Variation in Health and Well-Being Across Connecticut: Utilization of The DataHaven Community Wellbeing Survey's "Five Connecticuts" Measure

Research Brief

UNM-RWJF Center for Health Policy Connecticut Study Brief Series

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NOTES AND DISCLAIMER

This research brief was completed in collaboration with DataHaven.

The views expressed in this report are those of the authors and do not necessarily represent those of the RWJF Center for Health Policy, the University of New Mexico, collaborating organizations, or funders.

Survey Methodology

The DataHaven Community Wellbeing Survey traces its origins to a series of grassroots efforts that span over a decade. The Survey aims to gather information on and promote regional well-being and quality of life. In 2015, DataHaven expanded the Community Wellbeing Survey to encompass the entire State of Connecticut and sections of New York State, while retaining its mission to produce high-quality neighborhood-level and regional estimates for major metropolitan areas throughout the state, including Greater Hartford, Greater New Haven, Greater Bridgeport, Lower Fairfield County, Southeastern Connecticut, and the Naugatuck Valley, as well as rural areas. The program is designed with and supported by over 100 government, academic, health care, and community partner organizations.

On behalf of DataHaven, the Siena College Research Institute (SRI) conducted the 18-minute survey of 16,820 residents of the state of Connecticut and from specific zip codes in Westchester County in New York State. Surveys were conducted from April 26 through October 24, 2015. Residents age 18 and older were interviewed from within all 169 towns in Connecticut and seven zip codes in New York (10504, 10506, 10538, 10543, 10573, 10576, 10580). Interviews were conducted in English and Spanish. The overall Connecticut sample of 16,219 was weighted by age, gender, reported race, and geographic area to ensure statistical representativeness. In addition to demographic parameters, the Connecticut statewide sample was also weighted to match current patterns of telephone status (landline only, cell phone only or both), based on the state-level estimates from the National Health Interview Survey. Weighted estimates from the survey carry a maximum margin of error of +/- 1%). More background information regarding the methodology of the survey can be found on the DataHaven website.[i]

Variation in Health and Well-Being by Town - "Five Connecticuts"

This brief explores variation across "towns" in the state of Connecticut utilizing the 2015 DataHaven Community Wellbeing Survey, disaggregated by the "Five Connecticuts" grouping of the 169 individual towns (county subdivisions) in Connecticut. Relative to other states, many of Connecticut's towns might be thought of as "neighborhoods" of the large metropolitan areas that they sit within. Individual towns range in size from 5 to 61 square miles, and in

population from less than 1,000 to about 150,000. A typical town has about 12,000 people in a 20 square mile area.

As a result, there are significant demographic variations by town, similar to the differences seen between the neighborhoods or Census Tracts of similar size within other large U.S. metropolitan areas, and data on individual towns can be unreliable. In order to allow comparisons between these areas, Don Levy, Director of the Siena College Research Institute (SRI), created a "Five Connecticuts" grouping based on income, poverty, and population density, and updated them using 2010 Census data.[ii] The "Five Connecticuts" designations utilized in our report are as follows:

- **Wealthy** (towns such as Greenwich and Darien, many of which have median incomes of over $200,000 per year)
- **Suburban** (towns such as North Haven and Granby)
- **Rural** (towns such as Putnam and Sharon)
- **Urban Periphery** (towns such as Norwalk, East Haven, and Manchester)
- **Urban Cores** (towns of Bridgeport, New Haven, Hartford, Waterbury, New Britain, and New London, which typically have median incomes of less than $50,000 per year)
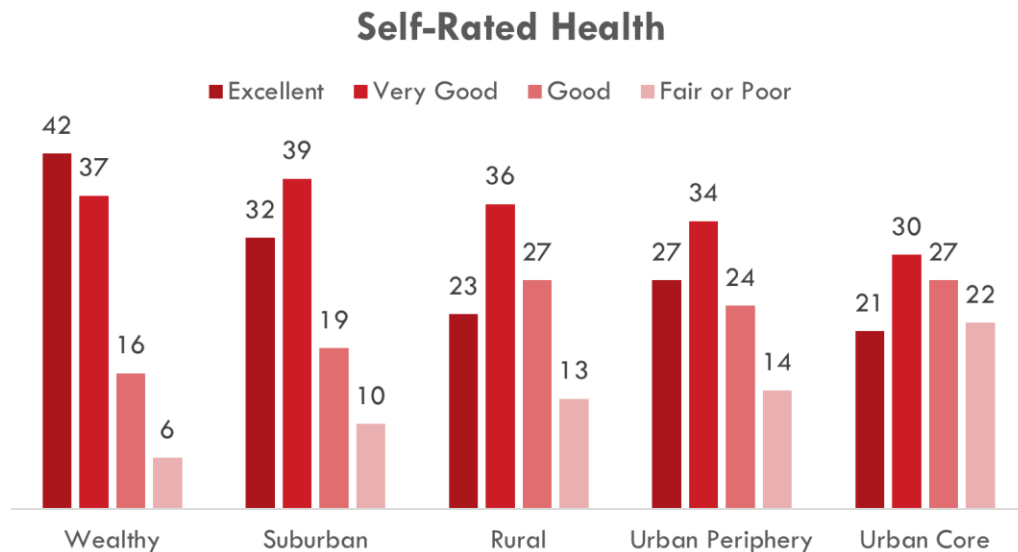
Connecticut does relatively well when compared to national and international indicators of health, income, and education. In fact, Connecticut is the highest ranked state in the United States according to the 2013-2014 Measure of America's Human Development Index (measureofamerica.org), and each of its 5 individual Congressional Districts rank within the top quartile of the Index. However, the DataHaven Community Wellbeing Survey provides unique and powerful data to look for meaningful disparities in health and well-being across the state. As this brief exposes, there is a sizeable segment of the state's population residing in neighborhoods that negatively affect their health and overall well-being. This provides policy-makers and health equity advocates with the data needed to reduce inequalities across the state.

Health Indicators – Access to Care / Health Status

Access to health insurance is an important indicator to overall well-being, as this factor has been linked with health outcomes in social science and in public health research. Overall, we see that a relatively small percentage (4.9%) of adults in Connecticut lack health insurance after multiple periods of open enrollment through the Affordable Care Act. When we look at the 2012 DataHaven Community Wellbeing data for the Greater New Haven region (the only location

where similar data was collected in 2012), we see that the uninsured rate dropped from 10% in 2012 to 4% in 2015. That said, access to insurance continues to vary across the "Five Connecticuts." While only 3% of residents in Wealthy towns lack insurance, 6% of residents in the Urban Periphery and 9% of residents in the Urban Core do not have health insurance. Adults who live in the Urban Core areas are more than twice as likely to lack insurance as their neighbors in suburban areas of the state, and three times as likely as residents in Wealthy towns.

One of the most utilized indicators of general health is a self-rated health measure, such as that included in the DataHaven Community Wellbeing Survey, which asks respondents to provide an assessment of their health from excellent to poor. As reflected in the figure below, this measure illustrates important variation by town grouping. Although only 14% of the overall sample reports health in the lower categories of fair or poor, only 6% of residents in Wealthy towns report fair or poor health compared to 13% in Rural towns, 14% in the Urban Periphery, and a high of 22% in the Urban Core of the state. Conversely, residents from the Wealthy (42%) and Suburban (32%) regions of the state report higher than average rates (27%) in Excellent health, compared to much lower percentages in the Rural (23%) and Urban Core (21%).
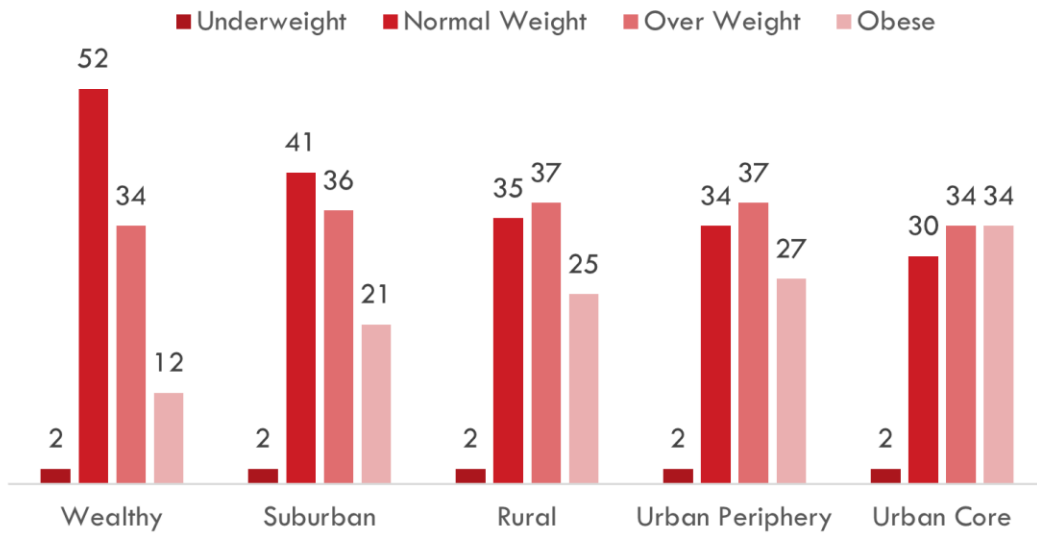

Source: DataHaven Community Wellbeing Survey, April-October 2015, n=16,219

The final health outcome measure we discuss in this brief is body mass index (BMI), generated from the measures of height and weight included in the survey. The results from these questions were coded into the four categories listed in the

figure below. There is a similar pattern here, with significant differences in obesity rates by town. Consistent with the two health indicators discussed above, only 12% of residents from Wealthy towns are obese compared to 21% in Suburban towns, and 25% in Rural areas of the state. Obesity rates are much higher in the more urban areas of the state, with 27% of Urban Periphery respondents reporting height and weights that indicate obesity compared to 34% for those living in the Urban Core.

Body Mass Index

■ Underweight ■ Normal Weight ■ Over Weight ■ Obese

	Wealthy	Suburban	Rural	Urban Periphery	Urban Core
Underweight	2	2	2	2	2
Normal Weight	52	41	35	34	30
Over Weight	34	36	37	37	34
Obese	12	21	25	27	34

Source: DataHaven Community Wellbeing Survey, April-October 2015, n=16,219
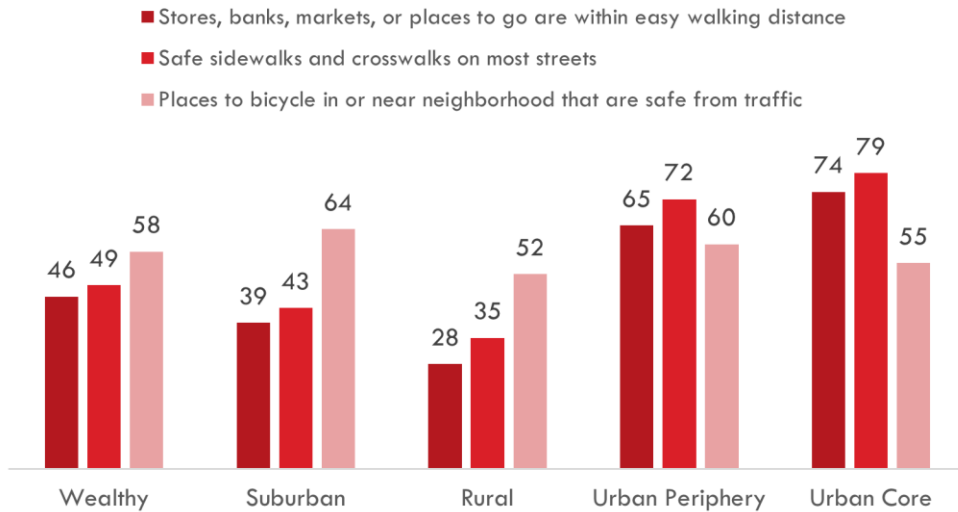
Neighborhood Factors Linked With Health

In addition to a rich selection of health outcome measures, the DataHaven Community Wellbeing Survey provides some of the best measures of neighborhood factors that public health scholars have found to be associated with health outcomes like those discussed in the brief. We highlight one of these measures that help explain reported differences in BMI discussed in the previous section. While many of us take for granted the ability to exercise near our home to help control our weight, the survey sheds light on the high number of state residents who do not have access to safe places to exercise.

Within the survey, a series of questions probes residents' perceptions of walkability, bike-ability, and recreational access. For example, while 59% of Connecticut adults state that they agree (39% strongly agree) with the statement that there are "safe sidewalks and crosswalks on most of the streets in my
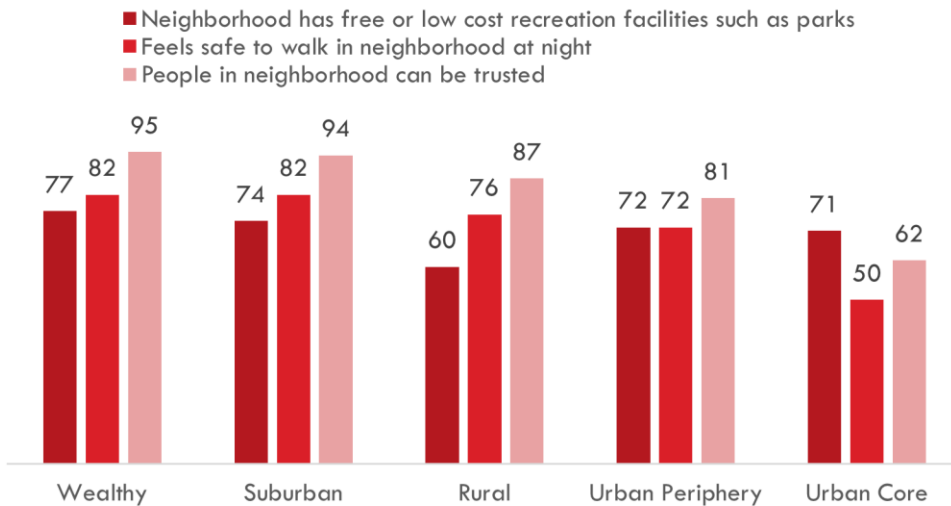
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neighborhood", this means that four in ten residents of Connecticut may not have access to the most basic resource needed to exercise, a safe place to walk in their neighborhood.

Percent who agree or strongly agree with each statement

- ■ Stores, banks, markets, or places to go are within easy walking distance
- ■ Safe sidewalks and crosswalks on most streets
- ■ Places to bicycle in or near neighborhood that are safe from traffic

	Wealthy	Suburban	Rural	Urban Periphery	Urban Core
Stores, banks, markets	46	39	28	65	74
Safe sidewalks	49	43	35	72	79
Places to bicycle	58	64	52	60	55

Source: DataHaven Community Wellbeing Survey, April-October 2015, n=16,219

Percent who agree or strongly agree with each statement

- ■ Neighborhood has free or low cost recreation facilities such as parks
- ■ Feels safe to walk in neighborhood at night
- ■ People in neighborhood can be trusted

	Wealthy	Suburban	Rural	Urban Periphery	Urban Core
Recreation facilities	77	74	60	72	71
Safe to walk at night	82	82	76	72	50
People can be trusted	95	94	87	81	62

Source: DataHaven Community Wellbeing Survey, April-October 2015, n=16,219

Summary of Findings / Future Research

This initial report by RWJF Center for Health Policy is the first of a series of briefs that explore health and well-being disparities in the state of Connecticut utilizing the DataHaven Community Wellbeing Survey. This series will focus on health and well-being outcome variation based on the "Five Connecticuts" regional grouping of the 169 individual towns in the state.

This brief has highlighted the power that both health outcome and neighborhood measures provide researchers interested in exploring potential disparities in health and well-being across types of towns in Connecticut. While only touching the surface of possible research projects to explore how and why place matters in the state, this brief has identified the following findings that should be relevant to policy-makers, advocates, and researchers:

- Many residents of Connecticut's Urban Core areas face disparities in both access to care (measured here by insurance coverage) and health outcomes, including obesity. The strong link between obesity rates and serious health conditions including heart disease makes this a disparity with major consequences for the state.

- Residents of some towns are more likely to lack access places to exercise near their homes, including sidewalks, bicycle facilities, and public spaces that are perceived as safe places to walk at night. This is one example of the rich neighborhood level data in the survey that can inform the decisions of state and local elected officials, government officials, and others interested in distribution of public resources.

The next brief in this series will focus specifically on health and well-being disparities faced by racial and ethnic minorities in the state of Connecticut. These analyses are made possible due to the large and diverse sample provided by the 2015 DataHaven Community Wellbeing Survey. The power of this dataset allows for the identification of disparities across multiple and important socio-economic factors and this series of briefs aims to explore these and provide critical insights into the health and well-being of Connecticut's residents.

About the Authors

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i DataHaven Community Wellbeing Survey. Available from http://ctdatahaven.org/reports/datahaven-community-wellbeing-survey

ii Levy, Don, Orlando Rodriguez, and Wayne Villemez. 2004. The Changing Demographics of Connecticut - 1990 to 2000. Part 2: The Five Connecticuts. Storrs, Connecticut: University of Connecticut, Center for Population Research, CPR Series, no. OP 2004-01. Available from http://www.ctdatahaven.org/data-resources/changing-demographics-connecticut-%E2%80%94%C2%A01900-2000-part-2-five-connecticuts

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