

ABOUT THIS REPORT

We believe in a collaborative approach to community health.

The Greater Waterbury Health Partnership was formed in 2013 to better understand the health and well-being of Greater Waterbury residents through data collection and community conversations. The partnership includes the Chesprocott Health District, City of Waterbury Department of Public Health, Connecticut Community Foundation, Pomperaug District Department of Health, Saint Mary's Hospital, StayWell Health Center, Inc., United Way of Greater Waterbury and Waterbury Hospital.

Our vision is to create a healthy Waterbury for all. This vision was adopted after convening over a hundred community members who determined the local priority areas of access to care, healthy lifestyles, chronic disease, and asthma prevention. Community providers, residents and nonprofit professionals joined the Health Partnership to ensure that the region's residents have access to quality, culturally sensitive, evidence-based health information.

In order to achieve this ambitious mission, the founding partners committed to community engagement through targeted workgroups, health data collection and analysis, coordination of community health efforts and advocacy, and policy design to support healthier communities.

The goal of the following report is to promote a better understanding of the critical community well-being needs and opportunities in the region and to highlight some promising practices that are underway to improve community health. We know that socioeconomic factors, physical environment, clinical care, and health behaviors are all key pieces of well-being. Throughout the pages of this report, we will explore each and invite you to be a partner in helping us achieve a healthy Waterbury region for everyone.

Towns in the Region

Beacon Falls
Bethlehem
Bridgewater
Cheshire
Goshen
Litchfield
Middlebury
Morris
Naugatuck
New Milford

Oxford

Prospect
Roxbury
Southbury
Thomaston
Warren
Washington
Waterbury
Watertown
Wolcott
Woodbury

DEMOGRAPHICS

Population

The Greater Waterbury region is home to a total of 335,773 residents, with 109,211 of those residents living in Waterbury and 226,562 in surrounding towns.

Similar to Connecticut trends, the region's total population is projected to stay the same between 2015 and 2040, though the area's population ages 65 and up is projected to grow by 35 percent.

Race and Ethnicity

Waterbury is the urban core of the region, and is more racially diverse than the surrounding towns. While people of color make up 28 percent of the region's total population, they are 41 percent of the region's population under age 18, and 61 percent of Waterbury's residents.

Immigration

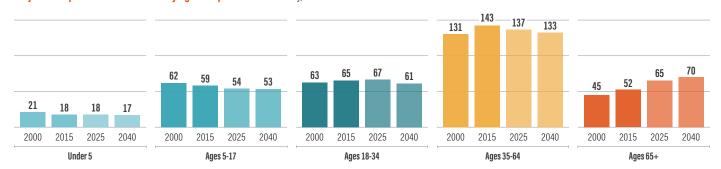
Eleven percent of Greater Waterbury's population, or more than 36,000 residents, were born outside the United States. A slightly higher share of the city's residents—16 percent—are foreignborn. Immigrants play an important role in the region's economy, and introduce linguistic diversity to the school system.

About 7 percent of the region's residents have limited English proficiency; this rate is twice as high in Waterbury.

Disparities

The health of individuals and communities is affected greatly by socioeconomic factors and their physical environments. 1 Residential areas in the Greater Waterbury region tend to be segregated by race and income. While Waterbury is home to only one third of the region's population, 76 percent of the region's black and Latino residents and 61 percent of residents in low-income households live in the city. The roots of these differences, and their ongoing impacts, have bearings on many aspects of life and health in our communities.

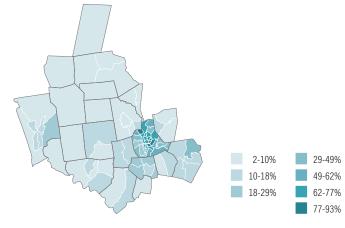
Projected Population in Thousands by Age Group Greater Waterbury, 2000-2040



Population by Age and Race Greater Waterbury, 2010



Non-White Population Share by census tract, Greater Waterbury, 2016



ECONOMIC SECURITY

Income

Health is affected not just by physical environment, but also by household income and access to resources such as medical care, healthy foods, and adequate transportation. Chronic illness disproportionately affects low-income communities.

Twelve percent of the region's population live below the federal poverty line. One quarter of the region's population live in low-income households (equivalent to just over \$50,000 for a family of four). This rate is higher for the region's most vulnerable populations, with 25 percent of seniors and 35 percent of children living in low-income households.

One quarter of Waterbury's residents, and 38 percent of its children, live below the poverty line. Two thirds of the city's children are in low-income households.

Employment

Employment can help improve people's overall well-being by providing access to healthcare benefits, wellness programs, and important preventative care policies such as paid sick leave.

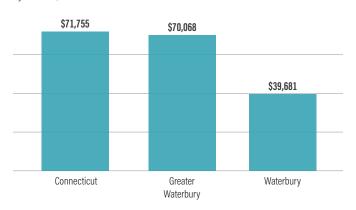
Greater Waterbury is a robust economic region with a total of 112,063 jobs, about one third of which are located in Waterbury. The average job in the region pays about \$50,600 annually. Each day, 27,719 people commute into Waterbury for work, and 31,636 Waterbury residents leave the city for work.

The region lost 2 percent of its total jobs between 2002 and 2015. Manufacturing in the region has declined in recent years, mirroring trends across Connecticut and the Northeast, with a 31 percent loss in the number of manufacturing jobs since 2002. Greater Waterbury's 2017 average unemployment rate—5.8 percent—was slightly higher than that of the state, but lower than the city's rate of 7.4 percent.

Between 2002 and 2015, the region's health care and social assistance industry saw a 20 percent gain in its number of employees, becoming the region's largest sector.

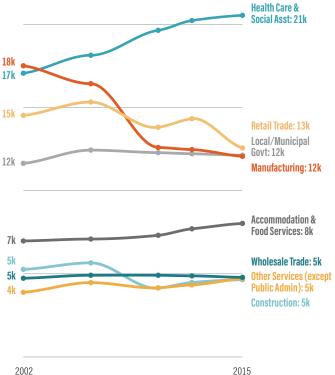
Median Household Income

By location, 2016



Employment in Largest Industries

Greater Waterbury employees, 2002-2015



HOUSEHOLDS AND HOUSEHOLD RESOURCES

Household Structure

The Greater Waterbury region is made up of 124,448 households. Of these households, 27 percent are comprised of an adult living alone, 19 are made up of married couples living with children, and 9 percent are led by a single parent. Within the city, households where an adult lives alone or is a single parent living with children are more common, making up 32 percent and 17 percent, respectively, of the city's households.

Housing Affordability

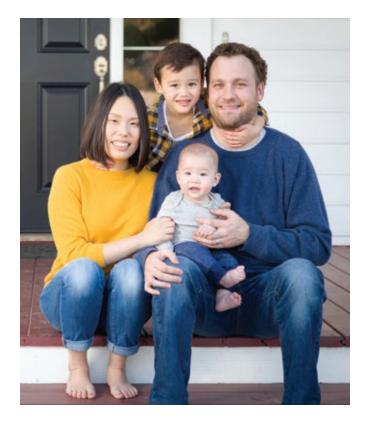
Greater Waterbury has a high homeownership rate: 69 percent of the region's households own the house where they live. As is common for cities, however, this rate is much lower in Waterbury, at only 44 percent. Housing costs, which are generally high across Connecticut, can put stress on families, particularly those who rent. Seventeen percent of the region's households are severely cost-burdened, meaning that more than half their income goes toward housing costs. A quarter of Waterbury households are severely cost-burdened, as are 27 percent of the region's renter-occupied households.

Access to Resources

Resources such as reliable transportation and emergency savings can be vital for families' financial stability and employment. Lower-income households, city residents, and people of color are less likely to have some of these resources that can help bolster the well-being of their families. Nine percent of the region's households, and 20 percent of those in Waterbury, have no vehicle, impacting their ability to travel to work or appointments.

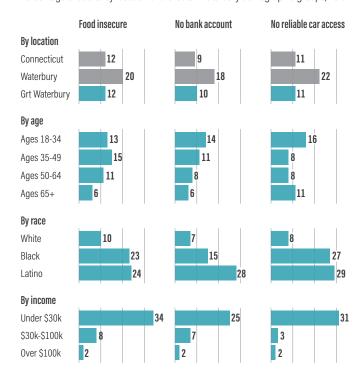
Twelve percent of Greater Waterbury adults, and 20 percent of those in the city, report food insecurity, or having been unable to provide adequate food for their family at some point in the past year. About one third of the region's low-income adults are food insecure.

Ten percent of adults in the region have no checking or savings account, but this measure of financial security varies: black adults are twice as likely, and Latino adults are 4 times as likely, to lack a bank account as white adults in the region.



Access to Resources

Percentage of adults by location and Greater Waterbury demographic groups, 2015



EDUCATION

Greater Waterbury Health Partnership is not alone in working to improve community well-being and collaborates with many education and health partners, including Bridge to Success Community Partnership (BTS) to ensure that children can succeed in school, work, and life. Through Community Action Networks, BTS aligns nonprofit and education priorities to ensure that preschool, after-school experiences, and a path to careers are achievable for Waterbury's children. Educational achievement is linked to long-term health outcomes due to three basic factors: health knowledge and behavior, employment and income, and social-emotional resilience. 2 Access to early childhood educational experiences through child care and preschool is considered the foundation of future educational success.

Early Childhood Education

Currently there is a shortage of childcare slots in the region, with only enough slots available to serve 20 percent of the region's infants and toddlers, and 83 percent of the region's children ages 3 and 4. These programs are often less accessible to low-income families due to their cost. Greater Waterbury's preschool enrollment rate is 61 percent, yielding a total 4,759 preschool students ages 3 and 4.

Free childcare and education is available for infant, toddler, and preschool-aged children in the city of Waterbury through several national and state programs, including Head Start and School Readiness. However, even with free or subsidized programs, accessibility remains an issue in the city. As of 2016, there were only enough free or subsidized childcare slots to cover an estimated 37 percent of the children under age 5 who would qualify for these programs. 3

K-12 Public Schools

The K-12 public school system in Greater Waterbury encompasses nine municipal school districts and five regional school districts, for a total 49,533 enrolled public school students. The demographic makeup of students varies greatly across the region. Overall, 43 percent of the region's public school students are children of color, but the majority of these students attend school in Waterbury.

Eighty-two percent of Waterbury Public Schools students are children of color. The surrounding districts have the opposite composition, where 82 percent of students are white.

The region's most recent graduation rate was lower than that of the state: 82 percent of the region's nearly 4,000 high school seniors in the class of 2017 graduated with their class. This was lower in Waterbury, where only 76 percent of seniors graduated on time.

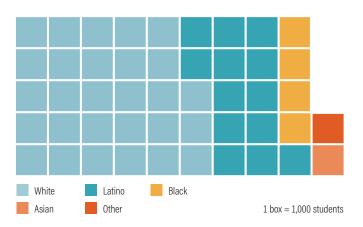
Post-Secondary Attainment

As noted earlier, education is connected to health and well-being. Those with a college diploma will live an average of nine years longer than people without a high school diploma. 4 Across the region, 32 percent of adults ages 25 and up have a Bachelor's degree or higher, while only 15 percent of adults in Waterbury have college degrees.

Waterbury has three institutions of higher education— Naugatuck Valley Community College, University of Connecticut Waterbury Branch, and Post University—which serve a regional and international cohort of students. More research is needed to examine how many of the graduates of these institutions stay in the region post-completion.

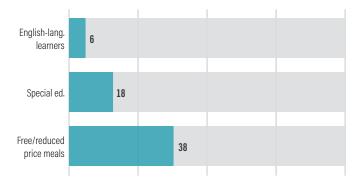
Public School Students by Race

Greater Waterbury, 2017-2018



Higher-Needs Public School Students

Percentage of Greater Waterbury students, 2016-2017



COMMUNITIES

Community Well-Being

The well-being of a community—the assets and strengths of a community, and the connectedness of its residents—impacts the well-being of the individuals and families that make up that community. This includes residents' sense of safety, quality of and access to shared resources, ease of mobility, and general satisfaction with their neighborhood or town. Many of these measures vary greatly by race, income, and location.

Overall, 80 percent of Greater Waterbury adults report being satisfied with the area where they live, but only 63 percent of Waterbury adults report feeling this way. On several community issues—such as trusting the police, feeling their local government is responsive to residents' needs, or seeing their area as a good place to raise children—adults in the region fare much like residents statewide, but city residents feel less optimistic.

Walkability

Relative to surrounding suburbs, city residents are more likely to report having safe sidewalks and many destinations within walking distance. Understanding residents' feelings toward their communities and access to resources can inform planning and policy to improve the environments where residents work, live, and play.

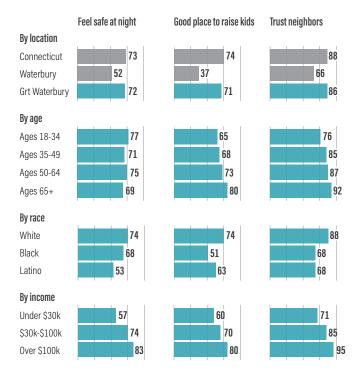
Walkability

Percentage of adults by location reporting walkability measures, 2015



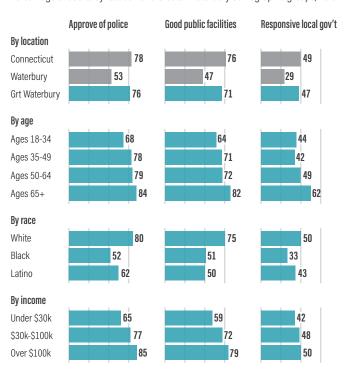
Community Cohesion

Percentage of adults by location and Greater Waterbury demographic groups, 2015



Civic Well-Being

Percentage of adults by location and Greater Waterbury demographic groups, 2015



COMMUNITY SAFETY AND MORTALITY

Causes of Premature Death

Like other health outcomes, safety and mortality can vary by socioeconomic factors and location.

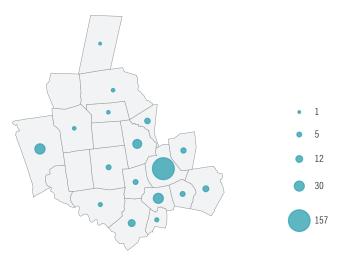
One way to quantify premature death is by measuring the years of potential life lost before age 75 per 100,000 residents. In Waterbury, the greatest loss of potential life comes from fetal and infant mortality, injury, cancer, and heart disease. Waterbury residents are much more impacted by infant mortality and injury than residents statewide.

Substance Abuse

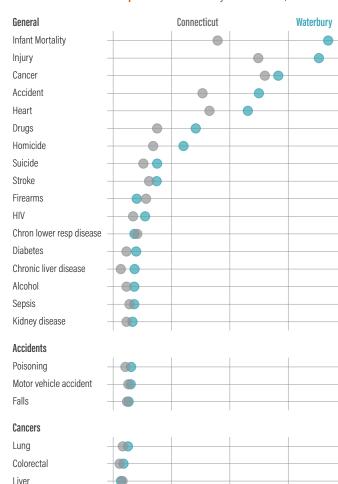
As is the case both statewide and nationwide, the number of deaths from substance use, particularly opioids, has rapidly increased over the past several years in Greater Waterbury. From January 2012 through June 2017, 350 residents of Greater Waterbury towns died of drug overdoses; just over half of these deaths were Waterbury residents.

The Waterbury Health Department is part of Connecticut's Opioid REsponse Initiative (CORE), which was designed with expertise from the Yale School of Medicine. CORE is funded by the Connecticut Department of Public Health and implements the strategies developed locally by the Mayor's Opioid Task Force. The Waterbury CORE program provides safe use, storage, and disposal strategies from a public safety perspective and relies on close collaboration among Waterbury's Health, Fire, and Police Departments. Additionally, Waterbury CORE is designed for easy adoption and customization of CORE strategies by other public safety entities throughout the broader region to extend the reach of the strategies.

Drug-Related Deaths Greater Waterbury towns, 1/2012-6/2017



Years of Potential Life Lost per 100k Residents By cause of death, 2008-2012



500

1.000

1.500

Breast Pancreatic

HEALTH OUTCOMES

Overall Well-Being

Connecticut is overall a quite healthy state, and Greater Waterbury residents fare just about as well as the state on many measures of health. However, there are often differences in health outcomes by income, race, and location within the region.

Eighty-three percent of adults in the region report their health as good or excellent, but black and Latino residents are less likely to rate their health as highly. Only 64 percent of adults with incomes below \$30,000 rate their health as good or excellent, whereas 97 percent of adults with incomes of at least \$100,000 report the same.

Chronic Disease

Adults in low-income neighborhoods are several times more likely to be hospitalized for severe conditions such as heart disease and diabetes at an early age. From 2012 to 2014, middle-aged adults in the state's four largest cities—including Waterbury—were admitted to the hospital for heart disease at higher rates than seniors ages 65 to 74 in wealthy communities. Local access to evidence-based classes is now an important tool for people managing chronic disease.

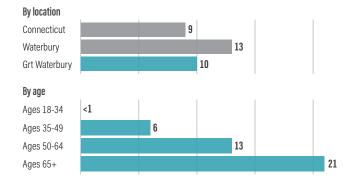
Regional partners including the Pomperaug Health District, Western Connecticut Area Agency on Aging, and the Greater Waterbury YMCA offer Live Well Chronic Disease Self-Management and Live Well with Diabetes classes in English and Spanish. These are evidence-based workshops that aim to teach participants how to better manage their health issues and improve their overall health. These workshops are free to participants and are held once per week for six weeks at various community locations.

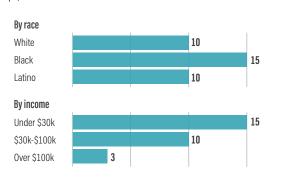
Thirteen percent of adults in the region, and 18 percent of adults in the city, have been diagnosed with asthma.

As a result, addressing the conditions that cause asthma and helping residents with asthma to better manage this chronic condition is a priority of GWHP. Waterbury Health Department leads the CTDPH's Putting on AIRS Program, a regional home visiting program to help improve the environment of children and adults with poorly controlled asthma. A Respiratory Therapist visits the home three times for one-on-one asthma education along with an Environmental Health expert who assesses the home for asthma attack triggers. Putting on AIRS is an evidence-based approach to help residents of Waterbury and the surrounding CTDPH Asthma Region 1 to avoid asthma-related hospitalizations or Emergency Department visits, missed school, or overuse of rescue inhalers.

The Waterbury Health Department's Lead and Healthy Homes Program is another example of improving environmental conditions within households. This program offers funding assistance to abate lead-based paint and other hazards for those who qualify.

Diabetes Rate Percentage of adults by location and Greater Waterbury demographic groups, 2015





HEALTH RISK FACTORS

Prevention

As is the case with health outcomes, many health risks and barriers to good preventive care are distributed unevenly throughout the state and region.

Greater Waterbury residents with incomes under \$30,000 are 3 times more likely to report having delayed or not received medical care they needed within the past year than residents with incomes of \$100,000 or more.

Dental Care

Regular preventative dental care is an important indicator of overall health. Lower-income residents are less likely to have access to dental care, following the same pattern as many other types of medical care. While 77 percent of Greater Waterbury residents report seeing a dentist within the past year, this is true of only 62 percent of adults with incomes under \$30,000.

Lack of access to dental care, brought on in part by a shortage of providers in low-income communities, can have a negative impact on health and lead to more severe conditions, including pain, infection, and tooth loss. 5

Smoking

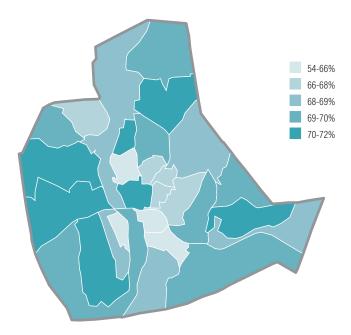
Seventeen percent of Greater Waterbury adults, and 25 percent of city adults, smoke regularly; both of these rates are higher than the statewide rate of 15 percent. Research shows that, on average, smokers die 10 years earlier than nonsmokers, impacting entire communities. 6 Recognizing the negative impact on the City of Waterbury, Greater Waterbury Health Partnership has explored the expansion of tobacco- and smoke-free areas in public parks and community spaces as one way to curb negative effects on the community.

This report provides an overview of important data on health, education, and economic indicators for Greater Waterbury. While much of the data highlights poor health indicators, programs such as Putting on AIRS and Live Well with Diabetes are just a few examples of local efforts to provide outreach and evidence-based programing that can improve community health. Greater Waterbury Health Partnership and important regional partners are committed to expanding access to health education and intervention programs that will lead to a healthier community for all.



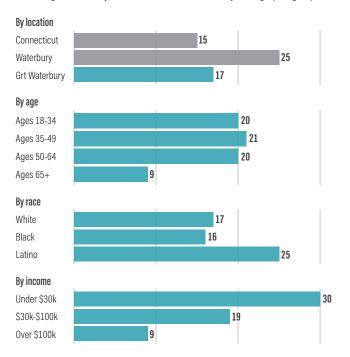
Received Annual Checkup

Waterbury adults by census tract, 2015



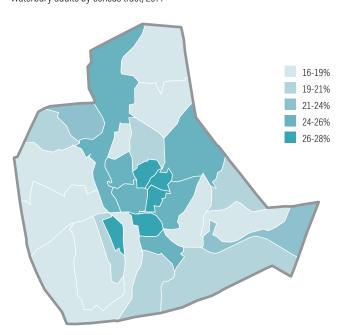
Health Risk Factors: Current Smoking

Percentage of adults by location and Greater Waterbury demographic groups, 2015



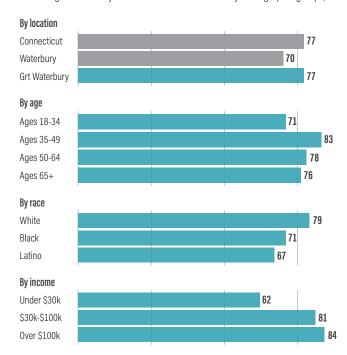
Current Smoking

Waterbury adults by census tract, 2014



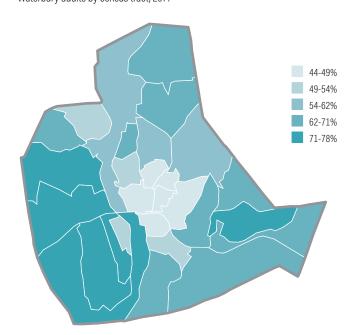
Health Risk Factors: Dental Visit in Past Year

Percentage of adults by location and Greater Waterbury demographic groups, 2015



Dental Visit in Past Year

Waterbury adults by census tract, 2014



SOURCES AND NOTES

Data Sources

This profile was created in 2018 by the Greater Waterbury Health Partnership and DataHaven. Sources include:

2-1-1 Child Care Connecticut, Annual Child Care Capacity, Availability, and Enrollment Survey 2016

2015 DataHaven Community Wellbeing Survey

Bureau of Labor Statistics, Quarterly Census of **Employment and Wages**

Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System

Connecticut Department of Public Health, Years of Potential Life Lost

Connecticut Office of the Chief Medical Examiner, Accidental Drug Related Deaths 2012-June 2017

Connecticut State Data Center, 2015 to 2040 Population Projections for Connecticut

Connecticut State Department of Education, EdSight

US Census Bureau, 2000 and 2010 Decennial Census

US Census Bureau, American Community Survey 2016 5-year estimates

Notes

- https://www.rwjf.org/en/library/features/achievinghealth-equity.html
- 2 https://www.rwjf.org/content/dam/farm/reports/issue_ briefs/2011/rwjf70447
- 3 Childcare Enrollment and Accessibility in Waterbury, 2016, prepared by DataHaven, http://ctdatahaven.org/reports/ childcare-accessibility-and-enrollment-waterbury-2016
- 4 https://www.rwjf.org/en/library/research/2014/01/ education--it-matters-more-to-health-than-ever-before.html
- 5 http://www.countyhealthrankings.org/measure/dentists
- 6 http://www.countyhealthrankings.org/our-approach/healthfactors/tobacco-use

