

A map of the Western DMHAS region, showing various counties or jurisdictions. The map is divided into several colored areas: a large purple area in the north and west, a yellow area in the east, and a grey area in the south. The title 'WESTERN DMHAS 2023 EQUITY PROFILE' is centered over the map, flanked by two horizontal lines.

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# **WESTERN DMHAS 2023 EQUITY PROFILE**

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**DataHaven**

# WESTERN DMHAS 2023 EQUITY PROFILE

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Compiled by DataHaven in August 2023.

This report is designed to inform local-level efforts to improve community well-being and racial equity. This is version 2.0 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 3.0 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 social needs. Wherever possible, data are presented with racial/ethnic breakdowns, as defined by existing federal data collection standards. However, for smaller groups or more detailed breakdowns, some values may not be available or have less reliable data. In these cases, values are marked as “N/A,” not available.

Federal and statewide approaches to data collection, including small sample sizes, tend to hide disparities within certain population groups. This does not mean that a given population is not impacted by inequitable social conditions. DataHaven and other organizations often collect information on demographic characteristics besides race/ethnicity, and encourage further analysis and advocacy that can lead to more inclusive data reporting. Please contact DataHaven at [info@ctdatahaven.org](mailto:info@ctdatahaven.org) with questions about additional reporting that may be possible.

- The Western DMHAS service area is a region of **624,254 residents**, **32 percent** of whom are people of color. The region’s population has increased by **1 percent** since 2010.
- Of the region’s **239,879 households**, **71 percent** are homeowner households.
- **Thirty-four percent** of the Western DMHAS area’s households are cost-burdened, meaning they spend at least 30 percent of their total income on housing costs.
- Among the region’s adults ages 25 and up, **38 percent** have earned a bachelor’s degree or higher.
- The Western DMHAS service area is home to **212,823 jobs**, with the largest share in the Health Care and Social Assistance sector.
- The median household income in the Western DMHAS area is **\$82,895**.
- As of 2015, the Western DMHAS service area’s average life expectancy was **80.4 years**.
- **Fifty-nine percent** of adults in the Western DMHAS service area say they are in excellent or very good health.
- In 2021, **226 people** in the Western DMHAS service area died of drug overdoses.
- **Eighty-three percent** of adults in the Western DMHAS area are satisfied with their area, and **55 percent** say their local government is responsive to residents’ needs.
- In the most recent state election, **60 percent** of registered voters in the Western DMHAS area voted.
- **Forty-four percent** of adults in the Western DMHAS service area report having stores, banks, and other locations in walking distance of their home, and **44 percent** say there are safe sidewalks and crosswalks in their neighborhood.

## OVERVIEW

For the purposes of this report, the Western DMHAS service area will be compared to Connecticut as a whole, as well as to Fairfield County, Litchfield County, and New Haven County whenever possible. Note that some indicators are only reliably available at the state and county levels. Where necessary, data may be presented based on a proxy region made up of public use microdata areas (PUMAs) designated by the US Census Bureau, including all of Litchfield County, and parts of Fairfield County and New Haven County. **Charts and tables based on these proxy areas are noted as such in their titles.**

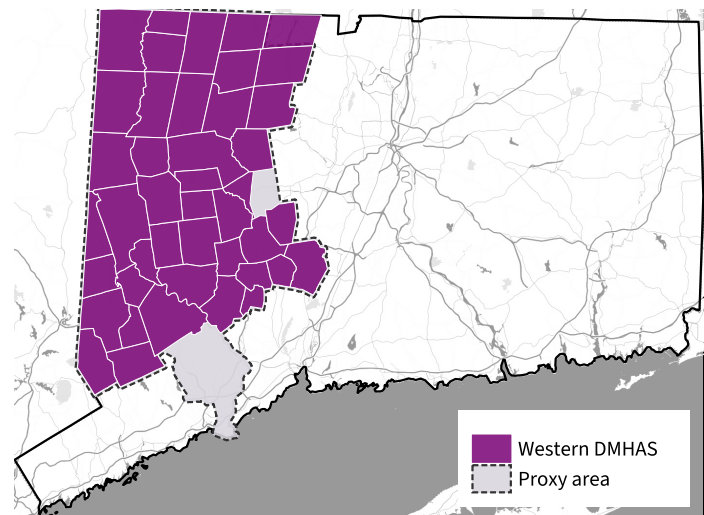
**The Western DMHAS service area** is made up of the following towns:

Barkhamsted, Beacon Falls, Bethel, Bethlehem, Bridgewater, Brookfield, Canaan, Cheshire, Colebrook, Cornwall, Danbury, Goshen, Hartland, Harwinton, Kent, Litchfield, Middlebury, Morris, Naugatuck, New Fairfield, New Hartford, New Milford, Newtown, Norfolk, North Canaan, Oxford, Prospect, Redding, Ridgefield, Roxbury, Salisbury, Sharon, Sherman, Southbury, Thomaston, Torrington, Warren, Washington, Waterbury, Watertown, Winchester, Wolcott, and Woodbury

**The proxy study area** is made up of the following locations:

PUMA 0900100, PUMA 0900105, PUMA 0900500 (Litchfield County), PUMA 0900900, and PUMA 0900901 (Waterbury)

**FIGURE 1: STUDY AREA**



**TABLE 1: ABOUT THE AREA**

Indicator	Connecticut	Fairfield County	Litchfield County	New Haven County	Western DMHAS
Total population	3,605,944	957,419	185,186	864,835	624,254
Total households	1,397,324	349,443	74,857	336,400	239,879
Homeownership rate	66%	67%	76%	62%	71%
Housing cost burden rate	35%	39%	32%	36%	34%
Adults with less than a high school diploma	9%	10%	6%	10%	9%
Median household income	\$83,572	\$101,194	\$84,797	\$75,043	\$82,895
Poverty rate	10%	9%	8%	11%	9%
Life expectancy (years, 2015)	80.3	81.5	80.2	79.4	80.4
Adults 18–64 w/o health insurance	10%	12%	8%	10%	10%

# DEMOGRAPHICS

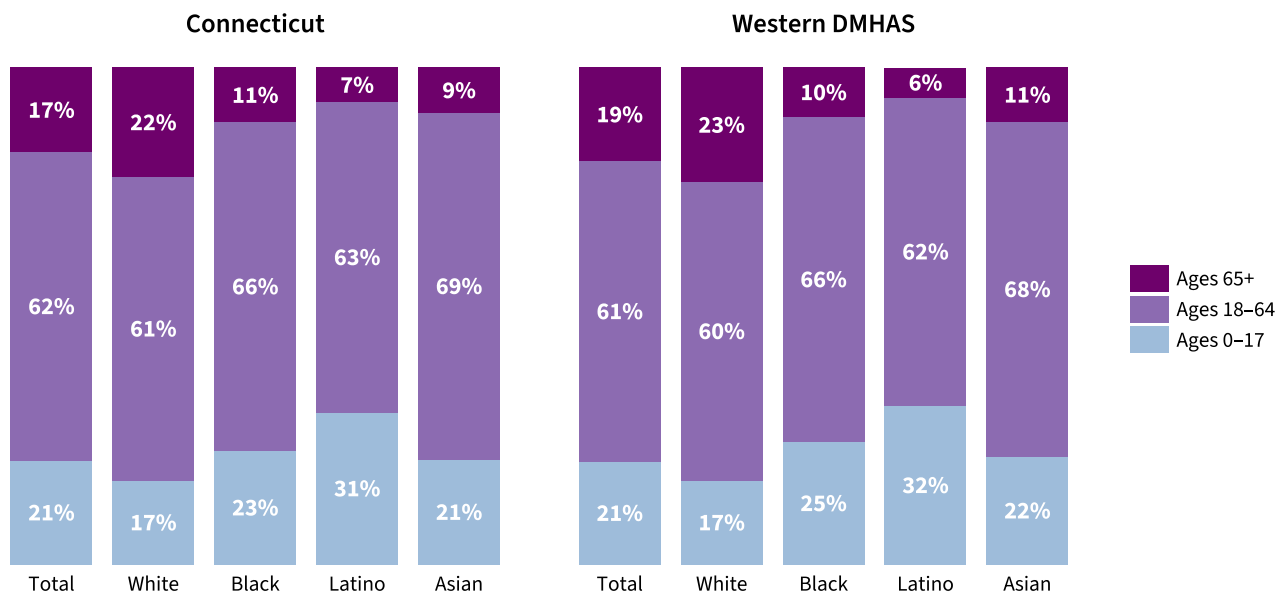
As of 2020, the population of the Western DMHAS service area is 624,254, including 130,102 children and 494,152 adults. Thirty-two percent of the Western DMHAS area’s residents are people of color, compared to 37 percent of residents statewide.

**TABLE 2: POPULATION BY RACE/ETHNICITY, 2020**

Area	White		Black		Latino		Asian		Other race/ethnicity	
	Count	Share	Count	Share	Count	Share	Count	Share	Count	Share
Connecticut	2,279,232	63%	360,937	10%	623,293	17%	170,459	5%	172,023	5%
Fairfield County	552,125	58%	99,992	10%	205,351	21%	50,751	5%	49,200	5%
Litchfield County	155,601	84%	2,957	2%	14,580	8%	3,434	2%	8,614	5%
New Haven County	509,688	59%	110,273	13%	170,081	20%	36,995	4%	37,798	4%
Western DMHAS	424,200	68%	37,193	6%	107,485	17%	19,784	3%	35,592	6%

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, 2021**

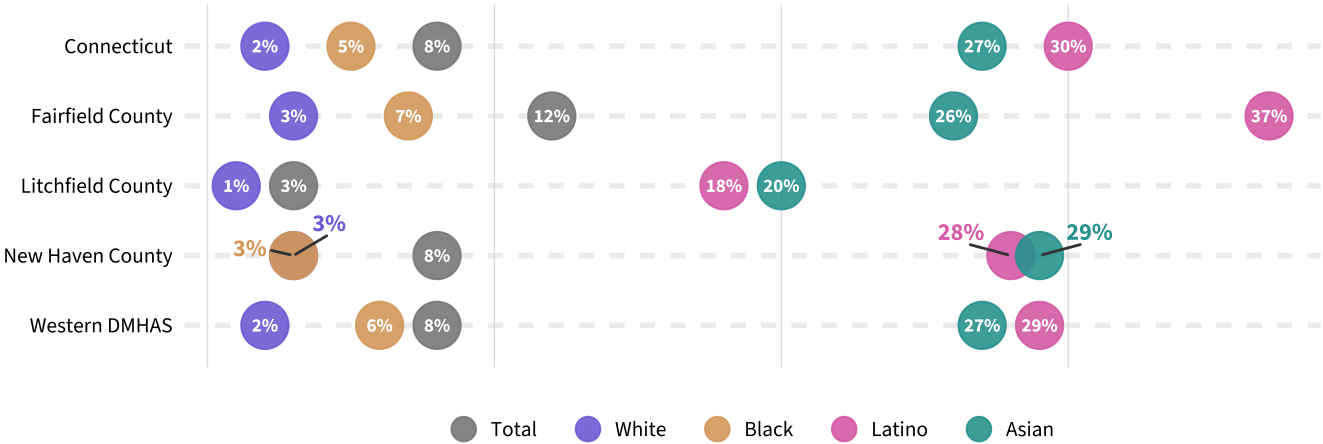


Note: Only groups with at least 50 residents shown.

About 88,231 residents of the Western DMHAS area, or 14 percent of the population, are foreign-born. The largest number of immigrants living in the Western DMHAS area were born in the Dominican Republic, followed by Brazil and Ecuador.

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 2021, 46,363 Western DMHAS area residents, or 8 percent of the population ages 5 and older, had limited English proficiency. Latinos and Asian Americans are more likely to have limited English proficiency than other racial/ethnic groups.

**FIGURE 3: LINGUISTIC ISOLATION BY RACE/ETHNICITY, 2021**



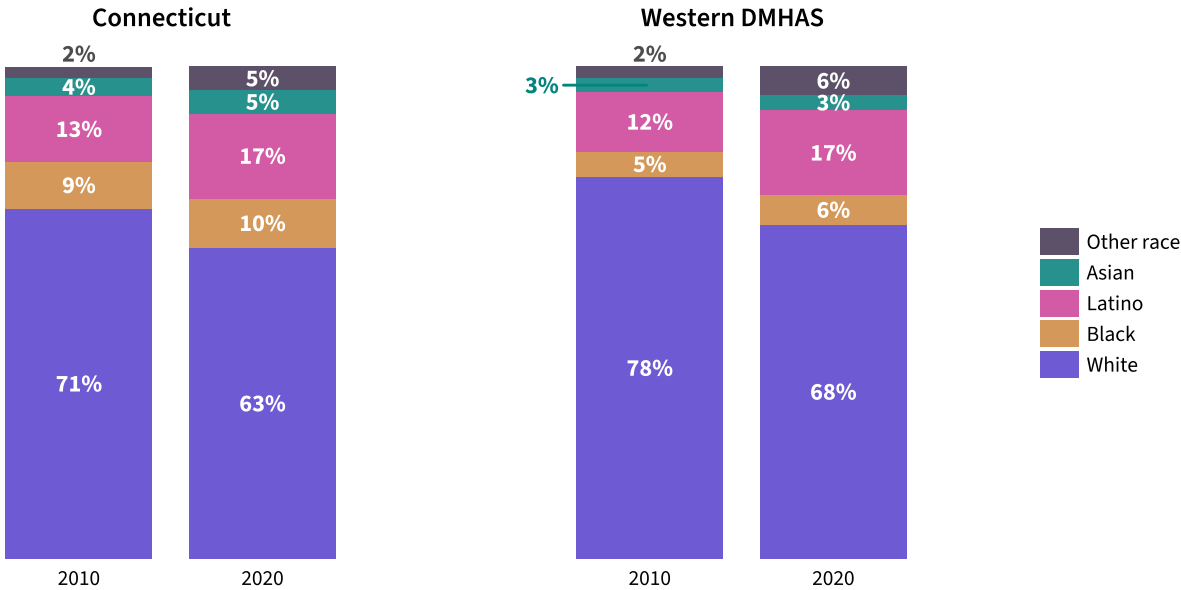
# POPULATION CHANGE: 2020 CENSUS

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, the population of the Western DMHAS service area grew by 5,924 people, a less than 1 percent increase. The number of white residents in the region shrank by 12 percent, while the non-white population grew by 45 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 (0–17)	817,015	736,717	-80,298	-9.8%
	Adults (18+)	2,757,082	2,869,227	+112,145	+4.1%
Western DMHAS	All ages	618,330	624,254	+5,924	+1.0%
	Children (0–17)	145,328	130,102	-15,226	-10.5%
	Adults (18+)	473,002	494,152	+21,150	+4.5%

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



# HOUSING

The Western DMHAS area has 239,879 households, of which 71 percent are homeowner households. Of the region’s 267,297 housing units, both occupied and vacant, 71 percent are in single-family buildings and 29 percent are in multifamily buildings.

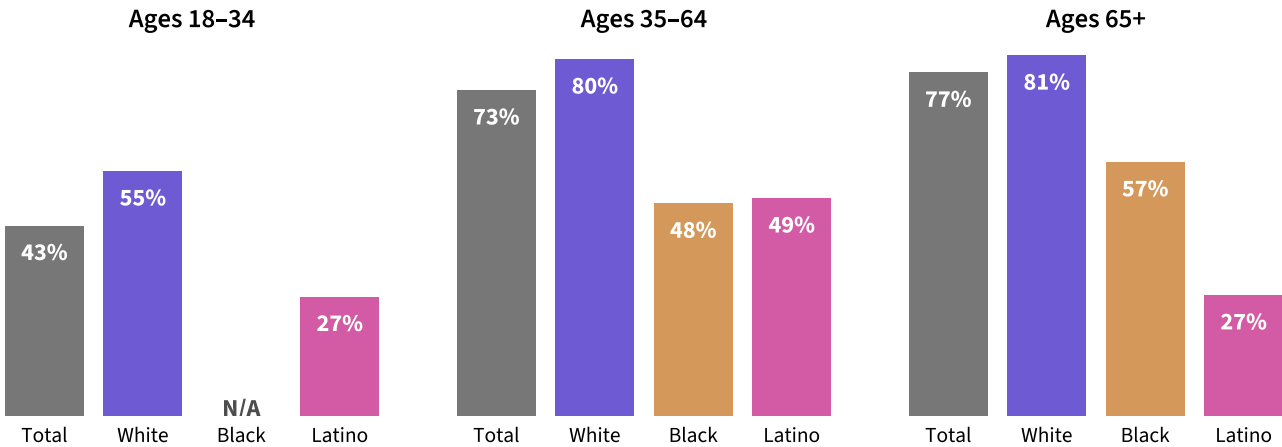
Homeownership rates vary by race/ethnicity. Purchasing a home is more attainable for advantaged groups because the process of purchasing a home has a long history of racially discriminatory practices that continue to restrict access to homeownership today. This challenge, coupled with municipal zoning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

**TABLE 4: HOMEOWNERSHIP RATE BY RACE/ETHNICITY OF HEAD OF HOUSEHOLD, 2021**

Area	Total	White	Black	Latino	Asian
Connecticut	66%	76%	41%	37%	60%
Fairfield County	67%	78%	42%	40%	65%
Litchfield County	76%	79%	52%	51%	59%
New Haven County	62%	73%	37%	36%	61%
Western DMHAS	71%	79%	42%	39%	75%

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.

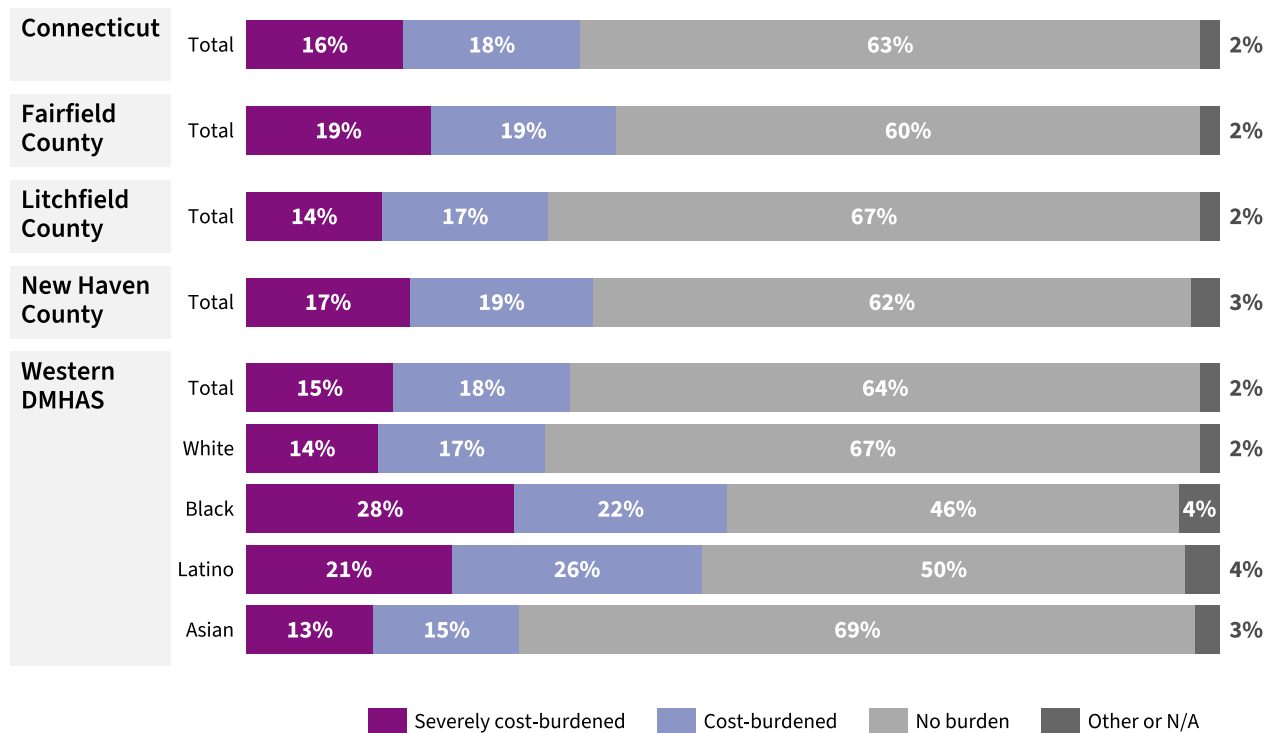
**FIGURE 5: HOMEOWNERSHIP RATES BY AGE AND RACE/ETHNICITY OF HEAD OF HOUSEHOLD, WESTERN DMHAS, 2021 (WITH PROXY AREA)**





A household is cost-burdened when they spend 30 percent or more of their income on housing costs, and severely cost-burdened 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. Cost-burden generally affects renters more than homeowners, and has greater impact on Black and Latino householders. Among renter households in the Western DMHAS area, 48 percent are cost-burdened, compared to 28 percent of owner households.

**FIGURE 6: HOUSING COST-BURDEN RATES BY RACE/ETHNICITY, 2021 (WITH PROXY AREA)**



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.

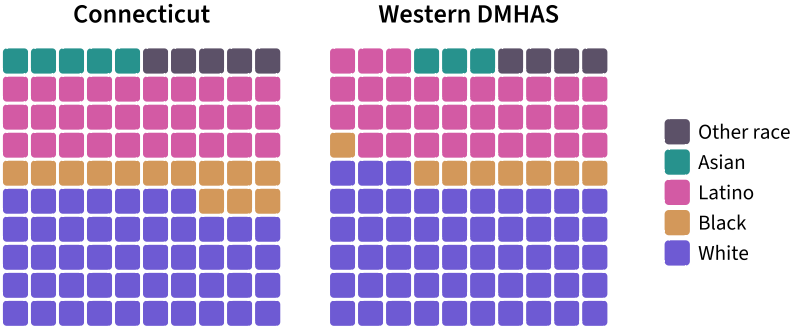
**TABLE 5: OVERCROWDED HOUSEHOLDS BY RACE/ETHNICITY OF HEAD OF HOUSEHOLD, 2021**

Area	Total		White		Black		Latino		Asian	
	Count	Share	Count	Share	Count	Share	Count	Share	Count	Share
Connecticut	27,078	2%	7,418	1%	4,868	3%	10,971	6%	3,445	6%
Fairfield County	9,940	3%	1,803	1%	2,147	6%	4,622	8%	1,121	7%
Litchfield County	831	1%	557	1%	<50	N/A	197	5%	<50	N/A
New Haven County	7,181	2%	2,070	1%	1,466	3%	3,165	6%	642	5%
Western DMHAS	4,047	2%	1,357	1%	605	4%	1,960	7%	247	4%

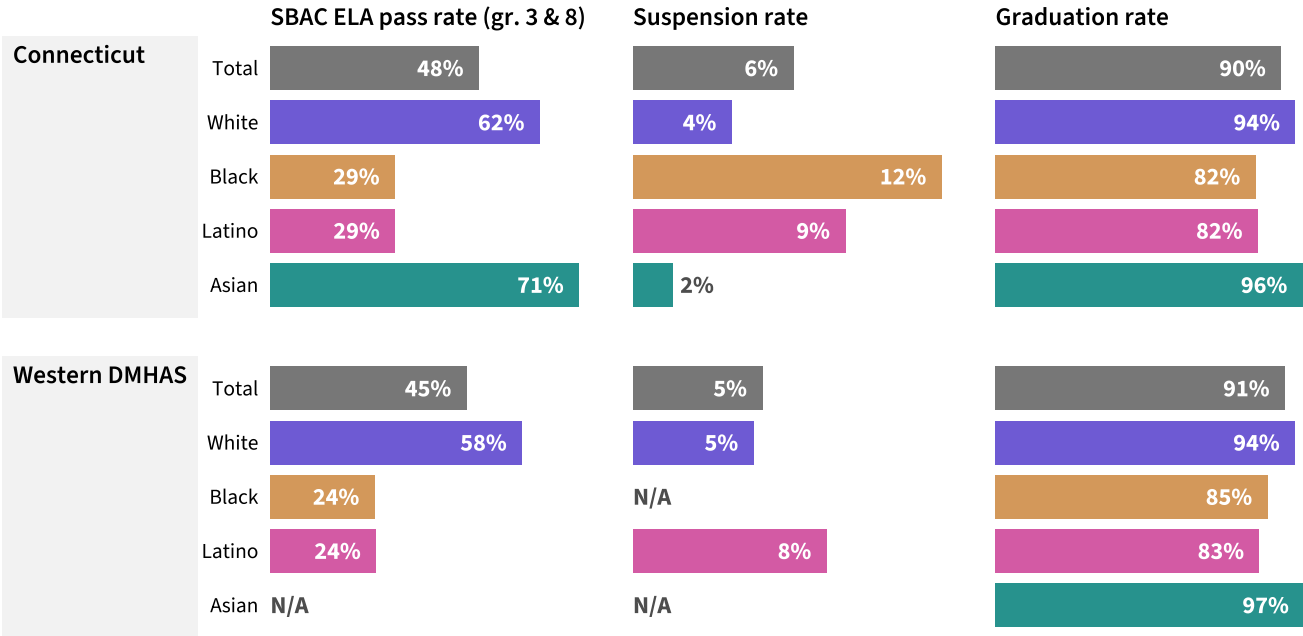
# EDUCATION

Public school students in the Western DMHAS area are served by 38 school districts for pre-kindergarten through grade 12, including 9 regional districts. During the 2022-23 school year, there were a total of 87,879 students enrolled in these districts. 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 long-term educational attainment and economic potential.

**FIGURE 7: PUBLIC K-12 STUDENT ENROLLMENT BY RACE/ETHNICITY PER 100 STUDENTS, 2022-23**

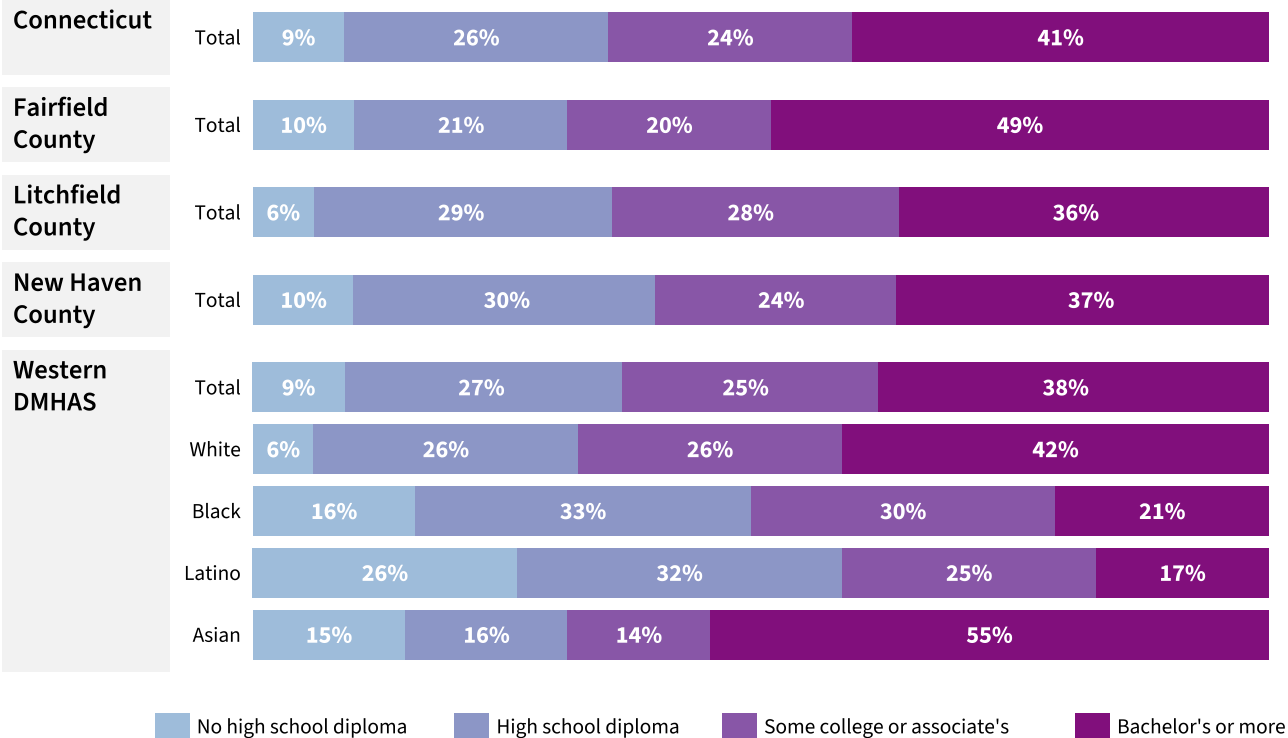


**FIGURE 8: SELECTED ACADEMIC AND DISCIPLINARY OUTCOMES BY STUDENT RACE/ETHNICITY, 2020-21 AND 2021-22 SCHOOL YEARS**



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 the Western DMHAS area, 9 percent of adults ages 25 and over, or 40,843 people, lack a high school diploma; this share is 9 percent statewide.

**FIGURE 9: EDUCATIONAL ATTAINMENT BY RACE/ETHNICITY, SHARE OF ADULTS AGES 25 AND UP, 2021**



## ECONOMY

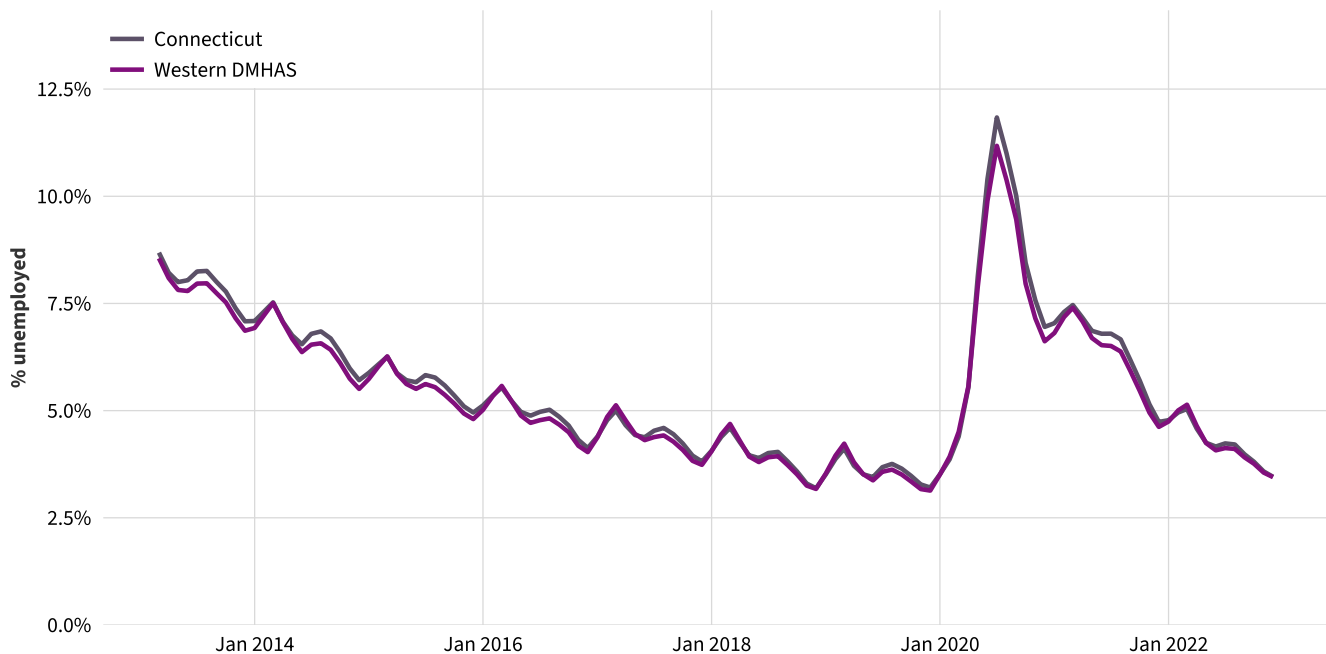
At the end of 2021, there were 212,823 total jobs based in towns in the Western DMHAS service area. The Health Care and Social Assistance sector comprises the largest share of jobs in the region. While many industries saw major job losses early on in the COVID-19 pandemic, by early 2023 the number of jobs statewide had nearly caught back up to pre-pandemic counts.

**TABLE 6: JOBS AND WAGES IN WESTERN DMHAS'S 5 LARGEST SECTORS, 2021**

Sector	Connecticut		Western DMHAS	
	Total jobs	Avg annual pay	Total jobs	Avg annual pay
All Sectors	1,591,760	\$77,816	212,823	\$64,399
Health Care and Social Assistance	267,984	\$60,835	39,802	\$58,090
Retail Trade	167,286	\$41,652	27,195	\$40,628
Manufacturing	152,860	\$89,604	21,565	\$85,677
Accommodation and Food Services	111,160	\$26,767	15,687	\$25,684
Construction	59,323	\$77,099	10,613	\$73,481

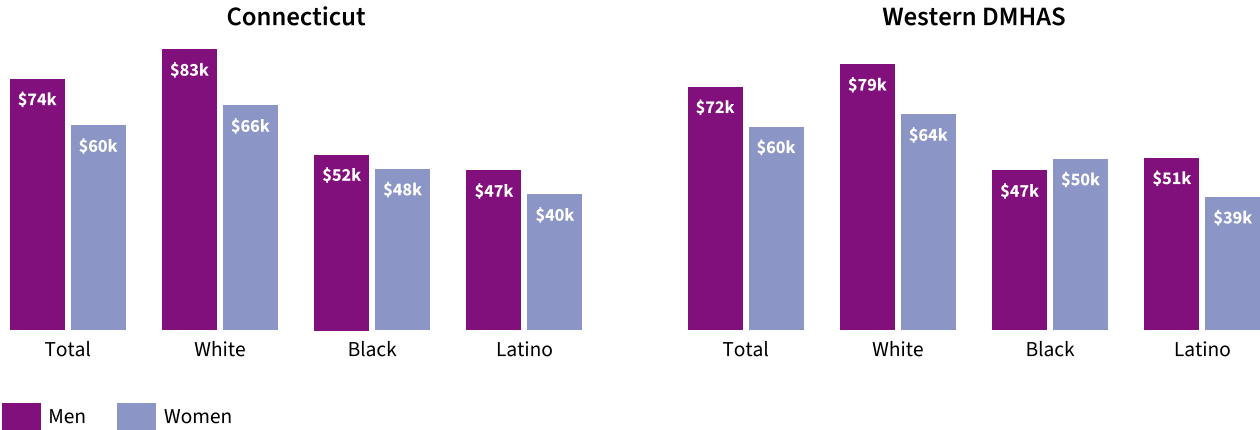
Nationwide, the onset of the pandemic led to a huge spike in unemployment rates, mirrored across Connecticut. At its peak in July 2020, Connecticut's unemployment rate was 12.0 percent. As of December 2022, unemployment rates statewide and in the Western DMHAS area were 3.2 percent and 3.3 percent, respectively.

**FIGURE 10: MONTHLY UNEMPLOYMENT RATE, 2013–2022, 3-MONTH ROLLING AVERAGE**



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 and within many occupational groups.

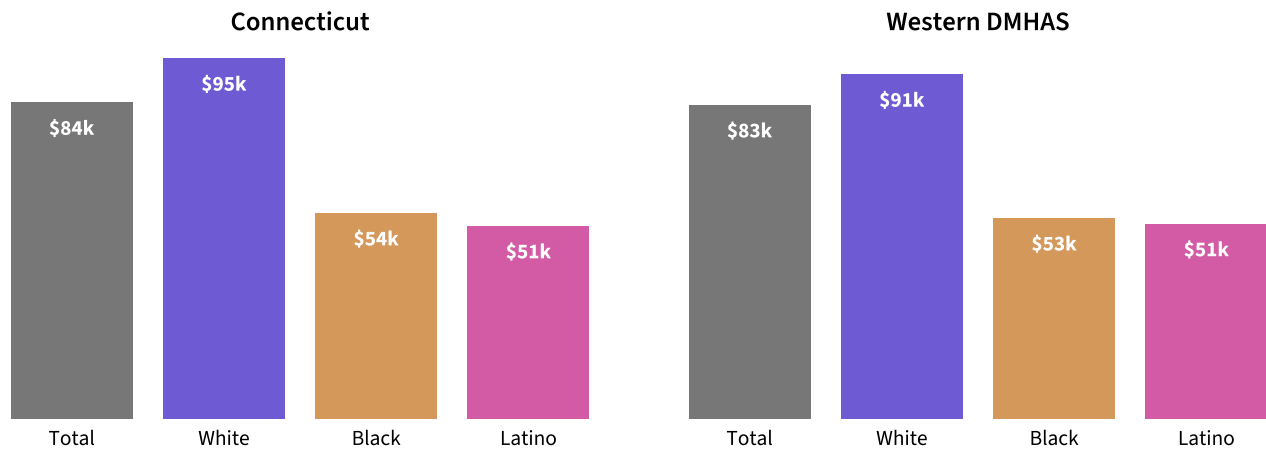
**FIGURE 11: MEDIAN INCOME BY RACE/ETHNICITY AND SEX FOR FULL-TIME WORKERS AGES 25 AND OVER WITH POSITIVE INCOME, 2021 (WITH PROXY AREA)**



## INCOME & WEALTH

The median household income in the Western DMHAS area is \$82,895, compared to \$83,572 statewide. Town-level median household incomes range from \$48,787 in Waterbury to \$160,258 in Ridgefield. Racial disparities in outcomes related to education, housing, 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, 2021 (WITH PROXY AREA)**



Between the Great Recession and the COVID-19 pandemic, average incomes have not kept pace with inflation over the past two decades. Connecticut's median household income was \$83,572 in 2021; adjusted for inflation, this was \$1,365 lower than in 2000.

**TABLE 7: MEDIAN HOUSEHOLD INCOME IN LARGE TOWNS, 2000–2021, IN 2021 DOLLARS**

Area	Income, 2000	Income, 2021	Change, 2000-2021	Percent change
Naugatuck	\$80,704	\$86,900	+\$6,196	+7.7%
Cheshire	\$126,718	\$132,682	+\$5,964	+4.7%
Connecticut	\$84,937	\$83,572	-\$1,365	-1.6%
Torrington	\$65,891	\$63,135	-\$2,756	-4.2%
New Milford	\$102,920	\$93,221	-\$9,699	-9.4%
Waterbury	\$53,992	\$48,787	-\$5,205	-9.6%
Danbury	\$84,510	\$74,600	-\$9,910	-11.7%

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 (\$26,500 for a family of four in 2021). Throughout the state, poverty and SNAP utilization rates are higher among Black and Latino households than white households.

With many of the safety measures early in the COVID-19 pandemic, having reliable, high-speed internet at home became a necessity for remote participation in school, expanded job opportunities, and telehealth. Statewide, Black and Latino residents are slightly more likely than average to live in a household without broadband access.

Access to a personal vehicle may also be considered a measure of financial security 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: SELECTED ECONOMIC RESOURCES BY RACE/ETHNICITY, 2021**

	Total		White		Black		Latino		Asian	
	Count	Share	Count	Share	Count	Share	Count	Share	Count	Share
<b>Population living below poverty level</b>										
Connecticut	351,476	10%	139,246	6%	64,472	17%	127,775	21%	14,134	9%
Western DMHAS	55,196	9%	25,932	6%	7,867	19%	19,650	21%	N/A	N/A
<b>Population without broadband internet at home</b>										
Connecticut	269,234	8%	159,553	7%	38,465	10%	61,883	10%	5,334	3%
Western DMHAS	49,801	8%	32,164	7%	3,906	10%	11,640	12%	N/A	N/A

**TABLE 9: SELECTED HOUSEHOLD ECONOMIC INDICATORS BY RACE/ETHNICITY OF HEAD OF HOUSEHOLD, 2021 (WITH PROXY AREA)**

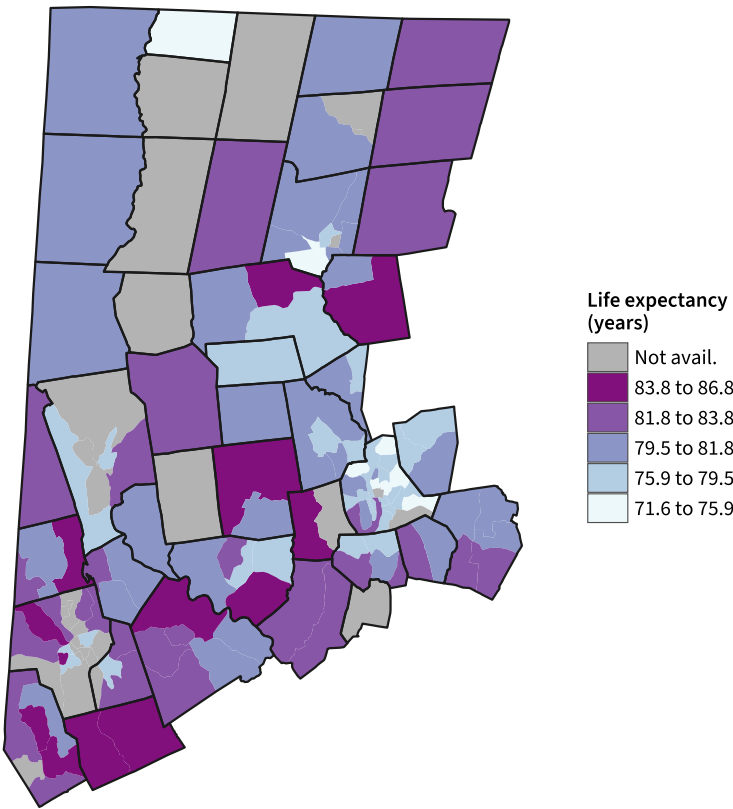
	Total		White		Black		Latino		Asian	
	Count	Share	Count	Share	Count	Share	Count	Share	Count	Share
<b>Households receiving food stamps/SNAP</b>										
Connecticut	160,416	11%	62,974	6%	34,132	24%	57,456	30%	3,501	6%
Western DMHAS	24,487	10%	12,489	7%	3,192	22%	8,027	27%	N/A	N/A
<b>Households without a vehicle</b>										
Connecticut	118,174	8%	53,628	5%	25,802	19%	31,312	16%	4,728	9%
Western DMHAS	17,862	7%	10,586	6%	2,337	17%	4,377	15%	N/A	N/A

# 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 is 80.4 years in the Western DMHAS area, and 80.3 years statewide. Across the region, this ranges from 74.4 years in North Canaan to 85.4 in Middlebury and Roxbury.

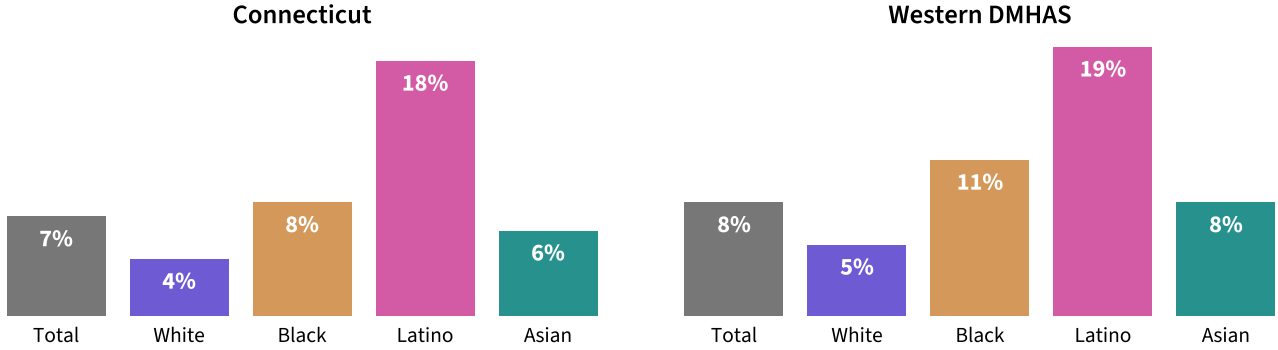
**FIGURE 13: LIFE EXPECTANCY, WESTERN DMHAS BY CENSUS TRACT, 2015**





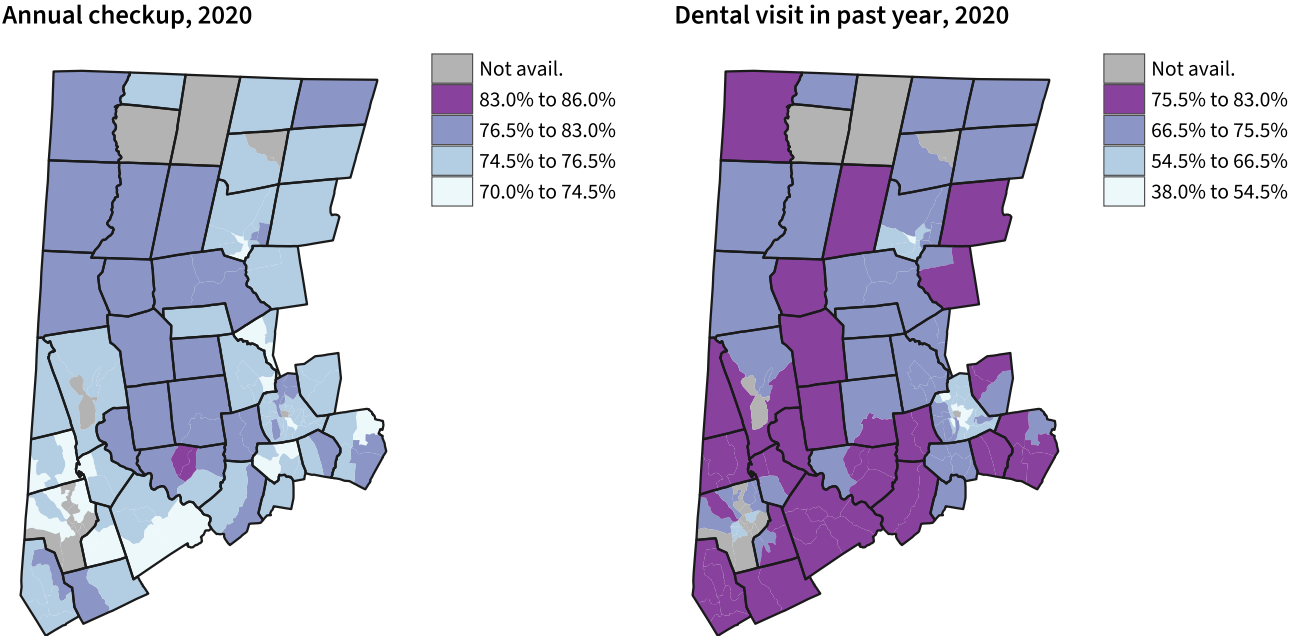
Health-related challenges begin with access to care. Due to differences in workplace benefits, income, and eligibility factors, Black and especially Latino people are less likely to have health insurance than white people.

**FIGURE 14: UNINSURED RATE AMONG ADULTS AGES 19–64 BY RACE/ETHNICITY, 2021**



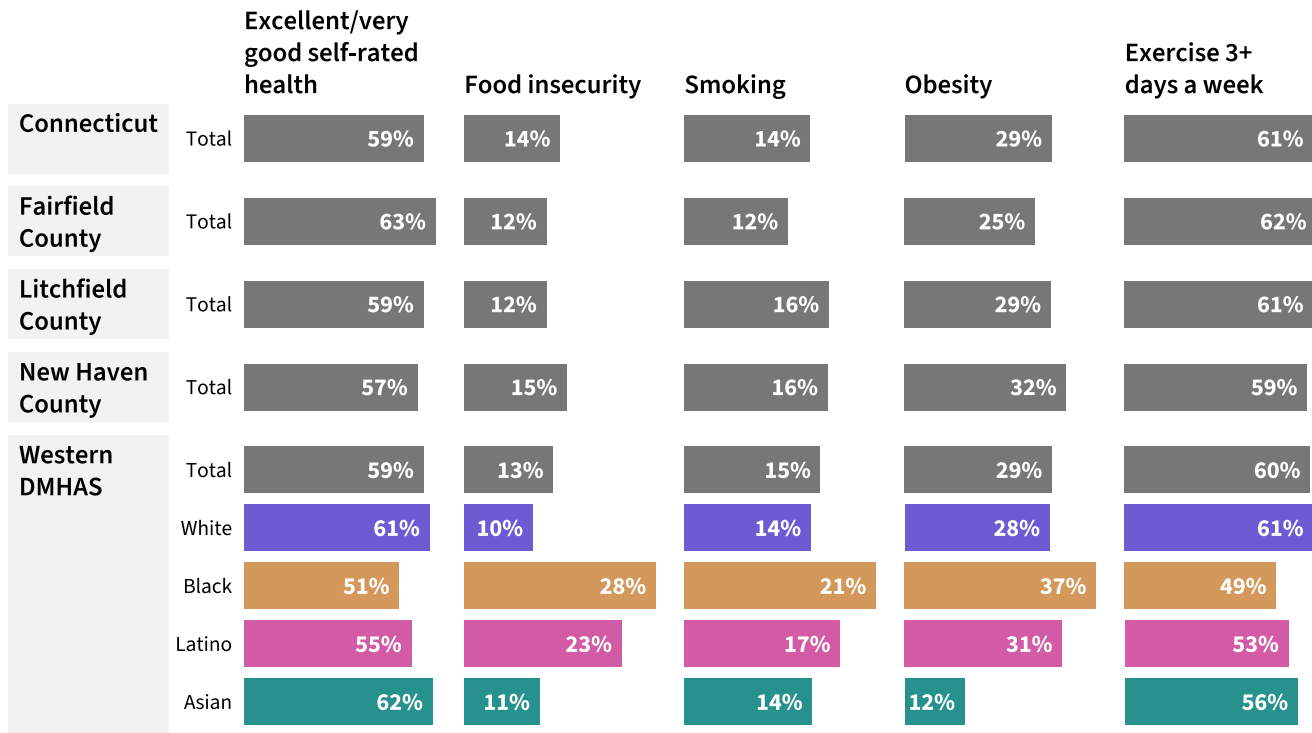
Preventive care can help counteract economic disadvantages, as a person’s health can be improved by addressing risk factors like hypertension and chronic stress early. Lack of affordable, accessible, and consistent medical care can lead to residents relying on expensive emergency room visits later on. Overall, 76 percent of the adults in the Western DMHAS area had an annual checkup as of 2020, and 71 percent had had a dental visit in the past year.

**FIGURE 15: PREVENTIVE CARE MEASURES, SHARE OF ADULTS BY CENSUS TRACT, WESTERN DMHAS**



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 16: SELECTED HEALTH RISK FACTORS, SHARE OF ADULTS, 2015–2021**



**FIGURE 17: SELECTED HEALTH INDICATORS BY AGE AND RACE/ETHNICITY, SHARE OF ADULTS, WESTERN DMHAS AREA, 2015–2021**

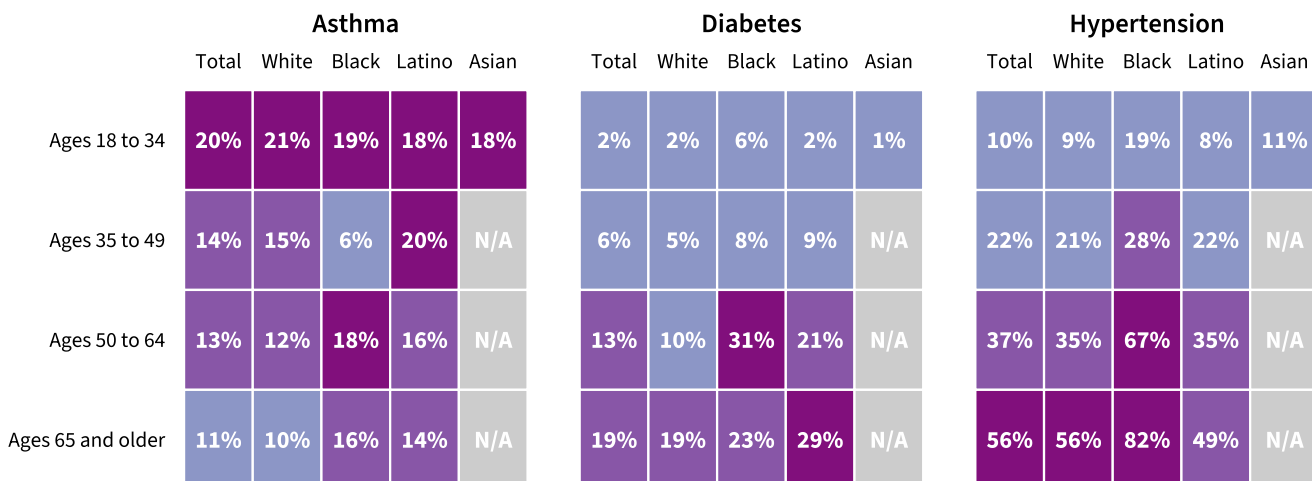
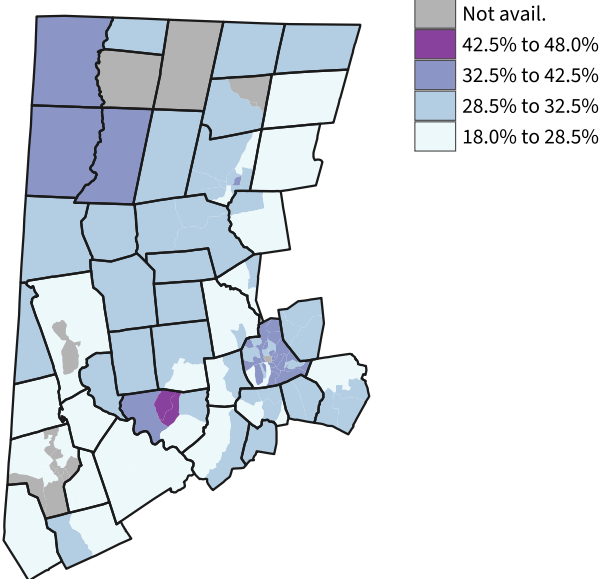
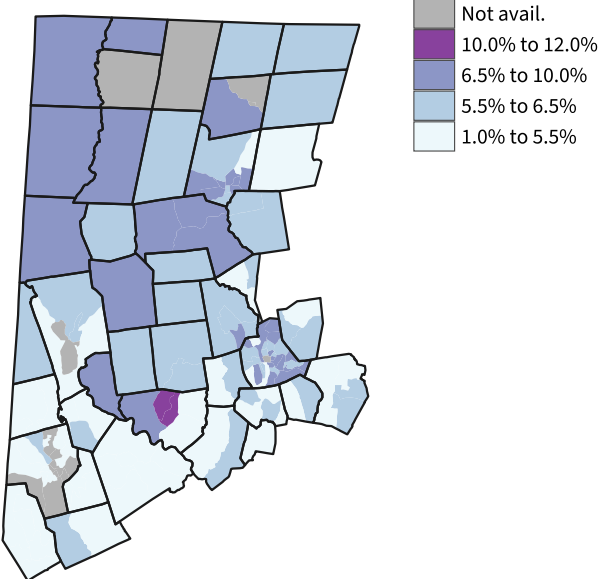


FIGURE 18: CHRONIC DISEASE PREVALENCE, SHARE OF ADULTS BY CENSUS TRACT, WESTERN DMHAS

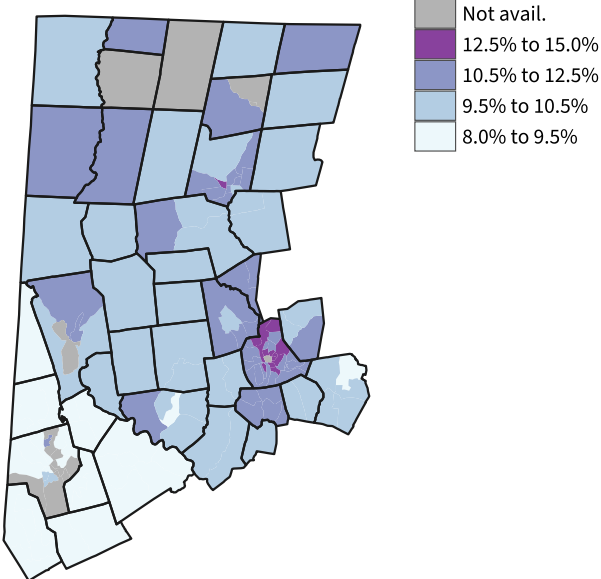
High blood pressure, 2019



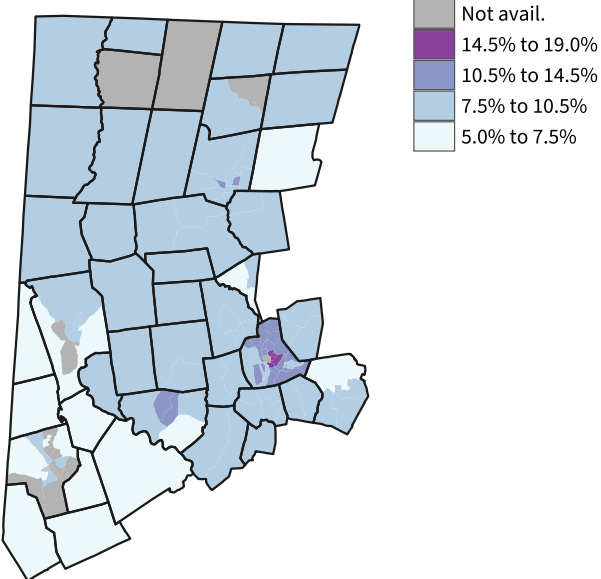
Coronary heart disease, 2020



Current asthma, 2020



Diabetes, 2020



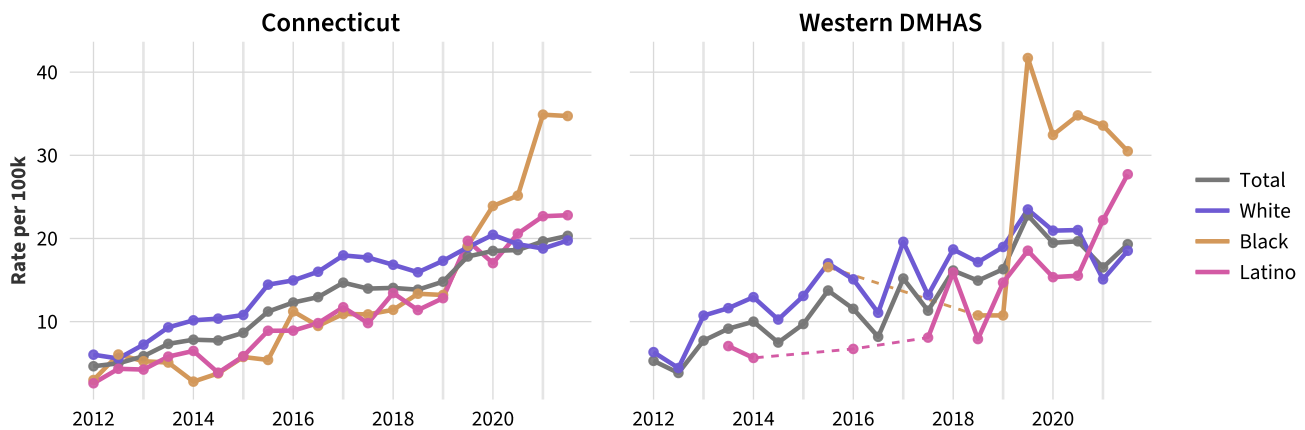
Mental health issues like depression and anxiety can be linked to social determinants like income, employment, and environment, and can pose risks of physical health problems as well, including by complicating a person’s ability to keep up other aspects of their health care. People of color are slightly more likely to report feeling mostly or completely anxious and being bothered by feeling depressed or hopeless. Overall, 13 percent of Western DMHAS area adults report experiencing anxiety regularly and 8 percent report being bothered by depression.

**TABLE 10: SELECTED MENTAL HEALTH INDICATORS, SHARE OF ADULTS, 2015-2021**

	Total	White	Black	Latino	Asian
<b>Experiencing anxiety</b>					
Connecticut	13%	11%	15%	19%	15%
Fairfield County	13%	10%	17%	20%	14%
Litchfield County	11%	10%	28%	14%	N/A
New Haven County	14%	12%	14%	19%	14%
Western DMHAS	13%	11%	15%	18%	19%
<b>Bothered by depression</b>					
Connecticut	9%	8%	10%	14%	9%
Fairfield County	7%	6%	10%	11%	5%
Litchfield County	8%	7%	12%	<1%	N/A
New Haven County	10%	8%	11%	16%	4%
Western DMHAS	8%	7%	14%	13%	10%

Like other states, Connecticut has seen a rise in drug overdose deaths in the last several years. In 2021, Connecticut saw an average of 122 overdose deaths per month, up from 59 in 2015. White residents long comprised the bulk of these deaths, but as overall overdose death rates have risen, an increasing share of those deaths have been people of color.

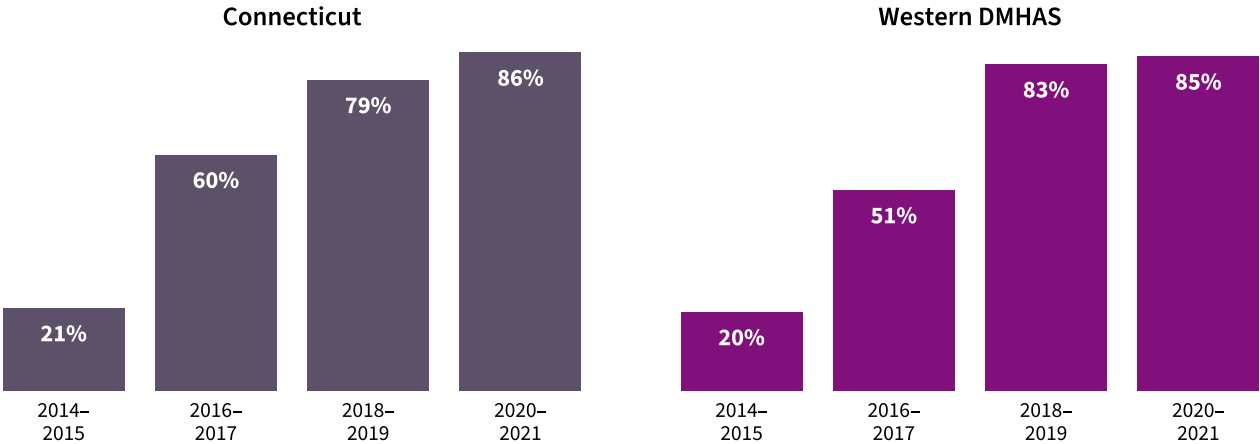
**FIGURE 19: AGE-ADJUSTED SEMI-ANNUAL RATES OF DRUG OVERDOSE DEATHS PER 100,000 RESIDENTS BY RACE/ETHNICITY, 2012-2021**



Note: Values are suppressed for small populations or few overdose incidents. Dashed lines indicate periods where values are suppressed or otherwise unavailable.

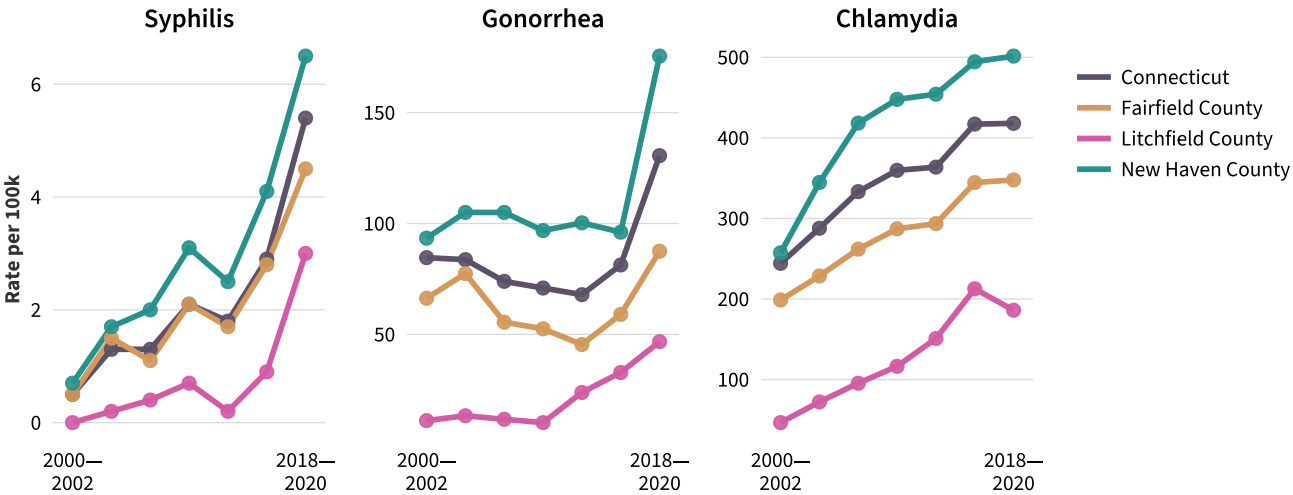
The introduction and spread of fentanyl in drugs—both with and without users’ knowledge—is thought to have contributed to this steep rise in overdoses. In 2016 and 2017, 51 percent of the drug overdose deaths in the Western DMHAS area involved fentanyl; in 2020 and 2021, this share was 85 percent.

**FIGURE 20: SHARE OF DRUG OVERDOSE DEATHS INVOLVING FENTANYL, 2012–2021**



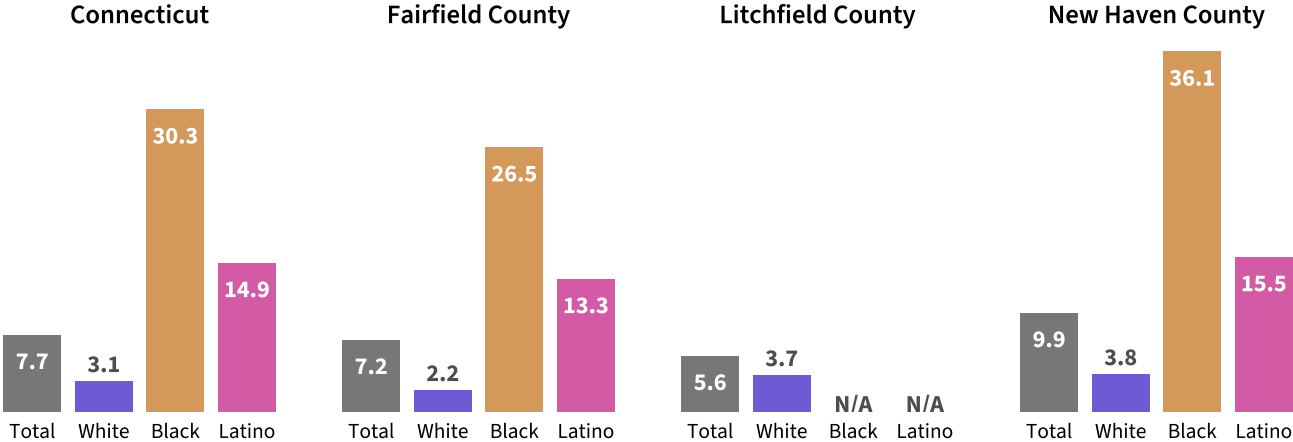
Sexually transmitted infections (STIs) can have long-term implications for health, including reproductive health problems and certain cancers, and can increase the risk of acquiring and transmitting diseases such as HIV and hepatitis C. Following nationwide trends, Connecticut has seen increases in the rates of STIs like chlamydia and gonorrhea over the past two decades. Between 2018 and 2020, Connecticut had annual average case rates of 418 new cases of chlamydia per 100,000 residents, 131 cases of gonorrhea per 100,000, and 5.4 cases of syphilis per 100,000. During that period, rates in New Haven County were higher than the state for all three of these STIs.

**FIGURE 21: ANNUALIZED AVERAGE RATES OF NEW CASES OF SELECTED SEXUALLY TRANSMITTED INFECTIONS PER 100,000 RESIDENTS, 2000–2020**



As with many other diseases, Connecticut’s Black and Latino residents face a higher burden of HIV rates. Statewide between 2016 and 2020, Black residents ages 13 and up were nearly 10 times more likely to be diagnosed with HIV than white residents.

**FIGURE 22: ANNUALIZED AVERAGE RATE OF NEW HIV DIAGNOSES PER 100,000 RESIDENTS AGES 13 AND OVER, 2016–2020**

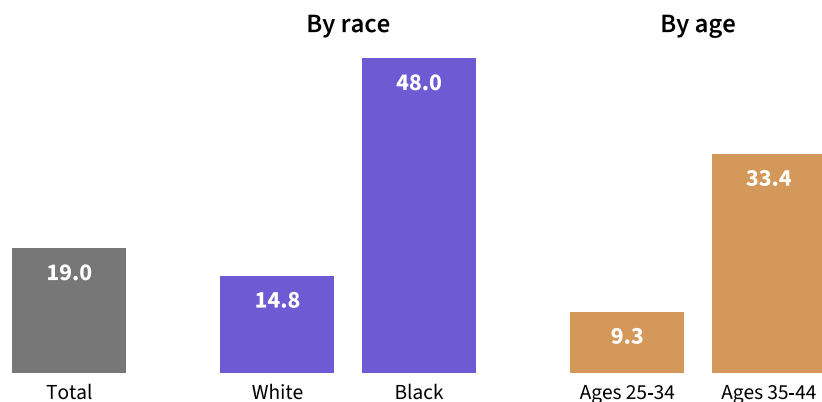


Birth outcomes often reflect health inequities for parents giving birth, and those outcomes can affect a child throughout their life. Often, parents of color have more complications related to birth and pregnancy than white parents. Complications during pregnancy or childbirth also contribute to elevated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

**TABLE 11: SELECTED BIRTH OUTCOMES BY RACE/ETHNICITY OF PARENT GIVING BIRTH, 2017–2021**

Area	Total	White	Black	Latina			Asian
				Latina (overall)	Puerto Rican	Other Latina	
<b>Late or no prenatal care</b>							
Connecticut	3.4%	2.5%	5.2%	4.4%	3.0%	5.6%	3.4%
Fairfield County	4.2%	3.2%	6.0%	5.4%	3.2%	5.9%	3.7%
Litchfield County	2.8%	2.3%	N/A	4.8%	N/A	5.9%	N/A
New Haven County	4.0%	2.9%	5.1%	5.0%	3.5%	6.7%	4.6%
<b>Low birthweight</b>							
Connecticut	7.9%	6.4%	12.4%	8.4%	10.0%	7.0%	9.0%
Fairfield County	7.4%	5.5%	12.7%	8.0%	10.7%	7.3%	8.4%
Litchfield County	6.6%	6.7%	10.9%	5.0%	6.2%	4.4%	8.1%
New Haven County	8.3%	6.7%	12.2%	8.4%	9.6%	7.0%	8.9%
<b>Infant mortality (per 1k live births)</b>							
Connecticut	4.5	3.0	9.1	5.4	N/A	N/A	N/A
Fairfield County	3.7	2.4	8.4	4.4	N/A	N/A	N/A
Litchfield County	3.9	3.7	N/A	N/A	N/A	N/A	N/A
New Haven County	5.6	3.4	10.5	6.0	N/A	N/A	N/A

**FIGURE 23: MATERNAL MORTALITY RATE PER 100K BIRTHS, CONNECTICUT, 2013–2017**



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 2018 and 2020, 1.7 percent of children tested in the Western DMHAS area 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 more likely to live in these older buildings.

**TABLE 12: HOUSEHOLDS LIVING IN STRUCTURES BUILT BEFORE 1960 BY RACE/ETHNICITY OF HEAD OF HOUSEHOLD, 2021 (WITH PROXY AREA)**

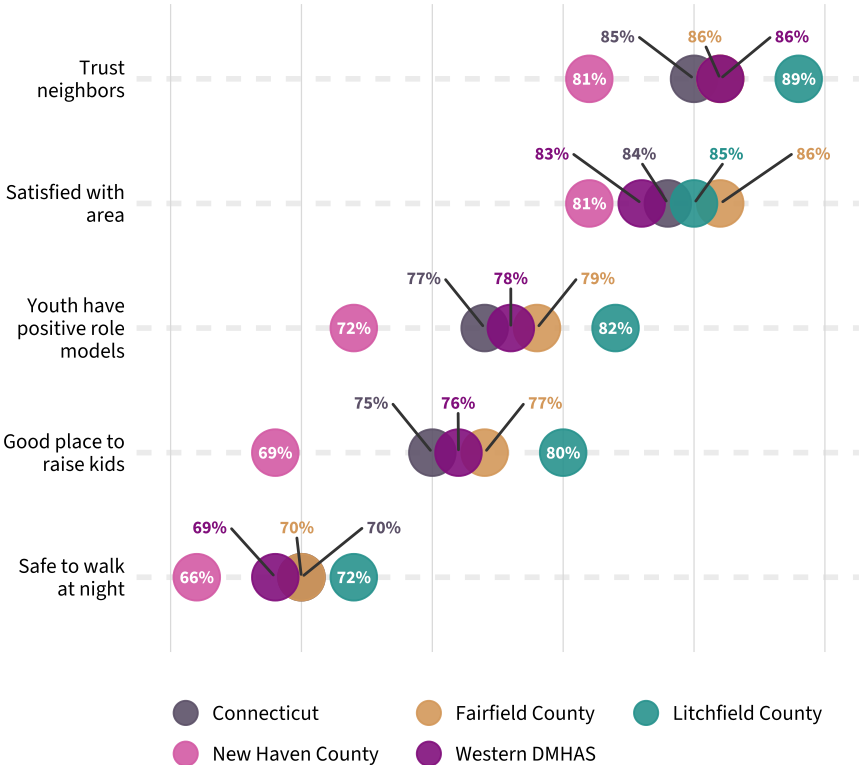
Area	Total		White		Black		Latino		Asian		Other race	
	Count	Share	Count	Share	Count	Share	Count	Share	Count	Share	Count	Share
Connecticut	579,568	41%	390,197	40%	64,854	49%	95,979	50%	14,732	27%	14,953	42%
Fairfield County	146,525	42%	90,573	40%	18,243	51%	29,019	49%	4,737	28%	3,813	43%
Litchfield County	29,936	40%	27,760	41%	N/A	N/A	1,087	30%	N/A	N/A	N/A	N/A
New Haven County	150,677	45%	94,467	43%	20,342	49%	28,111	53%	4,092	33%	3,475	44%
Western DMHAS	88,819	37%	66,438	36%	6,105	43%	13,899	47%	1,363	21%	2,291	38%



# CIVIC LIFE & COMMUNITY COHESION

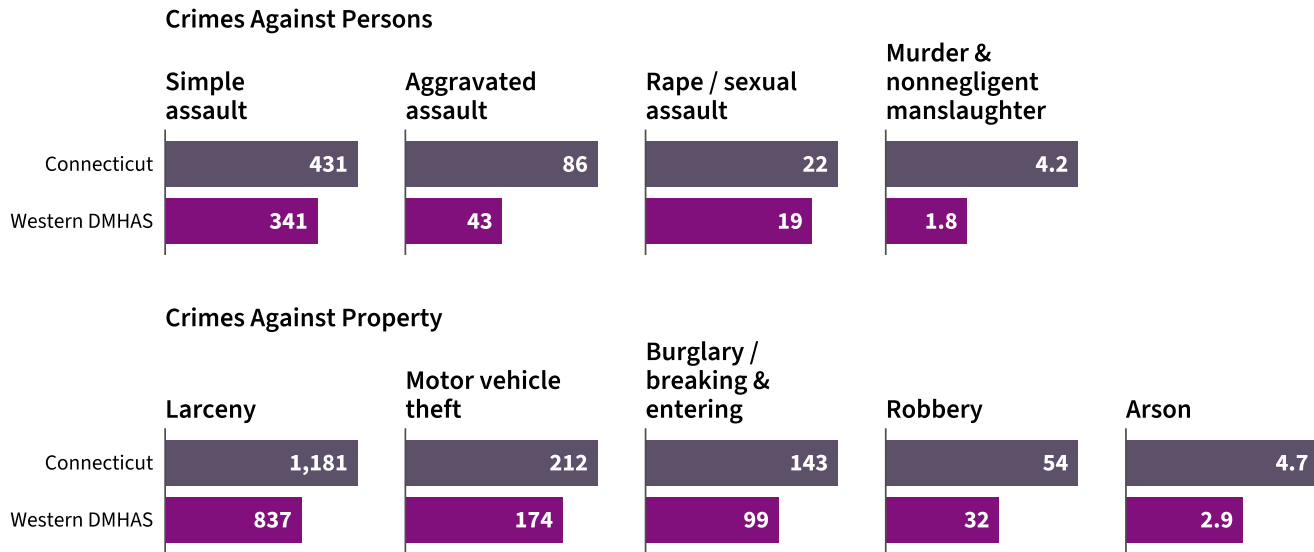
Beyond individual health, several measures from the DataHaven Community Wellbeing Survey show how local adults feel about the health of their neighborhoods. High quality of life and community cohesion can positively impact resident well-being through the availability of resources, sense of safety, and 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, 83 percent of Western DMHAS area adults report being satisfied with the area where they live.

**FIGURE 24: RESIDENTS' RATINGS OF COMMUNITY COHESION MEASURES, SHARE OF ADULTS, 2015-2021**



Crime rates 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 25: GROUP A CRIME RATES PER 100,000 RESIDENTS BY TOWN / JURISDICTION, 2021**



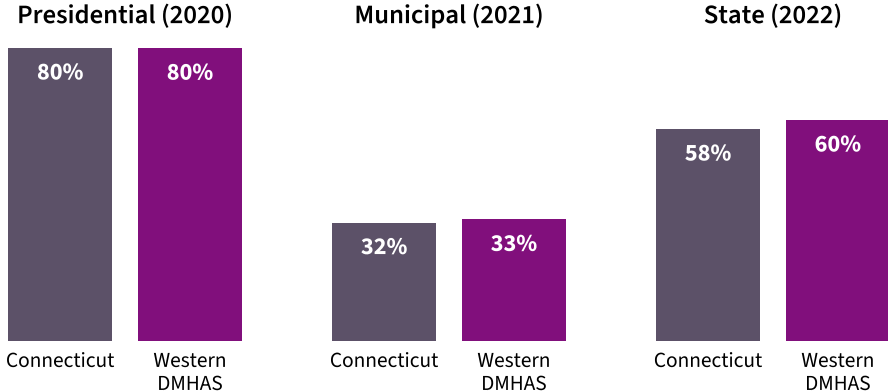
A lack of trust in and engagement with local government and experiences of unfair treatment by authorities can impair community well-being and cohesion. Fifty-five percent of adults in the Western DMHAS area feel their local government is responsive to residents’ needs, compared to 53 percent of adults statewide.

**TABLE 13: RESIDENTS’ RATINGS OF LOCAL GOVERNMENT, SHARE OF ADULTS, 2015–2021**

Area	Local govt is responsive	Have some influence over local govt
Connecticut	53%	67%
Fairfield County	56%	68%
Litchfield County	57%	70%
New Haven County	49%	66%
Western DMHAS	55%	68%

Eighty percent of the Western DMHAS area’s eligible voters, or 325,244 people, voted in the 2020 presidential election, and 60 percent (236,719 people) voted in the 2022 state election.

**FIGURE 26: REGISTERED VOTER TURNOUT, 2020–2022**

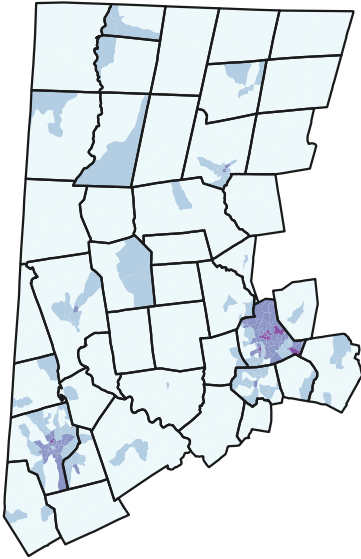


# ENVIRONMENT & SUSTAINABILITY

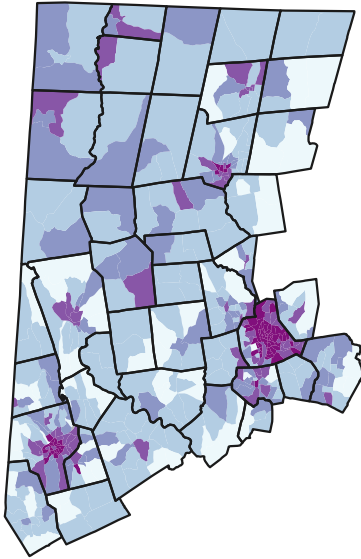
Many environmental factors—from access to outdoor resources to tree canopy to exposure to pollutants—can have direct impacts on residents’ health and quality of life. Environmental justice is the idea that these factors of built and natural environments follow familiar patterns of socioeconomic disparities 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.

**FIGURE 27: EPA ENVIRONMENTAL JUSTICE INDEX BY BLOCK GROUP, WESTERN DMHAS**

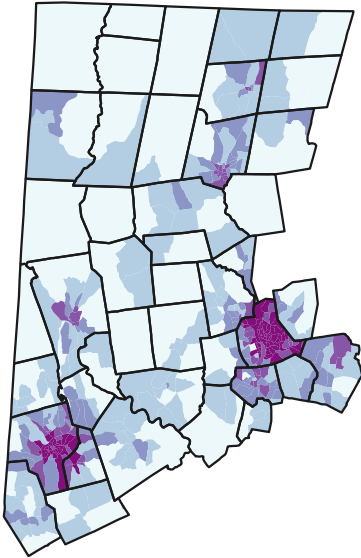
**Air toxics cancer risk**



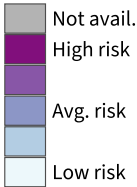
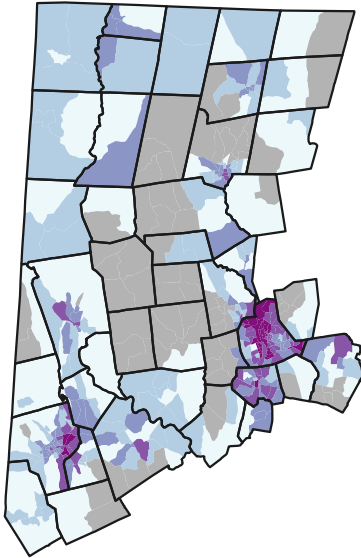
**Lead paint exposure**



**Hazardous waste proximity**

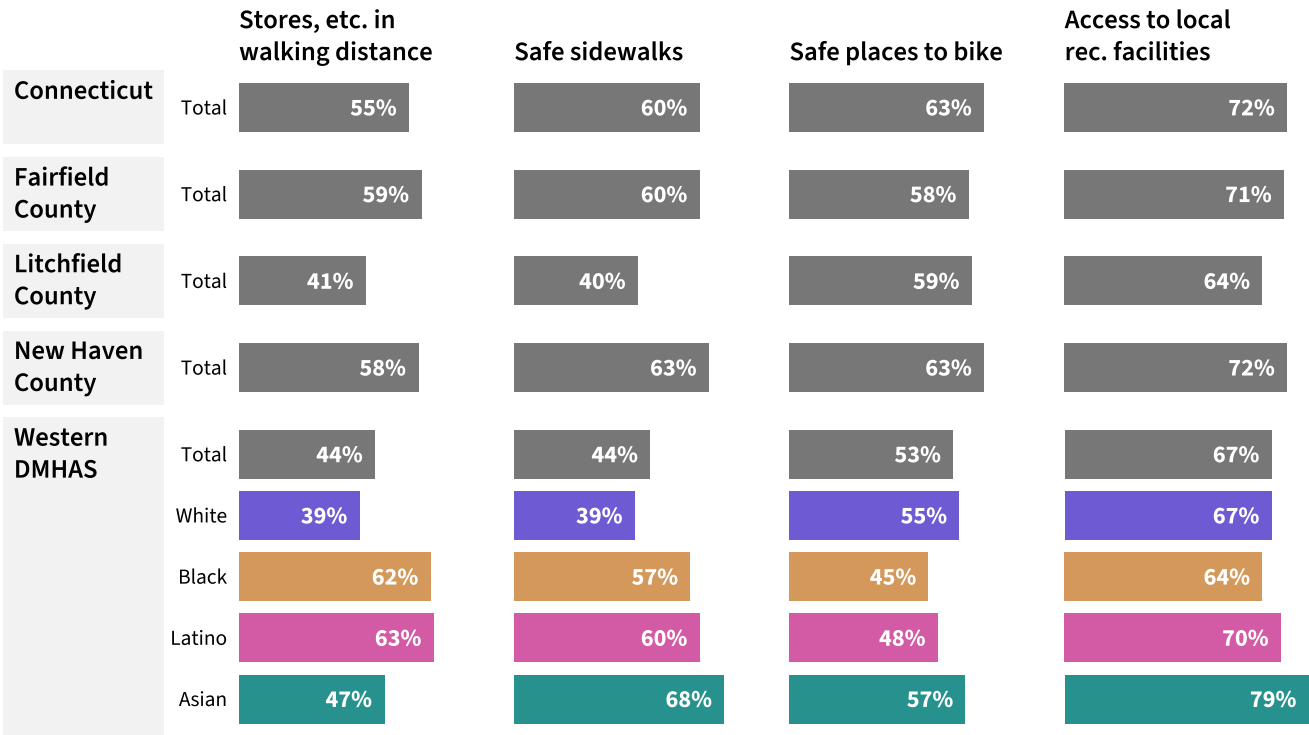


**Wastewater discharge**



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 the Western DMHAS area, 44 percent report having stores, banks, and other locations they need in walking distance, lower than the share of adults statewide.

**FIGURE 28: RESIDENTS’ RATINGS OF LOCAL WALKABILITY MEASURES BY RACE/ETHNICITY, SHARE OF ADULTS, 2015–2021**



## 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 (2023) of US Census Bureau American Community Survey 2021 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>. Note that for the sake of privacy, the Census Bureau suppresses any income values above \$250,000 in their tables; any such values not calculated by DataHaven will be shown as \$250,000+.

**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, 2021.** DataHaven analysis (2023) of US Census Bureau American Community Survey 2021 5-year estimates.

**Figure 3. Linguistic isolation by race/ethnicity, 2021.** DataHaven analysis (2023) of US Census Bureau American Community Survey 2021 5-year estimates.

**Table 3. Population and population change by age group, 2010–2020.** US Census Bureau 2010 & 2020 Decennial Census P.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, 2021.** DataHaven analysis (2023) of US Census Bureau American Community Survey 2021 5-year estimates.

**Figure 5. Homeownership rates by age and race/ethnicity of head of household, Western DMHAS, 2021 (with proxy area).** DataHaven analysis (2023) of US Census Bureau American Community Survey 2021 5-year public use microdata sample (PUMS) data, accessed via IPUMS. Steven Ruggles, Sarah Flood, Matthew Sobek, Danika Brockman, Grace Cooper, Stephanie Richards, and Megan Schouweiler. IPUMS USA: Version 13.0 [dataset]. Minneapolis, MN: IPUMS, 2023. <https://doi.org/10.18128/D010.V13.0>

**Figure 6. Housing cost-burden rates by race/ethnicity, 2021 (with proxy area).** DataHaven analysis (2023) of Ruggles, et al. (2023).

**Table 5. Overcrowded households by race/ethnicity of head of household, 2021.** DataHaven analysis (2023) of US Census Bureau American Community Survey 2021 5-year estimates.

**Figure 7. Public K–12 student enrollment by race/ethnicity per 100 students, 2022-23.** DataHaven analysis (2023) of 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, 2020-21 and 2021-22 school years.** DataHaven analysis (2023) of Smarter Balanced Assessment Consortium (SBAC) 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 represents the percentage of students with one or more suspension or expulsion during the school year.

**Figure 9. Educational attainment by race/ethnicity, share of adults ages 25 and up, 2021.** DataHaven analysis (2023) of US Census Bureau American Community Survey 2021 5-year estimates.

**Table 6. Jobs and wages in Western DMHAS's 5 largest sectors, 2021.** DataHaven analysis (2023) of annual employment data from the Connecticut Department of Labor. Note that in some cases, especially for smaller towns or where data were deemed unreliable for whatever reason, data have been suppressed by the department. In a few cases, that may mean large sectors in an area are missing from the analysis here. Available at [https://www1.ctdol.state.ct.us/lmi/202/202\\_annualaverage.asp](https://www1.ctdol.state.ct.us/lmi/202/202_annualaverage.asp)

**Figure 10. Monthly unemployment rate, 2013–2022, 3-month rolling average.** DataHaven analysis (2023) of US Bureau of Labor Statistics Local Area Unemployment Statistics. <https://www.bls.gov/lau>

**Figure 11. Median income by race/ethnicity and sex for full-time workers ages 25 and over with positive income, 2021 (with proxy area).** DataHaven analysis (2023) of Ruggles, et al. (2023).

**Figure 12. Median household income by race/ethnicity of head of household, 2021 (with proxy area).** DataHaven analysis (2023) of US Census Bureau American Community Survey 2021 5-year estimates and Ruggles, et al (2023).

**Table 7. Selected economic resource indicators by race/ethnicity, 2021.** DataHaven analysis (2023) of US Census Bureau American Community Survey 2021 5-year estimates.

**Table 8. Selected household economic indicators by race/ethnicity of head of household, 2021 (with proxy area).** DataHaven analysis (2023) of US Census Bureau American Community Survey 2021 5-year estimates and Ruggles, et al (2023).

**Table 9. Median household income in large towns, 2000–2021, in 2021 dollars.** DataHaven analysis (2023) of US Census Bureau 2000 and 2010 Decennial Census; and American Community Survey 2021 5-year estimates.

**Figure 13. Life expectancy, Western DMHAS 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 14. Uninsured rate among adults ages 19–64 by race/ethnicity, 2021.** DataHaven analysis (2023) of US Census Bureau American Community Survey 2021 5-year estimates.

**Figure 15. Preventive care measures, share of adults by Census tract, Western DMHAS.** Data from PLACES Project. Centers for Disease Control and Prevention.

**Figure 16. Selected health risk factors, share of adults, 2015–2021.** DataHaven analysis (2023) of 2015, 2018, and 2021 DataHaven Community Wellbeing Survey. Available at <https://ctdatahaven.org/reports/datahaven-community-wellbeing-survey>

**Figure 17. Selected health indicators by age and race/ethnicity, share of adults, Western DMHAS area, 2015–2021.** DataHaven analysis (2023) of 2015, 2018, and 2021 DataHaven Community Wellbeing Survey.

**Figure 18. Chronic disease prevalence, share of adults by Census tract, Western DMHAS.** Data from PLACES Project. Centers for Disease Control and Prevention.

**Table 10. Selected mental health indicators, share of adults, 2015–2021.** DataHaven analysis (2023) of 2015, 2018, and 2021 DataHaven Community Wellbeing Survey.

**Figure 19. Age-adjusted semi-annual rates of drug overdose deaths per 100,000 residents by race/ethnicity, 2012–2021.** DataHaven analysis (2023) of Accidental Drug Related Deaths. 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 20. Share of drug overdose deaths involving fentanyl, 2012–2021.** DataHaven analysis (2023) of Accidental Drug Related Deaths. Connecticut Office of the Chief Medical Examiner.

**Figure 21. Annualized average rates of new cases of selected sexually transmitted infections per 100,000 residents, 2000–2020.** DataHaven analysis (2023) of data from Centers for Disease Control and Prevention. NCHHSTP AtlasPlus. Updated 2019. <https://www.cdc.gov/nchhstp/atlas/index.htm>

**Figure 22. Annualized average rate of new HIV diagnoses per 100,000 residents ages 13 and over, 2016–2020.** DataHaven analysis (2023) of data from Centers for Disease Control and Prevention. NCHHSTP AtlasPlus.

**Table 11. Selected birth outcomes by race/ethnicity of parent giving birth, 2017–2021.** DataHaven analysis (2023) 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 23. 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 12. Households living in structures built before 1960 by race/ethnicity of head of household, 2021 (with proxy area).** DataHaven analysis (2023) of US Census Bureau American Community Survey 2021 5-year estimates and Ruggles, et al (2023).

**Figure 24. Residents’ ratings of community cohesion measures, share of adults, 2015–2021.** DataHaven analysis (2023) of 2015, 2018, and 2021 DataHaven Community Wellbeing Survey.

**Figure 25. Group A crime rates per 100,000 residents by town / jurisdiction, 2021.** DataHaven analysis (2023) of 2021 Crime in Connecticut Overview By Town. 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>. Group A crimes under the FBI’s National Incident Based Reporting System are categorized into crimes against persons, crimes against property, and crimes against society. The first two of these, shown here, are similar to the Part I Offenses of the previous reporting system and shown in older reports.

**Table 13. Residents’ ratings of local government, share of adults, 2015–2021.** DataHaven analysis (2023) of 2015, 2018, and 2021 DataHaven Community Wellbeing Survey.

**Figure 26. Registered voter turnout, 2020–2022.** DataHaven analysis (2023) of data from the Connecticut Office of the Secretary of the State Elections Management System. Available at <https://ctemspublic.pcctg.net>

**Figure 27. EPA Environmental Justice Index by block group, Western DMHAS.** United States Environmental Protection Agency. 2022 version. EJSCREEN. Retrieved from <https://www.epa.gov/ejscreen>

**Figure 28. Residents’ ratings of local walkability measures by race/ethnicity, share of adults, 2015–2021.** DataHaven analysis (2023) of 2015, 2018, and 2021 DataHaven Community Wellbeing Survey.



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Visit DataHaven ([ctdatahaven.org](https://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 30-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.

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