to clarify the Office's scope of work, strategic priorities, and partnerships moving forward.



Birth Justice Community Forum presentation (from left): Commissioner Caulton-Harris, Shenell Ford, and Deputy Commissioner Kissel.

Throughout 2025, OHRE integrated a health equity lens across departmental planning, programming, and funding decisions, including the equitable allocation of opioid settlement resources. Efforts focused on strengthening partnerships with organizations serving historically marginalized populations, promoting culturally responsive public health strategies, and ensuring that community voice and lived experience inform program design. The Office also emphasized professional development, civic engagement, and participation on boards and committees to advance equity initiatives citywide.

A central priority for the Office was Maternal, Child, and Family Health, recognizing that equitable beginnings are foundational to lifelong health, well-

being, and community stability. In January 2026, OHRE convened a Birth Justice Community Forum to address maternal health inequities and concerns related to changes in local healthcare infrastructure, including hospital and birthing unit closures. The forum provided a structured space for education, transparency, collaboration, and community input, bringing together residents, healthcare providers, advocates, and policymakers. Discussions focused on identifying barriers to safe and equitable birth experiences and developing community-driven strategies to improve access to culturally responsive care.



Attendees at the Birth Justice Community Forum.

Additional accomplishments included supporting cultural recognition and community engagement events and advancing the development of a Mayoral Youth Commission through draft ordinance planning, reinvigorating a civic body that has been inactive for decades. These efforts aim to elevate youth voice in policy development and promote civic engagement as a pathway to improved health and social outcomes.

Across all activities, OHRE remained committed to transparency, community education, collaborative problem-solving, and data-informed approaches to improving outcomes. Through policy advocacy, partnership development, and community engagement, the Office continues to advance birth equity, strengthen community trust, and ensure that all Springfield residents have the opportunity for a healthy start.



Notes from attendees at the Birth Justice Community Forum.

Problem Gambling & Prevention

The Office of Problem Gambling Prevention works to reduce the harms associated with gambling through education, outreach, early intervention, and community partnerships. Led by Theresa Glenn, the office promotes awareness of problem gambling as a public health issue and supports prevention efforts across the lifespan, with particular attention to populations at elevated risk. The program collaborates with schools, healthcare providers, community organizations, and regional partners to increase access to resources, promote responsible decision-making, and connect individuals and families to treatment and support services. Through data-informed strategies and culturally responsive programming, the office advances Springfield's commitment to preventing gambling-related harm and strengthening overall community well-being.

Talking About Gambling Project

In Spring 2023, the Springfield Department of Health and Human Services (SDHHS), Office of Problem Gambling Prevention, partnered with Men of Color Health Awareness (MOCHA), the Deborah Hunt Prevention & Education Drop-In Center (DHC), a program of the New North Citizens Council (NNCC) to launch the Talking About Gambling initiative. With grant funding received by MOCHA from the Health Resources in Action (HRIA) through a DSSR grant focused on dismantling systemic and structural racism. The project was designed by the collaborative team to initiate community dialogue about gambling-related harms—often described by addiction specialists as a “silent addiction” due to its hidden nature and delayed recognition. The initiative engaged DHC participants in structured conversations to explore knowledge, perceptions, and lived experiences related to gambling and its impacts on individuals, families, and the broader community.

Between February 2023 and June 2024, seven facilitated discussion groups were held at DHC, each lasting up to 1.5 hours and involving 16 to 27 participants. Topics included identification of problem gambling in Springfield, perceptions of legalized gambling venues, effects on personal relationships, co-occurring disorders, availability of local treatment resources, and strategies to increase awareness and prevention. Participants received stipends and meals, and sessions were audio-recorded and transcribed for qualitative analysis. Findings identified key themes and community-informed recommendations to guide future prevention efforts, outreach strategies, and policy discussions aimed at reducing gambling-related harm and improving access to support services.

Safe Ride Home Project

In 2023, the Springfield Department of Health and Human Services (SDHHS), in partnership with the Massachusetts Council on Gaming and Health, secured a \$196,000 safety grant from the Massachusetts Gaming Commission Community Mitigation Fund (CMF) to reduce impaired

driving associated with MGM Springfield. The initiative was launched after analyses identified MGM Springfield as the second-highest location in the state for adjudicated “place of last drink” cases and linked to increased alcohol-related crashes in the region. The Springfield Safe Ride Home Project focuses on reducing excessive drinking followed by driving through data analysis, patron research, targeted prevention strategies, and promotion of safer transportation alternatives. A 2024 electronic survey of MGM Rewards Club members found that 37% of respondents reported risky drinking and driving behaviors, many lived within 20 miles of the casino, and a large majority indicated that enforcement measures such as police presence or checkpoints would deter impaired driving.



Safe Ride Home Project billboard located on Interstate 91 near the MGM Casino, displayed from January to March 2026, featuring SDHHS Commissioner Helen Caulton-Harris and Springfield Police Superintendent Lawrence Akers.

Based on these findings, SDHHS developed a bilingual public awareness campaign, explored partnerships with local and state law enforcement for deterrence strategies, and identified practical alternatives, such as rideshare options and safe-ride programs, to reduce operating under the influence (OUI) incidents and alcohol-related traffic collisions associated with casino patronage. The campaign launched in January 2026 and featured Police Superintendent Lawrence Akers and SDHHS Commissioner Helen Caulton-Harris. The project aims to decrease impaired driving through expanded public education, targeted digital outreach, engagement of casino staff and community members and qualitative and quantitative research to better understand OUI patterns, promote safer transportation choices, and prevent OUI-related crashes.

Gambling Awareness Research Initiative (GARI)

The Gambling Awareness Research Initiative (GARI), funded by the Massachusetts Gaming Commission’s Community Mitigation Fund, is a community-based participatory research project created in response to the expansion of legalized gambling and the need for community-driven research to further understand gambling’s impact on youth and young adults. The initiative is a community-academic partnership that includes the Springfield Department of Health and



GARI Project Logo

Human Services (SDHHS), New North Citizens Council (NNCC), and the University of Massachusetts, Amherst, Center for Community Health Equity Research. Developed in 2023, GARI's focus is young adults ages 18–26, a population identified as particularly vulnerable to problem gambling. To ensure authentic community input, the project established the Young Adult Action Collective (YAAC), a 10-member group of diverse Springfield young adults, ages 18 – 24 to serve as co-researchers and co-leaders using a Youth Participatory Action Research (YPAR) approach to guide all phases of the work.

During Phases 1 and 2 (Fall 2023–Spring 2024), YAAC members participated in educational sessions to share their knowledge and lived experiences with gambling as well as learn about the research that highlights the risks associated with gambling, especially among young people. Priority themes emerged from group discussions including the normalization of gambling as a social activity, misconceptions and limited gambling literacy, and the need for earlier prevention education. During Phase 2 (Spring 2024) the YAAC, with support from the UMass research team, explored research methodologies that they believed would be most effective for research gambling knowledge and experience among their peers. Arts based research methodologies, including digital storytelling and a creative crowdsourcing contest were selected as approaches to best illuminate a stigmatized and often hidden public health issue like gambling. In addition, during the Spring and Summer of 2024, the YAAC established a project identity, including an online presence, with the development of the project's logo and website, (www.gariproject.org) that was created by the YAAC and



GARI Project members presents at the 2024 Massachusetts Gaming Commission Conference in Worcester, MA.

continues to be managed by the group. The YAAC also participated in community outreach and was invited to present at the 2024 Massachusetts Gaming Commission research conference, *Using Research to Rewrite the Playbook: Examining the Social Impacts of Sports Betting and the Changing Gambling Landscape*.



GARI Project members and partners at the 2024 Massachusetts Gaming Commission Conference in Worcester, MA.

The efforts of the GARI project were recognized with additional grant funding in FY2025 of \$275,000, by the Massachusetts Gaming Commission, Community Mitigation Fund to support Phase 3 of the project- the implementation of the project’s research plan to gain a greater understanding of the gambling related issues and concerns faced by fellow young adults in Springfield. By combining youth leadership, research, and public engagement, GARI advances culturally relevant prevention strategies while building local capacity to address gambling-related harms among young adults.



GARI Project members (top and bottom photos).

Burial Permit Program

The Burial Permit Program ensures compliance with Massachusetts General Laws governing the disposition of human remains and serves as a critical public health function of the Department. The program is administered by Efrain Colon, who oversees the permitting process and coordination with funeral homes, hospitals, and other partners to ensure that all legal and public health requirements are met prior to the disposition of remains.

Under state law, a burial permit must be issued by the local Board of Health or its designated agent before any burial, cremation, removal, or other disposition of remains may occur. The Springfield Department of Health and Human Services (SDHHS) administers this process for all deaths occurring within the city, working closely with funeral homes, hospitals, medical examiners, and families to verify that death records are complete and that all legal requirements are met prior to disposition.

In 2025, the program coordinated with all major hospitals and licensed funeral homes serving Springfield to issue burial permits for both residents and non-residents who died within city limits. Staff reviewed documentation, processed permits in accordance with state timelines, and facilitated the lawful transport of remains both within and outside the Commonwealth as needed. This work supports families during a sensitive time while ensuring accurate vital records, safe handling of remains, and adherence to public health standards.

The program also administers related licensing and fee collection. The burial permit fee is \$15.00 per permit, and funeral directors operating within the city are required to obtain an annual license, with a fee of \$125.00. Through timely permitting, coordination with partners, and regulatory oversight, the Burial Permit Program helps maintain compliance with state law while providing an essential service to the community during end-of-life circumstances.

Mayor's Office for Citizens with Disabilities

The Mayor's Office for Citizens with Disabilities works to ensure that City programs, services, and facilities are accessible to residents with disabilities and compliant with the Americans with Disabilities Act (ADA). The office is administered by Chassility Pizarro, who oversees accessibility initiatives and supports coordination between City departments to advance inclusive policies and practices.

In 2025, the office supported multiple City initiatives by advancing ADA accessibility and infrastructure requirements for public health installations located on municipal property. This included reviewing proposed projects, identifying accessibility considerations, and coordinating with relevant departments to promote inclusive design and equitable access for all residents.

The Office also serves as a central resource for individuals with disabilities and community-based organizations by facilitating referrals to services that address health, housing, transportation, and other support needs. Through collaboration with City departments and external partners, the office helps residents navigate available resources while promoting awareness of disability rights and accommodations. In addition, the office monitors municipal compliance with ADA requirements to ensure that City policies and practices align with federal accessibility standards.

The Mayor's Commission on Disability meets on the last Tuesday of each month at 3:00 PM at the Mason Square Library, 765 State Street. These meetings provide a forum for public input, community updates, and ongoing dialogue about accessibility issues affecting Springfield residents.

Public Health Council

The fifteen-member Public Health Council serves as the City’s advisory body on public health matters and provides guidance to the Mayor on issues affecting the health and wellbeing of Springfield residents. The Council is composed of a diverse group of community representatives, including two physicians, six members who earn less than fifty percent of their income from health care, and six members who earn more than fifty percent of their income from health care. The Commissioner of the Department of Health and Human Services serves as a voting member, and the Mayor appoints the Chair, who serves at the Mayor’s pleasure. While the Council is not currently at full membership, the body continues to provide important public health oversight and community insight. Current members include Commissioner Helen Caulton-Harris; Chair Nellie Maldonado; Vice Chair Wesley Days; Mattie Jenkins; Mary Ann Baker; Dr. Alicea-Torres; Dr. Colgram; and Dr. Scavron. Together, these members represent a range of professional expertise and community perspectives that help inform local public health policy and priorities.

Throughout 2025, the Springfield Public Health Council provided oversight, policy guidance, and community insight on a range of critical public health issues affecting residents. Council discussions reflected the Department’s commitment to evidence-based policy, prevention, and collaboration across community partners, healthcare providers, and government agencies.

A significant focus of the Council’s work this year was the development of local regulations addressing synthetically derived cannabinoids, often referred to as “gas station cannabis” products such as Delta-8 and Delta-10. These products are frequently sold in convenience stores and other retail locations with limited oversight and minimal research on safety. The Department presented data on potential health risks and gaps in state-level regulation, prompting extensive discussion about the role of local public health authority in protecting residents. Following community engagement with neighborhood councils and other stakeholders, the Council voted to move forward with regulations prohibiting the manufacture, sale, and distribution of synthetic cannabinoid products in Springfield. By mid-year, the effort advanced toward a citywide ordinance that would include stronger enforcement provisions and penalties.

Substance use prevention and harm reduction also remained central to the Council’s work. Early in the year, the Department finalized awards through the City’s Opioid Recovery and Remediation Fund (ORRF), supporting initiatives led by the New North Citizens’ Council, Gandara Center, and Tapestry Health. These programs aim to strengthen care coordination, expand recovery services, and incorporate the perspectives of individuals with lived experience into program design. In addition, the Council reviewed emerging public health strategies such as drug checking programs that allow individuals to test substances for contaminants including fentanyl and xylazine. Council members emphasized the importance of education around

overdose response, including the use of naloxone and rescue breathing, as part of broader harm reduction efforts.

During several meetings, the Council also evaluated new overdose reversal medications, including OPVEE (Nalmefene). After reviewing emerging research and hearing concerns from harm reduction providers about the medication's potential to cause prolonged withdrawal symptoms, the Council recommended that opioid settlement funds not be used to purchase OPVEE in Springfield. This recommendation reflects the Council's focus on evidence-based decision making and alignment with the perspectives of frontline providers and people who use drugs.

Public health preparedness and emergency response were also key topics. The Department provided updates on efforts to revitalize the Springfield Medical Reserve Corps (MRC), a volunteer program that supports local response during emergencies and public health initiatives. The program received a Medical Reserve Corps Operational Readiness Award to support volunteer recruitment, training, and program development. The Council also reviewed the Department's winter outreach and shelter coordination strategies for residents experiencing homelessness, including partnerships with hospitals, shelters, and transportation providers to ensure safe placement during extreme cold weather events.

The Council additionally reviewed updates related to federal and state policy changes affecting public health and healthcare access. Presentations addressed potential federal policy shifts related to immigration status verification and healthcare funding, as well as major changes to the Supplemental Nutrition Assistance Program (SNAP). Springfield has one of the highest SNAP participation rates in Massachusetts, and Council members discussed how new federal work requirements and eligibility changes could affect food security for thousands of residents. The Department and its partners are continuing outreach efforts to ensure residents understand eligibility rules, available exemptions, and how to maintain benefits.

Operational oversight of the Health Services for the Homeless Health Center also remained an important component of the Council's responsibilities. In a joint session with the Health Center's Co-Applicant Board, members reviewed clinical quality indicators, patient satisfaction data, staffing updates, and financial reports. Progress was noted in several areas, including improvements in colorectal cancer screening and continued strong performance in tobacco cessation counseling. The Council also reviewed the FY2026 federal HRSA grant budget and application cycle updates to ensure continued stability of health center operations.

Finally, the Council discussed emerging public health concerns related to substances such as kratom and newly synthesized derivatives that may pose opioid-like risks. Presentations explored the pharmacology, safety concerns, and regulatory considerations associated with these products, emphasizing the need for continued monitoring as new substances enter the marketplace.

Meet Our Staff



Meet Our Staff



