SOMERS 2021 EQUITY PROFILE

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CONTENTS

Executive Summary	2
Overview	3
Demographics	4
Housing	7
Education	9
Economy	11
Income & Wealth	13
Health	15
Civic Life & Community Cohesion	24
Environment & Sustainability	27
Notes	29

Compiled by DataHaven in August 2021.

This report is designed to inform local-level efforts to improve community well-being and racial equity. This represents version 1.0 of the DataHaven town equity profile, which DataHaven has published for all 169 towns and several regions of Connecticut. Please contact DataHaven with suggestions for version 2.0 of this report.

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EXECUTIVE SUMMARY

Throughout most of the measures in this report, there are important differences by race/ethnicity and neighborhood that reflect differences in access to resources and other health-related social needs. Wherever possible, data will be presented with racial/ethnic breakdowns. Data for white, Black, Asian, and other populations represent non-Hispanic members of each racial group.

- Somers is a town of 10,255 residents, 16 percent of whom are people of color. The town's population has decreased by 10 percent since 2010.
- Of the town's **3,625 households**, **87 percent** are homeowner households.
- **Twenty-six percent** of Somers's households are cost-burdened, meaning they spend at least 30 percent of their total income on housing costs.
- **Ninety-two percent** of public high school seniors in the Somers School District graduated within four years in 2019.
- Among the town's adults ages 25 and up, **39 percent** have earned a bachelor's degree or higher.
- Somers is home to **2,637 jobs**, with the largest share in the Agriculture, Forestry, Fishing and Hunting sector.
- Somers's average life expectancy is **81.5 years**.
- **Sixty percent** of adults in Greater Hartford say they are in excellent or very good health.
- **Eighty-two percent** of adults in Greater Hartford are satisfied with their area, and **52 percent** say their local government is responsive to residents' needs.
- In the 2020 presidential election, **88 percent** of registered voters in Somers voted.
- **Fifty-eight percent** of adults in Greater Hartford report having stores, banks, and other locations in walking distance of their home, and **69 percent** say there are safe sidewalks and crosswalks in their neighborhood.

OVERVIEW

For the purposes of this report, Somers will be compared to Connecticut as a whole, as well as to the towns in Tolland County. In addition, data are presented for Greater Hartford where sample sizes are otherwise small.

FIGURE 1: STUDY AREA

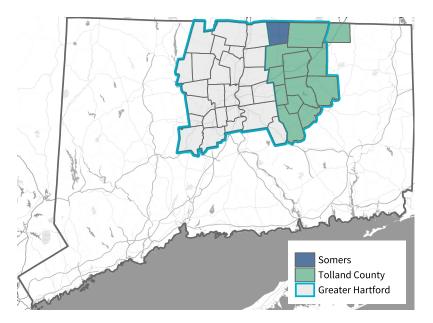


TABLE 1: ABOUT THE AREA

Indicator	Connecticut	Tolland County	Somers
Total population	3,605,944	149,788	10,255
Total households	1,370,746	55,683	3,625
Homeownership rate	66%	72%	87%
Housing cost burden rate	36%	29%	26%
Adults with less than a high school diploma	9%	5%	9%
Median household income	\$78,444	\$87,069	\$108,560
Poverty rate	10%	7%	2%
Life expectancy (years)	80.3	81.1	81.5
Adults w/o health insurance	10%	8%	9%

Tolland County is made up of the following towns: Andover, Bolton, Columbia, Coventry, Ellington, Hebron, Mansfield, Somers, Stafford, Tolland, Union, Vernon, and Willington Greater Hartford is made up of the following towns: Andover, Avon, Berlin, Bloomfield, Bolton, Canton, Columbia, Coventry, East Granby, East Hartford, East Windsor, Ellington, Enfield, Farmington, Glastonbury, Granby, Hartford, Hebron, Manchester, Mansfield, Marlborough, New Britain, Newington, Plainville, Rocky Hill, Simsbury, Somers, South Windsor, Southington, Stafford, Suffield, Tolland, Vernon, West Hartford, Wethersfield, Willington, Windsor, and Windsor Locks

DEMOGRAPHICS

As of 2020, the population of Somers is 10,255, including 1,851 children and 8,404 adults. Sixteen percent of Somers's residents are people of color, compared to 37 percent of the residents statewide.

TABLE 2: POPULATION BY RACE/ETHNICITY, 2020

	Whit	:e	Bla	ck	Lati	ino	Asi	an	Native American		Oth race/et	
Area	Count	Share	Count	Share	Count	Share	Count	Share	Count	Share	Count	Share
Connecticut	2,279,232	63%	360,937	10%	623,293	17%	170,459	5%	6,404	<1%	165,619	5%
Tolland County	120,021	80%	5,074	3%	9,699	6%	8,438	6%	182	<1%	6,374	4%
Somers	8,641	84%	610	6%	591	6%	128	1%	<50	N/A	276	3%

As Connecticut's predominantly white Baby Boomers age, younger generations are driving the state's increased racial and ethnic diversity. Black and Latino populations in particular skew much younger than white populations.

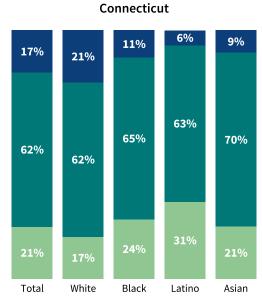
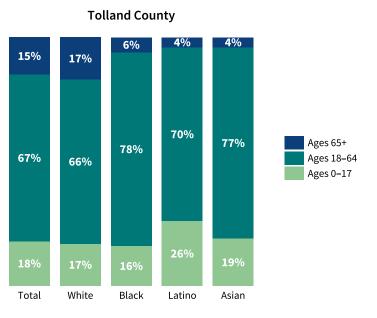


FIGURE 2: POPULATION BY RACE/ETHNICITY AND AGE GROUP, 2019



Note: Only groups with at least 50 residents shown.

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4

About 461 residents of Somers, or 4 percent of the population, are foreign-born. The largest number of immigrants living in Tolland County were born in China, followed by India and United Kingdom.

Linguistic isolation is characterized as speaking English less than "very well." People who struggle with English proficiency may have difficulty in school, seeking health care, accessing social services, or finding work in a largely English-speaking community. As of 2019, 309 Somers residents, or 3 percent of the population age 5 and older, were linguistically isolated. Latinos and Asian Americans are more likely to be linguistically isolated than other racial/ethnic groups.

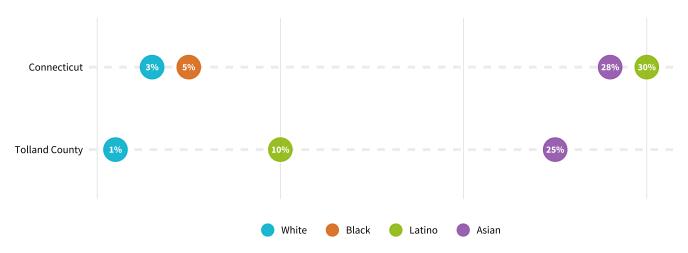


FIGURE 3: LINGUISTIC ISOLATION BY RACE/ETHNICITY, 2019

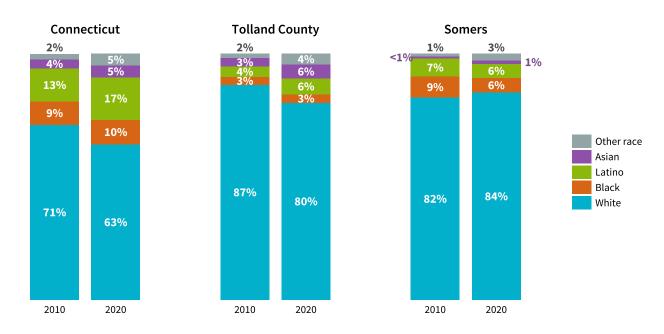
POPULATION CHANGE: 2020 CENSUS

The first set of data from the 2020 Census was released in August 2021, containing basic population counts by age and race/ethnicity. Between 2010 and 2020, Connecticut's population was nearly stagnant. During the same period, Somers shrank by 1,189 people, a 10 percent decrease. The number of white residents in Somers shrank by 8.2 percent, while the non-white population shrank by 21 percent.

TABLE 3: POPULATION AND POPULATION CHANGE BY AGE GROUP, 2010-2020

Area	Age	Population, 2010	Population, 2020	Change	Percent change
Connecticut	All ages	3,574,097	3,605,944	+31,847	+0.9%
	Children	817,015	736,717	-80,298	-9.8%
	Adults	2,757,082	2,869,227	+112,145	+4.1%
Tolland County	All ages	152,691	149,788	-2,903	-1.9%
	Children	30,884	26,204	-4,680	-15.2%
	Adults	121,807	123,584	+1,777	+1.5%
Somers	All ages	11,444	10,255	-1,189	-10.4%
	Children	2,163	1,851	-312	-14.4%
	Adults	9,281	8,404	-877	-9.4%

FIGURE 4: SHARE OF POPULATION BY RACE/ETHNICITY, 2010-2020



HOUSING

Somers has 3,625 households, of which 87 percent are homeowner households. Of Somers's 3,725 housing units, 93 percent are single-family and 7 percent are multifamily, compared to Tolland County, where 73 percent are single-family and 26 percent are multifamily.

Homeownership rates vary by race/ethnicity. Purchasing a home is more attainable for advantaged groups because the process of purchasing a home has a long history of racially discriminatory practices that continue to restrict access to homeownership today. This challenge, coupled with municipal zoning dominated by single-family housing, results in de facto racial and economic segregation seen throughout Connecticut.

Area	Total	White	Black	Latino	Asian	Native American
Connecticut	66%	76%	39%	34%	58%	40%
Tolland County	72%	77%	20%	34%	43%	N/A
Somers	87%	87%	N/A	100%	N/A	N/A

TABLE 4: HOMEOWNERSHIP RATE BY RACE/ETHNICITY OF HEAD OF HOUSEHOLD, 2019

Younger adults are less likely than older adults to own their homes across several race/ethnicity groups. However, in most towns, younger white adults own their homes at rates comparable to or higher than older Black and Latino adults.

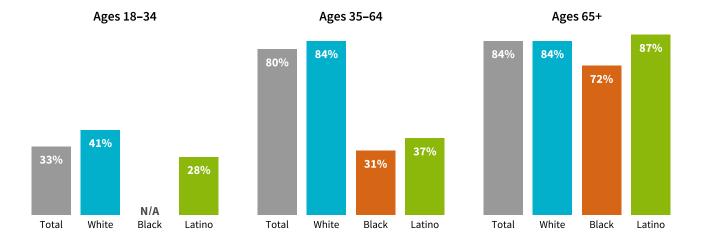


FIGURE 5: HOMEOWNERSHIP RATES BY AGE AND RACE/ETHNICITY OF HEAD OF HOUSEHOLD, TOLLAND COUNTY, 2019

A household is cost-burdened when they spend 30 percent or more of their income on housing costs, and severely costburdened when they spend half or more of their income on housing costs. Housing costs continue to rise, due in part to municipal zoning measures that limit new construction to very few towns statewide. Meanwhile, wages have largely stagnated, especially among lower-income workers who are more likely to rent. As a result, cost-burden generally affects renters more than homeowners, and has greater impact on Black and Latino householders. Among renter households in Somers, 39 percent are cost-burdened, compared to 23 percent of owner households.

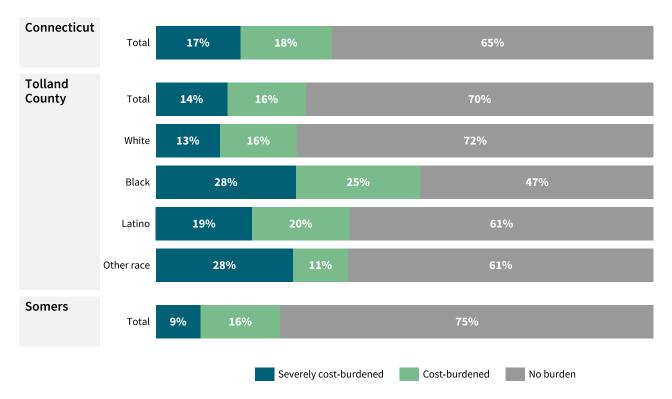


FIGURE 6: HOUSING COST-BURDEN RATES BY RACE/ETHNICITY, TOLLAND COUNTY, 2019

Household overcrowding is defined as having more than one occupant per room. Overcrowding may increase the spread of illnesses among the household and can be associated with higher levels of stress. Increasing the availability of appropriately-sized affordable units helps to alleviate overcrowding.

TABLE 5: OVERCROWDED HOUSEHOLDS BY RACE/ETHNICITY OF HEAD OF HOUSEHOLD, 2019

	To	tal	Wh	ite	Bla	ick	Lat	ino	Asian		Native America	
Area	Count	Share	Count	Share	Count	Share	Count	Share	Count	Share	Count	Share
Connecticut	25,541	2%	7,252	<1%	4,437	3%	10,771	6%	2,954	6%	158	4%
Tolland County	658	1%	513	1%	<50	N/A	<50	N/A	77	4%	<50	N/A
Somers	<50	N/A	<50	N/A	<50	N/A	<50	N/A	<50	N/A	<50	N/A

Latino

Other race

Asian

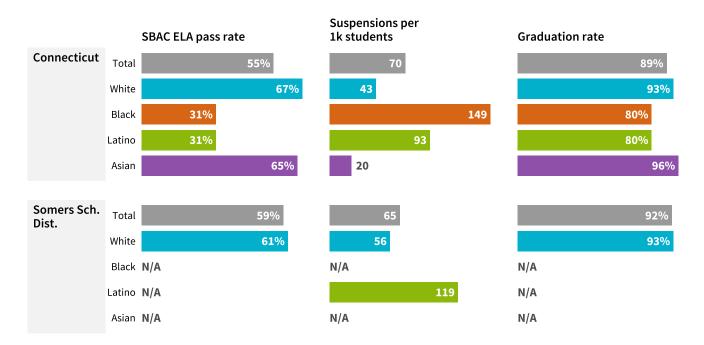
EDUCATION

Public school students in Somers are served by the Somers School District for pre-kindergarten through grade 12. During the 2019–2020 school year, there were 1,353 students enrolled in the Somers School District. Tracking student success measures is important since disparate academic and disciplinary outcomes are observed as early as preschool and can ultimately affect a person's longterm educational attainment and economic potential.

Connecticut Somers Sch. Dist.

FIGURE 7: PUBLIC K-12 STUDENT ENROLLMENT BY RACE/ETHNICITY PER 100 STUDENTS, 2019-2020





Adults with high school diplomas or college degrees have more employment options and considerably higher potential earnings, on average, than those who do not finish high school. In Somers, 9 percent of adults ages 25 and over, or 794 people, lack a high school diploma; statewide, this value is 9 percent.

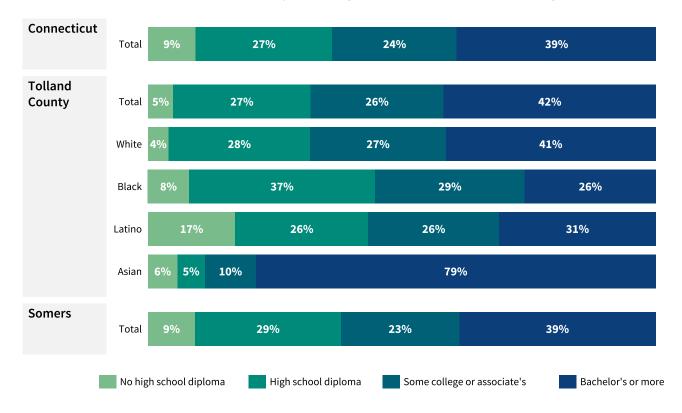


FIGURE 9: EDUCATIONAL ATTAINMENT BY RACE/ETHNICITY, SHARE OF ADULTS AGES 25 AND UP, 2019

ECONOMY

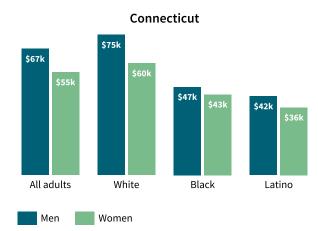
There are 2,637 total jobs in Somers, with the largest share in the Agriculture, Forestry, Fishing and Hunting sector. While these numbers are from 2019 and do not include economic outcomes related to the COVID-19 pandemic, they describe general labor market strengths and average wages for the area.

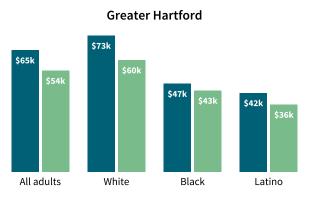
TABLE 6: JOBS AND WAGES IN CONNECTICUT'S 5 LARGEST SECTORS, 2019

	Cor	nnecticut	Somers		
Sector	Total jobs	Avg annual pay	Total jobs	Avg annual pay	
All Sectors	1,670,354	\$69,806	2,637	\$52,859	
Retail Trade	175,532	\$35,833	183	\$28,877	
Manufacturing	161,893	\$85,031	151	\$60,321	
Accommodation and Food Services	129,012	\$23,183	110	\$16,415	
Health Care and Social Assistance	271,014	\$54,858	40	N/A	
Finance and Insurance	101,760	\$174,420	35	N/A	

Individual earnings vary by race/ethnicity, sex, and other characteristics. These can be measured comparing the differences in average earnings between groups. White workers and men often out-earn workers of color and women. These trends hold even when controlling for educational attainment.

FIGURE 10: MEDIAN INCOME BY RACE/ETHNICITY AND SEX FOR FULL-TIME WORKERS AGES 25 AND OVER WITH POSITIVE INCOME, 2019





Rates of unemployment also vary by race and ethnicity. Generally, workers of color are more likely to be unemployed due to factors ranging from hiring practices to proximity to available jobs. Overall unemployment in Somers averaged 3 percent in 2019.

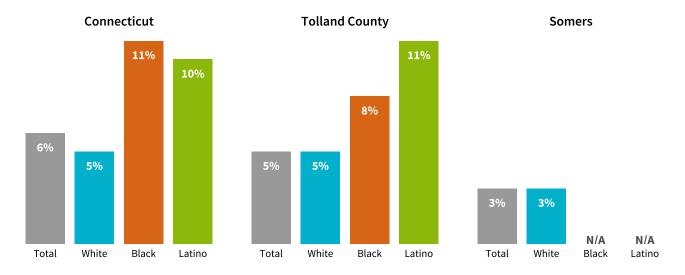


FIGURE 11: UNEMPLOYMENT RATE BY RACE/ETHNICITY, 2019

INCOME & WEALTH

The median household income in Somers is \$108,560, compared to \$78,444 statewide. Racial disparities in outcomes related to education, housing, and wages result in disparate household-level incomes and overall wealth. Racial disparities in outcomes related to education, employment, and wages result in disparate household-level incomes and overall wealth. Households led by Black or Latino adults generally average lower incomes than white households.

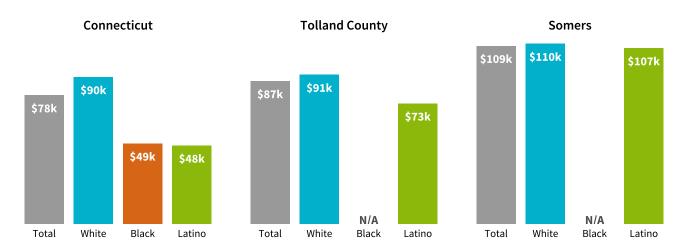


FIGURE 12: MEDIAN HOUSEHOLD INCOME BY RACE/ETHNICITY OF HEAD OF HOUSEHOLD, 2019

The Supplemental Nutritional Assistance Program (SNAP, or food stamps) is a program available to very low-income households earning less than 130 percent of the federal poverty guideline (\$25,750 for a family of four in 2019). Throughout the state, poverty and SNAP utilization rates are higher among Black and Latino households than white households.

TABLE 7: SELECTED HOUSEHOLD ECONOMIC INDICATORS BY RACE/ETHNICITY OF HEAD OF HOUSEHOLD, 2019

	Tot	al	White		Black		Latino		Asian		Native American	
	Count	Share	Count	Share	Count	Share	Count	Share	Count	Share	Count	Share
Population living	Population living below poverty level											
Connecticut	344,146	10%	137,123	6%	65,664	18%	123,431	22%	12,398	8%	1,629	17%
Tolland County	9,996	7%	6,902	6%	898	25%	1,491	20%	586	10%	<50	N/A
Somers	179	2%	155	2%	<50	N/A	<50	N/A	<50	N/A	<50	N/A
Households rece	eiving food	d stamps	SNAP									
Connecticut	162,967	12%	67,339	7%	34,650	26%	56,091	32%	3,145	6%	958	26%
Tolland County	3,475	6%	2,638	5%	336	19%	343	14%	111	5%	<50	N/A
Somers	78	2%	78	2%	<50	N/A	<50	N/A	<50	N/A	<50	N/A

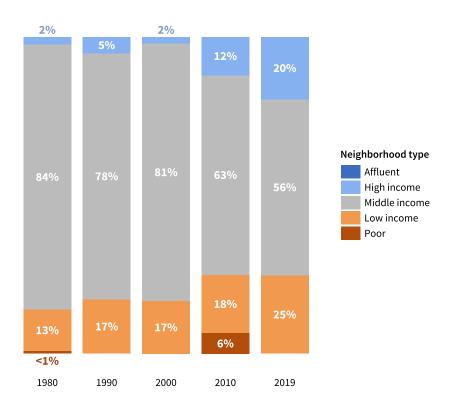
Access to a personal vehicle may also be considered a measure of wealth since reliable transportation plays a significant role in job access and quality of life. Vehicle access reduces the time a family may spend running errands or traveling to appointments, school, or work.

TABLE 8: HOUSEHOLDS WITH NO VEHICLE AT HOME BY RACE/ETHNICITY OF HEAD OF HOUSEHOLD,2019

	Tot	al	Wh	White		Black		ino	Other race		
Area	Count	Share	Count	Share	Count	Share	Count	Share	Count	Share	
Connecticut	121,434	9%	55,942	6%	27,048	21%	30,496	17%	7,948	10%	
Tolland County	2,539	5%	1,964	4%	314	17%	69	3%	192	7%	
Somers	<50	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	

Over the past 40 years, neighborhood income inequality has grown statewide as the share of the population living in wealthy or poor neighborhoods has increased and the population in middle income areas declined in a process known as "economic sorting," which often leads to further disparities in access to economic opportunity, healthy environments, and municipal resources.

FIGURE 13: DISTRIBUTION OF POPULATION BY NEIGHBORHOOD INCOME LEVEL, TOLLAND COUNTY, 1980-2019

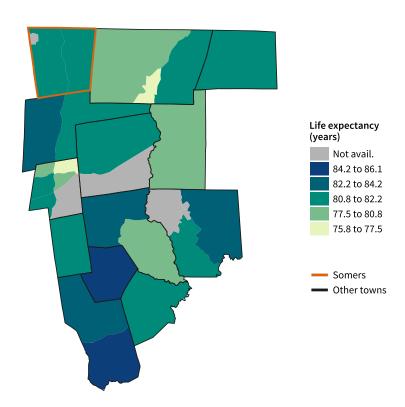


HEALTH

The socioeconomic disparities described above tend to correlate with health outcomes. Factors such as stable housing, employment, literacy and linguistic fluency, environmental hazards, and transportation all impact access to care, physical and mental health outcomes, and overall quality of life. Income and employment status often drive differences in access to healthcare, the likelihood of getting preventive screenings as recommended, the affordability of life-saving medicines, and the ability to purchase other goods and services, including high-quality housing and nutritious food.

Life expectancy is a good proxy for overall health and well-being since it is the culmination of so many other social and health factors. The average life expectancy in Somers is 81.5 years, compared to 81.1 years across Tolland County, and 80.3 years statewide.

FIGURE 14: LIFE EXPECTANCY, TOLLAND COUNTY BY CENSUS TRACT, 2015



Health-related challenges begin with access to care. Due to differences in workplace benefits, income, and eligibility factors, Black and especially Latino people are less likely to have health insurance than white people.

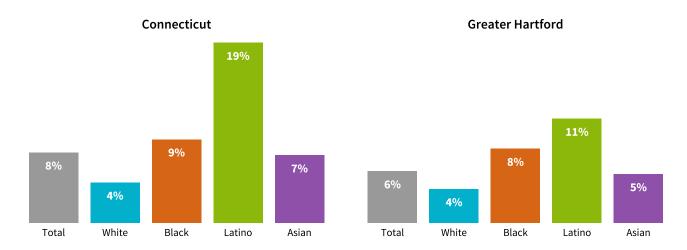
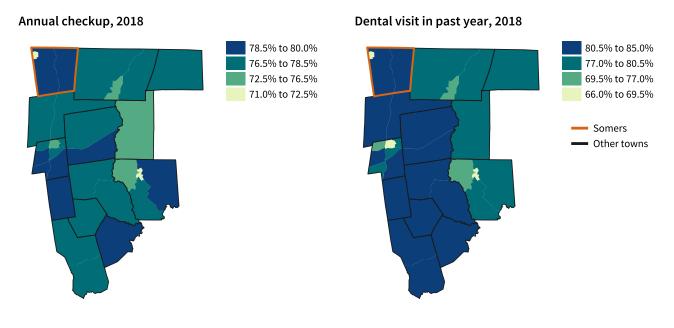


FIGURE 15: UNINSURED RATE AMONG ADULTS AGES 19-64 BY RACE/ETHNICITY, 2019

Preventive care can help counteract economic disadvantages, as a person's health can be improved by addressing risk factors like hypertension and chronic stress early. Lack of affordable, accessible, and consistent medical care can lead to residents relying on expensive emergency room visits later on. Overall, 77 percent of the adults in Somers had an annual checkup as of 2018, and 79 percent had a dental visit in the past year.

FIGURE 16: PREVENTIVE CARE MEASURES, SHARE OF ADULTS BY CENSUS TRACT, TOLLAND COUNTY



Throughout the state, people of color face greater rates and earlier onset of many chronic diseases and risk factors, particularly those that are linked to socioeconomic status and access to resources. For example, diabetes is much more common among older adults than younger ones, yet middle-aged Black adults in Connecticut have higher diabetes rates than white seniors.

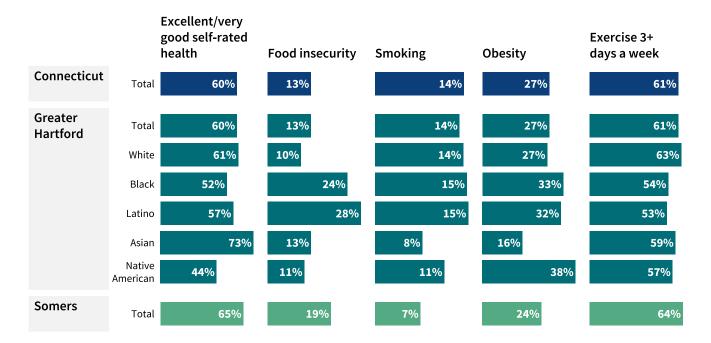


FIGURE 17: SELECTED HEALTH RISK FACTORS, SHARE OF ADULTS, 2015-2018

FIGURE 18: SELECTED HEALTH INDICATORS BY AGE AND RACE/ETHNICITY, SHARE OF ADULTS, GREATER HARTFORD, 2015–2018

		A	sthm	a			Diabetes						Hypertension					
	Total	White	Black	Latino	Asian	Tot	al V	White	Black	Latino	Asian		Total	White	Black	Latino	Asian	
Ages 18 to 34	20%	20%	18%	28%	12%	3%	6	2%	1%	4%	7%		9%	7%	9%	12%	10%	
Ages 35 to 49	18%	17%	13%	28%	7%	6%	6	5%	11%	10%	2%		23%	20%	34%	24%	24%	
Ages 50 to 64	12%	12 %	16%	19%	N/A	159	%	12%	27%	30%	N/A		40 %	36%	57%	53%	N/A	
Ages 65 and older	11%	10%	14%	17%	N/A	229	% :	20%	37%	33%	N/A		58%	57%	76%	51%	N/A	

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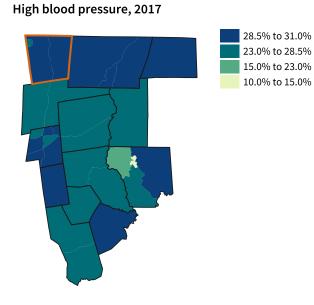
6.5% to 7.0%

5.5% to 6.5%

2.5% to 5.5%

1.0% to 2.5%

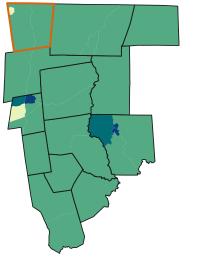
FIGURE 19: CHRONIC DISEASE PREVALENCE, SHARE OF ADULTS BY CENSUS TRACT, TOLLAND COUNTY



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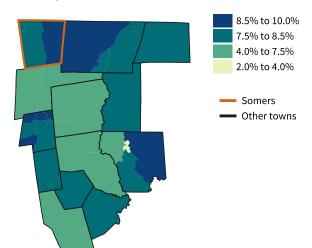
Coronary heart disease, 2018

Current asthma, 2018



11.5% to 13.0% 10.5% to 11.5% 9.5% to 10.5% 8.0% to 9.5%

Diabetes, 2018



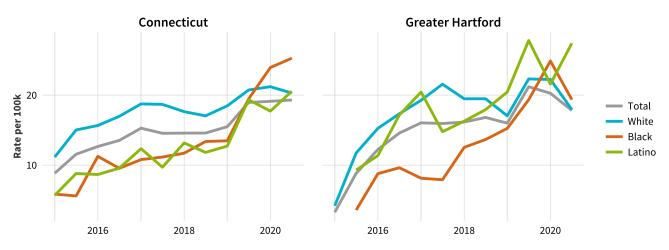
Mental health issues like depression and anxiety can be linked to social determinants like income, employment, and environment, and can pose risks of physical health problems as well, including by complicating a person's ability to keep up other aspects of their health care. People of color are slightly more likely to report feeling mostly or completely anxious and being bothered by feeling depressed or hopeless. Overall, 0 percent of Somers adults report experiencing anxiety regularly and 4 percent report being bothered by depression.

	Total	White	Black	Latino	Asian	Native American
Experiencing anxiety						
Connecticut	12%	11%	15%	19%	14%	15%
Greater Hartford	12%	10%	15%	20%	15%	14%
Somers	0%	0%	N/A	N/A	N/A	N/A
Bothered by depression	l					
Connecticut	9%	8%	10%	14%	8%	12%
Greater Hartford	9%	8%	10%	15%	6%	15%
Somers	4%	4%	N/A	N/A	N/A	N/A

TABLE 9: SELECTED MENTAL HEALTH INDICATORS, SHARE OF ADULTS, 2015-2018

Like other states, Connecticut has seen a rise in drug overdose deaths in the last several years. In 2020, Connecticut saw an average of 113 overdose deaths per month, up from 60 in 2015. White residents long comprised the bulk of these deaths, but as overall overdose death rates have increased, an increasing share of those deaths have been people of color.

FIGURE 20: AGE-ADJUSTED SEMI-ANNUAL RATES OF DRUG OVERDOSE DEATHS PER 100,000 RESIDENTS BY RACE/ETHNICITY, 2015–2020



Note: Values suppressed for small populations or few overdose incidents.

The introduction and spread of fentanyl in drugs—both with and without users' knowledge—is thought to have contributed to this steep rise in overdoses. In 2015 and 2016, 45 percent of the drug overdose deaths in Tolland County involved fentanyl; in 2019 and 2020, this share was 87 percent.

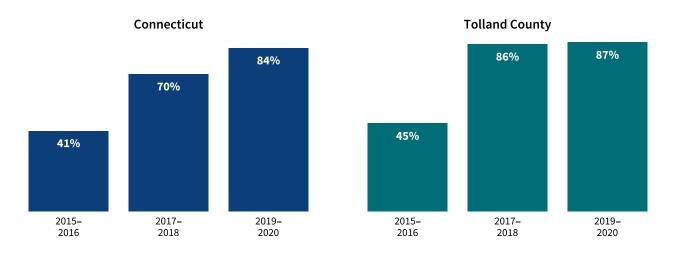
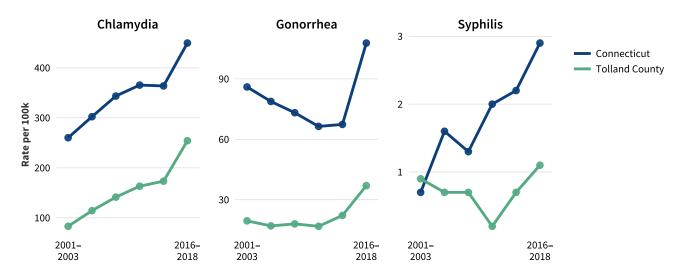


FIGURE 21: SHARE OF DRUG OVERDOSE DEATHS INVOLVING FENTANYL, 2015-2020

Sexually transmitted infections (STIs) can have long-term implications for health, including reproductive health problems and certain cancers, and can increase the risk of acquiring and transmitting diseases such as HIV and hepatitis C. Following nationwide trends, Connecticut has seen increases in the rates of STIs like chlamydia and gonorrhea over the past two decades. Between 2016 and 2018, Tolland County had annual average case rates of 254 new cases of chlamydia per 100,000 residents, 37 cases of gonorrhea per 100,000, and 1.1 cases of syphilis per 100,000.





Like many other diseases, Connecticut's Black and Latino residents face a higher burden of HIV rates. Statewide between 2016 and 2018, Black residents ages 13 and up were more than 10 times more likely to be diagnosed with HIV than white residents.

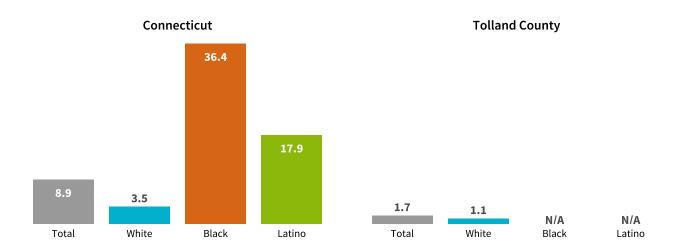


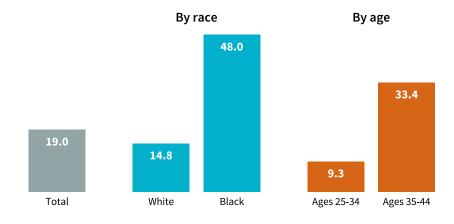
FIGURE 23: ANNUALIZED AVERAGE RATE OF NEW HIV DIAGNOSES PER 100,000 RESIDENTS AGES 13 AND OVER, 2016-2018

Birth outcomes often reflect health inequities for parents giving birth, and those outcomes can affect a child throughout their life. Often, parents of color have more complications related to birth and pregnancy than white parents. Complications during pregnancy or childbirth also contribute to elevated mortality among parents giving birth.

Area	Total	White	Black	Latina (overall)	Puerto Rican	Other Latina	Asian
Late or no prenatal care							
Connecticut	3.4%	2.5%	5.7%	4.0%	2.9%	5.1%	3.5%
Tolland County	2.4%	2.0%	5.2%	3.0%	N/A	5.6%	4.0%
Somers	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Low birthweight							
Connecticut	7.8%	6.4%	12.1%	8.3%	10.2%	6.6%	8.7%
Tolland County	7.1%	6.5%	11.7%	9.7%	8.8%	11.2%	8.1%
Somers	10.4%	N/A	N/A	N/A	N/A	N/A	N/A
Infant mortality (per 1k l	ive births)						
Connecticut	4.6	3.1	9.5	5.0	N/A	N/A	N/A
Tolland County	3.2	4.0	0.0	0.0	N/A	N/A	N/A
Somers	0.0	0.0	N/A	0.0	N/A	N/A	N/A

TABLE 10: SELECTED BIRTH OUTCOMES BY RACE/ETHNICITY OF PARENT GIVING BIRTH, 2016-2018

FIGURE 24: MATERNAL MORTALITY RATE PER 100K BIRTHS, CONNECTICUT, 2013-2017



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22

Children under 7 years old are monitored annually for potential lead poisoning, based on having blood-lead levels in excess of the state's accepted threshold. Between 2013 and 2017, 2.4 percent of children tested in Somers were found to have elevated lead levels. Children living in homes built before 1960 are at a higher risk of potential lead poisoning due to the more widespread use of lead-based paints in older homes. Black and Latino households are slightly more likely to live in structures built before 1960.

TABLE 11: HOUSEHOLDS LIVING IN STRUCTURES BUILT BEFORE 1960 BY RACE/ETHNICITY OF HEAD OF HOUSEHOLD,2019

	Tota	al	Whi	te	Bla	ck	Lati	ino	Other	race
Area	Count	Share	Count	Share	Count	Share	Count	Share	Count	Share
Connecticut	580,941	42%	399,512	40%	63,552	49%	93,011	53%	24,866	32%
Tolland County	15,328	28%	13,913	28%	371	20%	581	26%	463	17%
Somers	873	24%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

CIVIC LIFE & COMMUNITY COHESION

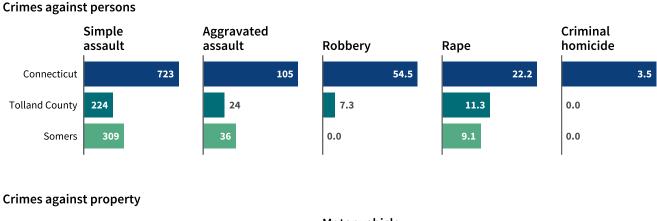
Beyond individual health, several measures from the DataHaven Community Wellbeing Survey show how local adults feel about the health of their neighborhoods. High quality of life and community cohesion can positively impact resident well-being through the availability of resources, sense of safety, and participation in civic life. For example, adults who see the availability of role models in their community may enroll their children in extracurricular activities that benefit them educationally and socially; residents who know and trust their neighbors may find greater social support. Overall, 96 percent of Somers adults reported being satisfied with the area where they live.

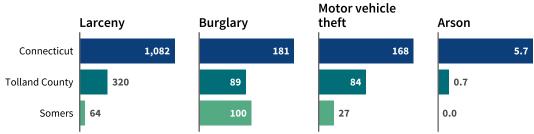
85% 85% Trust neighbors 75% Good place to raise kids 82% 82% Satisfied with area 77% 78% Youth have positive role models 70% 71% Safe to walk at night **Greater Hartford** Connecticut Somers

FIGURE 25: RESIDENTS' RATINGS OF COMMUNITY COHESION MEASURES, SHARE OF ADULTS, 2015–2018

Crime rates per 100,000 residents are based on reports to law enforcement of violent force against persons, as well as offenses involving property. Not all crimes involve residents of the areas where the crimes occur, which is important to consider when evaluating crime rates in areas or towns with more commercial activity. Crime patterns can also vary dramatically by neighborhood. Crime can impact the social and economic well-being of communities, including through negative health effects.

FIGURE 26: PART I CRIME RATES PER 100,000 RESIDENTS BY TOWN / JURISDICTION, 2019





A lack of trust in and engagement with local government and experiences of unfair treatment by authorities can impair community well-being and cohesion. Sixty-six percent of Somers adults feel their local government is responsive to residents' needs, compared to 51 percent statewide.

TABLE 12: RESIDENTS' RATINGS OF LOCAL GOVERNMENT, SHARE OF ADULTS, 2015–2018

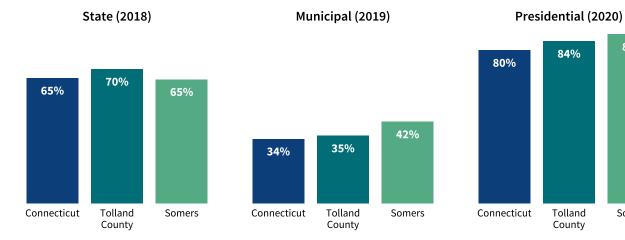
Area	Unfairly stopped by police	Local govt is responsive	Have some influence over local govt
Connecticut	11%	51%	67%
Greater Hartford	13%	52%	67%
Somers	0%	66%	66%

88%

Somers

During the 2020 presidential election, 88 percent of Somers registered voters cast ballots, compared to 80 percent statewide, and to 95 percent in the 2016 presidential election.

FIGURE 27: REGISTERED VOTER TURNOUT, 2018–2020



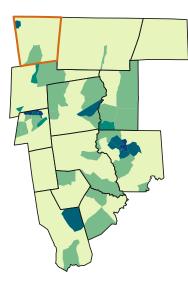
ENVIRONMENT & SUSTAINABILITY

Many environmental factors—from access to outdoor resources to tree canopy to exposure to pollutants—can have direct impacts on residents' health and quality of life. Environmental justice is the idea that these factors of built and natural environments follow familiar patterns of socioeconomic disparities and segregation. The federal Environmental Protection Agency (EPA) ranks small areas throughout the US on their risks of exposure to a variety of pollutants and hazards, scaled to account for the historically disparate impact of these hazards on people of color and lower-income people.

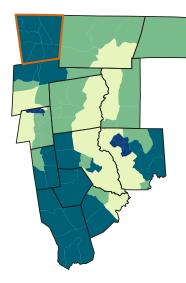
Air cancer risk

FIGURE 28: EPA ENVIRONMENTAL JUSTICE INDEX BY BLOCK GROUP, TOLLAND COUNTY

Lead paint exposure risk

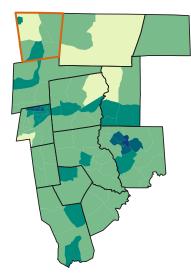


Proximity to water discharge





Proximity to treatment facilities





High-quality built environment resources, such as recreational facilities and safe sidewalks, help keep residents active and bring communities together. Walkable neighborhoods may also encourage decreased reliance on cars. Throughout Connecticut, Black and Latino residents are largely concentrated in denser urban areas which tend to offer greater walkability. Of adults in Somers, 30 percent report having stores, banks, and other locations they need in walking distance, lower than the share of adults statewide.

FIGURE 29: RESIDENTS' RATINGS OF LOCAL WALKABILITY MEASURES BY RACE/ETHNICITY, SHARE OF ADULTS, 2015-2018

		Stores, etc. in walking distance	Safe sidewalks	Safe places to bike	Access to local rec. facilities
Connecticut	Total	54%	60%	62%	71%
Greater Hartford	Total	58%	69%	72%	77%
	White	52%	64%	72%	76%
	Black	76%	85%	74%	81%
	Latino	79%	79%	70%	80%
	Asian	60%	80%	68%	80%
	Native American	62%	65%	63%	70%
Somers	Total	30%	20%	64%	58%

NOTES

Figure 1. Study area. Map tiles by Stamen Design, under CC BY 3.0. Data by OpenStreetMap, under ODbL.

Table 1. About the area. DataHaven analysis (2021) of US Census Bureau American Community Survey 2019 5-year estimates. Available at https://data.census.gov; US Census Bureau 2020 Decennial Census P.L. 94-171 Redistricting Data. Available at https://www.census.gov/programs-surveys/decennial-census/about/rdo.html; PLACES Project. Centers for Disease Control and Prevention. Available at https://www.cdc.gov/places; and National Center for Health Statistics. U.S. Small-Area Life Expectancy Estimates Project (USALEEP): Life Expectancy Estimates Files, 2010–2015. National Center for Health Statistics. 2018. Available at https://www.cdc.gov/nchs/nvss/usaleep/usaleep.html

Table 2. Population by race/ethnicity, 2020. US Census Bureau 2020 Decennial Census P.L. 94-171 Redistricting Data.

Figure 2. Population by race/ethnicity and age group, 2019. DataHaven analysis (2021) of US Census Bureau American Community Survey 2019 5-year estimates.

Figure 3. Linguistic isolation by race/ethnicity, 2019. DataHaven analysis (2021) of US Census Bureau American Community Survey 2019 5-year estimates.

Table 3. Population and population change by age group, 2010–2020. US Census Bureau 2010 & 2020 Decennial CensusP.L. 94-171 Redistricting Data.

Figure 4. Share of population by race/ethnicity, 2010–2020. US Census Bureau 2010 & 2020 Decennial Census P.L. 94-171 Redistricting Data.

Table 4. Homeownership rate by race/ethnicity of head of household, 2019. DataHaven analysis (2021) of US Census Bureau American Community Survey 2019 5-year estimates.

Figure 5. Homeownership rates by age and race/ethnicity of head of household, Tolland County, 2019. DataHaven analysis (2021) of US Census Bureau American Community Survey 2019 5-year public use microdata sample (PUMS) data, accessed via IPUMS. Steven Ruggles, Sarah Flood, Sophia Foster, Ronald Goeken, Jose Pacas, Megan Schouweiler and Matthew Sobek. IPUMS USA: Version 11.0 [dataset]. Minneapolis, MN: IPUMS, 2021. https://doi.org/10.18128/D010.V11.0

Figure 6. Housing cost-burden rates by race/ethnicity, Tolland County, 2019. DataHaven analysis (2021) of Ruggles, et al. (2019).

Table 5. Overcrowded households by race/ethnicity of head of household, 2019. DataHaven analysis (2021) of US Census Bureau American Community Survey 2019 5-year estimates.

Figure 7. Public K–12 student enrollment by race/ethnicity per 100 students, 2019–2020. DataHaven analysis (2021) of 2019–2020 school year enrollment data from the Connecticut State Department of Education, accessed via EdSight at http:// edsight.ct.gov At the school district level, not all groups may be shown due to CTSDE data suppression rules for small enrollment counts, even though they may represent more than 1% of the school district population.

Figure 8. Selected academic and disciplinary outcomes by student race/ethnicity, 2018–2019. DataHaven analysis (2021) of 2018–2019 school year testing (8th grade English/language arts), discipline, and four-year graduation data from the Connecticut State Department of Education, accessed via EdSight. Because students can be suspended more than once in a school year, the suspension rate is given as the number of reported suspensions per 1,000 enrolled students rather than a percentage.

Figure 9. Educational attainment by race/ethnicity, share of adults ages 25 and up, 2019. DataHaven analysis (2021) of US Census Bureau American Community Survey 2019 5-year estimates.

Table 6. Jobs and wages in Somers's 5 largest sectors, 2019. DataHaven analysis (2021) of annual employment data from the Connecticut Department of Labor. Note that in some cases, especially for smaller towns, data have been suppressed. Available at https://www1.ctdol.state.ct.us/lmi/202/202_annualaverage.asp

Figure 10. Median income by race/ethnicity and sex for full-time workers ages 25 and over with positive income, 2019. DataHaven analysis (2021) of Ruggles, et al. (2019).

Figure 11. Unemployment rate by race/ethnicity, 2019. DataHaven analysis (2021) of US Census Bureau American Community Survey 2019 5-year estimates.

Figure 12. Median household income by race/ethnicity of head of household, 2019. DataHaven analysis (2021) of US Census Bureau American Community Survey 2019 5-year estimates.

Table 7. Selected household economic indicators by race/ethnicity of head of household, 2019. DataHaven analysis(2021) of US Census Bureau American Community Survey 2019 5-year estimates.

Table 8. Households with no vehicle at home by race/ethnicity of head of household, 2019. DataHaven analysis (2021)of US Census Bureau American Community Survey 2019 5-year estimates.

Figure 13. Distribution of population by neighborhood income level, Tolland County, 1980–2019. DataHaven analysis (2021) of household income and population by Census tract. Values for 1980–2000 are from the US Census Bureau Decennial Census, provided by the Neighborhood Change Database (NCDB) created by GeoLytics and the Urban Institute with support from the Rockefeller Foundation (2012). 2019 values are calculated from US Census Bureau American Community Survey 2019 5-year estimates.

Figure 14. Life expectancy, Tolland County by Census tract, 2015. Data from National Center for Health Statistics. U.S. Small-Area Life Expectancy Estimates Project (USALEEP): Life Expectancy Estimates Files, 2010–2015. National Center for Health Statistics. 2018. Available at https://www.cdc.gov/nchs/nvss/usaleep/usaleep.html

Figure 15. Uninsured rate among adults ages 19–64 by race/ethnicity, 2019. DataHaven analysis (2021) of US Census Bureau American Community Survey 2019 5-year estimates.

Figure 16. Preventive care measures, share of adults by Census tract, Tolland County. Data from PLACES Project. Centers for Disease Control and Prevention.

Figure 17. Selected health risk factors, share of adults, 2015–2018. DataHaven analysis (2021) of 2015 & 2018 DataHaven Community Wellbeing Survey. Available at https://ctdatahaven.org/reports/datahaven-community-wellbeing-survey

Figure 18. Selected health indicators by age and race/ethnicity, share of adults, Greater Hartford, 2015–2018. DataHaven analysis (2021) of 2015 & 2018 DataHaven Community Wellbeing Survey.

Figure 19. Chronic disease prevalence, share of adults by Census tract, Tolland County. Data from PLACES Project. Centers for Disease Control and Prevention.

Table 9. Selected mental health indicators, share of adults, 2015–2018. DataHaven analysis (2021) of 2015 & 2018DataHaven Community Wellbeing Survey.

Figure 20. Age-adjusted semi-annual rates of drug overdose deaths per 100,000 residents by race/ethnicity, 2015–2020. DataHaven analysis (2021) of Accidental Drug Related Deaths 2012–2018. Connecticut Office of the Chief Medical Examiner. Available at https://data.ct.gov/resource/rybz-nyjw. Rates are weighted with the U.S. Centers for Disease Control and Prevention (CDC) 2000 U.S. Standard Population 18 age group weights available at https://seer.cancer.gov/stdpopulations

Figure 21. Share of drug overdose deaths involving fentanyl, 2015–2020. DataHaven analysis (2021) of Accidental Drug Related Deaths 2012–2018. Connecticut Office of the Chief Medical Examiner.

Figure 22. Annualized average rates of new cases of selected sexually transmitted infections per 100,000 residents, **2001–2003 through 2016–2018.** DataHaven analysis (2021) of data from Centers for Disease Control and Prevention. NCHHSTP AtlasPlus. Updated 2019. https://www.cdc.gov/nchhstp/atlas/index.htm

Figure 23. Annualized average rate of new HIV diagnoses per 100,000 residents ages 13 and over, 2016–2018. DataHaven analysis (2021) of data from Centers for Disease Control and Prevention. NCHHSTP AtlasPlus.

Table 10. Selected birth outcomes by race/ethnicity of parent giving birth, 2016–2018. DataHaven analysis (2021) of data from the Connecticut Department of Public Health Vital Statistics. Retrieved from https://portal.ct.gov/DPH/Health -Information-Systems--Reporting/Hisrhome/Vital-Statistics-Registration-Reports

Figure 24. Maternal mortality rate per 100k births, Connecticut, 2013–2017. America's Health Rankings analysis of CDC WONDER Online Database, Mortality files, United Health Foundation. Retrieved from https://www.americashealthrankings .org

Table 11. Households living in structures built before 1960 by race/ethnicity of head of household, 2019. DataHavenanalysis (2021) of US Census Bureau American Community Survey 2019 5-year estimates.

Figure 25. Residents' ratings of community cohesion measures, share of adults, 2015–2018. DataHaven analysis (2021) of 2015 & 2018 DataHaven Community Wellbeing Survey.

Figure 26. Part I crime rates per 100,000 residents by town / jurisdiction, 2019. DataHaven analysis (2021) of 2019 Crimes Analysis Offenses. Connecticut Department of Emergency Services and Public Protection. Available at https://portal.ct .gov/DESPP/Division-of-State-Police/Crimes-Analysis-Unit/Crimes-Analysis-Unit

Table 12. Residents' ratings of local government, share of adults, 2015–2018. DataHaven analysis (2021) of 2015 & 2018 DataHaven Community Wellbeing Survey.

Figure 27. Registered voter turnout, 2018–2020. DataHaven analysis (2021) of data from the Connecticut Office of the Secretary of the State Elections Management System. Available at https://ctemspublic.pcctg.net

Figure 28. EPA Environmental Justice Index by block group, Tolland County. United States Environmental Protection Agency. 2019 version. EJSCREEN. Retrieved from https://www.epa.gov/ejscreen

Figure 29. Residents' ratings of local walkability measures by race/ethnicity, share of adults, 2015–2018. DataHaven analysis (2021) of 2015 & 2018 DataHaven Community Wellbeing Survey.

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31

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Visit DataHaven (ctdatahaven.org) for more information. This report was authored by Camille Seaberry, Kelly Davila, and Mark Abraham of DataHaven.

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ABOUT DATAHAVEN

DataHaven is a non-profit organization with a 25-year history of public service to Connecticut. Our mission is to empower people to create thriving communities by collecting and ensuring access to data on well-being, equity, and quality of life. DataHaven is a formal partner of the National Neighborhood Indicators Partnership of the Urban Institute in Washington, D.C.