# Creating A Healthy New Haven

# **Setting the Stage for Action**







# Summary Data To Inform a Community Dialogue on Health

**Compiled for** 

The New Haven Health Department and CARE: Community Alliance for Research and Engagement at the Yale Center for Clinical Investigation

by

#### **DataHaven**

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# New Haven Health Data Work Group New Haven Health Department

William Quinn New Haven Health Department

Jeannette Ickovics CARE: Community Alliance for Research and Engagement and

Yale School of Public Health

Mark Abraham DataHaven; Holt, Wexler and Farnam, LLP

Penny Canny DataHaven; Community Foundation for Greater New Haven

Beth Comerford Yale-Griffin Prevention Research Center

Maria Damiani New Haven Health Department

Jim Farnam Holt, Wexler, and Farnam, LLP; DataHaven

Georgina Lucas Robert Wood Johnson Clinical Scholars Program, Yale University

Elaine O'Keefe Office of Community Health, Yale School of Public Health

Matthew Storeygard Holt, Wexler, and Farnam, LLP; DataHaven Steven Updegrove MD Hill Health Center; Medical Consultant to the

**New Haven Public Schools** 

Maurice Williams CARE; Yale-Griffin Prevention Research Center

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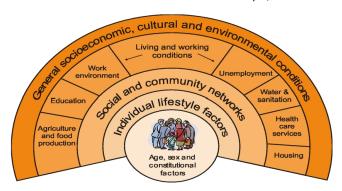
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# Creating A Healthy New Haven: Setting the Stage for Action

#### Introduction

"He who has health has hope; and he who has hope has everything." Arabic Proverb



Social, economic and environmental conditions have a tremendous impact on health. These conditions are referred to as **social determinants of health**. Individual behaviors and genetics surely influence health status. But socio-economic inequalities and poor living conditions are also at the root of most premature death and disability, and can have a great impact on how well and long we live. Most of these factors are beyond the control of individuals, and outside the reach of the health care system.

Like all major cities, New Haven has its share of **health inequities**: marked differences in the health of residents that relate to race, ethnicity, and/or socio-economic status. Those in poverty and people of color bear a disproportionate burden of disease and disability.

Effective solutions to New Haven's health issues will need to consider these underlying causes. Given that two thirds of New Haven's population identifies as a race/ethnicity other that White, that a fifth of our households are living in poverty, and three-quarters of our school aged children are in families eligible for free and reduced price lunch, we see that these issues indeed affect a large proportion of the population.

Our health is our livelihood. It is also our collective responsibility. Achieving optimal health for all in New Haven will require a coordinated effort of all sectors within the city, reaching into all corners of the community.

The **Health Data Work Group**, a group of New Haven health professionals and analysts convened by the New Haven Health Department, guided the development of this report to provide vital information on and encourage dialogue about the health of the New Haven community. In 2007, the Work Group began developing this **Creating A Healthy New Haven** summary report and its companion document with more detailed data, the **New Haven Health Data Atlas**, also available at DataHaven. The publication of these documents represents a collaborative effort to gather and disseminate the most recent data on New Haven's health and its determinants.

New activities are underway that are certain to impact health in New Haven for years to come. For example, New Haven is the first U.S. City to join the international collaborative, *Community Interventions for Health* (www. cih.net), aimed at preventing chronic disease. As part of this effort, CARE has just begun neighborhood asset mapping and will soon be collecting survey data from families throughout the city. With leadership from the New Haven Health Department, the *Health Equity Alliance* will soon be underway to encourage civic engagement and focus on addressing the root causes of disease, including poverty, education and the environment. These and other initiatives will improve health for New Haven residents, families, and our community.

#### **Factors Producing Health Inequities**

- Physical and social barriers preventing access to education, child care and jobs
- Public safety and violence
- Lack of employment and economic security
- Stigma and discrimination
- Unequal access to quality medical care and social services
- Isolation from community support systems

- Lack of adequate housing, transportation and opportunities for physical activity
- Limited opportunity for civic engagement
- Environmental constraints that impact traffic, green space, noise and pollution
- Unequal access to quality foods
- Injurious behaviors like excessive eating, smoking, alcohol and drug abuse

#### **Goals of This Report**

The health trends that are profiled in this document, some positive and some negative, are intended to set the stage for local action aimed at addressing the social determinants of health and at reducing health inequities. They can be used to **inform policy, inspire community involvement, and bring more resources to bear on local health improvements**. With these goals, the New Haven Health Department has set out to:

1) Better understand the factors contributing to inequities in health outcomes by race, ethnicity and socio-economic status; and 2) Advocate new ways for the civic sector to work together to implement programs that improve community health.

Our approach to this work was guided in part by an effort by the Robert Wood Johnson Clinical Scholars Program at the Yale School of Medicine to understand community leaders' perceptions of health issues, including how best to present and share data within the community. For a copy of the Scholars' report please contact Georgina.Lucas@yale.edu. The Scholars found that New Haven's community leaders agreed that:

- Social conditions affect health and that education and economic status are the most dominant factors impacting health;
- Data are important but have limitations in general usability by individuals and organizations;
- Involving the community in the early stages of data collection and dissemination will increase the trust and utility of the data for action;
- To increase the impact of data, dissemination needs to be multifaceted and targeted;
- Those collecting data within the community must be committed to reporting back to the community in a timely manner;
- The data must go beyond the numbers to include explanations and stories; and
- Efforts to collect data and develop related actions should be coordinated.

Given that the underlying causes of disease are multifaceted and that the true measure of health is not only the absence of disease, but a "state of complete physical, mental, and social well-being," this document highlights a broad array of social, economic, safety, disease, and community health indicators. This report and the companion New Haven Data Atlas offer the most current data at its smallest available geographic level. We also provide existing local programs and translational research efforts addressing each issue, as well as nationally-identified best practices for improving each indicator. Data will serve as a baseline to measure success of future initiatives, and be stored at DataHaven: www.ctdatahaven.org.

#### The Health Department wants to hear:

Which issues are most important to you?

How can we best address them?

→ Email healthynewhaven@gmail.com

→ Call 203-946-6999

The publication of these reports serves as a prelude to broader community dialogue, assessment and planning around health in New Haven, which is discussed at the end of this document. To help decide which issues to address and how to address them, the Health Department is soliciting feedback from those who live and work in the community. We look forward to your participation and support of new initiatives to address these issues.

#### Overview: Collecting New Haven's Health Data

Using a broad social determinant framework of health, the New Haven Health Data Work Group set out to collect approximately 70 indicators of health as well as its underlying determinants. The initial list came from past New Haven efforts. We also examined reports that have helped define and prioritize health issues in other cities across the country. Our final list of **key indicators** are grouped within the category of health indicators and related outcome measures, **Health Behaviors**, **Disease**, **and Access to Health Care**, plus four categories of social determinants -- **Economic Security**, **Education**, **Safety**, and **Social and Community Strength**.

This summary report contains a synopsis of our findings from studying these indicators. Due to accessibility and availability constraints, data were only available on the city level for 55 of the indicators originally sought. We are seeking additional data down to the neighborhood level on as many of these as possible. A list of the unattainable indicators is compiled in the Appendix of the companion Data Atlas, and will help guide future community surveys. We believe that it is important to fill in the knowledge gaps that continue to exist about the health of our community.

Existing data show stability and improvement in many New Haven indicators over the past decade. For example, New Haven has made great strides in the area of childhood lead poisoning, with cases of elevated blood lead levels in children under 6

decreasing by 37% between 2002 and 2006. Additionally, New Haven has seen a decrease in juvenile arrests for drug related crime, our middle school students score higher on standardized tests than those in Bridgeport and Hartford, and youth substance abuse is lower than state levels. However, other crucial indicators lag behind accepted levels, and require our immediate, collective attention.

#### **Key Indicators**

Trends improving: \\_\_\_\_\_/\\_\_'
Level still a significant concern: •

Trend worsening:

# Health Behaviors, Disease, and Access to Health Care



Like the state and nation, New Haven has significant disparities in health outcomes across racial, ethnic, and socio-economic groups.

The health of New Haven's residents falls below national Healthy People 2010 Goals across many indicators. Health inequities persist from birth to old age.

#### Headlines

- After a sharp decline between 2000 and 2002, infant mortality has now increased back to 1999 levels. Infant deaths are highly concentrated in six of our 20 neighborhoods.
- New Haven emergency room visits and hospitalizations for childhood asthma are 2-3 times the state level and have been increasing. Overall, asthma inpatient treatment is also increasing, with Black and Latino/a New Haven children showing steadier increases in care needs.
- Childhood lead poisoning, with cases of elevated blood lead levels in children under 6 decreased by 37% between 2002 and 2006.
- Physical activity is declining in our youth, and remains low in adults.
- On an average school day, one in three New Haven students report watching more than five hours of television, and one in five report that they had not been physically active for at least 60 minutes.
- Rates of sexual activity among New Haven youth are higher than the state average, as are rates of STDs. Rates of most STD infections have almost doubled, and are 3-6 times the state rate. However, AIDS infection rates have decreased since 2003.
- The teen birth rate has been stable, but still remains more than twice the state rate.

- Seventy-five percent of African American adults and over half of Latino/a adults are overweight or obese. This is strongly linked to a higher prevalence of high blood pressure and diabetes.
- Between 1998 and 2003, New Haven had a lower percentage of individuals who reported smoking or being chronic or heavy alcohol users than the Connecticut average, and rates were also lower than those in both Hartford and Bridgeport.
- 9% of New Haven residents reported having poor mental health for 15 or more days in the past month between 1998 and 2003, a rate slightly higher than Connecticut (8%).
- Access to health services by the uninsured remains a concern.
- In 2004, over 30% of New Haven residents were covered by HUSKY, compared with 12% for the state.

#### What Works to Improve our Health

We know a lot about what works to address these health issues directly as we also work on the social determinants of health outcomes. While many intervention programs have been tried, only a few have been formally evaluated for effectiveness. Our community efforts will be informed both by this research and our experience of what works.

#### For example:

- Reducing maternal stress levels, through support programs and other measures, can help improve infant health.
- Health care system-level interventions can address chronic diseases. For instance, case management and disease
  management programs help keep patients' diabetes under control. Diabetes self management education programs
  administered in community gathering places also show results. Current Yale research efforts are examining best
  practice guidelines interventions for primary care providers of chronic diseases such as diabetes. Home-based
  interventions work to decrease episodes of asthma.
- To reduce the spread of HIV, partner notification services administered through provider referrals is a recommended approach. Efforts that focus on youth are critical because the majority of sexually transmitted infections occur in persons aged 15-24.
- Teen pregnancy can be addressed by delaying sexual initiation, increasing use of condoms and other contraceptives, offering social development programs in school and after school, and engaging parents.
- Worksite initiatives and behavioral interventions to reduce screen time (time watching TV or on the computer) can
  be effective ways to prevent overweight and obesity. Improved nutrition and outdoor recreation programs have
  also been shown to be effective. A translational weight management program, the Yale Bright Bodies Program, is
  providing teens with an effective lifestyle strategy to manage weight.

#### Selected Current Efforts in New Haven

Community organizations and health providers have come together through multiple initiatives to improve health in New Haven. Some of these include:

- Community health providers
  - » Fair Haven Community Health Center, Hill Health Center, Hospital of St. Raphael, Yale Health Plan, Yale-New Haven Hospital, private providers
- New Haven Public Schools (NHPS) District Wellness Committee
  - » NHPS School-level Wellness Committees
  - » NHPS School-Based Health Clinics
  - » Work Group on School Food
- New Haven Healthy Start Consortium and Perinatal Partnership
- Greater New Haven Partnership for a Healthy Community
- Issue-specific health coalitions / councils
  - » Mayor's Task Force on AIDS
  - » Ryan White Title I Planning Council (HIV/AIDS)
  - » New Haven Teen Pregnancy Prevention Council
  - » New Haven Asthma Coalition
  - » New Haven Childhood Obesity Coalition
  - » New Haven Oral Health Collaborative
- Community Gardens initiative
- New Haven Parks Department recreation and outdoor programs

- Yale Center for Clinical Investigation
  - Community Alliance for Research Engagement (CARE)
    - » Community Interventions for Health (CIH)
  - Clinical and Community-based Research
    - » Educational interventions to lower infant mortality
    - » Research and program development for pregnant and parenting teens
    - » Reducing risks for vulnerable families exposed to lead
    - » Implementation of asthma practice guidelines in New Haven schools
    - "Bright Bodies" an afterschool weight loss program for children and their families
    - » TeenCope: an internet education program for teenagers with type 1 diabetes
- Robert Wood Johnson Clinical Scholars Program
  - Strategies to reduce youth gun violence
  - Increasing access to specialty care for the uninsured
  - Understanding attitudes toward pregnancy and contraception among teens
- Sustainable New Haven
- HUSKY Outreach
- Family Support / Child Welfare
- Child welfare reforms (e.g. DCF "Differential Response")

### **Economic Security**



Economic security is a major social determinant of disparate health outcomes. Parents with steady jobs are more likely to retain consistent health insurance, stay healthy, and provide quality care for their children.

The lack of financial resources contributes to adverse family environments, including domestic violence, child abuse, and poor early literacy experiences.

#### **Headlines**

- One out of five New Haven children (<18 years of age) live in poverty, close to three times the state prevalence. Although these levels of poverty are high, they are lower than those in Hartford or Bridgeport.
- Median household income and levels of poverty in New Haven range greatly across neighborhoods. Poverty is most concentrated within a limited number of geographic areas, particularly certain sections of the Dixwell, Dwight, Edgewood, Fair Haven, Hill, Newhallville, West River and West Rock neighborhoods.
- Fewer than one out of three New Haven households own the house in which they live, half the Connecticut rate.
- Although declining, reported child abuse
- rates in New Haven, associated with family instability, are three times the state average.
- Particularly within low-income neighborhoods, the lack of early literacy exposure contributes to difficulty in school.
- Homelessness, mental health issues and criminal background remain major barriers to economic security and health for many New Haven adults.

#### What Works To Improve Economic Security

In these challenging economic times, local efforts to support economic security are more important than ever. Quality family support, early childhood services, good primary education and an effective workforce system all support lifelong employment and poverty reduction. Strong community and political will at all levels of government are needed to improve the performance of all these systems.

- City-led and civic-sector economic development initiatives
- New Haven Public Schools (NHPS) programs
- Adult and Higher Education programs
- Workforce development system, overseen by The Workforce Alliance
- Coalition for Working Families
- New Haven Family Alliance
- Empower New Haven
- JUNTA
- Community-based public and private affordable housing efforts
- Prisoner re-entry programs
- Early family intervention programs (e.g., Nurturing Families Network, Family Resource Centers)
- Community-based employment services and family support efforts to address family skills, employability, child care, and other personal or institutional barriers to economic success

#### **Education**



Strong educational foundations lay the groundwork for economic success and maintaining health.

Ensuring that quality education is available to children and adults of all race, gender, ethnicity and socio-economic background is critical.

#### Headlines



New Haven has recently increased the percentage of preschoolers entering kindergarten with preschool experience from 65% in 2001 to 70% in 2008. However, this compares to 79% statewide, and this achievement is threatened by proposed state cutbacks.



- New Haven eighth grade test scores do not exceed 60% reaching proficiency in the subjects of math, reading, and writing. However, these test scores are increasing and slightly outperform comparison cities of Hartford and Bridgeport.
- The Achievement Gap persists: White and more affluent eighth graders tend to score above their Black and Hispanic and lower income counterparts across math, reading and writing.
- By tenth grade, New Haven students are 2-3 times less likely to reach state testing goals in math, reading, writing and science than students statewide.



Notably, New Haven's high school cumulative drop out rate was down 40% since 1998, but remained 2.4 times greater than the State in 2007.



The city has recently opened over 25 new and renovated school buildings. Over 80% of school parents, teachers and students are satisfied with the "learning environment" within renovated schools, though only 54% report being satisfied in non-renovated buildings.

#### What Works to Improve Education

The barriers to achievement posed by family poverty and other risk factors require extra effort within the schools and community to ensure that children learn, graduate from high school, and break the cycle of poverty.

A growing literature on the importance of early brain development has created a strong policy focus in New Haven on comprehensive early childhood services – from parenting education through universal availability of preschool programs.

In K-12 education, the elements of success include an integrated district-level approach to improvement in curriculum, instruction, and assessment. Features of successful districts and schools include strong leadership to drive instructional improvement, a culture of organizational learning, effective collection and use of data on student learning, and strong parental engagement in the learning process.

- New Haven Public Schools (NHPS) District Improvement Plan
- NHPS Community Engagement Team
- NHPS District Wellness Committee
- **New Haven School Construction Program**
- New Haven Early Childhood Council (Early Childhood Plan)
- **Charter Schools**
- Adult and Higher Education programs (Gateway, SCSU, Quinnipiac, Yale and others)
- **Greater New Haven Literacy Coalition**
- Neighborhood School Collaborative
- New Haven Reads

### **Safety**



Living in a safe environment strengthens physical, emotional and social health and community cohesiveness within a neighborhood. Psychological trauma generated from violence can undermine trust and feelings of security.

Youth violence puts young citizens at risk and starts our next generation off with criminal records.

#### **Headlines**

- Violent crime in Newhallville, West River, Hill, Wooster Square, Dixwell, Dwight, Fair Haven, and Edgewood is higher than the city average. Wooster Square, Dwight, Hill, West River, and Edgewood experience high property crime.
- Although juvenile crime overall, and drug-related arrests have declined in recent years, juvenile arrests for violent crime have remained at consistent levels, three times higher than the state rate
- Juvenile involvement in shootings is a major concern in New Haven neighborhoods
- Hit-and-runs and pedestrian injuries comprise a disproportionate number of motor vehicle collisions in New Haven. Pedestrian injuries disproportionately affect residents in denser urban areas, particularly children and older adults.

#### What Works to Make Communities Safer

Many programs have been developed to improve community safety. School-based and family-based prevention programs are able to reduce youth violence. Programs in which former offenders mentor youth at high risk for violence have shown success in many urban areas. Cognitive behavior therapy may reduce the psychological harm that children endure due to exposure to violence. Progressive urban traffic engineering, education and enforcement programs have reduced injuries caused by traffic collisions, while greatly improving safe access to walking, mass transit and bicycling. Environmental design (lighting, physical code enforcement, improved visibility, etc.) has been shown to significantly reduce opportunities for criminal activity and improve neighborhood sense of security.

- New Haven Police Department programs
- Block Watches and Community Management Teams (CMTs)
- Livable City Initiative
- Youth@Work
- New Haven Family Alliance Street Outreach Workers Program
- NHPS Social Development Programs
- New Haven Safe Streets Coalition and City of New Haven Complete Streets Legislation
- New Haven Early Childhood Council Family Engagement
- Domestic Violence Task Force
- Citywide Youth Coalition member programs
- Community Mediation / Peer Mediation in Schools
- Mentoring programs
- New Haven Collaborative for Youth (behavioral health)
- Community Foundation for Greater New Haven Neighborhoods of Choice (e.g., traffic calming in Chatham Square)
- Yale Child Study Center Community Policing Partnership and National Center for Children Exposed to Violence (NCCEV)
- Clifford Beers Guidance Clinic
- United Illuminating "Light the Night"

# **Social and Community Strength**



Using our existing resources to build social capital, community trust, activism, voter participation, and equitable access to recreational facilities will reconnect neighborhoods and help make New Haven an even better place to live.

#### **Headlines**

- New Haven has numerous resources such as universities, non-profits, and neighborhood groups that are already very active in the community.
- New Haven has a rich and varied faith community with over 100 places of worship and interfaith organizations.
- The number of miles of walking and bicycling trails within the city limits increased between 2000 and 2008.
- Regionally, Greater New Haven is highly segregated by income and race/ethnicity.
- Voter participation in New Haven is far below state levels.

# What Works to Build Community Cohesion

Building community "social capital" and cohesion requires conscious investments of resources and time.

Residents have reported positive experiences and increased their social networks through involvement in city and community forums, parent-teacher organizations, strong neighborhood associations, and collaborative arts and culture programs, among others.

Supporting these activities helps bring people together at the neighborhood level and citywide.

- Multiple task forces and volunteer commissions through the Mayor's Office
- City-led initiatives to improve connectivity for pedestrians and cyclists within neighborhoods, including a proposed Greenway system (Farmington Canal, Harborside, Fair Haven, West River, Route 34), crosswalk improvements, and "complete streets" public workshops in the Hill and Fair Haven
- Parent-Teacher Organizations
- Active School Wellness Committees
- Empower New Haven community capacity building projects
- Community Management Teams
- Cultural organizations such as the Arts Council of Greater New Haven, Neighborhood Music School, Artspace, International Festival of Arts and Ideas, and dozens of others
- Network for Civic Engagement through Dialogue, Deliberation & Story
- Community Action Agency of Greater New Haven
- A growing network of neighborhood gardens supported by the New Haven Land Trust, now 50 gardens within city boundaries led by local residents
- Community Foundation Neighborhood Grants
   Program and Neighborhoods of Choice Initiative
- Active Faith Community
- SeeClickFix
- New Haven Independent / Online Journalism Project

### **Next Steps**

#### **Moving Forward with a Strong Policy**



These data and the growing body of research being translated into community action represent a resource to help citizens advocate for stronger policy measures.

Addressing the social determinants of health will require changes in public policies and private practices. Examples include more effective efforts to support families and eliminate the cycle of poverty, create stronger pathways to educational achievement and careers for youth, promote healthy food in schools, and ensure that parks, street designs and urban lighting programs promote recreation, physical comfort and safety.

Citizens are encouraged to inform themselves, vote, and form strong working relationships with their elected officials and neighbors in order to advocate for issues that they believe are important, and ultimately affect social policy change. Progress on these issues will be fostered through dialogue, community workshops and civic summits on the issue of health inequities, as well as by new collaborations between researchers, policy-makers and the community.

#### Moving Forward with a Strong Data Infrastructure

While this first report and its companion Data Atlas address many components of health, they are incomplete due to the lack of available and current data in some areas. To focus new data collection efforts in the future, we have compiled a list of needed indicators. We have also developed a dissemination checklist for groups collecting data to help them inform community stakeholders of any population estimates, intervention results and data availability.

By maintaining a central repository for clear, accessible health-related data and tools for analysis at DataHaven (www.ctdatahaven.org), we can continue to make meaningful connections between health and the broader environment and inform planning. If you are interested in joining in a data advisory group to help inform this work, please email info@ctdatahaven.org or call 203-772-2050 x19.

#### The Health Equity Alliance: Moving Forward with You

Beginning this year, the Health Department and its community partners will be launching new efforts such as the **Health Equity Alliance (HEA)**, a program being funded by the Connecticut Association of Directors of Health. City-wide efforts including the HEA will result in large amounts of additional neighborhood data and community dialogue, in tandem with Community Mediation's New Haven 2020 project. These will help guide systematic efforts to improve the health status of New Haven residents at a block-by-block level, as well as through broader policy approaches and advocacy.

Please stay tuned for information about upcoming opportunities for civic engagement. To be added to the **Creating A Healthy New Haven email list**, email <a href="mailto:healthynewhaven@gmail.com">healthynewhaven@gmail.com</a>.



Community health stakeholders and Yale University researchers and clinicians met in a Future Search conference in 2007 organized by CARE and the City of New Haven to build stronger partnerships to improve the health of New Haven residents.