FAIRFIELD COUNTY

Community Wellbeing Index 2023

Indicators of well-being, equity, and quality of life in Fairfield County neighborhoods

A CORE PROGRAM OF

DataHaven

In partnership with **Fairfield County's Community Foundation,** and a **Community Health Needs Assessment** for the towns served by Bridgeport Hospital, Danbury Hospital, Greenwich Hospital, Norwalk Hospital, St. Vincent's Medical Center, and Stamford Hospital

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DataHaven Community Wellbeing Survey Funders

Among other data sources, this document makes extensive use of the DataHaven Community Wellbeing Survey, which completed live, in-depth interviews with over 40,000 randomly-selected adults in every Connecticut town in 2015, 2018, 2020, 2021, and 2022. In addition to the major funders shown above, sponsors of interviews in Fairfield County included local public health departments serving Bridgeport, Stamford, Norwalk, Danbury, Fairfield, Stratford, Trumbull, Monroe, Easton, Newtown, Bethel, and New Fairfield, as well as the Valley Community Foundation (serving Shelton), Newtown-Sandy Hook Community Foundation, Tufts Health Plan Foundation, Universal Health Care Foundation of Connecticut, Planned Parenthood of Southern New England, Yale Cancer Center, Yale Medicine, Yale University, Southern Connecticut State University, and other partners.

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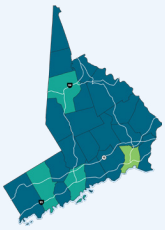

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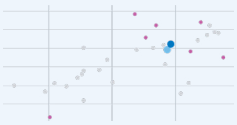

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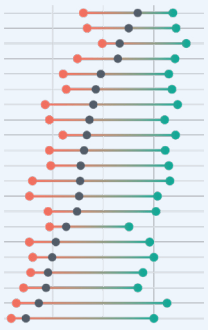

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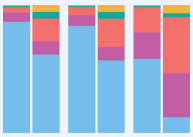

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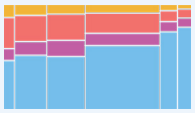

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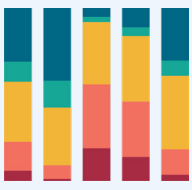

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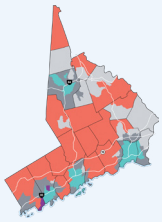

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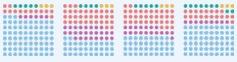

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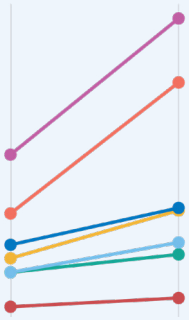

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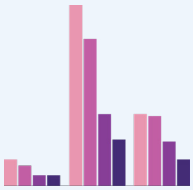

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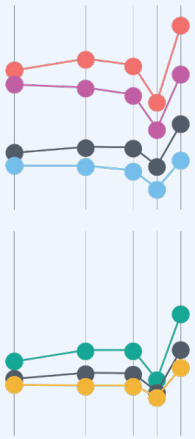

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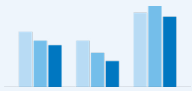

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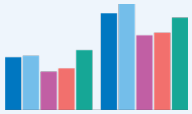

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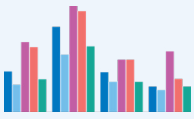

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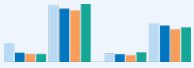

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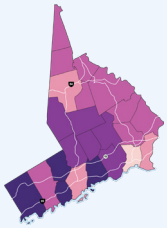

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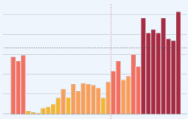

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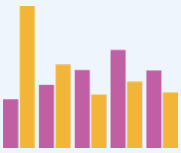

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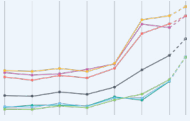

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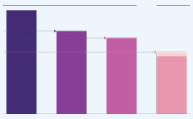

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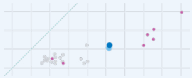

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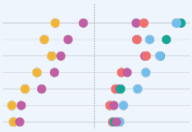

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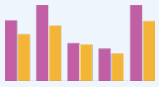

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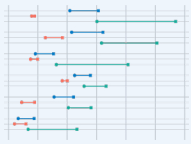

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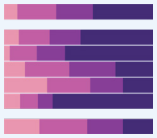

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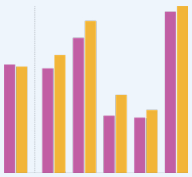

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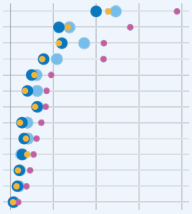

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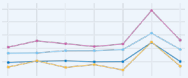

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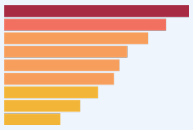

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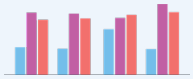

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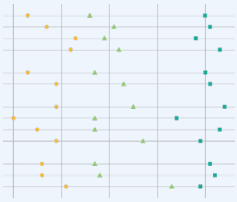

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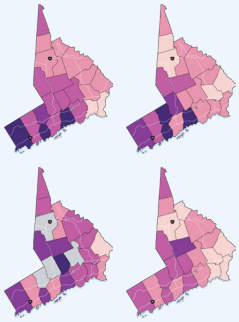

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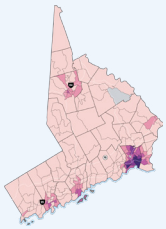

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CHAPTER 1

Introduction and Community Index

AT A GLANCE

- → This chapter discusses the purpose of this report and findings from the DataHaven Community Index and Personal Wellbeing Index, two methods we use to measure well-being, equity, and quality of life in the region.
- → Connecticut tends to rank highly on measures of well-being among states, reflecting a relatively high quality of life compared to the rest of the country. However, these rankings often do not account for disparity within a state.
- → Fairfield County is home to some of the highest and lowest scoring towns on the DataHaven Community Index, revealing stark inequality in the region. Fairfield County ranks 12th out of 100 metropolitan areas in the U.S. overall.
- → High levels of personal well-being often correspond with high levels of community well-being. As a result, those with fewer community resources often report lower quality of life than those with better access to resources.

Foreword

Fairfield County historically has been marked by some of the sharpest disparities in the country in terms of the well-being of its population. Its wealthiest neighborhoods rank among the most prosperous in the nation, where residents enjoy a very high quality of life. Most of them own the home where they live, have access to good health care, earn high salaries, and send their kids to well-funded schools. These communities are immediately adjacent to others where very few people own their homes, residents struggle with access to health care, earn low wages, and send their kids to schools with persistent funding issues.

As has been the case across the country, the stresses of the COVID-19 pandemic exposed and amplified the disparities that have long existed in Fairfield County. Many people with high-paying jobs and ample resources saw shifts in the ways they worked and lived, but the pandemic did not fundamentally alter their general well-being. By contrast, those who struggled before the pandemic faced greater unemployment and loss of health insurance. Their schools were thrown into disarray, with potentially dramatic and long-term effects on their children's education. People facing financial insecurity, and Black and Latino[1] people were more likely than wealthier white people to get sick from COVID-19, and more likely to die. Other persons living with chronic conditions and disabilities, and those in older age groups, are also at much higher risk.

The past few years have also been a time of national reckoning with the country's history of racism, with reverberations at state and local levels. In Connecticut, that reckoning sharpened the discussion about the generations of inequities in well-being, from the availability of affordable housing, to support for schools, to questions about health care and employment, to quality of life concerns about access to safe and reliable transportation and outdoor spaces.

The pandemic also affected data collection for the 2020 Census, as people moved to places they would ride out the initial lockdowns. As a result, the credibility of that data was put to question. However, the 2020 counts remain useful for helping describe and hopefully dismantle some of the disparities the pandemic revealed in stark clarity.

Fairfield County, like the state and country overall, is still in the long tail of recovery from the pandemic's most acute effects. Locally, policymakers, state and local agencies, nonprofits, and residents are more aware of, more willing to talk about, and more interested in doing something to address the disparities in well-being that have existed for a long time. Good information is crucial to that work. It allows us to compare our towns and regions to one another to see which legacies of racially-biased systems echo those in other parts of the country, and to determine those which are regionally unique. The more we understand, the better we are at addressing inequities, making sure that the benefits of recovery are felt by all, and by those who need it the most.

About This Document

The Fairfield County Community Wellbeing Index is produced through DataHaven's comprehensive community indicators program, which collects and shares data on well-being, equity, and quality of life. For the past 30 years, DataHaven has published information on an ongoing basis at the statewide, regional, town, and neighborhood levels. As a formal partner of the National Neighborhood Indicators Partnership, DataHaven is committed to making information more accessible to communities.

This report defines the region as all 23 towns in Fairfield County. Data are also presented for specific neighborhoods within larger towns. In some cases, the report presents aggregate data for the 6 wealthiest towns, which are Darien, New Canaan, Ridgefield, Weston, Westport, and Wilton.

This report is made possible through funding from more than 100 public and private partners. It also relies on advice from community members and subject matter experts throughout the state and beyond, including 300 individuals who participated in the DataHaven Community Wellbeing Survey's Advisory Council in 2021 and 2022. DataHaven is profoundly grateful for their support.

DataHaven publishes Community Wellbeing Index reports and similar publications that cover other regions of Connecticut. These reports as well as previous editions of the Community Wellbeing Index may be found at www.ctdatahaven.org/reports.

Additional Connecticut Town Data

Through its Town Equity Reports, DataHaven publishes detailed information about individual towns and cities throughout Connecticut. Data for all towns in Connecticut are available at ctdatahaven.org/reports/connecticut-town-equity-reports. DataHaven also publishes these equity reports for other groupings of towns, such as hospital service areas or Council of Governments (COG) regions.

Other user-friendly data resources at DataHaven include its community and neighborhood profiles, which cover all towns, as well as neighborhoods within the largest cities. These are available at ctdatahaven.org/communities.

The information in this report, and additional data published by DataHaven about specific communities within the region, also may be found in community health needs assessments (CHNAs) that are published on the websites of each hospital in the region.

Measuring How Communities Shape Well-Being

Quality of life in Fairfield County can be measured in several ways. First, we summarize how Connecticut ranks among nearby states in various measures. We then use our Community Index to compare Fairfield County towns and neighborhoods to the 100 largest metropolitan areas in the United States across eight community-based indicators. Finally, we use our DataHaven Community Wellbeing Survey to generate our Personal Wellbeing Index, which allows us to compare four measures of personal well-being across specific demographic groups.

Connecticut Rankings

Connecticut, along with the rest of New England, tends to rank highly on measures of well-being, reflecting a relatively high quality of life compared to the rest of the country. However, because these rankings do not account for disparities within a state, they do not accurately reflect quality of life for all residents. We explore these disparities by comparing towns, neighborhoods, and specific demographic groups.

DataHaven Community Index Scores for Local Areas

The DataHaven Community Index combines several indicators into an average score, ranging from 0 to 1,000, that allows readers to compare parts of Connecticut to one another and to other parts of the United States. Included in the Community Index are measures of economic, health-related, and educational well-being (SEE TABLE 1B).

Fairfield County ranks 12th out of 100 metropolitan areas in the United States. This county-level figure hides local disparities within the region. When assessed town by town, or neighborhood by neighborhood, the county includes some of the highest and lowest scoring areas in the analysis. In other words, well-being disparities in Fairfield County remain among the greatest in the country.

That said, between 2015 and 2020 (the latest year for which these data are available), Community Index scores have improved for most metropolitan areas, although for some individual towns and neighborhoods in the region, scores have declined. DH

TABLE 1A

Quality of life rankings for New England and New York

SELECTED STATE RANKINGS AND AVERAGE PLACEMENT FOR QUALITY OF LIFE INDICES

REPORT [YEAR] - PUBLISHER	DESCRIPTION	CT	ME	MA	NH	NY	RI	VT
Measure of America [2018] - Social Science Research Council	The distribution of well-being and opportunity in three basic dimensions: health, access to knowledge, and living standards.	3	29	2	10	6	13	17
Opportunity Index [2019] - Opportunity Nation	A composite measure that draws upon important economic, educational, health, and community-related indicators of opportunity.	10	11	4	8	14	20	2
Quality Counts [2021] - Education week	Measures the education of states on Chance for Success, School Finance and K-12 Achievement.	3	16	2	9	8	13	6
State Innovation Index [2020] - Bloomberg	Rank based on research and development intensity, productivity, clusters of companies in technology, STEM jobs, residents with degrees in science and engineering disciplines and patent activity.	4	37	2	9	14	19	24
America's Health Rankings [2021] - United Health Foundation	Measures social and economic factors, physical environment, clinical care, behaviors and health outcomes.	6	8	2	1	22	12	3
Prosperity Now Outcome Ranks [2020] - Prosperity Now	Assesses states on the financial security and economic opportunity of households; final score incorporates the state's racial disparity.	13	20	4	6	27	24	2
Number of times state is ranked among the top 10 states		5	1	6	6	2	0	4
Average placement		7	20	3	7	15	17	9

TABLE 1B

DataHaven Community Index

SCORES FOR LARGE U.S. METROPOLITAN AREAS AND LOCAL CITIES, TOWNS, AND NEIGHBORHOODS, 2015 AND 2020

RANK	LOCATION	2020 COMM. INX.	2015 COMM. INX.	PERCENT CHANGE
	6 wealthiest Fairfield County	991	976	⬆2%
	Greenwich high-income nbhd.	989	961	⬆3%
	Other Fairfield County towns	954	943	⬆1%
	Fairfield	952	939	⬆1%
	Stamford high-income neighborhoods	936	951	⬇2%
	Danbury high-income nbhd.	890	935	⬇5%
	Norwalk high-income neighborhoods	890	933	⬇5%
	Greenwich	881	892	⬇1%
1	Ogden-Clearfield, UT	856	789	⬆8%
	Stratford	849	818	⬆4%
2	Minneapolis-St. Paul-Bloomington, MN-WI	829	787	⬆5%
3	Madison, WI	815	767	⬆6%
4	Washington-Arlington-Alexandria, DC-VA-MD-WV	804	792	⬆2%
5	Des Moines-West Des Moines, IA	802	768	⬆4%
6	Provo-Orem, UT	802	739	⬆9%
7	Salt Lake City, UT	797	726	⬆10%
8	Boston-Cambridge-Newton, MA-NH	792	765	⬆4%
9	Seattle-Tacoma-Bellevue, WA	792	748	⬆6%
10	Denver-Aurora-Lakewood, CO	792	733	⬆8%
11	Grand Rapids-Kentwood, MI	790	716	⬆10%
12	**Fairfield County, CT**	786	796	⬇1%
13	San Jose-Sunnyvale-Santa Clara, CA	784	753	⬆4%
14	Pittsburgh, PA	783	740	⬆6%
15	Omaha-Council Bluffs, NE-IA	783	736	⬆6%
16	Baltimore-Columbia-Towson, MD	781	757	⬆3%
17	Boise City, ID	779	685	⬆14%
18	Hartford-East Hartford-Middletown, CT	779	772	⬆1%
19	Colorado Springs, CO	778	746	⬆4%
20	Raleigh-Cary, NC	778	729	⬆7%
21	Worcester, MA-CT	777	744	⬆4%
22	Urban Honolulu, HI	776	750	⬆3%
	Connecticut (state avg.)	774	770	⬆1%
23	Albany-Schenectady-Troy, NY	772	762	⬆1%
24	St. Louis, MO-IL	772	724	⬆7%
35	Philadelphia-Camden-Wilmington, PA-NJ-DE-MD	745	723	⬆3%
	Norwalk	740	788	⬇6%
36	Nashville-Davidson-Murfreesboro-Franklin, TN	740	684	⬆8%
37	Spokane-Spokane Valley, WA	738	679	⬆9%
40	Akron, OH	730	695	⬆5%
	Bridgeport high-income neighborhoods	729	712	⬆2%
41	New Haven-Milford, CT	729	717	⬆2%
49	Deltona-Daytona Beach-Ormond Beach, FL	716	630	⬆14%
	Greenwich low-income neighborhoods	715	806	⬇11%
50	Columbus, OH	715	689	⬆4%
56	Sacramento-Roseville-Folsom, CA	709	655	⬆8%
	Stamford	707	752	⬇6%
64	Greenville-Anderson, SC	698	631	⬆11%
	United States (national avg.)	695	656	⬆6%
	Danbury	673	696	⬇3%
80	New York-Newark-Jersey City, NY-NJ-PA	666	648	⬆3%
87	Houston-The Woodlands-Sugar Land, TX	638	617	⬆3%
	Stamford low-income neighborhoods	636	650	⬇2%
95	Los Angeles-Long Beach-Anaheim, CA	599	561	⬆7%
	Norwalk low-income neighborhoods	593	570	⬆4%
	Danbury low-income neighborhoods	551	646	⬇15%
97	El Paso, TX	517	477	⬆8%
99	Fresno, CA	474	419	⬆13%
	Bridgeport	402	430	⬇7%
100	McAllen-Edinburg-Mission, TX	349	322	⬆8%
	Bridgeport low-income neighborhoods	0	0	0%

FIGURE 1A

Community Index scores vary by town within Fairfield County

INDEX SCORE BY TOWN, 2020

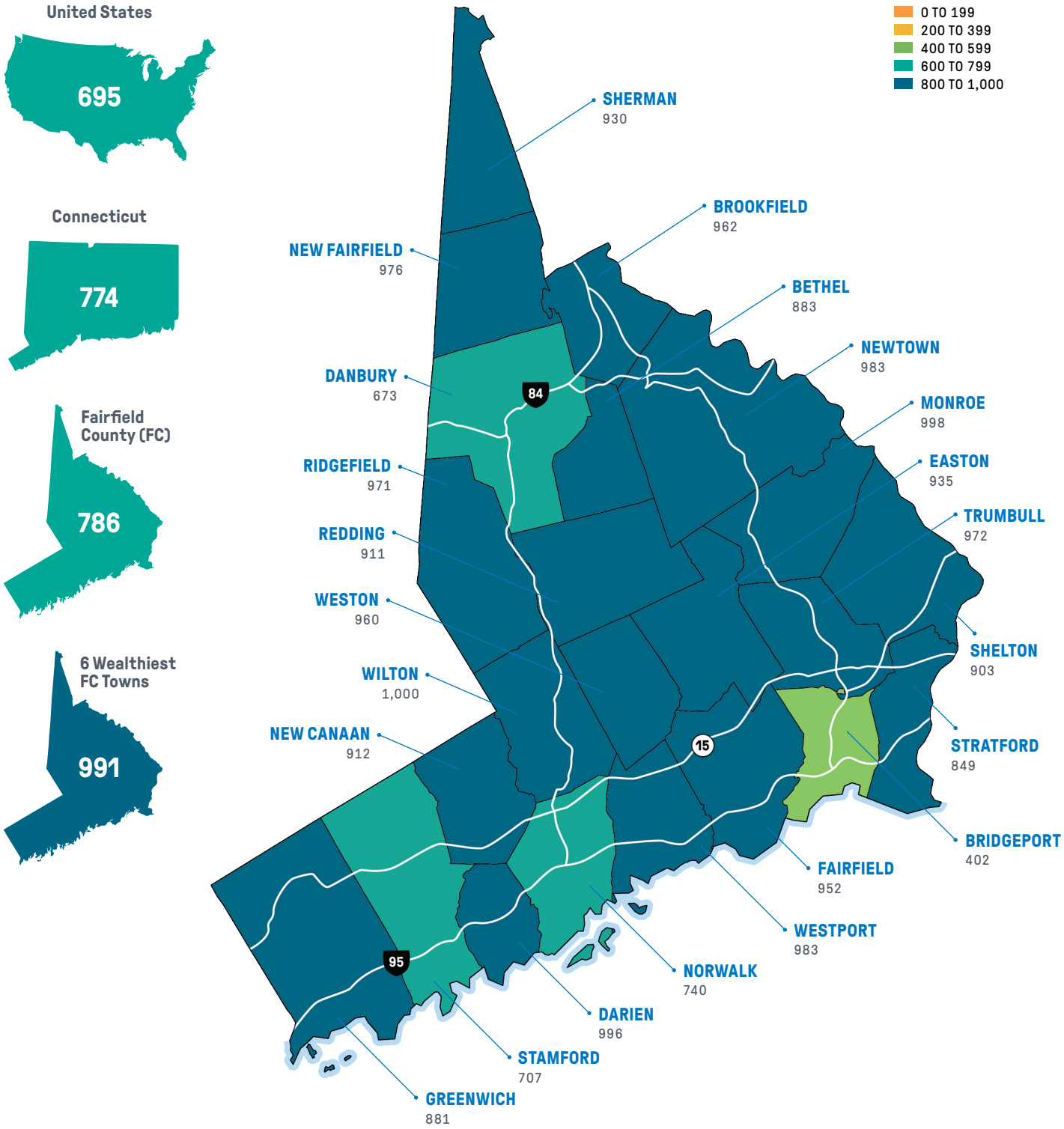


TABLE 1C

DataHaven Community Index and its components by area

LOCAL DATA VALUES AND SCORES, 2020

LOCATION	HOME-OWNERSHIP RATE	H.S. GRADUATES	YOUTHFUL LABOR FORCE PARTICIPATION	WORKERS WITH SHORT COMMUTE	HOUSING COST BURDEN	LOW-INCOME POPULATION	CHILDHOOD POVERTY RATE	INSURED POPULATION	2020 COMM. IDX.
United States	64%	89%	83%	62%	31%	30%	18%	91%	695
Connecticut	66%	91%	86%	64%	35%	22%	13%	95%	774
Fairfield County	67%	90%	86%	58%	39%	21%	12%	92%	786
Bridgeport	42%	76%	84%	59%	53%	45%	34%	87%	402
Danbury	57%	84%	89%	61%	40%	27%	16%	86%	673
Fairfield	83%	96%	86%	53%	33%	13%	3%	97%	952
Greenwich	67%	96%	83%	59%	35%	13%	6%	96%	881
Norwalk	57%	88%	87%	63%	41%	22%	11%	86%	740
Stamford	50%	89%	88%	64%	43%	24%	14%	90%	707
Stratford	79%	91%	87%	62%	39%	18%	10%	96%	849
6 wealthiest FC towns	87%	98%	81%	48%	32%	7%	3%	98%	991
All other FC towns	85%	96%	86%	55%	32%	11%	5%	96%	954
INDIVIDUAL NEIGHBORHOODS									
Bridgeport, higher-income	62%	86%	87%	55%	44%	25%	13%	91%	729
Bridgeport, lower-income	9%	66%	78%	65%	58%	72%	56%	89%	0
Danbury, higher-income	79%	91%	81%	59%	30%	15%	5%	95%	890
Danbury, lower-income	51%	79%	90%	67%	49%	36%	23%	81%	551
Greenwich, higher-income	88%	98%	74%	47%	28%	7%	3%	99%	989
Greenwich, lower-income	45%	94%	87%	65%	40%	25%	12%	93%	715
Norwalk, higher-income	81%	96%	85%	64%	34%	9%	N/A	93%	890
Norwalk, lower-income	39%	81%	87%	65%	46%	33%	13%	81%	593
Stamford, higher-income	93%	95%	86%	59%	30%	6%	N/A	98%	936
Stamford, lower-income	50%	90%	91%	65%	51%	30%	22%	87%	636

Personal Wellbeing Index

It is important for policymakers and programs to measure well-being directly, because traditional measures such as income and gross domestic product are unable to capture the importance of so many life experiences.[2]

To fill this gap, the DataHaven Community Wellbeing Survey conducts live, in-depth interviews with thousands of randomly-selected adults in every Connecticut town. We find that personal well-being measures—including life satisfaction, self-rated health, anxiety, and happiness—correlate strongly with Community Index scores (SEE FIGURE 1B). In other words, higher levels of personal well-being are associated with greater levels of community well-being, while communities and populations with fewer community resources often report lower levels of personal well-being. DataHaven's Personal Wellbeing Index, which factors across the above four indicators of overall well-being, reveals stark inequalities by race/ethnicity and town (SEE TABLE 1D). DH

TABLE 1D

DataHaven Index scores

PERSONAL WELLBEING INDEX (2021) AND COMMUNITY INDEX SCORES (2020), FAIRFIELD COUNTY

LOCATION	PERSONAL WELLBEING INDEX	COMMUNITY INDEX
CT	696	774
FC	723	786
BY DEMOGRAPHIC WITHIN FAIRFIELD COUNTY		
White	783	936
Black	518	603
Latino	704	510
BY TOWN		
Bridgeport	330	402
Danbury	883	673
Fairfield	651	952
Greenwich	840	881
Norwalk	823	740
Stamford	760	707
Stratford	682	849

FIGURE 1B

Personal well-being tends to improve with overall community well-being

PERSONAL WELLBEING INDEX (2021) VERSUS COMMUNITY INDEX SCORES (2020)

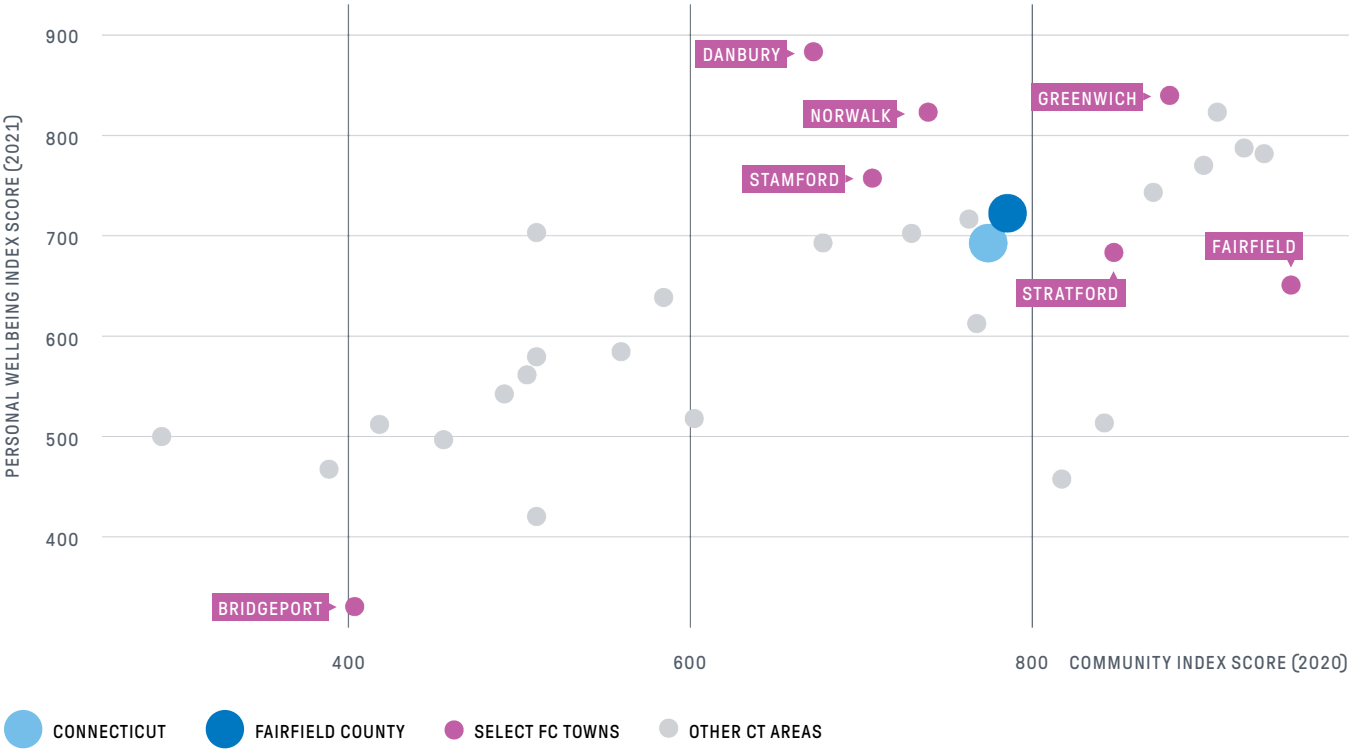
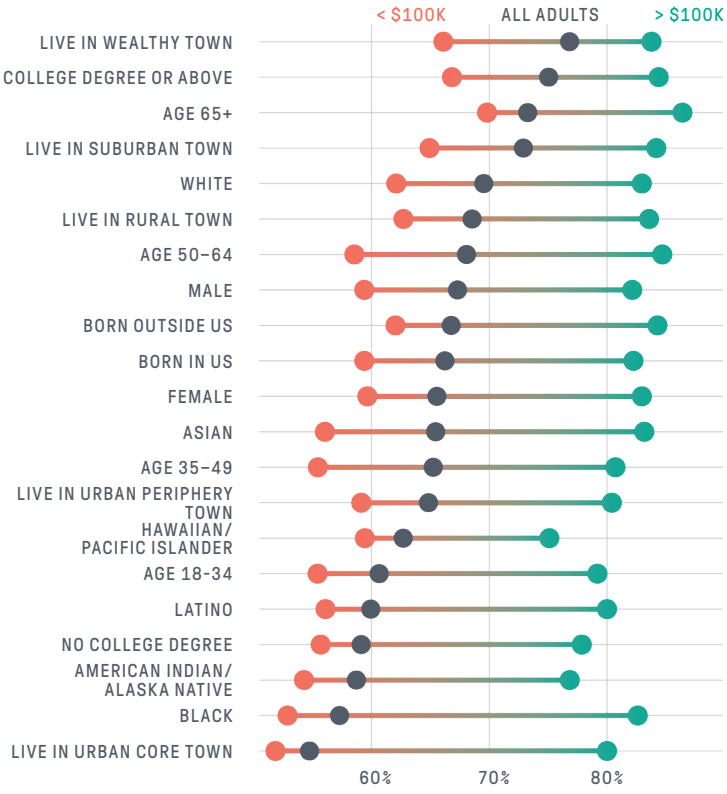


FIGURE 1C

Within demographic groups, life satisfaction often varies by income

SHARE OF ADULTS REPORTING BEING SATISFIED WITH LIFE BY INCOME AND DEMOGRAPHIC GROUP, CONNECTICUT, 2015–2021



Life Satisfaction

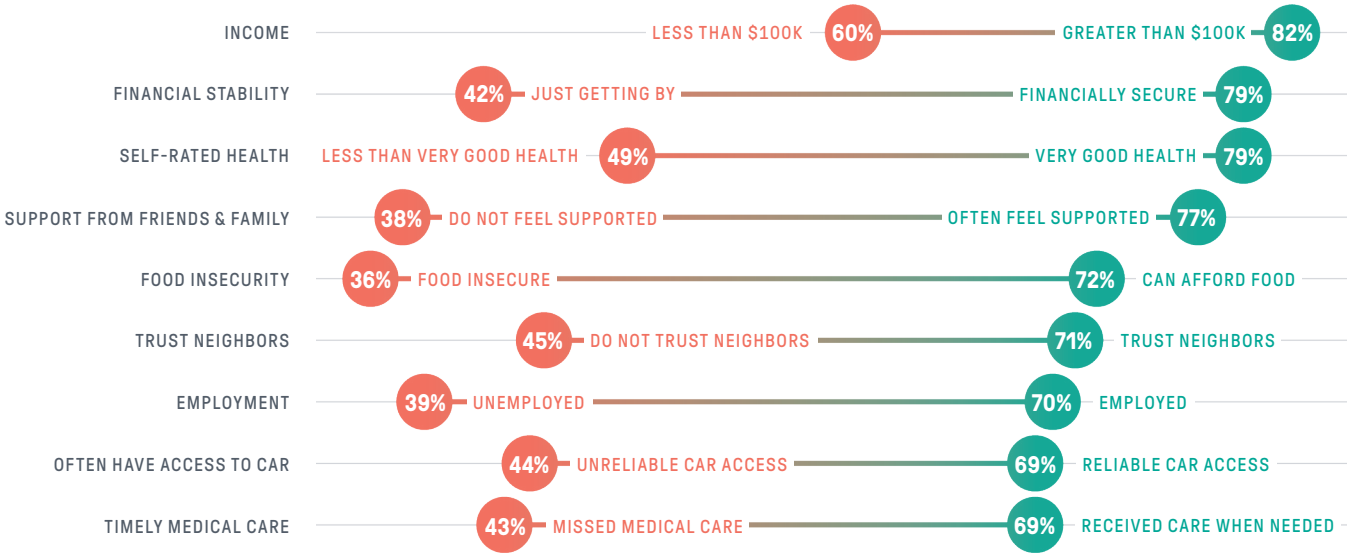
Looking further into measures of life satisfaction, patterns begin to emerge that reinforce the correlation of well-being measures with Community Index scores. Higher income is strongly associated with higher levels of reported life satisfaction (SEE FIGURE 1C). Other divisions are also clear: life satisfaction is lower among adults ages 18 to 34 compared to those who are 65 and up; lower among adults of color, especially Black adults, than white adults; lower among adults without a four-year college degree than those with one; and lower among those residing in urban core towns compared to wealthy towns.

Access to food, employment, health care, and community support affect greater life satisfaction: adults with more personal and community resources report being more satisfied (SEE FIGURE 1D). These data suggest that ensuring adequate food and housing for all people, fostering asset building and interpersonal connections, and reducing inequities in access to services would have a larger impact on well-being than policies focused mostly on traditional economic outputs. DH

FIGURE 1D

Many positive experiences and resources, including having a high income, correspond to higher life satisfaction

SHARE OF ADULTS REPORTING BEING SATISFIED WITH LIFE BY SELECT EXPERIENCES, CONNECTICUT, 2015–2021



CHAPTER 2

Population

AT A GLANCE

- → This chapter provides a brief overview of the population of Fairfield County, including demographic trends in recent decades.
- → Fairfield County has large immigrant communities from the Americas, Asia, Europe, and Africa. Between 2000 and 2020, the share of foreign-born residents in Fairfield County increased from 17 percent to 22 percent of the total population.
- → The county is highly segregated, with only 1 percent of the population living in a neighborhood that is both high income and high diversity.

Population Change

Fairfield County has an overall population of 957,419.[3] While the state population grew 1 percent over the past decade, Fairfield County's population increased 4 percent. Stamford, which had a population growth rate of 11 percent, is the fastest-growing city in the state (SEE TABLE 2A).

Compared to Connecticut, Fairfield County has a higher share of Latino residents (17 percent vs. 21 percent) and foreign-born residents (15 percent vs. 22 percent). Younger populations, including immigrants, tend to be more diverse: while people of color constitute 21 percent of residents ages 65 and over in Fairfield County, 47 percent of residents under 18 are people of color. Between 1980 and 2020, the white share of the population declined from 85 percent to 58 percent, while Latino residents went from 6 percent of the population to 21 percent (SEE TABLE 2B, FIGURE 2A, FIGURE 2B).

High-income and affluent neighborhoods in Fairfield County remain disproportionately white: 58 percent of white residents live in a higher income neighborhood, compared to 8 percent of Black residents and 16 percent of Latino residents. The share of Black residents in the 6 wealthiest towns is less than one-tenth that of Fairfield County (SEE TABLE 2B, FIGURE 2C). The aging population is a key trend, as adults ages 80 and over represent the region's fastest-growing age group. We covered this in more detail in the 2019 edition of this report. DH

TABLE 2A

Population and growth

POPULATION IN FAIRFIELD COUNTY AND TOWNS, 2010–2020

LOCATION	POPULATION, 2010	POPULATION, 2020	CHANGE, 2010–2020	PERCENT CHANGE
CT	3,574,097	3,605,944	⬆31,847	⬆0.9%
FC	916,829	957,419	⬆40,590	⬆4.4%
Bethel	18,584	20,358	⬆1,774	⬆9.5%
Bridgeport	144,229	148,654	⬆4,425	⬆3.1%
Brookfield	16,452	17,528	⬆1,076	⬆6.5%
Danbury	80,893	86,518	⬆5,625	⬆7.0%
Darien	20,732	21,499	⬆767	⬆3.7%
Easton	7,490	7,605	⬆115	⬆1.5%
Fairfield	59,404	61,512	⬆2,108	⬆3.5%
Greenwich	61,171	63,518	⬆2,347	⬆3.8%
Monroe	19,479	18,825	⬇654	⬇3.4%
New Canaan	19,738	20,622	⬆884	⬆4.5%
New Fairfield	13,881	13,579	⬇302	⬇2.2%
Newtown	27,560	27,173	⬇387	⬇1.4%
Norwalk	85,603	91,184	⬆5,581	⬆6.5%
Redding	9,158	8,765	⬇393	⬇4.3%
Ridgefield	24,638	25,033	⬆395	⬆1.6%
Shelton	39,559	40,869	⬆1,310	⬆3.3%
Sherman	3,581	3,527	⬇54	⬇1.5%
Stamford	122,643	135,470	⬆12,827	⬆10.5%
Stratford	51,384	52,355	⬆971	⬆1.9%
Trumbull	36,018	36,827	⬆809	⬆2.2%
Weston	10,179	10,354	⬆175	⬆1.7%
Westport	26,391	27,141	⬆750	⬆2.8%
Wilton	18,062	18,503	⬆441	⬆2.4%

TABLE 2B

Characteristics by race and origin

POPULATION BY RACE/ETHNICITY AND PLACE OF BIRTH, FAIRFIELD COUNTY, 2020

LOCATION	TOTAL POPULATION	PERCENT WHITE	PERCENT BLACK	PERCENT LATINO	PERCENT ASIAN	PERCENT OTHER RACE	FOREIGN-BORN POPULATION	PERCENT FOREIGN BORN
Connecticut	3,605,944	63%	10%	17%	5%	5%	521,384	15%
Fairfield County	957,419	58%	10%	21%	5%	5%	206,892	22%
Bridgeport	148,654	16%	33%	42%	3%	6%	43,265	30%
Danbury	86,518	44%	7%	33%	6%	10%	26,307	31%
Fairfield	61,512	81%	2%	8%	5%	4%	7,675	12%
Greenwich	63,518	72%	2%	13%	7%	6%	13,776	22%
Norwalk	91,184	49%	12%	30%	5%	4%	25,255	28%
Stamford	135,470	48%	12%	28%	8%	4%	42,917	33%
Stratford	52,355	54%	17%	21%	3%	5%	7,700	15%
6 wealthiest FC towns	123,152	83%	1%	6%	6%	5%	16,264	13%
Other FC towns	195,309	83%	2%	8%	5%	3%	23,733	12%

FIGURE 2A

Since 1980, the region has diversified greatly

SHARE OF POPULATION BY RACE/ETHNICITY, 1980–2020

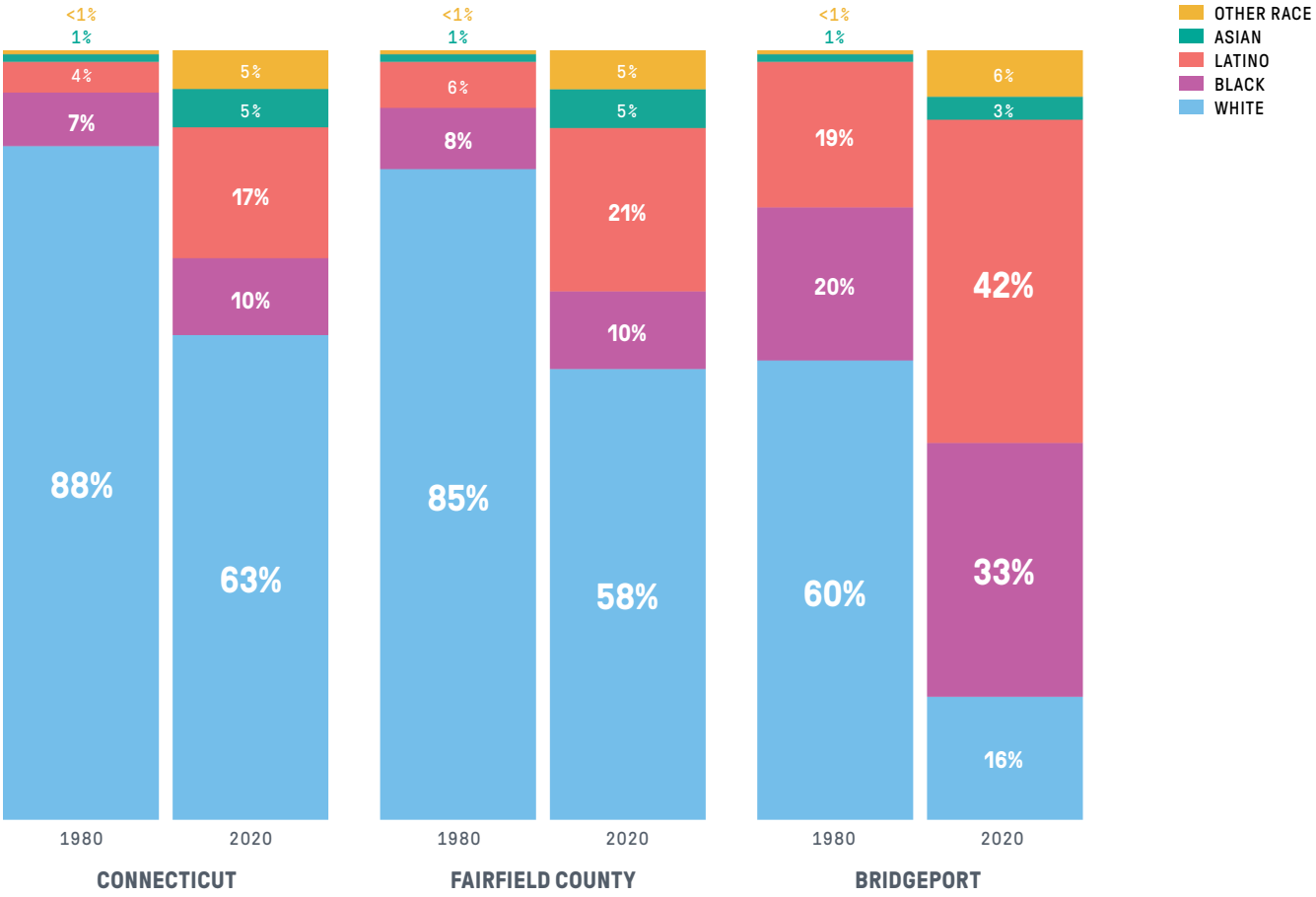


FIGURE 2B

Younger generations are much more racially diverse than older ones

POPULATION BY RACE/ETHNICITY AND AGE, FAIRFIELD COUNTY, 2020

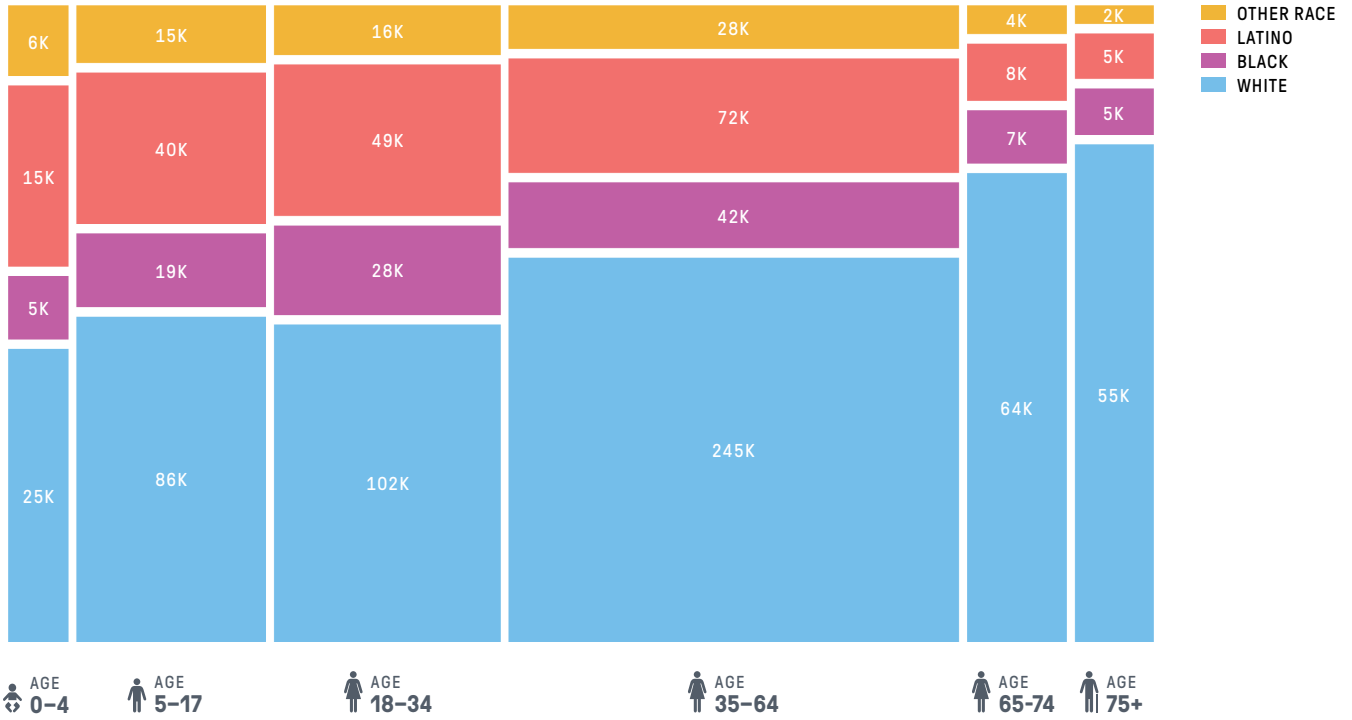
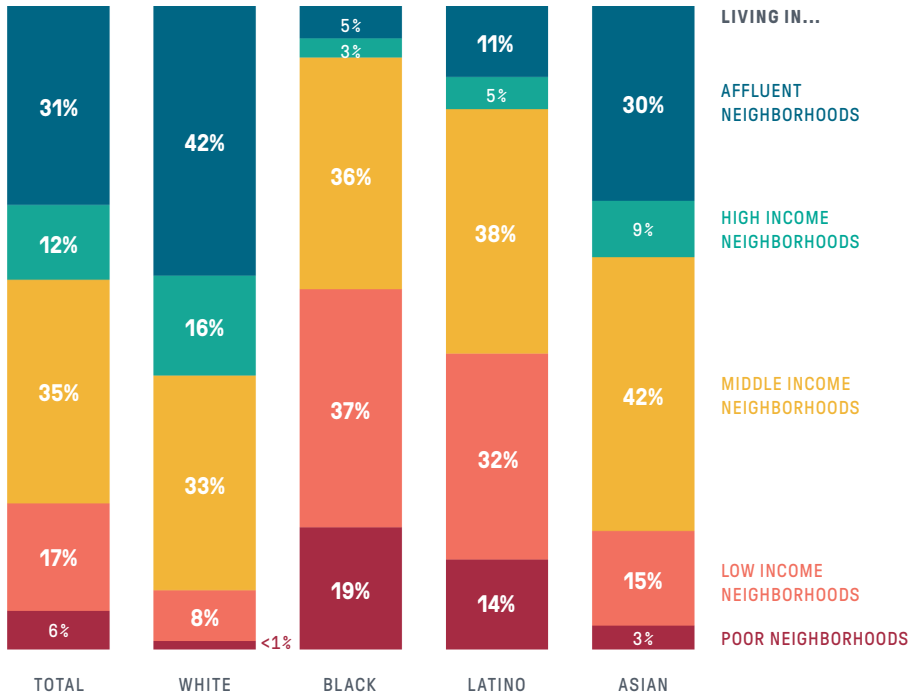


FIGURE 2C

White residents are over 3 times more likely to live in high-income or affluent neighborhoods than Black and Latino residents

SHARE OF POPULATION BY NEIGHBORHOOD INCOME LEVEL, FAIRFIELD COUNTY, 2020



BRACKET	RATIO TO STATE INCOME	AVERAGE HOUSEHOLD INCOME
Affluent	1.50x or higher	$259,017
High income	1.25x to 1.49x	$155,478
Middle income	0.75x to 1.24x	$112,829
Low income	0.50x to 0.74x	$73,243
Poor	Less than 0.49x	$46,769

Households

In 2020, Fairfield County had a total of 345,070 households, a 6 percent increase from 2000. Households of single individuals increased the most, growing 11 percent from about 77,900 in 2000 to 86,600 in 2020.[4] The rise of nonfamily households occurred in tandem with a decline in homeownership. These trends may have a causal relationship as those who live alone are less likely to be able to afford to own a home. In 2020, about 50 percent of nonfamily households in the county were renters, while only 26 percent of family households were renters.

Although nonfamily households have become more prevalent in Fairfield County, the region still has a higher share of family households than the state overall: 69 percent of households in Fairfield County are families, compared to 65 percent in the state. Fairfield County also has a lower share of single person households. Compared to Connecticut, where 28 percent of households have one person, only 25 percent of households in Fairfield County have one person (SEE FIGURE 2D). DH

Immigration

Between 2000 and 2020, the share of foreign-born residents in Fairfield County increased from 17 percent to 22 percent of the total population.[5] Communities from Ecuador, India, the Dominican Republic, Jamaica, Guatemala, Mexico, and Brazil saw the largest population increases, while the number of residents from many European countries declined (SEE FIGURE 2E).

Fairfield County's increasing diversity is due in part to this shift in immigration. Thirty-five percent of the county's immigrants who came to the U.S. before 1990 were born in Europe, while among immigrants who entered in 2010 or later, only 15 percent were born in Europe. Instead, recent immigration has shifted to people born in Asia and South America, each of which comprise 23 percent of immigrants entering in 2010 or later. Large communities of these recent immigrants include people born in the Caribbean and now living in Bridgeport, Asia-born residents in Stamford, and South Americans in Danbury, each of which are more than 3,000 people. DH

FIGURE 2D

The majority of Bridgeport's households are nonfamily households

SHARE OF HOUSEHOLDS BY HOUSEHOLD TYPE, 2020

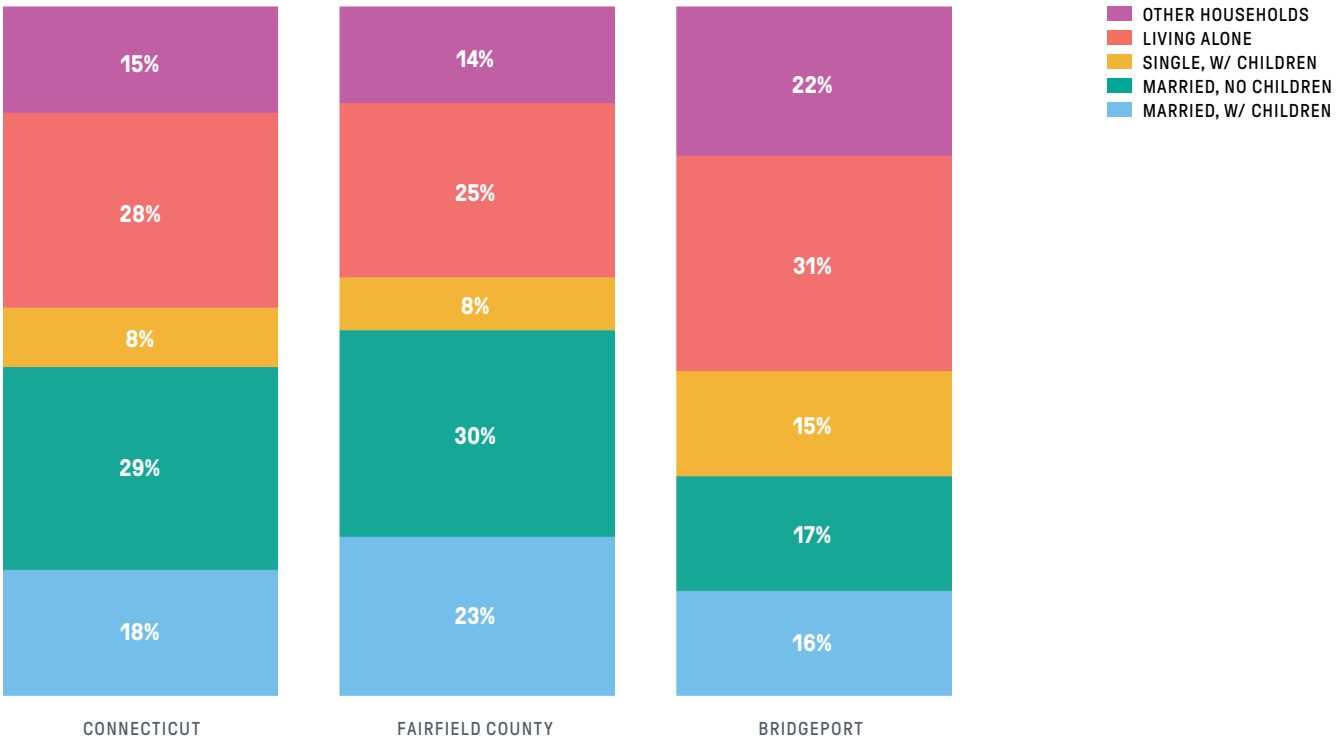
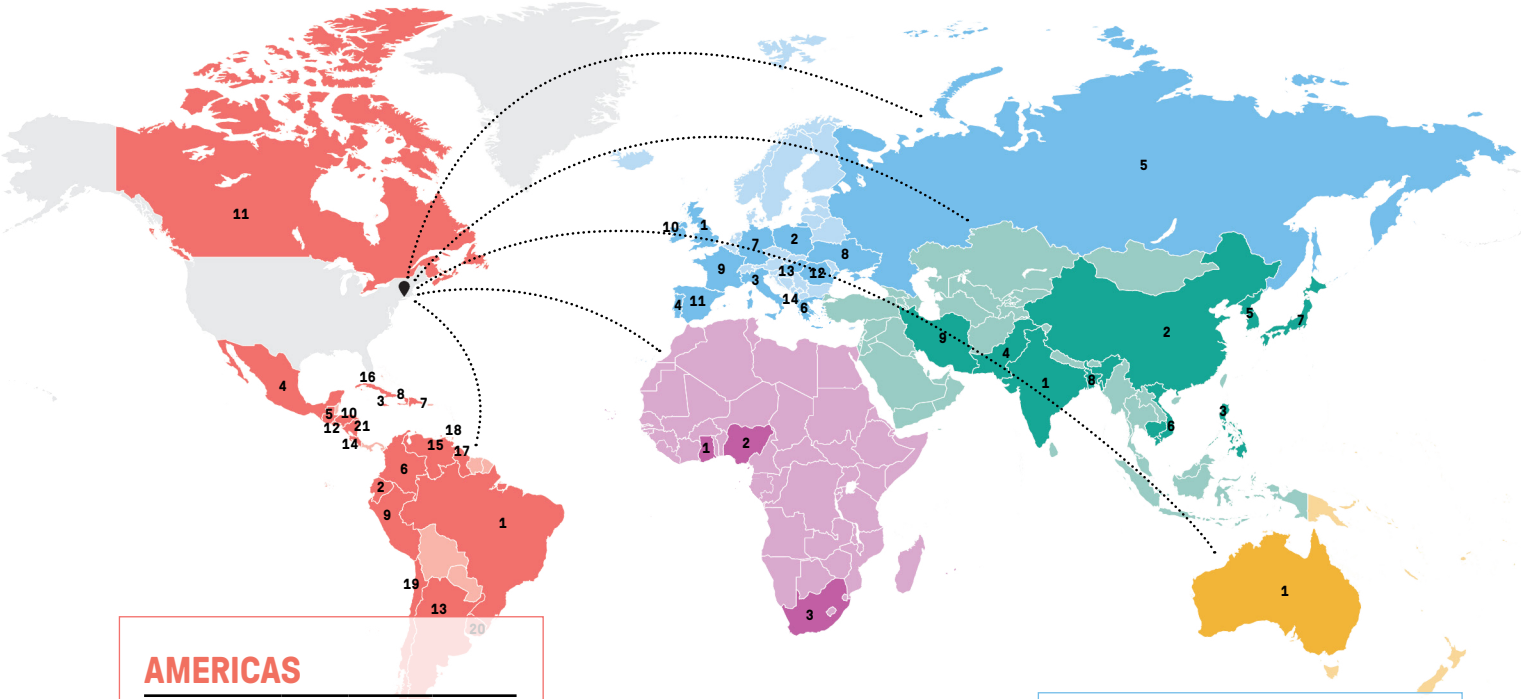


FIGURE 2E

Fairfield County's foreign-born population has been changing over time

NUMBER OF FAIRFIELD COUNTY RESIDENTS BY PLACE OF BIRTH, 2000 AND 2020



AMERICAS

	2000	2020	CHANGE
Americas	70,866	120,810	+70%
① Brazil	8,874	13,444	+51%
② Ecuador	4,398	13,400	+205%
③ Jamaica	7,745	13,160	+70%
④ Mexico	7,378	12,681	+72%
⑤ Guatemala	6,330	11,635	+84%
⑥ Colombia	7,255	9,645	+33%
⑦ Dominican Republic	3,955	9,440	+139%
⑧ Haiti	6,071	7,841	+29%
⑨ Peru	1,947	5,792	+197%
⑩ Honduras	2,045	3,684	+80%
⑪ Canada	4,436	3,521	-21%
⑫ El Salvador	1,164	2,656	+128%
⑬ Argentina	675	1,705	+153%
⑭ Costa Rica	1,456	1,658	+14%
⑮ Venezuela	546	1,306	+139%
⑯ Cuba	1,705	1,239	-27%
⑰ Guyana	126	975	+674%
⑱ Trinidad and Tobago	640	971	+52%
⑲ Chile	1,133	877	-23%
⑳ Uruguay	612	849	+39%
㉑ Nicaragua	410	834	+103%
Remainder	1,965	3,497	+78%

AFRICA

	2000	2020	CHANGE
Africa	2,777	6,119	+120%
① Ghana	151	855	+466%
② Nigeria	447	836	+87%
③ South Africa	566	830	+47%
Remainder	1,613	3,598	+123%

ASIA

	2000	2020	CHANGE
Asia	24,020	38,279	+59%
① India	5,556	13,274	+139%
② China	4,224	7,571	+79%
③ Philippines	2,089	2,826	+35%
④ Pakistan	1,149	2,062	+79%
⑤ Korea	1,438	1,821	+27%
⑥ Vietnam	1,047	1,547	+48%
⑦ Japan	1,825	1,469	-20%
⑧ Bangladesh	637	1,061	+67%
⑨ Iran	560	821	+47%
Remainder	5,495	5,827	+6%

EUROPE

	2000	2020	CHANGE
Europe	46,778	40,933	-12%
① United Kingdom	6,511	7,352	+13%
② Poland	5,544	4,776	-14%
③ Italy	7,474	4,582	-39%
④ Portugal	4,979	3,072	-38%
⑤ Russia	1,655	2,711	+64%
⑥ Greece	2,128	2,323	+9%
⑦ Germany	3,992	2,176	-45%
⑧ Ukraine	1,048	2,078	+98%
⑨ France	1,295	1,434	+11%
⑩ Ireland	1,704	1,193	-30%
⑪ Spain	565	1,177	+108%
⑫ Romania	782	959	+23%
⑬ Hungary	1,425	902	-37%
⑭ Albania	666	808	+21%
Remainder	7,010	5,390	-23%

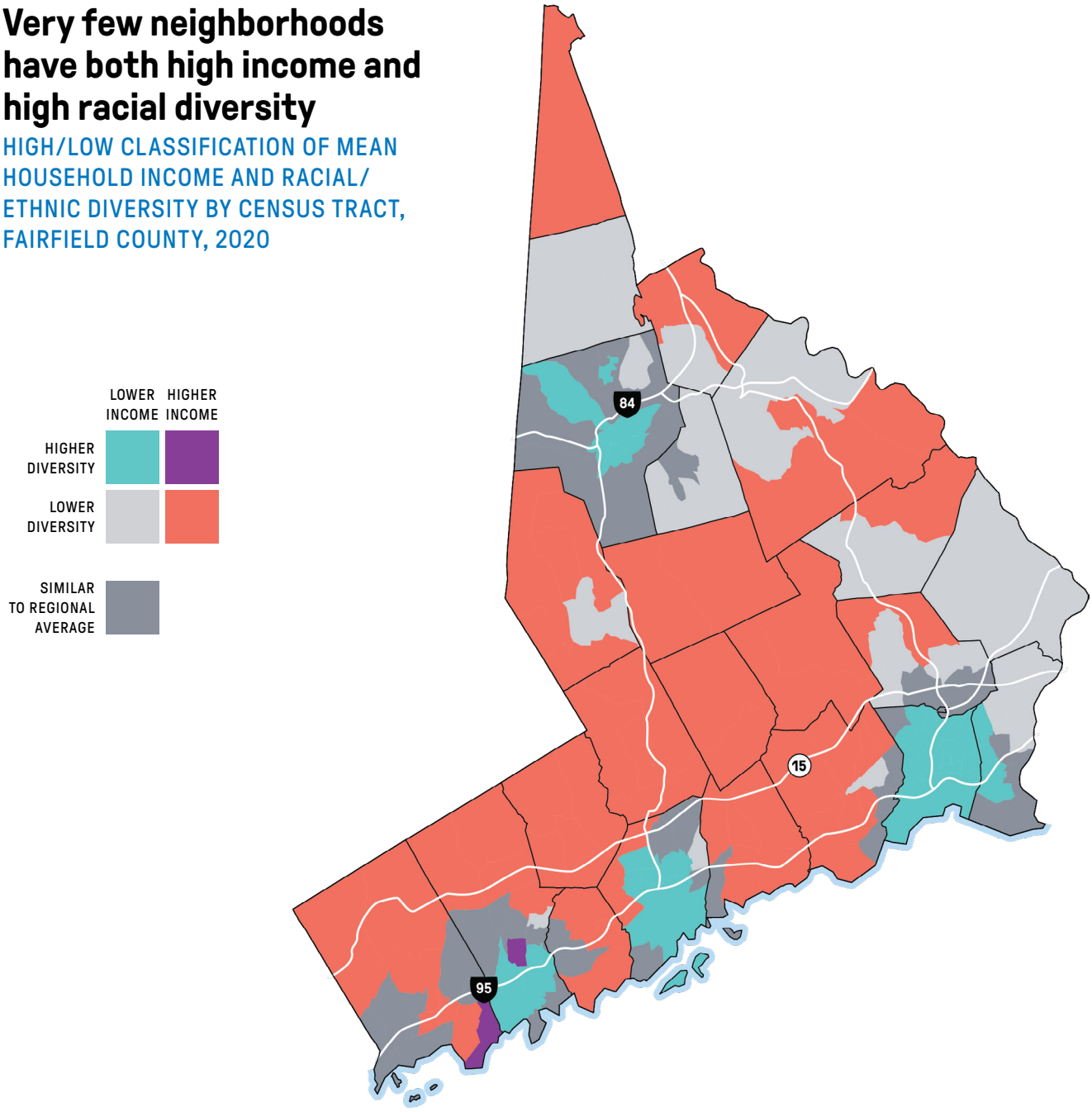
OTHER

	2000	2020	CHANGE
① Oceania	804	676	-16%

FIGURE 2F

Very few neighborhoods have both high income and high racial diversity

HIGH/LOW CLASSIFICATION OF MEAN HOUSEHOLD INCOME AND RACIAL/ ETHNIC DIVERSITY BY CENSUS TRACT, FAIRFIELD COUNTY, 2020



OVERALL CHARACTERISTICS OF NEIGHBORHOODS BY INCOME-DIVERSITY CLASSIFICATION, FAIRFIELD COUNTY, 2020

CLASSIFICATION	TOTAL POPULATION	AVG HOUSEHOLD INCOME	PERCENT WHITE	PERCENT BLACK	PERCENT LATINO	PERCENT ASIAN	PERCENT OTHER RACE
Lower income, lower diversity	155,202	$130,484	80%	3%	10%	5%	2%
Lower income, higher diversity	340,592	$87,599	30%	23%	38%	6%	3%
Higher income, lower diversity	259,223	$270,951	85%	2%	6%	4%	3%
Higher income, higher diversity	9,831	$268,129	75%	1%	11%	7%	4%
Similar to regional avg	179,459	$159,324	68%	7%	15%	7%	4%

FOCUS: SEGREGATION

Segregation is a major force in determining where people live, who they come in contact with, where they go to school, and what resources are available to them, but can be hard to define and measure.[6,7,8] Measurements of segregation can describe regional patterns or local ones;[9] they can focus on how much one group fits in with others, or how multiple groups integrate together;[10] they can mean different things in different contexts.[11]

The dynamics of segregation are complex,[12] but the processes and policies that create it are often detrimental.[13,14] The long and wide-reaching history of segregation has left us with disparities in access to health care and jobs, quality of schools,[15] ease of transportation, and exposure to environmental hazards and violence.[16] There can also be benefits, such as strong social cohesion and community supports for members of minority or immigrant enclaves.[17]

Connecticut is highly segregated, particularly by race and income. Previous research by DataHaven found that Connecticut's concentrations of wealth and poverty rival some of the most segregated metro areas in the U.S.[18] Even as the state diversifies, inequality has become more pronounced.[19]

Segregation can lead to a lack of resources in some neighborhoods, but it can also mean advantaged groups miss out on the benefits of a more diverse community. The degree to which white residents are isolated from people of other backgrounds sets them apart from other racial groups: within Fairfield County, the average white person lives in a neighborhood[20] where 73 percent of their neighbors are also white. In contrast, the average Latino person lives in a neighborhood that is 35 percent Latino, and the average Black resident lives in a neighborhood that is 26 percent Black, giving them exposure to more racial diversity.[21] Similarly, higher-income people more often live near people of similar incomes, while people with lower incomes have neighbors of a wider variety of income levels.

One way to visualize segregation is to identify "hotspots" or "cold spots" by certain factors. An income hotspot occurs where neighborhoods adjacent to each other all have much higher median household incomes than the rest of the area. Likewise, a cold spot is a cluster of neighborhoods all with much lower incomes.[22]

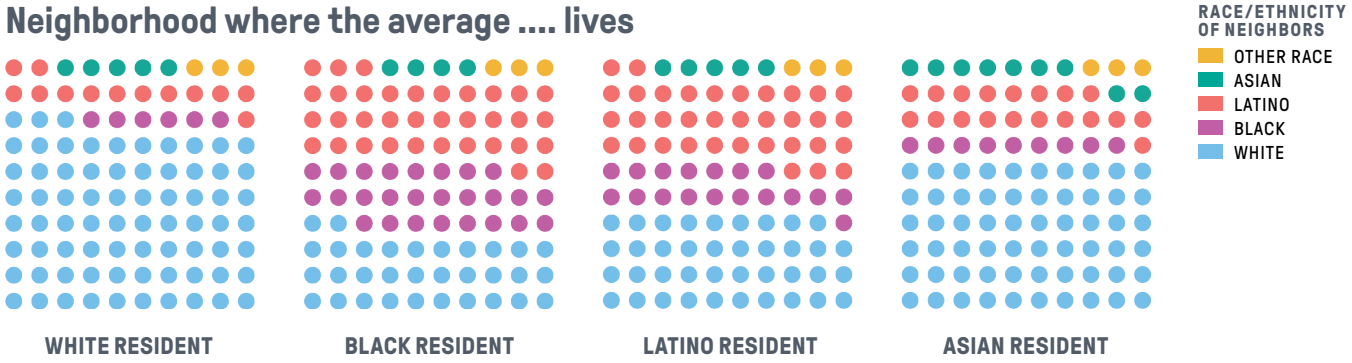
We calculated a diversity index to quantify the extent to which people living in an area are from different racial and ethnic groups. Much of Fairfield County consists of large clusters of very high incomes and very low racial diversity. Only 1 percent of the county's population lives in a neighborhood that is both high income and high diversity. Thirty-six percent live in neighborhoods that are low income and high diversity, many of which are concentrated in the region's larger cities, while 27 percent live in high income, low diversity areas.

No one number can fully capture the dynamics of our neighborhoods, but simplified views like this can help set up a framework for understanding the histories and patterns of many of the other issues we focus on in this document.

FIGURE 2G

Unlike other groups, white residents mostly live near other white people

AVERAGE RACIAL/ETHNIC MAKEUP OF A RESIDENT'S NEIGHBORS, FAIRFIELD COUNTY, 2020



CHAPTER 3

Economic Security

AT A GLANCE

- → Income inequality has increased in Fairfield County since 1980, as median incomes of higher-income towns increased more than median incomes of lower-income towns.
- → Poverty rates are higher for households with children, single-parent households, and female-led households. Single-parent households led by women under 25 have the highest poverty rates.
- → Connecticut saw an uptick in food insecurity over the past year, as pandemic relief programs ended and food prices surged. Food prices in Fairfield County exceed those in both the state and the nation.
- → Fairfield County has large income and race disparities in vehicle and internet access. Higher shares of Black and Latino households do not have access to a vehicle. While most households have broadband internet access, about 25 percent of households making less than $50,000 per year still lack a broadband connection.
- → Levels of debt in Fairfield County vary widely by race and ethnicity. While about 12 percent of adults in majority-white ZIP codes have some form of debt in collections, roughly 33 percent of adults in majority-Black and Latino ZIP codes do.

Economic Security and Well-Being

Being economically secure involves more than just having money; it requires having a stable income and the means to secure and maintain a job. Recent events—like the Great Recession and the COVID-19 pandemic—have exposed how fragile economic security has been for many families. At the same time, economic security is threatened by gradual social changes like rising prices and the replacement of full-time jobs by temporary ones.[23]

We begin in this chapter by tracing income inequality and segregation in Fairfield County. Then, we examine variations in poverty rates by family type, identifying segments of the population that are under greater economic duress. Next, we look at resources that pertain to economic security, including access to food, transportation, and broadband internet. As an increasing number of jobs require that employees work remotely, broadband internet and computer access have become more important for participation in the workforce. Finally, we compare levels of wealth and debt by race and ethnicity, focusing on the implications of student debt for upward mobility.

The subject of economic security is particularly relevant to Fairfield County, where income inequality and energy, food, and housing costs have risen. DH

Income

Fairfield County had a median household income of $98,000 in 2020, about $18,000 higher than Connecticut and $33,000 higher than the U.S. overall. Since 1980, inflation-adjusted median household incomes in Fairfield County and Connecticut have grown about 27 percent. However, income segregation is growing: while median incomes in the wealthiest towns grew more than 60 percent, the median income in Bridgeport only increased 9 percent. Fairfield County now has the second-highest income inequality among all metropolitan areas in the country (SEE FIGURE 3A).[24]

Another way to look at income is in the aggregate, as the sum of household incomes. Income concentrations differ by race, ethnicity, and geography in ways that are important to economic development. For example, Bridgeport has the highest share of Black and Latino income of any town in Fairfield County: 39 percent of aggregate income among Black households and 22 percent of income among Latino households is earned by Bridgeport residents. DH

FIGURE 3A

Median incomes have risen steeply in higher-income towns

MEDIAN HOUSEHOLD INCOME IN 2020 DOLLARS, FAIRFIELD COUNTY, 1980–2020

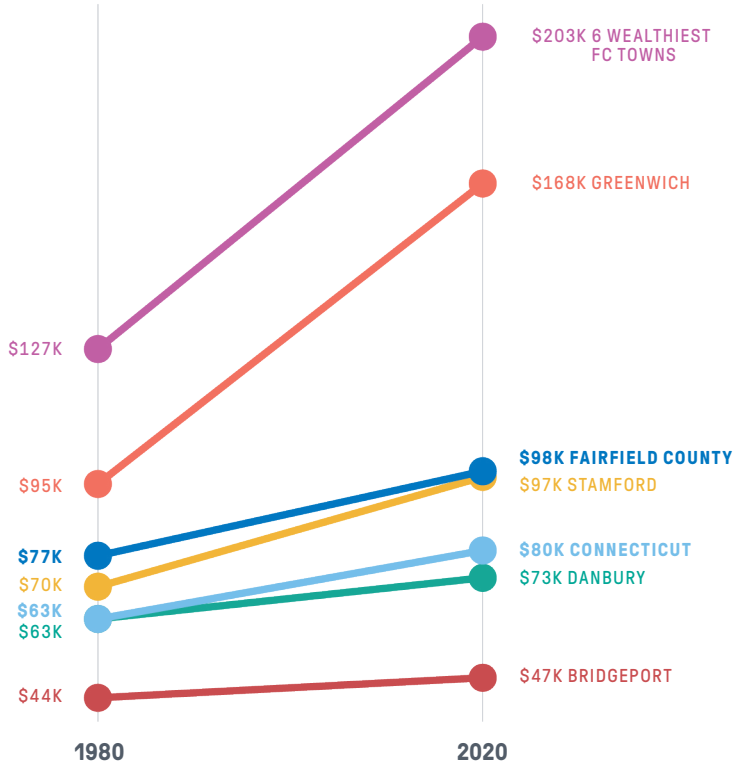
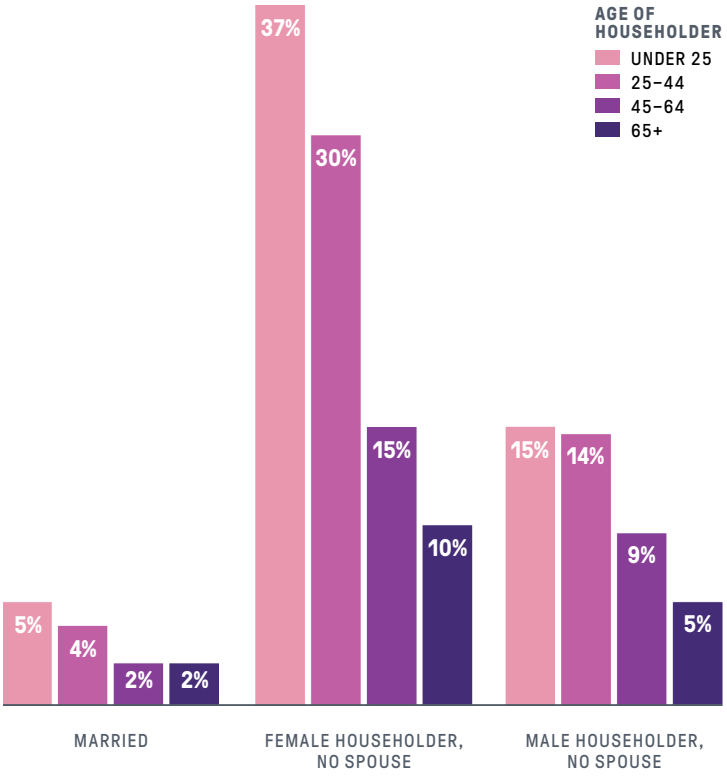


FIGURE 3B

Female householders under age 25 have the highest poverty rate

POVERTY RATE BY FAMILY TYPE AND AGE OF HOUSEHOLDER, FAIRFIELD COUNTY, 2020



Poverty

Fairfield County has a poverty rate of 9 percent, lower than the U.S. poverty rate of 13 percent.[25] The prevalence of poverty, however, varies widely among towns. Fairfield and Greenwich each have poverty rates of 5 percent. Bridgeport's poverty rate is over four times higher at 23 percent.

Poverty rates also vary considerably by family composition and demographic characteristics. In Fairfield County, both married couples with children and single parents are more likely to live in poverty. Children are also more likely to live in poverty than adults are. In the county overall, 13 percent of children under 6 years old lived in poverty in 2020. In Bridgeport, 38 percent of children in the same age group did. Among single-parent households, the poverty rate for female-led families is 27 percent while the poverty rate for male-led families is 17 percent. Finally, poverty rates are higher for younger householders. In Fairfield County, the poverty rate for householders under 25 is 27 percent, higher than the rate for householders ages 25–44 (10 percent) and householders over 44 (8 percent) (SEE TABLE 3A, FIGURE 3B). DH

TABLE 3A

Poverty and low-income rates

POVERTY AND LOW-INCOME (<200% FPL) RATES BY AGE GROUP, FAIRFIELD COUNTY, 2020

	POVERTY RATES				LOW-INCOME RATES			
LOCATION	ALL AGES	AGES 0–5	AGES 0–17	AGES 65+	ALL AGES	AGES 0–5	AGES 0–17	AGES 65+
US	13%	19%	17%	9%	30%	41%	39%	27%
CT	10%	14%	13%	7%	22%	31%	29%	21%
FC	9%	13%	12%	7%	21%	27%	26%	19%
Bridgeport	23%	38%	34%	17%	45%	65%	61%	40%
Danbury	11%	14%	16%	8%	27%	39%	41%	22%
Fairfield	5%	3%	3%	4%	13%	8%	12%	14%
Greenwich	5%	4%	6%	5%	13%	11%	14%	12%
Norwalk	9%	10%	11%	9%	22%	29%	32%	21%
Stamford	9%	11%	14%	8%	24%	32%	34%	25%
Stratford	7%	9%	10%	7%	18%	25%	27%	19%
6 wealthiest FC towns	3%	2%	2%	3%	7%	4%	7%	9%
All other FC towns	4%	4%	5%	4%	11%	10%	12%	13%

Food Security

In 2022, a higher share of Connecticut residents reported experiencing food insecurity—not having enough money to buy food for themselves or their families—compared to 2021.[26] This uptick, reflecting the diminishing of pandemic relief programs, was higher for Black and Latino adults and for adults who have children at home (SEE FIGURE 3C). Additional data on food insecurity are available for the region and each town in our town equity reports, available at ctdatahaven.org/reports/connecticut-town-equity-reports.

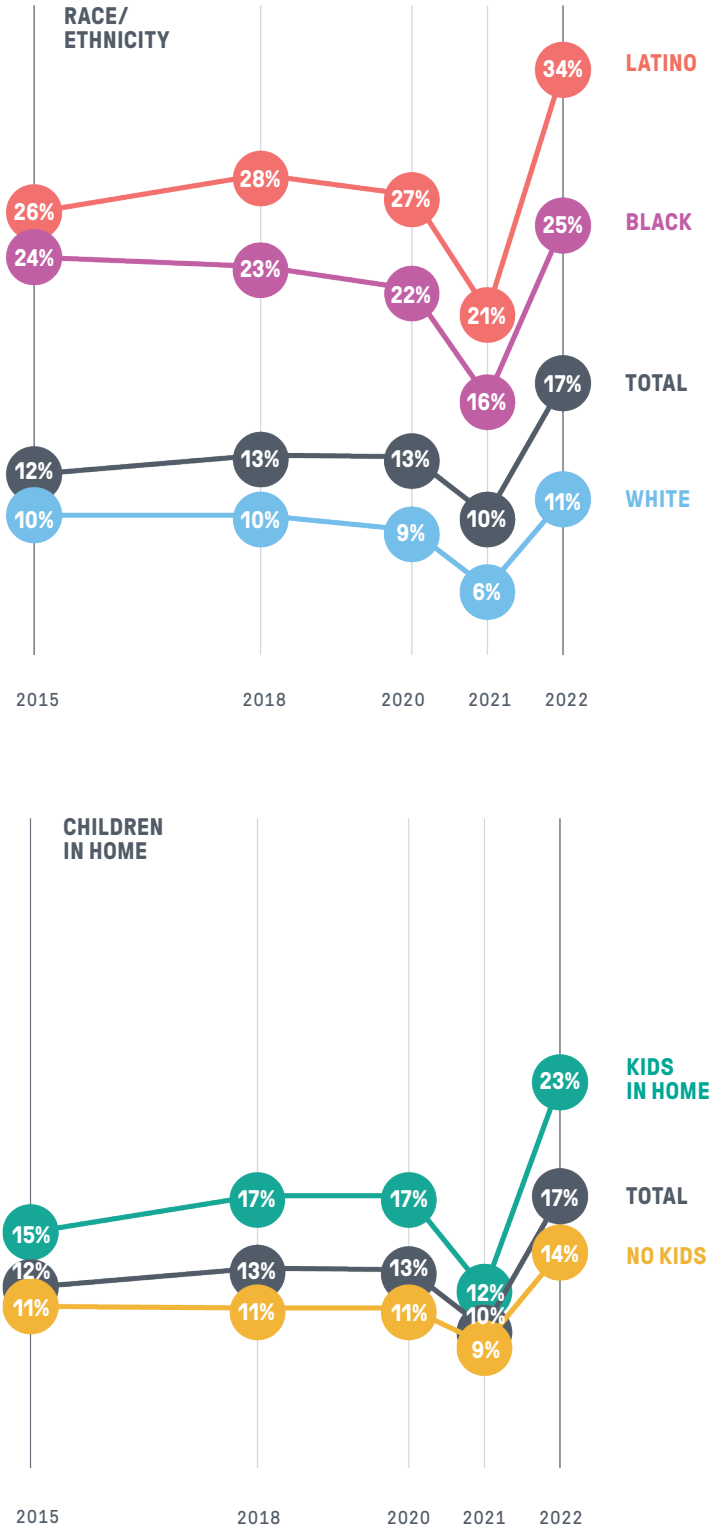
Food insecurity may continue to increase if inflation drives up living costs. Between August 2021 and August 2022, the rate of food-cost inflation outpaced overall inflation. While the consumer price index increased 8.3 percent over that period, overall food costs increased 11.4 percent and the cost of groceries increased 13.5 percent.[27] Even before these recent rises, prices in Connecticut were higher than the national average. While the average cost of a meal in the U.S. was $3.25 in 2020, the average cost of a meal was higher in Fairfield County at $4.20.[28]

Persons who experience food insecurity are two to three times more likely to have diabetes. As a result of food policies and other structural factors, healthy food options that are lower in saturated fats, sugar, and sodium often cost more and are more difficult for families to access.[29] DH

FIGURE 3C

As pandemic relief programs fade, Black and Latino adults and adults who live with children are hit hard by food insecurity

SHARE OF ADULTS REPORTING FOOD INSECURITY BY RACE/ETHNICITY AND PRESENCE OF CHILDREN, CONNECTICUT, 2015–2022



Transportation

Many Fairfield County residents lack adequate access to transportation. According to the 2021 DataHaven Community Wellbeing Survey, 12 percent of residents in the county stayed home in the last year because they did not have reliable transportation. The rate of transportation insecurity was about twice as high for those who did not attend college and more than twice as high for adults making less than $30,000 per year.[30] According to Census data, vehicle availability varies by race and ethnicity and by the number of workers in the home. Among households with at least one working-age member but without any employed members, Black and Latino households were significantly more likely to have no access to a vehicle compared to white households. Only 15 percent of white households in this group lacked vehicle access. In many parts of Fairfield County, having access to a vehicle is needed to find and keep a job. Racial disparities in access to a vehicle may therefore exacerbate racial disparities in employment rates and income levels (SEE TABLE 3B, FIGURE 3D). DH

Internet Access

Broadband internet access enhances families' employment and educational opportunities and connects them to their communities. Although broadband access has increased over the past several years, it still varies by income. Among households in Fairfield County that earn less than $50,000 per year, 25 percent—or 24,000 households—still do not have access to broadband internet. Meanwhile, only 4 percent of households making more than $50,000 do not have internet access. Given employers' continuing expectations that workers can work from home, internet access will only become more vital to workforce participation in the future (SEE TABLE 3C). DH

FIGURE 3D

Higher shares of Black and Latino households do not have access to a vehicle

SHARE OF HOUSEHOLDS WITHOUT VEHICLE ACCESS BY NUMBER OF WORKERS AND RACE/ETHNICITY OF HEAD OF HOUSEHOLD, FAIRFIELD COUNTY, 2020

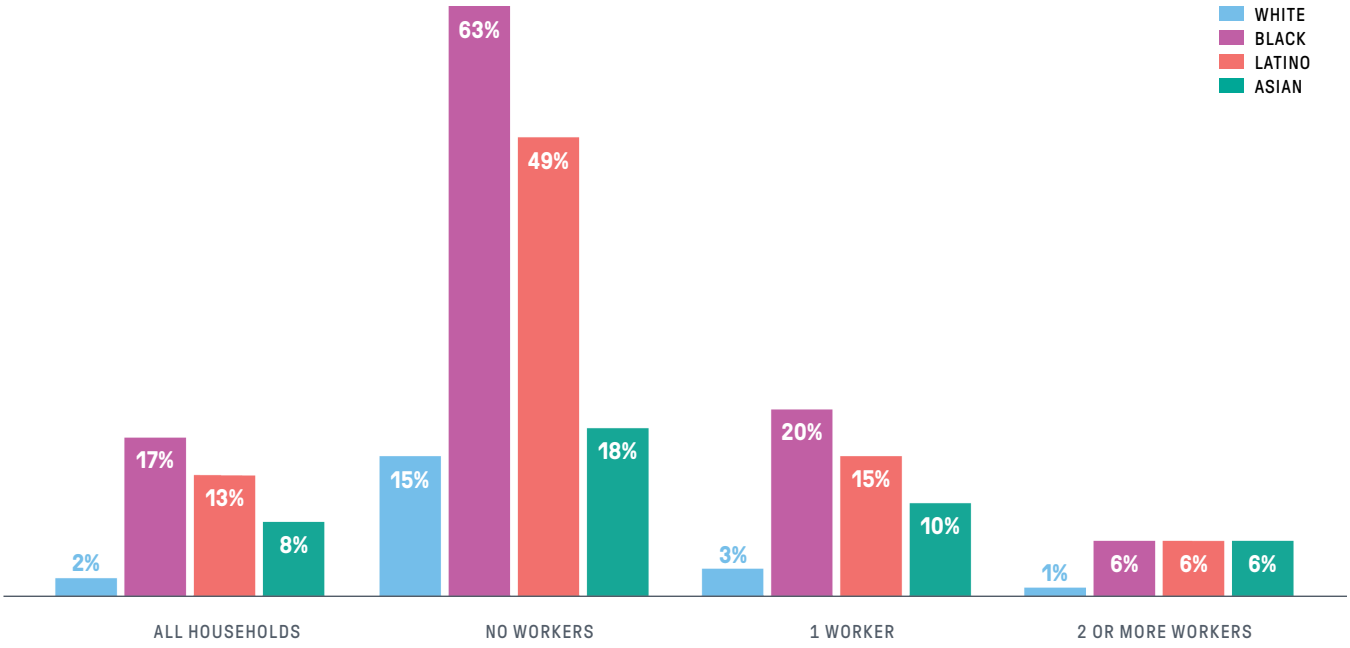


TABLE 3B

Financial security

SHARE OF ADULTS, FAIRFIELD COUNTY, 2021

LOCATION	JUST GETTING BY	NEGATIVE NET WORTH	FOOD INSECURE	TRANSPORTATION INSECURE	LIMITED CAR ACCESS
Connecticut	26%	14%	11%	13%	10%
Fairfield County	28%	13%	12%	12%	9%
BY DEMOGRAPHIC WITHIN FAIRFIELD COUNTY					
Male	23%	9%	8%	10%	7%
Female	31%	16%	15%	13%	10%
Ages 18-34	35%	16%	20%	22%	12%
Ages 35-49	30%	15%	11%	8%	7%
Ages 50-64	29%	14%	11%	9%	7%
Ages 65+	17%	6%	4%	7%	10%
White	22%	10%	7%	8%	5%
Black	50%	29%	23%	19%	18%
Latino	41%	13%	23%	18%	14%
<$30K	58%	27%	32%	31%	26%
$30K-$100K	36%	15%	14%	12%	6%
$100K+	10%	6%	3%	3%	2%
Kids in home	31%	16%	14%	10%	6%
No kids	26%	11%	10%	13%	10%

TABLE 3C

Internet access

BROADBAND INTERNET ACCESS AT HOME BY HOUSEHOLD INCOME, FAIRFIELD COUNTY, 2020

	ALL HOUSEHOLDS		UNDER $50K		$50K OR MORE	
LOCATION	% WITHOUT BROADBAND	HOUSEHOLDS WITHOUT BROADBAND	% WITHOUT BROADBAND	HOUSEHOLDS WITHOUT BROADBAND	% WITHOUT BROADBAND	HOUSEHOLDS WITHOUT BROADBAND
United States	15%	18M	28%	13M	7%	5M
Connecticut	13%	176K	28%	123K	6%	53K
Fairfield County	10%	35K	25%	24K	4%	11K
Bridgeport	19%	10K	27%	7K	9%	2K
Danbury	13%	4K	31%	3K	4%	1K
Fairfield	6%	1K	16%	1K	3%	1K
Greenwich	5%	1K	17%	1K	3%	1K
Norwalk	9%	3K	24%	2K	3%	1K
Stamford	10%	5K	23%	3K	4%	2K
Stratford	15%	3K	32%	2K	9%	1K
6 wealthiest FC towns	5%	2K	19%	1K	2%	1K
All other FC towns	8%	6K	25%	4K	4%	2K

Wealth

Wealth allows families to live healthy and prosperous lives and provides a safety net against unemployment and unforeseen calamities. Home values, the largest source of wealth in the U.S., give some insight into wealth differences among families, as home equity is a key driver of racial wealth disparities.[31] In 2019, the median wealth of white households was about eight times greater than that of Black households and almost five times greater than that of Latino households.[32]

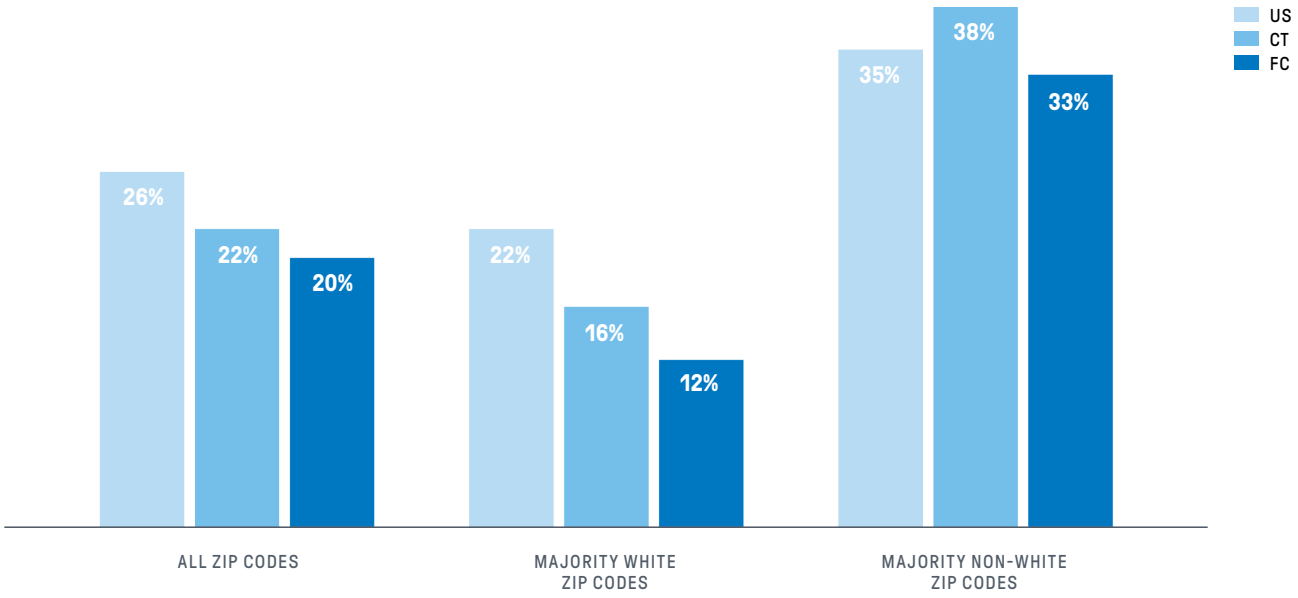
The median home value among white homeowners in Fairfield County was $550,000, while median home values among Black and Latino householders were $385,000 and $400,000, respectively. Moreover, studies have shown that white-owned homes appreciate at a higher rate than Black- and Latino-owned homes, a phenomenon related to biases among appraisers and white homebuyers against Black and Latino neighborhoods.[33,34]

Debt restricts families' ability to build wealth and is disproportionately concentrated in Black and Latino communities. In Fairfield County, 33 percent of adults who live in majority-Black and Latino ZIP codes have debt held by a collections agency.[35] In majority-white ZIP codes, on the other hand, only 12 percent of adults have debt in collections. The racial debt gap in the U.S. is smaller but still significant: 35 percent of adults living in majority-Black and Latino ZIP codes and 22 percent of adults living in majority-white ZIP codes have debt. Student loan debt is more prevalent in majority-Black and Latino ZIP codes. In Fairfield County, 9 percent of adults in majority-Black and Latino ZIP codes have student loan debt, while 4 percent of adults in majority-white ZIP codes do. These data support the rationale behind debt-relief proposals at the federal level, as forgiving this debt may reduce racial wealth gaps in the long term. In addition to having greater prevalence of debt, Black and Latino regions also have higher rates of default on loans. Delinquent debt can negatively affect a person's credit score, which further limits the ability to acquire mortgages, small business loans, or other lines of credit. In Fairfield County, 5 percent of adults in majority-Black and Latino ZIP codes and 1 percent of adults in majority-white ZIP codes have delinquent credit card debt (SEE FIGURE 3E). DH

FIGURE 3E

Residents of majority non-white neighborhoods are more likely to have debt in collections

SHARE OF RESIDENTS WITH DEBT IN COLLECTIONS BY MAJORITY RACE/ETHNICITY OF ZIP CODE, 2021



CHAPTER 4

Housing

AT A GLANCE

- → The homeownership rate in Fairfield County peaked in the mid-2000s and has declined since.
- → Gaps in homeownership rates by race and income remain large and may be expanding. In the county, the homeownership rate among white households (77 percent) was almost double that of Black (42 percent) and Latino (40 percent) households.
- → In Fairfield County in 2021, Black and Latino mortgage applicants were more than twice as likely as white applicants to have their applications rejected on the basis of either credit score or debt-to-income ratio. These differences are not accounted for by household incomes.
- → Home prices, rents, and evictions have spiked in recent months, following national trends. Rent for a typical apartment is 39 percent higher in Fairfield County than in Connecticut, while the median household income in Fairfield County is only 22 percent higher than the statewide median.
- → The supply of new housing is limited due to zoning laws and the low rate of housing construction.

Housing and Well-Being

For centuries, privileged groups have discriminated against low-income and minority residents in the arena of housing in the United States. White residents have used racial covenants, redlining, and zoning regulations to exclude Black and other people of color from high-quality housing and the resources available in neighborhoods where desirable homes tend to be located.[36] These resources include access to better education, a safe neighborhood, and higher paying jobs.[37]

Recognizing the profound relationship between housing and well-being, we focus in this chapter on several aspects of housing access and affordability. First, we contextualize trends in homeownership and outline the factors that contribute to racial and income disparities in homeownership and home values. Turning to housing affordability, we discuss the recent spike in the cost of housing and some consequences of rising rents. Finally, we address the declining rate of housing construction and the housing supply shortage.

Many of the problems pertaining to housing in Connecticut are amplified in Fairfield County, where there is a higher level of income and wealth inequality and a shortage of affordable homes. Homeowners' efforts to prevent the construction of affordable housing through zoning ordinances and historical preservation laws worsen these issues.[38] DH

Homeownership

American families accumulate wealth primarily through homeownership, and housing accounts for over 40 percent of all household wealth in the United States.[39] Homeownership can have economically harmful consequences—many families went into foreclosure after the housing market collapse of 2008—but it generally facilitates upward mobility.[40] In addition to building savings through mortgage payments, owning a home qualifies homeowners for tax benefits, such as the ability to deduct mortgage insurance payments. In 2017, U.S. homeowners saved a total of $71 billion through such deductions.[41]

The U.S. government has used a range of policy measures to expand homeownership access to more American families. These have included keeping mortgage interest rates low and backing third-party loans through government-sponsored entities. As a result, the homeownership rate in the United States steadily increased from 1990 until the mid-2000s.[42] Since then, however, the homeownership rate has declined. Between 2010 and 2020, homeownership in Fairfield County fell from 71 to 67 percent, due in part to stricter mortgage lending requirements, stagnant incomes, and increased debt, especially from student loans (SEE TABLE 4A).[43]

This trend has widened already large homeownership gaps in Fairfield County. While the homeownership rate in Norwalk fell from 66 to 57 percent between 2010 and 2020, the homeownership rate in the six wealthiest towns in Fairfield County stayed the same, at about 86 percent. In Weston, one of the wealthiest towns in the county, the homeownership rate increased from 94 to 98 percent (SEE TABLE 4A).

Homeownership rates in Fairfield County vary by race, ethnicity, and income. The rate among white households (77 percent) is about double that of Black (42 percent) and Latino (40 percent) households, and the rate among households in the bottom 20 percent of the county's income distribution (37 percent) is less than half that of households in the top 20 percent (90 percent) (SEE TABLE 4A, FIGURE 4C).

The towns in Fairfield County vary widely by average home value, with towns closest to New York City boasting average property values above $1.5 million. Home values in the county also vary by the race and ethnicity of homeowners: white-owned homes are worth 43 percent more than Black-owned homes and 38 percent more than Latino-owned homes. These disparities are partly driven by biases among prospective homeowners and home appraisers (SEE FIGURE 4A, FIGURE 4F).[44,45]

Another reason for racial and income disparities in home values and homeownership is that mortgage applicants' debt levels and credit profiles vary along demographic lines. In Fairfield County in 2021, Black and Latino applicants were more than twice as likely as white applicants to have their applications rejected on the basis of either credit score or debt-to-income ratio. These differences are not accounted for by household incomes: 9 percent of white applicants with annual household incomes below $70,000 had their mortgage applications denied, compared to 16 percent of Black applicants and 15 percent of Latino applicants in the same income group. Similar disparities are seen across all income groups. Among those making more than $120,000 per year, white applicants had a rejection rate of 3 percent, while Black and Latino applicants had rejection rates of 9 percent and 5 percent, respectively (SEE FIGURE 4B). DH

FIGURE 4A

Housing values vary substantially by race

MEDIAN HOUSING VALUE BY RACE/ETHNICITY OF HEAD OF HOUSEHOLD, FAIRFIELD COUNTY, 2020

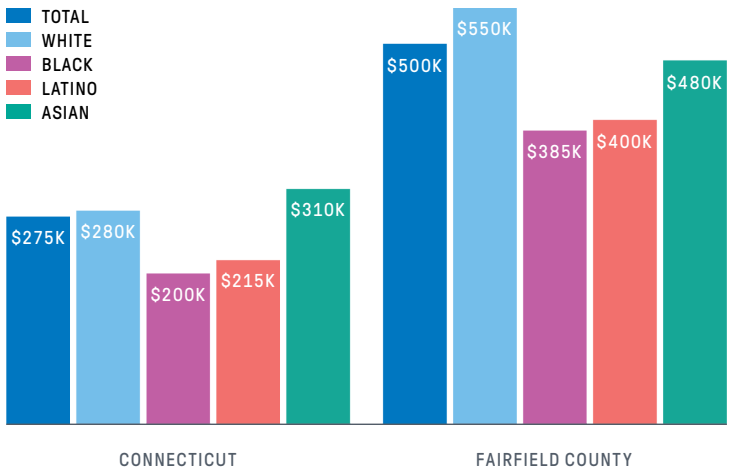


TABLE 4A

Homeownership

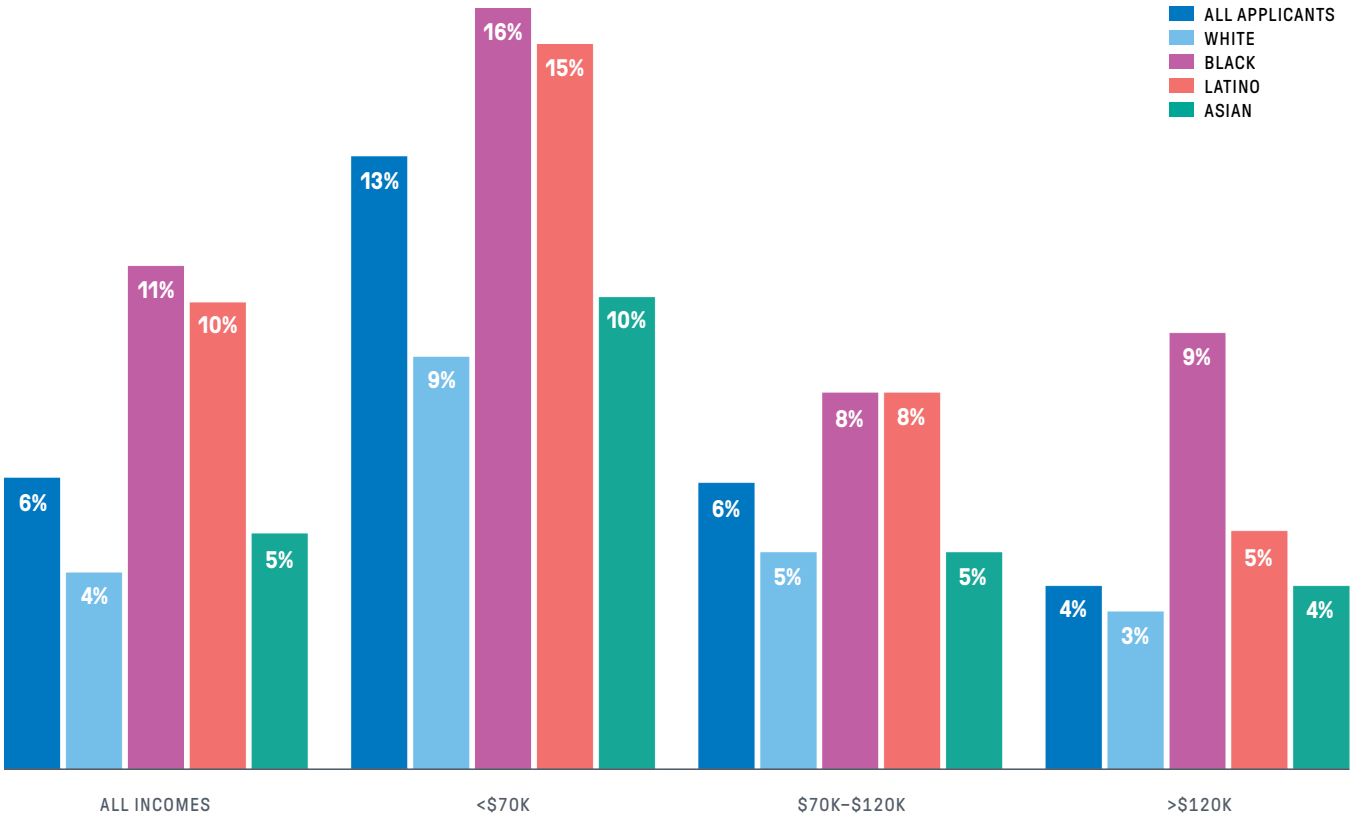
HOMEOWNERSHIP RATE, TOTAL AND BY RACE/ETHNICITY OF HEAD OF HOUSEHOLD, FAIRFIELD COUNTY, 2010–2020

	TOTAL		WHITE		BLACK		LATINO		ASIAN	
LOCATION	2010	2020	2010	2020	2010	2020	2010	2020	2010	2020
United States	67%	64%	74%	72%	46%	42%	49%	49%	59%	60%
Connecticut	69%	66%	77%	76%	41%	40%	35%	36%	56%	59%
Fairfield County	71%	67%	81%	77%	43%	42%	39%	40%	59%	65%
Bridgeport	45%	42%	62%	56%	42%	40%	33%	36%	47%	48%
Danbury	63%	57%	73%	68%	46%	38%	32%	33%	62%	63%
Fairfield	85%	83%	86%	84%	N/A	78%	72%	75%	87%	70%
Greenwich	73%	67%	79%	72%	N/A	N/A	32%	38%	47%	64%
Norwalk	66%	57%	77%	69%	40%	44%	43%	34%	50%	55%
Stamford	56%	50%	71%	62%	33%	29%	32%	29%	44%	54%
Stratford	82%	79%	86%	84%	64%	65%	69%	70%	86%	75%
6 wealthiest FC towns	87%	86%	88%	87%	N/A	N/A	65%	75%	84%	87%
All other FC towns	88%	85%	89%	87%	79%	59%	75%	68%	77%	82%

FIGURE 4B

Black and Latino mortgage applicants have higher rejection rates

REJECTED SHARE OF MORTGAGE APPLICATIONS BY INCOME AND RACE/ETHNICITY OF MAIN APPLICANT, FAIRFIELD COUNTY, 2021



Housing Affordability

Connecticut home prices have risen significantly since the start of the pandemic. Between 2020 and 2022, home prices increased by 32 percent in both Connecticut and Fairfield County, and 34 percent in the country overall.

People who have been priced out of the housing market have been unable to find refuge in the rental market. The cost to rent a typical apartment or house in Fairfield County increased 22 percent from June 2020 to June 2022.[46,47] Rents in Fairfield County are also higher than statewide rents. In January 2022, renters in Connecticut paid a rent of $1,800 for a typical apartment, while renters in Fairfield County paid $2,500.[48] Rent for a typical apartment is 39 percent higher in Fairfield County than in Connecticut, while the median household income in Fairfield County is only 22 percent higher than the statewide median (SEE TABLE 4B, FIGURE 4D).

One consequence of high rents is Fairfield County's share of housing cost-burdened renters exceeds that of the state. Fifty-two percent of renters in Fairfield County are cost-burdened, meaning they put more than 30 percent of their monthly income toward housing costs. In Connecticut, a slightly lower share (50 percent) of renters is cost-burdened. Shares of cost-burdened households also vary by race. While half of Black and Latino households in Fairfield County are cost-burdened, only a third of white households in the region are. Furthermore, fewer homeowners (31 percent) are cost-burdened compared with renters (52 percent). These differences are also evident among severely cost-burdened residents—those who spend more than half of their income on housing. For instance, 30 percent of Black and Latino renters are severely cost-burdened, while only 13 percent of white homeowners owners are (SEE FIGURE 4E, TABLE 4C).[49]

The 2021 DataHaven Community Wellbeing Survey found that a significant portion of Connecticut adults struggle with the high cost of housing. Nine percent of respondents in Connecticut and 10 percent of those in Fairfield County reported not having enough money to provide adequate shelter for themselves or their family. In 2015, only 6 percent of residents in Connecticut and Fairfield County had trouble paying for housing. Among Fairfield County adults making less than $30,000 per year, 20 percent reported difficulty paying for housing, up from 17 percent in 2015. In the 2022 survey, most adults in rural, suburban, and urban towns alike said that residents in their area did not have good opportunities to obtain satisfactory housing that they could afford.[50] DH

TABLE 4B

Average rent

AVERAGE MONTHLY RENT BY COUNTY, 2018–2022

LOCATION	JUN 2018	JUN 2020	JUN 2022
U.S.	$1,550	$1,629	$2,007
Fairfield County	$2,124	$2,223	$2,711
Hartford Metro Area	$1,328	$1,383	$1,656
New Haven County	$1,523	$1,615	$1,953

FIGURE 4C

Higher-income households are more likely to own their homes

HOMEOWNERSHIP RATE BY HOUSEHOLD INCOME QUINTILE, FAIRFIELD COUNTY, 2020

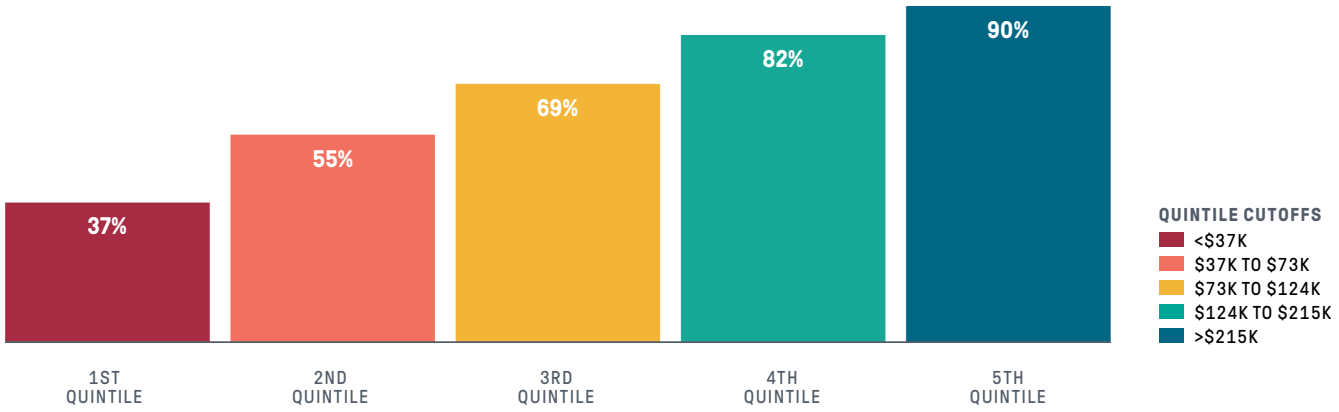


FIGURE 4D

Housing prices have surged since the start of the pandemic

PERCENT CHANGE IN AVERAGE HOME PRICES AND MONTHLY RENT BY COUNTY, 2018–2022

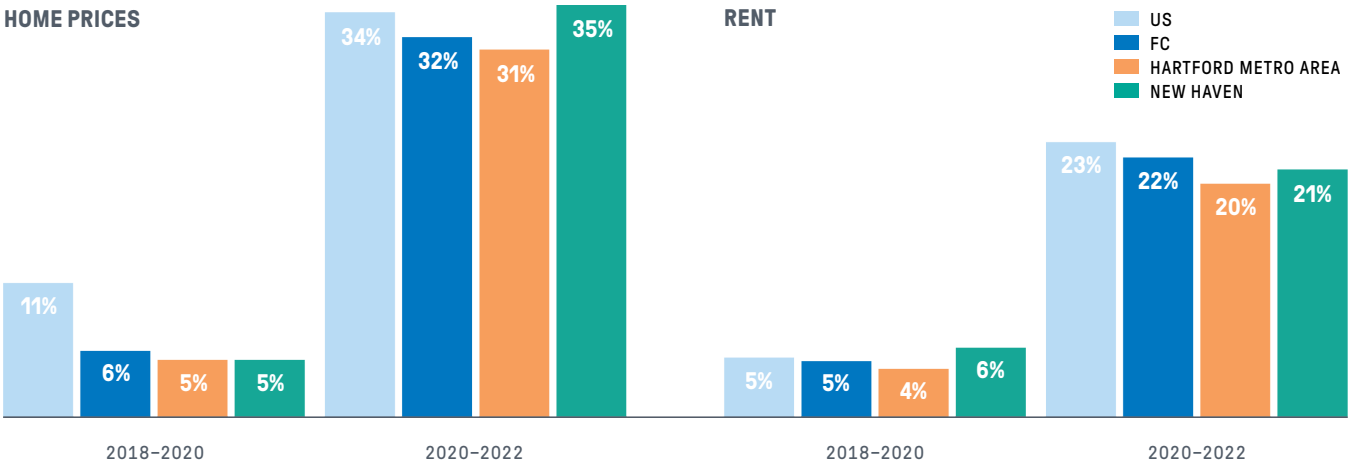


FIGURE 4E

High shares of Black and Latino renters are burdened by housing costs

COST-BURDEN RATES BY TENURE AND RACE/ETHNICITY OF HEAD OF HOUSEHOLD, FAIRFIELD COUNTY, 2020

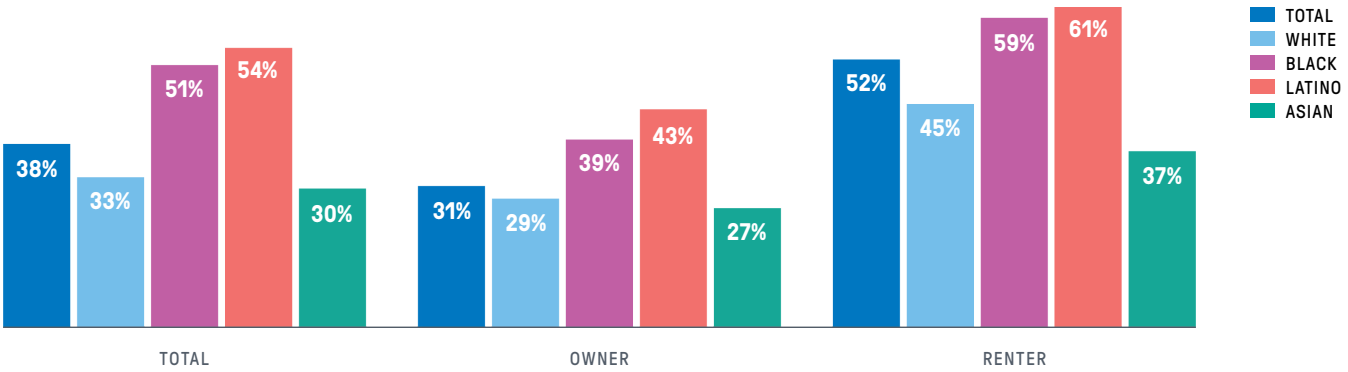
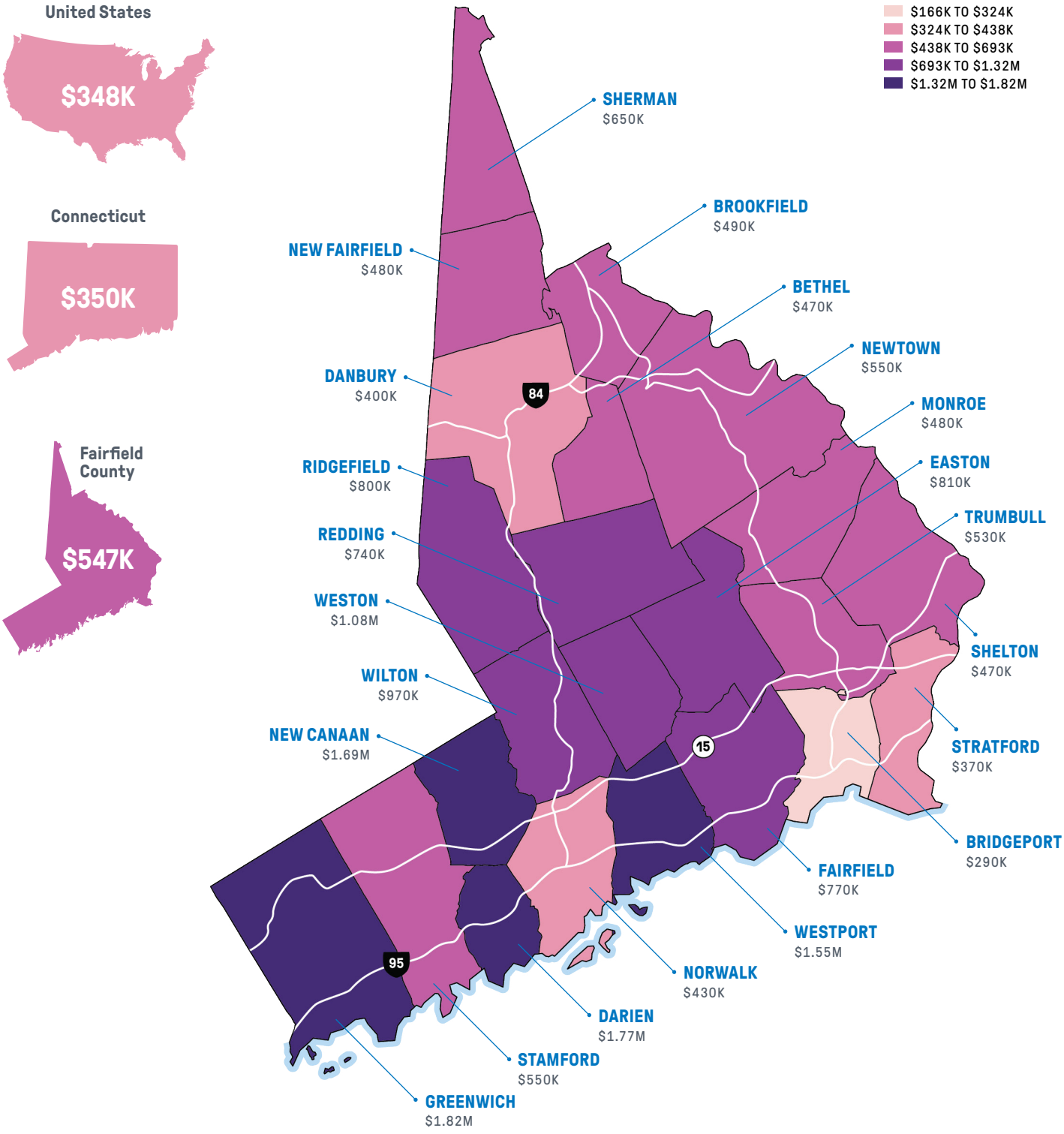


FIGURE 4F

Towns closer to New York City have the highest average housing values

AVERAGE HOUSING VALUES BY TOWN, 2022



Evictions

The inability of Connecticut residents to keep up with the cost of housing is reflected in the state's eviction rate. From March 2020 to August 2021, the federal government imposed a moratorium on evictions.[51] Since that moratorium was lifted, eviction filings have been rising. As of October 2022, the eviction filing rate was above pre-pandemic levels in many regions. According to data from the Eviction Lab, the number of eviction filings has increased more than two-fold in Connecticut and Fairfield County since the end of the moratorium.[52] Compared to the 2017 to 2019 pre-pandemic average for October, the number of filings from October 2022 was 24 percent higher. From January to October 2022, there were 4,004 eviction filings in Fairfield County, or 348 for every 10,000 renter households. By these measures, renters in Bridgeport were several times more likely to face eviction than renters in other parts of the county (SEE TABLE 4C, FIGURE 4G).

In late 2021, the DataHaven Community Wellbeing Survey found that 3 percent of Black and Latino women and 2 percent of Black and Latino men in Connecticut said that they would have to leave their home in the next 2 months because they were behind on their rent or mortgages, compared to 0.5 percent of white women and 0.5 percent of white men.[53] Recent research finds that the threat of displacement, including eviction notices, can cause harm to communities, meaning that eviction moratoriums on their own are not sufficient to protect the well-being of families and children.[54]

In addition to increasing evictions, Connecticut's affordable housing crisis has contributed to the state's recent rise in homelessness. Connecticut saw declining rates of homelessness every year between 2015 and 2021. That streak ended in 2022. According to one metric, homelessness increased 13 percent over the past year.[55] This uptick has been attributed to rising costs and the termination of pandemic relief programs.[56] DH

TABLE 4C

Severe cost burden and eviction

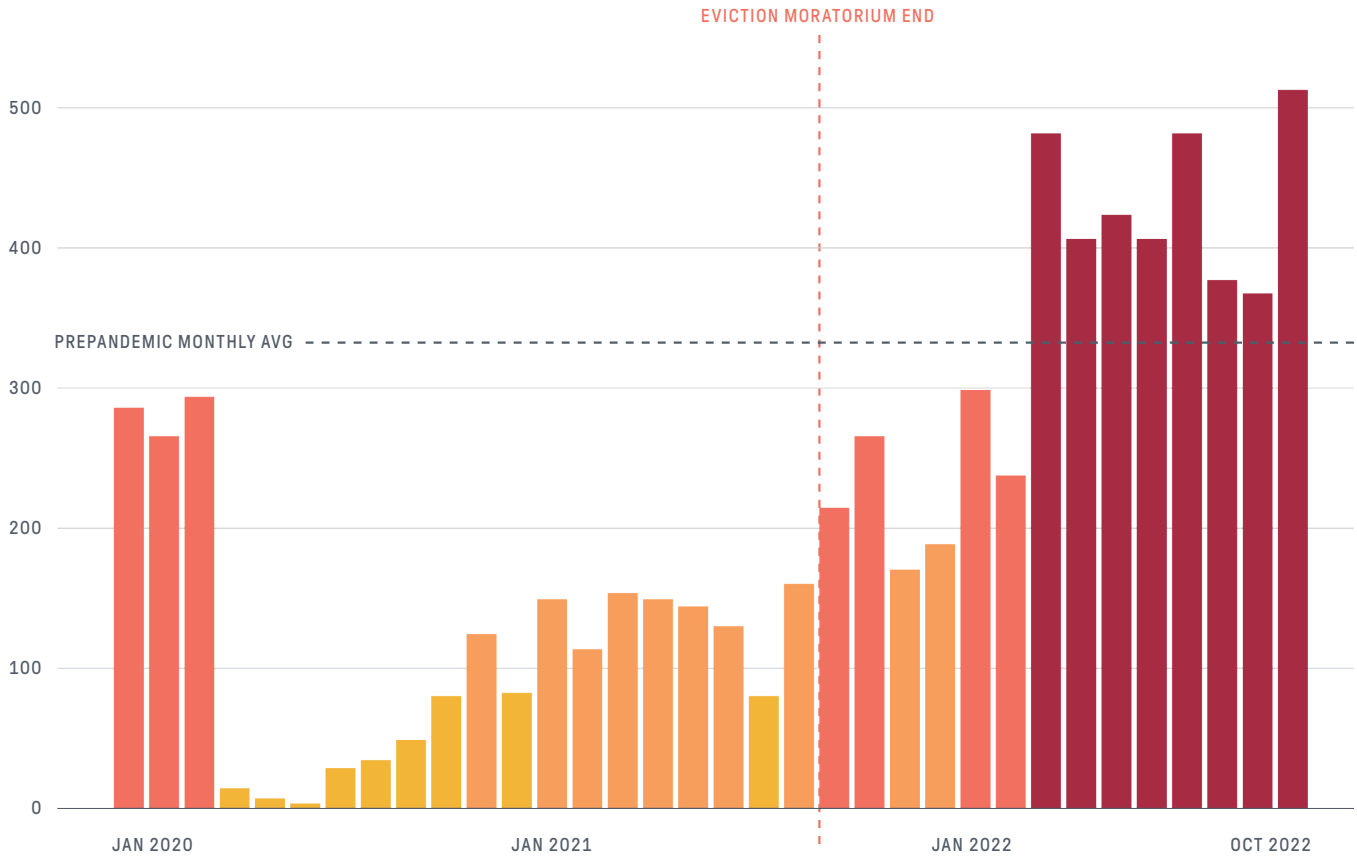
SEVERE COST BURDEN (2020) AND EVICTION FILINGS (JAN–OCT 2022) FOR RENTER HOUSEHOLDS

LOCATION	TOTAL HOUSEHOLDS	SEVERE COST BURDEN RATE	RENTER HOUSEHOLDS	RENTER SEVERE COST BURDEN RATE	SEVERELY BURDENED RENTER HOUSEHOLDS	TOTAL EVICTION FILINGS	EVICTION FILINGS PER 10K
Connecticut	1.4M	16%	470K	25%	116K	19,426	413
Fairfield County	345K	19%	115K	27%	31K	4,004	348
Bridgeport	52K	27%	30K	33%	10K	1,889	634
Danbury	31K	17%	13K	23%	3K	259	194
Fairfield	21K	16%	4K	24%	1K	62	169
Greenwich	22K	19%	7K	23%	2K	107	144
Norwalk	34K	20%	15K	24%	4K	392	266
Stamford	51K	21%	25K	27%	7K	768	303
Stratford	20K	16%	4K	31%	1K	159	376
6 wealthiest FC towns	43K	16%	6K	21%	1K	104	181
All other FC towns	71K	13%	11K	24%	3K	264	247

FIGURE 4G

Since the eviction moratorium was lifted, monthly filings have surpassed prepandemic levels

MONTHLY EVICTION FILINGS, FAIRFIELD COUNTY, JAN 2020 TO OCT 2022



Housing Supply

Another cause of rising housing costs has been the low rate of housing construction. Between 2006 and 2009, the average rate of construction permits issued each year in Fairfield County was 56 per 10,000 households. Between 2018 and 2021, that rate dropped to 48. The decline in the rate of construction over the past decade is a result of the housing market collapse in 2008, the Great Recession, the pandemic, the increased cost of materials needed to build housing, and zoning restrictions that limit the construction of affordable housing (SEE TABLE 4D).[57]

Although the overall construction rate in Fairfield County has declined, construction of multi-family housing has actually increased over the past several years. From 2006 to 2009, 24 multi-family housing construction permits per 10,000 households were issued each year on average. From 2018 to 2021, the rate increased to about 28 per 10,000 households. Multi-family housing construction in Fairfield County is concentrated in Stamford, where the number of permits grew from 60 to 70 per 10,000 households between 2006-09 and 2018-21 (SEE FIGURE 4H).

Housing supply constraints have had uneven effects on Fairfield County residents. In 2020, about 3 percent of all homes in the region were overcrowded, meaning that the number of occupants in a property exceeded the number of rooms. However, while only 1 percent of owner-occupied properties are overcrowded, 6 percent of rental properties are. Overcrowding also varies substantially by race. The rate of overcrowding among white residents is one-fifth that of Black residents (1 percent vs. 5 percent) and one-seventh that of Asian and Latino residents. DH

TABLE 4D

Housing construction

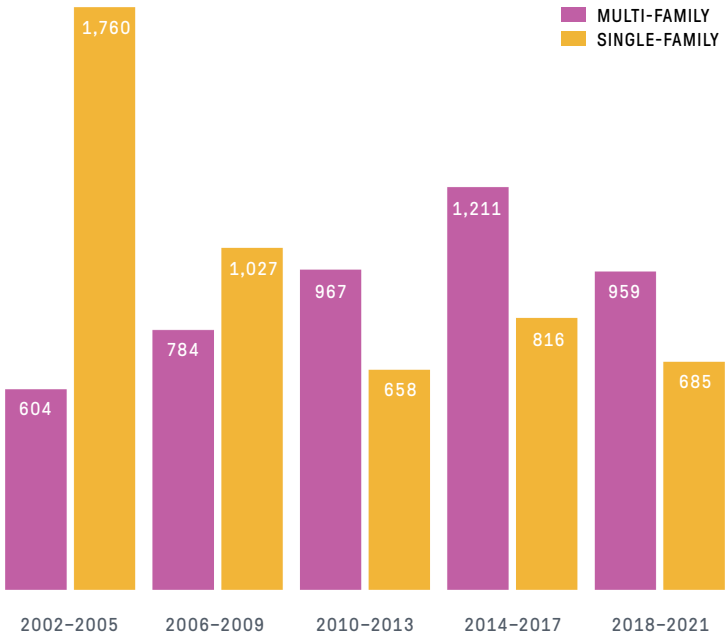
YEARLY AVERAGE HOUSING CONSTRUCTION PERMITS AND RATE PER 10,000 HOUSEHOLDS BY TYPE OF STRUCTURE, FAIRFIELD COUNTY, 2018–2021

	TOTAL		SINGLE FAMILY UNITS		MULTI-FAMILY UNITS	
LOCATION	PERMIT	RATE/10K	PERMIT	RATE/10K	PERMIT	RATE/10K
Connecticut	5,198	38	2,592	19	2,605	19
Fairfield County	1,644	48	685	20	959	28
Bridgeport	58	11	26	5	32	6
Danbury	123	40	82	26	41	13
Fairfield	137	65	46	22	91	43
Greenwich	125	56	100	45	26	11
Norwalk	123	36	19	6	104	30
Stamford	408	80	53	10	354	70
Stratford	52	26	13	6	40	20
6 wealthiest FC towns	236	55	136	32	100	24
All other FC towns	382	54	211	30	172	24

FIGURE 4H

Multi-family housing makes up a rising share of construction permits

YEARLY AVERAGE HOUSING CONSTRUCTION PERMITS BY TYPE OF STRUCTURE, FAIRFIELD COUNTY, 2002–2021



CHAPTER 5

Youth and Education

AT A GLANCE

- Fairfield County is home to an estimated 212,144 children under the age of 18, of whom 51,645 are under 5 years old. Like children statewide, nearly all children in Fairfield County live with one or both parents: 92 percent of the county's children live with their biological, adoptive, or step-parents, while 4 percent live with one or more grandparents. Seventy percent of children live in a married-couple family.[58]
- Childcare providers in the area only have enough licensed slots for 43 percent of the county's children from birth through age 4.
- In Fairfield County, 91 percent of the class of 2021 graduated within four years of starting high school. However, college enrollment and completion is much lower, and reveals deep inequities in access to higher education: Only 20 percent of graduating high school students in Bridgeport and 40 percent in Danbury earned a college degree within six years, versus 82 percent of students in districts representing the six wealthiest towns.
- Adults have positive views of youth opportunity in general, though concerns about youth experiencing substance use disorder are widespread.
- In the 2009–10 school year, 37 percent of students and only 9 percent of educators were people of color; in the 2021–22 school year, these figures were 52 percent and 12 percent, respectively.

Early Childhood

Just over 3,000 children attend preschool in a public school district in Fairfield County.[59] In addition to public preschools, many families rely on childcare programs in the area, but have long faced severe shortages and high costs. Difficulties in getting childcare received particular attention at the beginning of COVID-19 lockdowns, when schools throughout the state closed and many parents left the workforce to care for their children at home.[60]

Childcare providers in the area only have enough licensed slots for 43 percent of the county's children from birth through age 4. Coverage is much better for preschool-aged children (ages 3 and 4) than for infants and toddlers (under age 3): there are enough licensed slots for an estimated 71 percent of Fairfield County's preschoolers, versus only 23 percent of infants and toddlers.[61]

Coverage alone does not address other issues in obtaining childcare. The fact that slots exist in an area does not mean that seats are vacant, or that they are available when families need them. Childcare centers might not be located in the communities where they are needed the most, or might not be accessible by public transit or have transportation available. Costs can also be prohibitive: based on 2-1-1 listings, we estimate the median price charged for full-time childcare in Fairfield County is $366 per week for an infant or toddler and $300 per week for a preschool-aged child.[62] Many families use subsidized programs like Head Start or vouchers like Care 4 Kids to offset costs, or rely on family members to care for their children. DH

Public Education

Children in Fairfield County are served by 24 public school districts, including one regional district.[63] The Bridgeport and Stamford school districts together account for a quarter of the county's enrollment.

Throughout the state, the number of children—and with it, the number of students enrolled in public school districts—has steadily declined. Fairfield County districts enrolled a total of 137,701 students during the 2021–22 school year, about 7,000 fewer than in 2011–12. School enrollment also took a hit at the start of the COVID-19 pandemic when schools went online: Fairfield County districts had about 2,000 fewer students than would be expected from the downward trend alone in the most recent school year.[64]

Students are considered chronically absent if they miss 10 percent or more of the school days for which they are enrolled in a year. Chronic absenteeism rates were around 8 or 9 percent each year for the decade preceding COVID-19 lockdowns, but rose considerably with online and hybrid school modes. In the 2020–21 and 2021–22 school years, chronic absenteeism rates for the county's school districts were 14 and 18 percent, respectively (SEE FIGURE 5A).[65]

Schools canceled or waived the Smarter Balanced Assessment Consortium (SBAC) standardized testing during the pandemic closures. In the one school year of test scores available since the closures, 2021–22, scores are down several percentage points, with larger losses among students of color. Overall, 52 percent of third graders and 54 percent of eighth graders taking the English/Language Arts (ELA) test passed, scoring at or above grade-level goals. These are down from 58 percent and 61 percent, respectively, in the 2018–19 school year (SEE TABLE 5A, FIGURE 5B).[66]

High school graduation rates have remained high: 91 percent of the class of 2021 graduated within four years of starting high school, about the same as statewide. This continues a strong upward trend over the past decade. While graduation rates are still lower for Black and Latino students and students eligible for free or reduced-price meals (FRPM), those gaps are closing: Black, Latino, and FRPM students in Fairfield County's class of 2021 all had graduation rates of 82 percent, marking increases of 6, 12, and 13 percentage points, respectively, since 2011.[67] DH

TABLE 5A

K-12 achievement

SELECTED ACADEMIC AND DISCIPLINARY OUTCOMES BY DISTRICT, WITH FAIRFIELD COUNTY STUDENTS BY RACE/ETHNICITY, ELIGIBILITY FOR FREE/REDUCED PRICE MEALS (FRPM), SPECIAL EDUCATION (SPED), AND ENGLISH LANGUAGE LEARNER STATUS (ELL), 2020–21 AND 2021–22 SCHOOL YEARS

LOCATION	GRADE 3 SBAC ELA PASS RATE *	SUSPENSIONS PER 1K STUDENTS *	GRADUATION RATE †
Connecticut	46%	68	90%
Fairfield County	52%	45	91%
BY DEMOGRAPHIC WITHIN FAIRFIELD COUNTY			
White	70%	24	96%
Black	24%	117	82%
Latino	28%	60	82%
Asian	48%	13	96%
FRPM	26%	85	82%
Not FRPM	57%	25	96%
SPED	N/A	81	73%
Not SPED	N/A	38	94%
ELL	N/A	60	69%
Not ELL	N/A	44	92%
6 wealthiest FC	80%	15	97%
Bridgeport SD	18%	76	76%
Danbury SD	33%	87	82%
Fairfield SD	71%	14	97%
Greenwich SD	77%	15	96%
Norwalk SD	34%	59	88%
Stamford SD	38%	49	85%
Stratford SD	36%	86	93%
Trumbull SD	68%	18	97%
Westport SD	85%	12	97%

* 2021–22 school year † 2020–21 school year

FIGURE 5A

Since the start of the COVID-19 pandemic, chronic absenteeism has skyrocketed

SHARE OF STUDENTS CHRONICALLY ABSENT BY RACE/ETHNICITY AND ELIGIBILITY FOR FREE/REDUCED PRICE MEALS, FAIRFIELD COUNTY PUBLIC SCHOOLS, 2015–16 TO 2020–23 SCHOOL YEARS

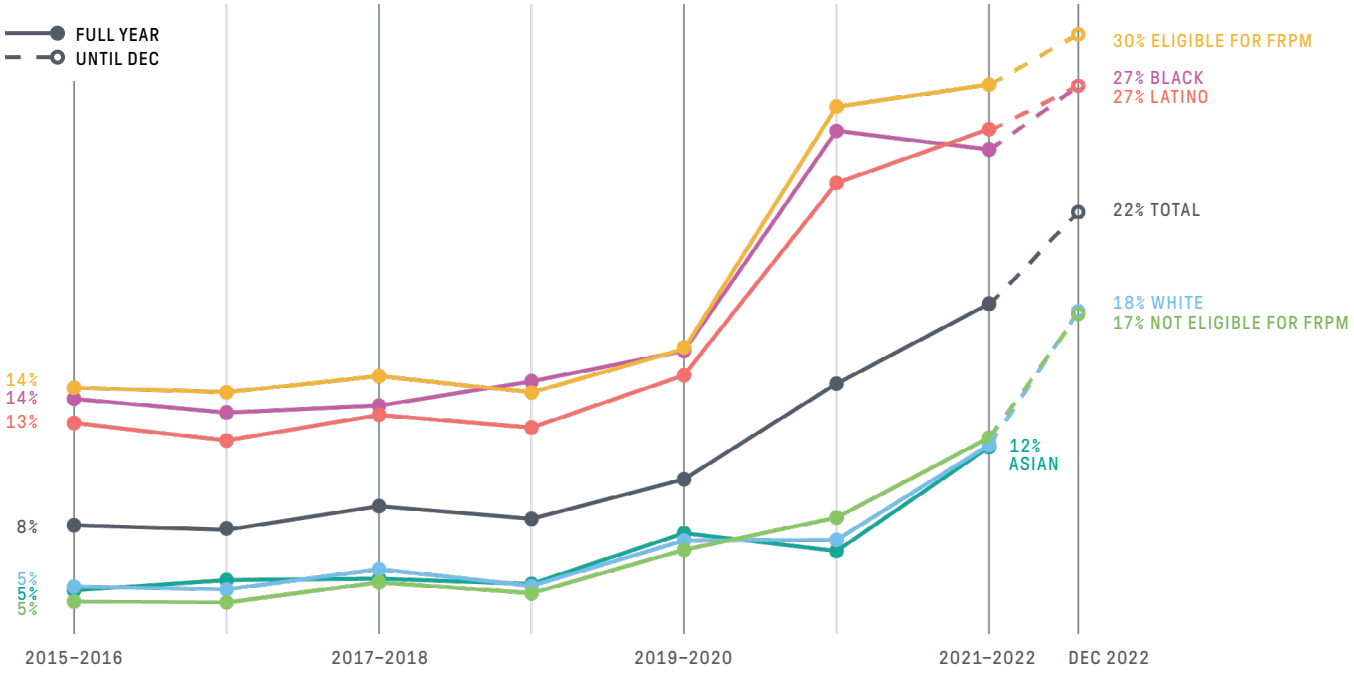
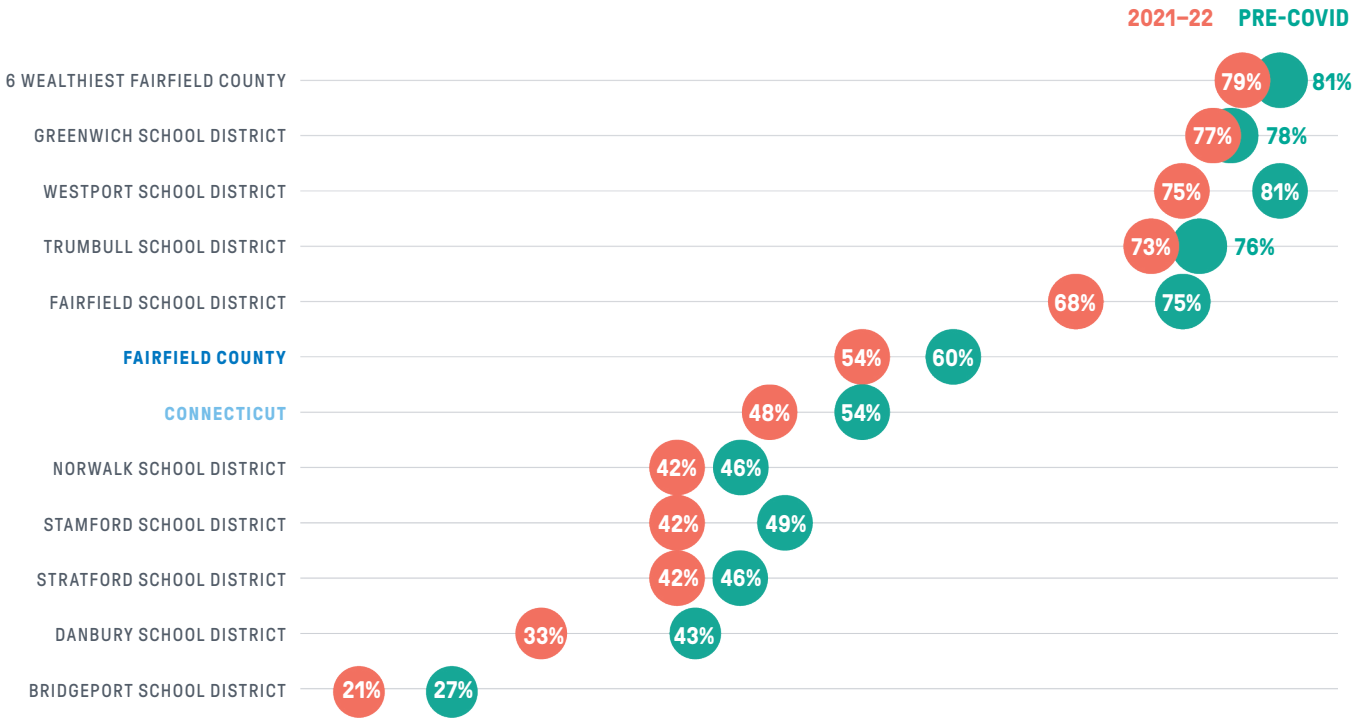


FIGURE 5B

Standardized test scores have dropped from pre-COVID averages

GRADE 8 ENGLISH/LANGUAGE ARTS SBAC PASS RATES, FAIRFIELD COUNTY BY DISTRICT, PRE-2020 AVERAGE VERSUS 2021–22 SCHOOL YEAR



Higher Education

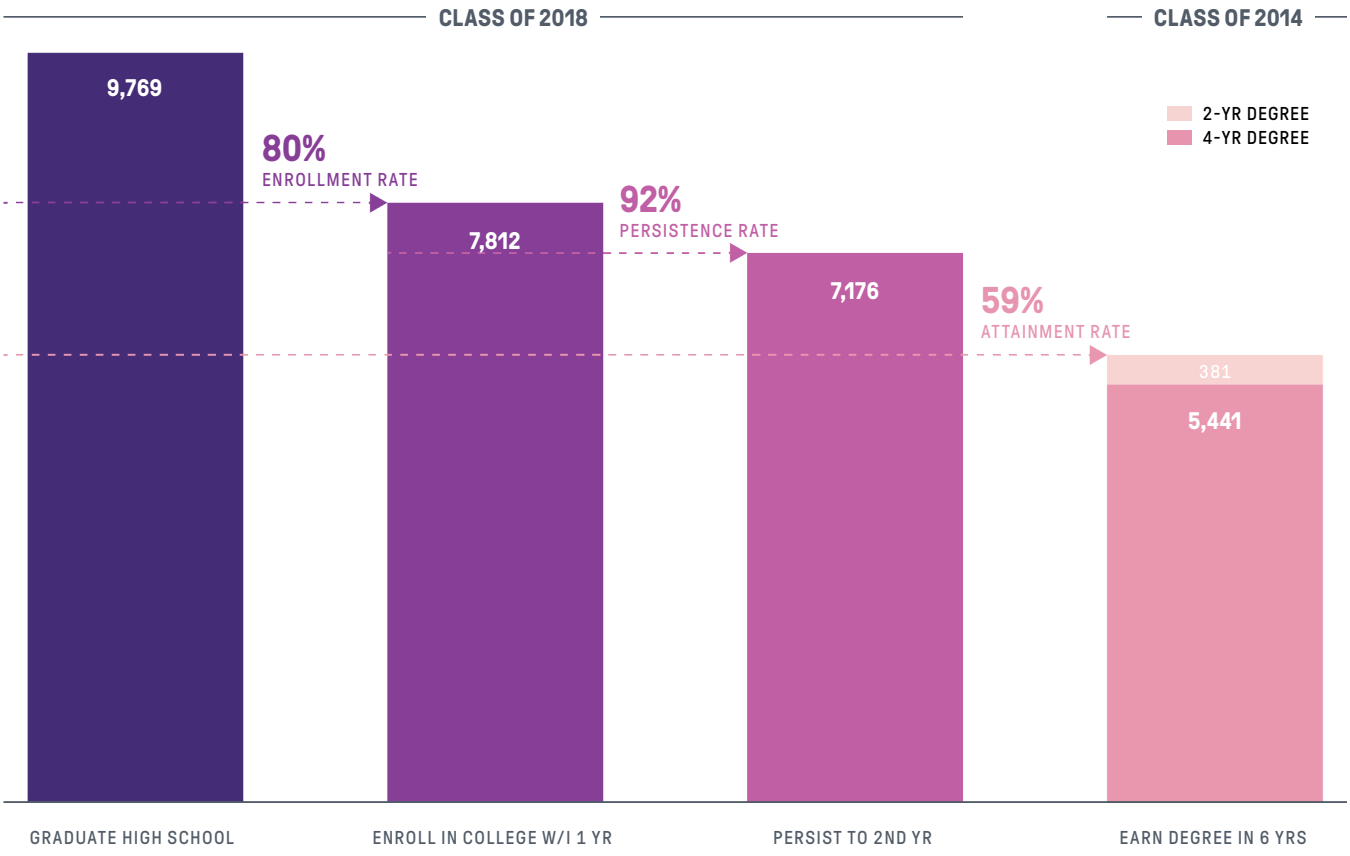
The majority of students in 11th and 12th grades throughout Connecticut are enrolled in at least one college and career readiness (CCR) course, including Advanced Placement and International Baccalaureate courses, technical education, enrollment in local colleges, and internships. Eighty-four percent of Connecticut upperclassmen had CCR experience in the 2021–22 school year, as did 87 percent of students in Fairfield County public schools. Early preparation for college and career can help close opportunity gaps in the region, but students in less-resourced districts like Bridgeport have much lower rates of CCR participation. Only 59 percent of Bridgeport upperclassmen were in CCR courses, compared to 93 percent of those in the six wealthiest towns.[68]

After graduating high school, about 80 percent of Fairfield County public school students enroll in a two- or four-year college for the following school year, and 92 percent of those students persist into a second consecutive year of higher education (SEE FIGURE 5C). However, there is considerable attrition. Six years after graduating high school, only 59 percent of the class of 2014 had earned a postsecondary degree. This percentage varies widely from town to town, though. Only 20 percent of graduating high school students in Bridgeport and 40 percent in Danbury earned a college degree within six years, versus 82 percent of students in districts representing the six wealthiest towns.[69] DH

FIGURE 5C

Six years after graduating high school, only 59 percent of Fairfield County public school students have a college degree

NUMBER AND PERCENTAGE OF STUDENTS ENROLLING IN, PERSISTING IN, AND GRADUATING FROM COLLEGE, FAIRFIELD COUNTY PUBLIC HIGH SCHOOL GRADUATES



Youth Opportunity

While growing up in a relatively high-income area like Fairfield County affords children many opportunities, access to them is not evenly distributed. To measure youth opportunity, the DataHaven Community Wellbeing Survey includes a series of questions asking adults to rate the odds that children in their neighborhood will succeed in different aspects of life. Generally, Fairfield County adults see good prospects for children: 97 percent rate it almost certain or very likely that young people will graduate high school, and 74 percent expect young people to be able to get jobs with opportunities for advancement. On the other end of the spectrum, 83 percent find it unlikely that young people will be in a gang, and 77 percent find it unlikely they will be arrested for a felony. Some of this optimism fades depending on race and ethnicity, education, and income, with lower-income adults less certain young people will find jobs with opportunities for advancement, and Black and lower-income adults less certain about young people avoiding gangs or felony arrests.[70]

However, on one measure, adults are split: 38 percent of Fairfield County adults and 43 percent statewide rate the chances of young people abusing drugs or alcohol as a tossup. This uncertainty persists across demographic groups, illustrating just how deeply risks of substance abuse permeate communities.[71]

In addition, the DataHaven Community Wellbeing Survey asks young adults directly about life experiences and opportunity. Compared to older adults, younger adults are more likely to experience underemployment, defined as either being unemployed and looking for work or being employed part-time but saying that they would like to work full-time. Young adults are less optimistic about job opportunities; as of summer 2022 in Connecticut, only 50 percent of adults between the age of 18 and 25 reported that the ability of residents to obtain suitable employment in their area was excellent or good, compared to 67 percent of other adults. Additionally, when asked about reasons why they did not go to college or persist in completing a college degree, many young adults without college degrees reported barriers related to cost, childcare responsibilities, and the need to work and earn money. The survey finds that young adults who live in advantaged neighborhoods and are not in debt are more likely to be optimistic about economic and educational opportunities and less likely to have experienced cost-related barriers to completing college.[72] DH

FOCUS SCHOOL SEGREGATION AND DIVERSITY

Research shows that students benefit in myriad ways from having a diverse set of teachers, caring adults, and peers, and that students of color in particular benefit from having teachers from shared cultural and socioeconomic backgrounds.[73,74,75] In Fairfield County, 48 percent of public school students identify as white, compared to 61 of the population as a whole. Some of this difference comes from white students being more likely to attend private schools than other children, while some comes from younger generations being more diverse than older ones. Across several metrics, schools are becoming less segregated and more diverse. However, while white students are less isolated now than they were in the past, the average white public school student still goes to a school that is 64 percent white. Meanwhile, Latino students are growing slightly more isolated: the average Latino student goes to a school that is 47 percent Latino, higher in the 2021–22 school year than a decade ago, when the average Latino student attended a school that was 38 percent Latino.[76]

In Fairfield County, while the student and educator populations have both become more diverse, changes among educators are not keeping up with those of their students. In the 2009–10 school year, 37 percent of students and only 9 percent of educators were people of color; in the 2021–22 school year, these figures were 52 percent and 12 percent, respectively (SEE FIGURE 5D, TABLE 5B). In all but one district, the gap between these percentages has widened. In Bridgeport, the lone exception, the gap is still quite large, as 90 percent of students and only 30 percent of educators are of color.[77]

FIGURE 5D

Even though educators have diversified in recent years, teachers of color are still vastly underrepresented compared to their students

NON-WHITE SHARE OF STUDENTS AND EDUCATORS BY DISTRICT, 2021–22 SCHOOL YEAR WITH LINE SHOWING EQUAL SHARES OF STUDENTS AND EDUCATORS

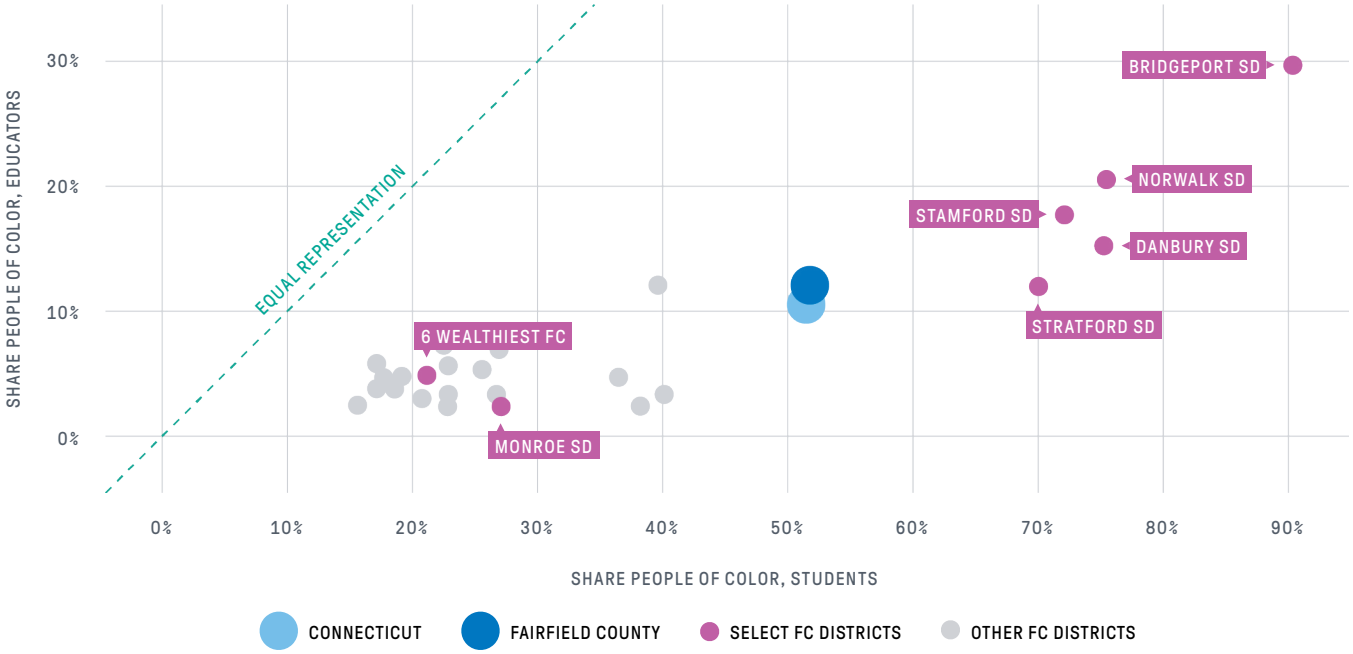


TABLE 5B

Student and teacher diversity

COUNTS AND SHARES OF STUDENTS AND EDUCATORS WHO ARE PEOPLE OF COLOR BY FAIRFIELD COUNTY DISTRICT, 2021–22 SCHOOL YEAR

LOCATION	TOTAL STUDENTS	STUDENTS OF COLOR	SHARE STUDENTS OF COLOR	TOTAL EDUCATORS	EDUCATORS OF COLOR	SHARE EDUCATORS OF COLOR
Connecticut	513,615	263,801	51%	53,654	5,700	11%
Fairfield County	137,701	71,311	52%	13,815	1,666	12%
6 wealthiest FC	24,802	5,235	21%	2,694	131	5%
SCHOOL DISTRICTS WITHIN FAIRFIELD COUNTY						
Bethel School District	3,160	1,266	40%	294	10	3%
Bridgeport School District	19,231	17,384	90%	1,668	494	30%
Brookfield School District	2,601	698	27%	263	18	7%
Danbury School District	11,843	8,920	75%	1,064	162	15%
Darien School District	4,754	820	17%	539	31	6%
Easton School District	895	201	22%	96	7	7%
Fairfield School District	9,378	2,506	27%	1,047	36	3%
Greenwich School District	8,630	3,412	40%	980	117	12%
Monroe School District	3,345	903	27%	294	7	2%
New Canaan School District	4,137	788	19%	443	21	5%
New Fairfield School District	2,132	485	23%	238	6	3%
Newtown School District	4,051	697	17%	444	17	4%
Norwalk School District	11,458	8,650	75%	1,211	250	21%
Redding School District	832	153	18%	105	4	4%
Regional School District 09	822	145	18%	86	4	5%
Ridgefield School District	4,578	948	21%	468	14	3%
Shelton School District	4,423	1,688	38%	409	10	2%
Sherman School District	263	41	16%	41	1	2%
Stamford School District	16,079	11,604	72%	1,598	284	18%
Stratford School District	6,860	4,808	70%	651	78	12%
Trumbull School District	6,896	2,515	36%	632	30	5%
Weston School District	2,239	509	23%	234	8	3%
Westport School District	5,336	1,213	23%	597	35	6%
Wilton School District	3,758	957	25%	413	22	5%

CHAPTER 6

Economy

AT A GLANCE

- → The economies of both Connecticut and Fairfield County shrank shortly after the start of the COVID-19 pandemic. Many industries in Fairfield County have rebounded since then, but some sectors, especially retail and accommodation, lost jobs that have not come back.
- → While the composition of Fairfield County's labor force changed during COVID, the region's gender and racial wage disparities did not. Wage gaps by race are particularly high. Although these disparities are partly explained by differences in educational attainment levels between racial groups, they exist within educational and occupational groups. This suggests that discrimination plays a key role in driving the wage disparities in the region.[78]
- → Between the first quarters of 2020 and 2022, average weekly wages in Fairfield County increased by 19 percent from $2,051 to $2,446. Although these gains are substantial, most of these increases have been eaten up by inflation. In inflation-adjusted terms, wages increased about 4 percent.
- → Similar shares of women and men in Fairfield County have college degrees, but rates of college education still vary widely by race. Educational inequities have implications for persistence of the racial wage gap over time. For example, higher shares of Black and Latino adults cite the cost of college as a major reason for not pursuing a degree.

Jobs

The COVID-19 pandemic caused the number of jobs in Fairfield County to drop from about 408,300 to 372,700 between the first and second quarters of 2020, but the economy has gained jobs since then. In the first quarter of 2022, the region had only 5,600 fewer jobs (402,700) than it had in the first quarter of 2020. Many of the jobs lost over this period were in the retail trade and accommodation and food services sectors, which together lost 5,700 jobs during this time (SEE TABLE 6A).

While the number of jobs in Fairfield County decreased since the start of the pandemic, the unemployment rate has remained low: 3.9 in September 2022, only slightly higher than it was in the same month three years earlier (3.1).[79] The labor force participation rate, which declined sharply at the start of the pandemic and has not returned to its pre-pandemic level, may partly explain low unemployment. Some people who lost jobs and stopped looking for work are not counted among the unemployed.[80] However, the high number of job openings suggests that many who have left the labor force have done so by choice rather than poor job prospects.[81]

One of the most dramatic changes in the economy since the start of the pandemic has been the rise of at-home work. Only 6 percent of workers in Fairfield County worked from home in 2019. This number increased to 23 percent in 2021. Meanwhile, between 2019 and 2021 commuting by car dropped from 79 to 68 percent, and commuting by public transit dropped from 21 to 9 percent.[82] Because workers began returning to the office in large numbers during late 2021 and 2022, more current sources such as the DataHaven Community Wellbeing Survey show an increase in commuting for work in 2022 compared to the year prior.[83]

Opinion data gives mixed signals about how Fairfield County residents' employment opportunities have changed since the start of the pandemic. According to the DataHaven Community Wellbeing Survey, the share of those who believe that residents have good or excellent chances of obtaining suitable employment increased from 48 percent to 54 percent between 2018 and 2021.[84] On the other hand, the share of those who reported being underemployed, which includes both unemployed adults and part-time workers who would like a full-time job, increased from 15 to 17 percent.

Future employment trends can be difficult to predict, and tend to vary by industry and occupation. For example, even before the pandemic, the emergence of online services for products and food had led to the disappearance of many in-person jobs. This has been especially true of retail trade, which is projected to lose more jobs than any other sector by 2030.[85] However, there is a consensus that the number of jobs in many healthcare occupations will continue to grow as the population ages. DH

TABLE 6A

Job trends by sector

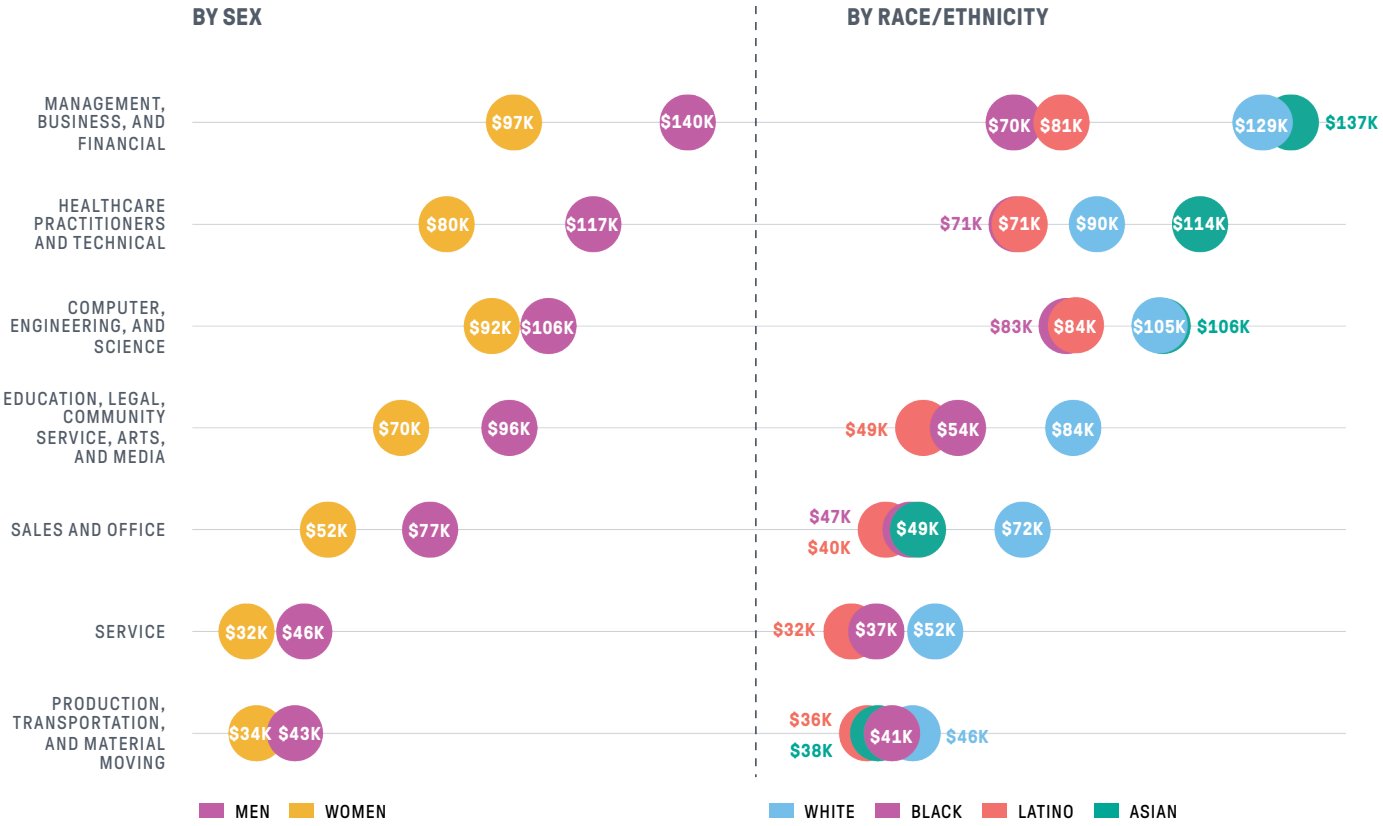
NUMBER OF JOBS IN LARGEST SECTORS, FAIRFIELD COUNTY, 2010–2022

INDUSTRY	2010 JOBS	2020 JOBS	CHANGE 2010-2020	PERCENT CHANGE 2010-2020	2022 JOBS	CHANGE 2020-2022	PERCENT CHANGE 2020-2022
All Industries	394,100	408,300	⬆14,200	⬆4%	402,700	⬇5,600	⬇1%
Health Care and Social Assistance	57,400	65,900	⬆8,500	⬆15%	65,600	⬇300	⬇<1%
Retail Trade	47,700	48,200	⬆500	⬆1%	44,900	⬇3,300	⬇7%
Educational Services	39,300	34,600	⬇4,700	⬇12%	35,900	⬆1,300	⬆4%
Professional, Scientific, and Technical Services	28,700	33,900	⬆5,200	⬆18%	33,600	⬇300	⬇1%
Manufacturing	39,600	31,200	⬇8,400	⬇21%	31,700	⬆500	⬆2%
Accommodation and Food Services	23,400	32,600	⬆9,200	⬆39%	30,200	⬇2,400	⬇7%
Finance and Insurance	37,300	30,000	⬇7,300	⬇20%	30,100	⬆100	⬆<1%
Administrative and Support and Waste Management and Remediation Services	21,100	26,500	⬆5,400	⬆26%	25,800	⬇700	⬇3%
Wholesale Trade	15,500	14,800	⬇700	⬇5%	15,100	⬆300	⬆2%
Information	11,300	14,200	⬆2,900	⬆26%	14,600	⬆400	⬆3%

FIGURE 6A

Wide wage gaps exist by sex and race/ethnicity, even within occupational groups

MEDIAN EARNINGS BY MAJOR OCCUPATION GROUP, SEX, AND RACE/ETHNICITY, FAIRFIELD COUNTY ADULTS AGES 25+ WORKING FULL-TIME, 2020



Wages

Low unemployment, a shrinking labor force, and rising prices have contributed to wage increases. Between the first quarters of 2020 and 2022, average weekly wages in Fairfield County increased by 19 percent from $2,051 to $2,446.[86] Although these gains are substantial, most of these increases have been eaten up by inflation. In inflation-adjusted terms, wages increased about 9 percent.

The high rate of inflation has increased cost burdens for many families in Fairfield County, especially those with lower wages. Wage differences in the region still vary along demographic lines. In 2020, white men working full-time had median earnings of $100,000 per year, compared with $73,000 for white women. Income differences by race and ethnicity were even larger. The median income among Black men, $50,000, was half that of white men. Latino men, who had a median income of $43,000, earned less than half as much as white men (SEE FIGURE 6B).

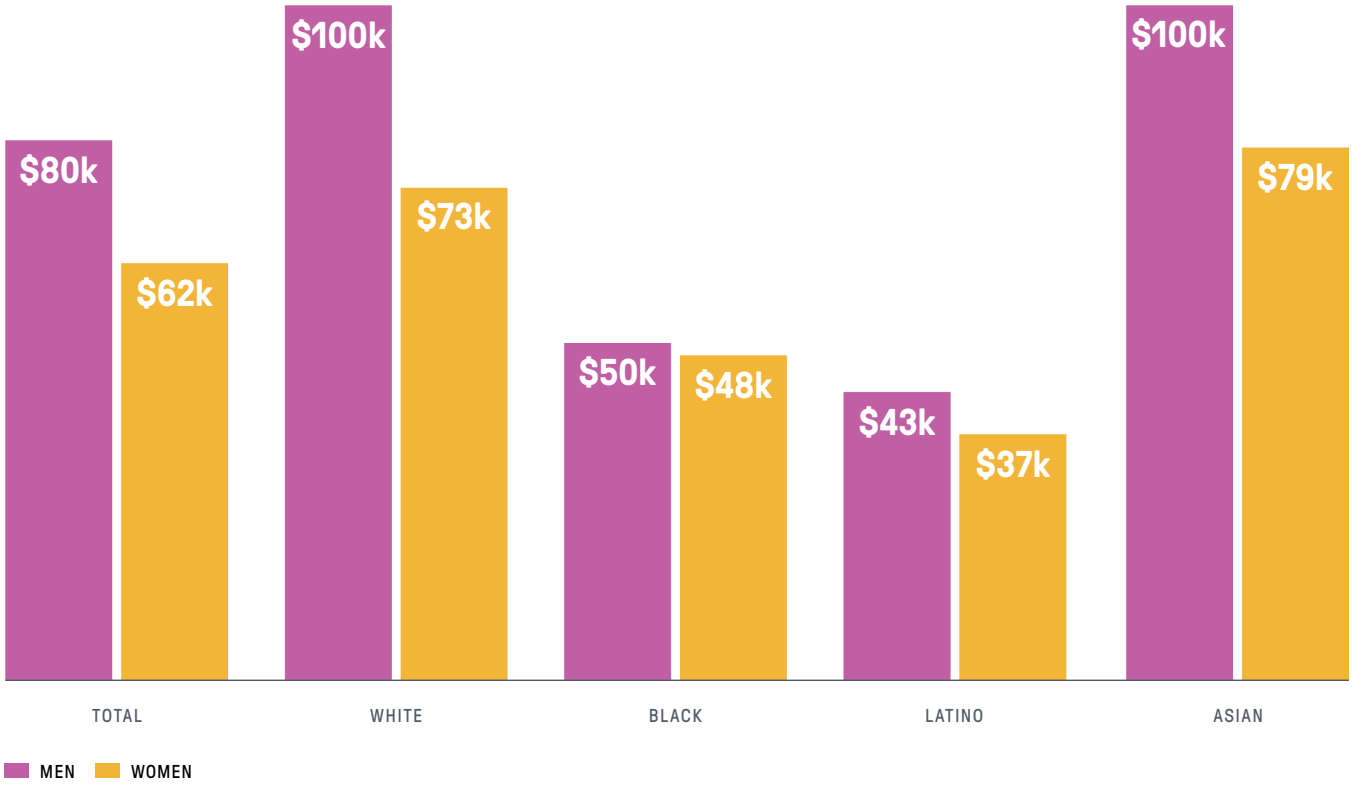
Some of these gaps can be attributed to occupational differences. For instance, 35 percent of white workers versus only 15 percent of Black workers in Fairfield County work in a management, business, and financial occupation, a job group that pays a median annual income of $120,000 per year. On the other hand, 26 percent of Latino workers and only 7 percent of white workers have a service job, which has a median annual wage of $39,000. Educational attainment differences also contribute to wage disparities. Twenty-two percent of white workers, 44 percent of Black workers, and 58 percent of Latino workers have a high school degree or less. Those without college degrees earn a median income of $42,000 per year, while those with degrees earn $90,000.[87]

Significant wage disparities, however, can also be found within occupational groups, even among workers with the same education. Among those with a college degree in Connecticut, white workers in management, business, and finance have a median income

FIGURE 6B

Wage gaps are larger by race/ethnicity than by sex

MEDIAN EARNINGS BY SEX AND RACE/ETHNICITY, FAIRFIELD COUNTY ADULTS AGES 25+ WORKING FULL-TIME, 2020



of $98,000, while Black and Latino workers in the same group earn median incomes of $70,000 and $72,000, respectively.[88] Gender wage disparities can also be found in education and occupation groups. These gaps are largest for workers with graduate or professional degrees. In Connecticut's healthcare sector, men at this education level earn a median income of $167,000 per year, while women in this group earn $100,000 (SEE FIGURE 6B, FIGURE 6C).

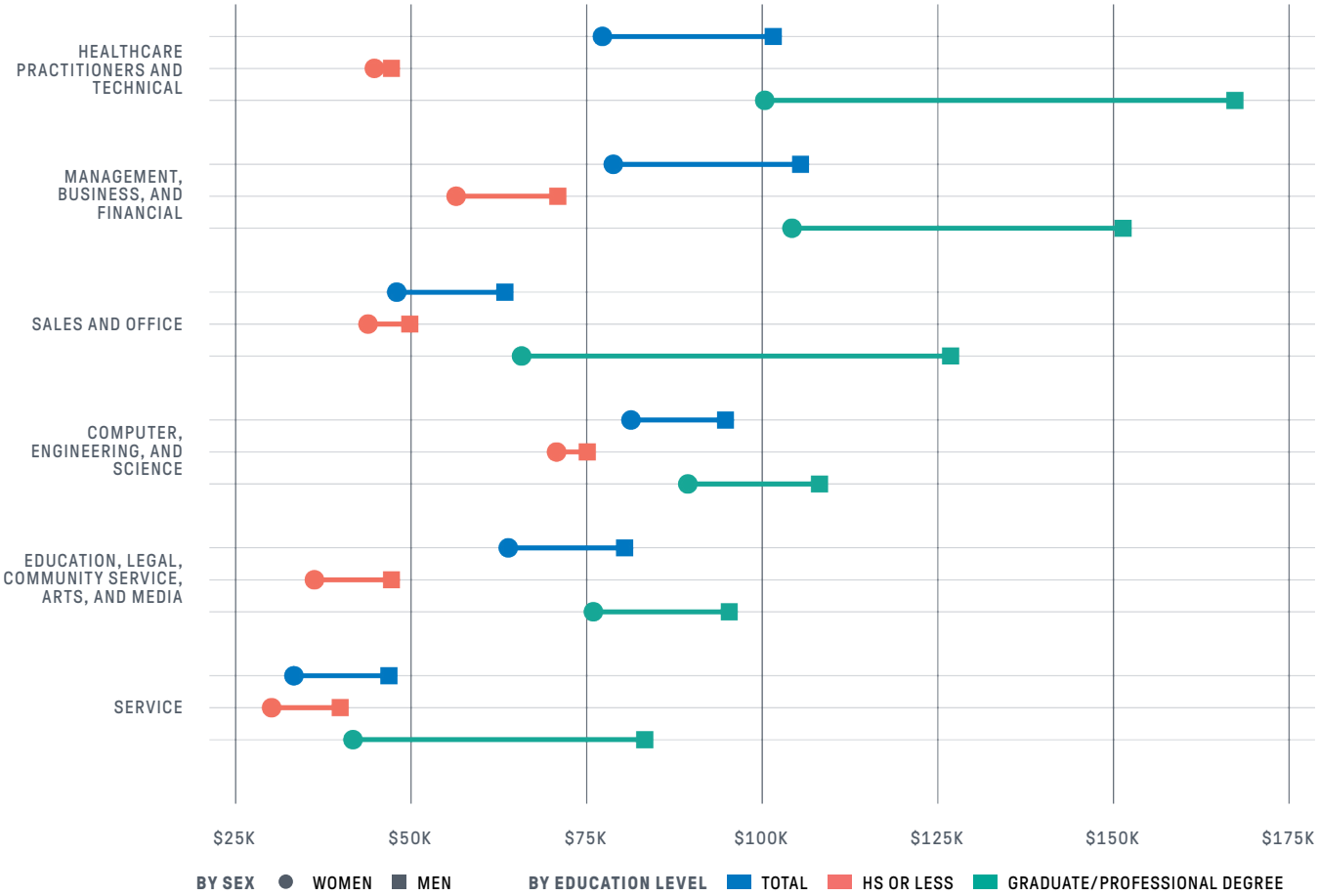
Fairfield County's large gender and racial wage gaps follow patterns of wage differences at the national level.[89] Social networks are a key reason these gaps persist over time. White male workers are more likely to have ties to higher-paid people, which allows them to leverage their connections to obtain higher-paying jobs.[90]

Discrimination also contributes to wage disparities, which explains why they remain after controlling for occupation and education.[91] Discrimination may even explain some differences from one occupation to another, as Black job applicants refrain from applying to certain higher paying jobs to avoid being discriminated against.[92] According to the 2021 DataHaven Community Wellbeing Survey, 16 percent of Black residents compared to 5 percent of white residents in Fairfield County report having been unfairly fired or denied a promotion at work or not hired for a job for unfair reasons on more than one occasion during the past 3 years.[93] DH

FIGURE 6C

Across several occupation groups, wage gaps between men and women are higher with advanced degrees

MEDIAN EARNINGS BY SELECT MAJOR OCCUPATION GROUP, SEX, AND EDUCATIONAL ATTAINMENT, CONNECTICUT ADULTS AGES 25+ WORKING FULL-TIME, 2020



Educational Attainment

The share of women with college degrees has risen over the past several decades, and in Fairfield County roughly the same share of women and men have college degrees.[94] A higher share of women ages 25–34 have college degrees compared to men in the same age group (55 versus 48 percent), suggesting that soon a higher overall share of women than men will have a college degree (SEE FIGURE 6E). This trend has been attributed to the increasing labor force participation of women and the fact that women are more likely to pursue jobs that require a college degree.[95]

Rates of higher education vary widely by race and ethnicity. The share of white adults with at least a college degree, 59 percent, is more than twice as high as that of Black adults, 25 percent, and almost three times higher than that of Latino adults, 20 percent (SEE TABLE 6B, FIGURE 6D).

Variation in educational attainment by race and ethnicity is important because education has a big effect on earnings. Compared to white adults without a college degree, higher shares of Black and Latino adults cite the cost of college as a major reason for not pursuing a degree.[96] This illustrates how the cost and inaccessibility of higher education contribute to the reproduction of racial wage gaps. Black and Latino adults who are less likely to afford college are unable to obtain the higher-paying jobs that require college degrees. DH

FIGURE 6D

More than a quarter of Latino adults in the area lack a high school diploma

SHARE OF ADULTS AGES 25+ BY HIGHEST EDUCATIONAL ATTAINMENT, FAIRFIELD COUNTY BY RACE/ETHNICITY, 2020

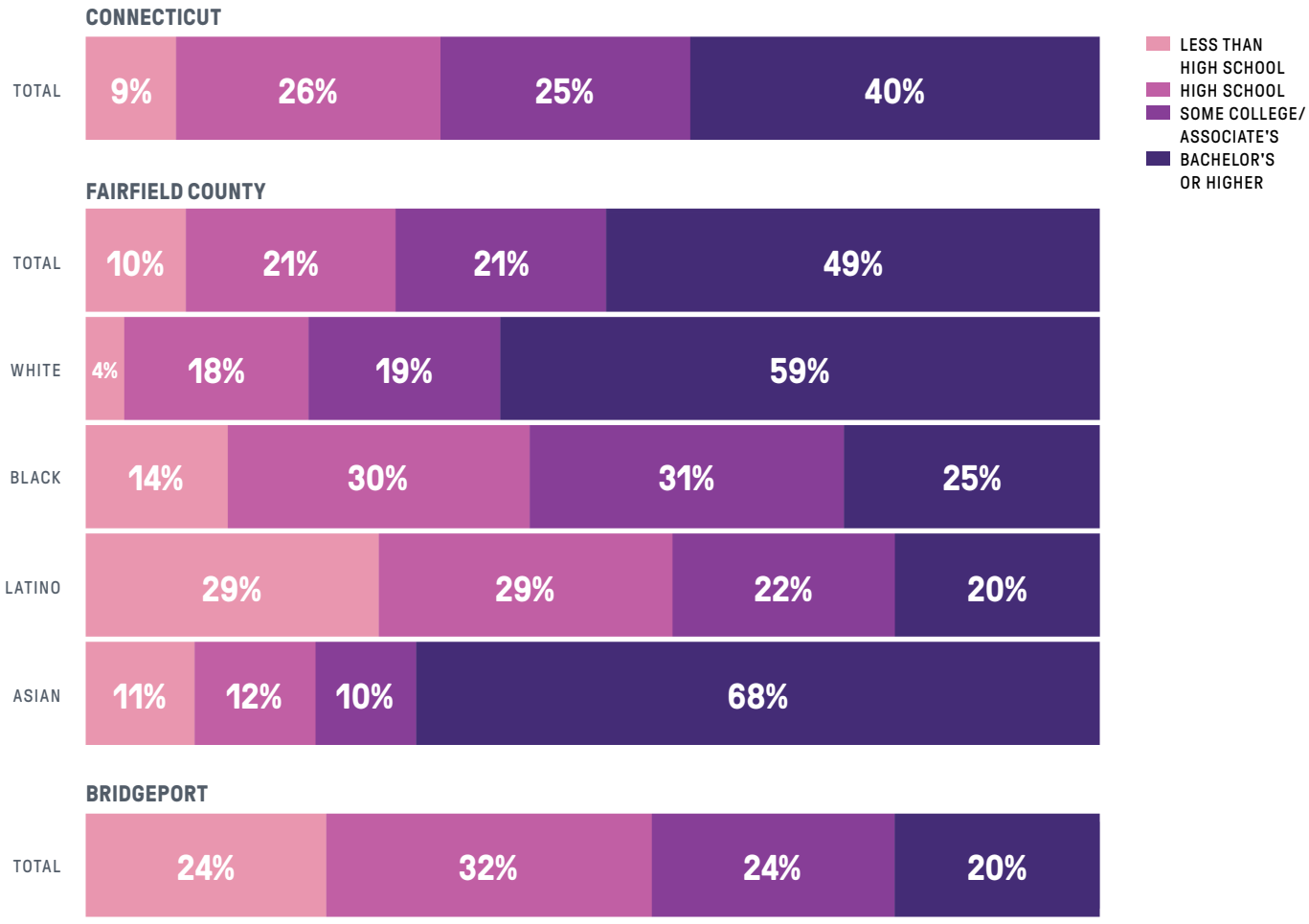


TABLE 6B

Educational attainment

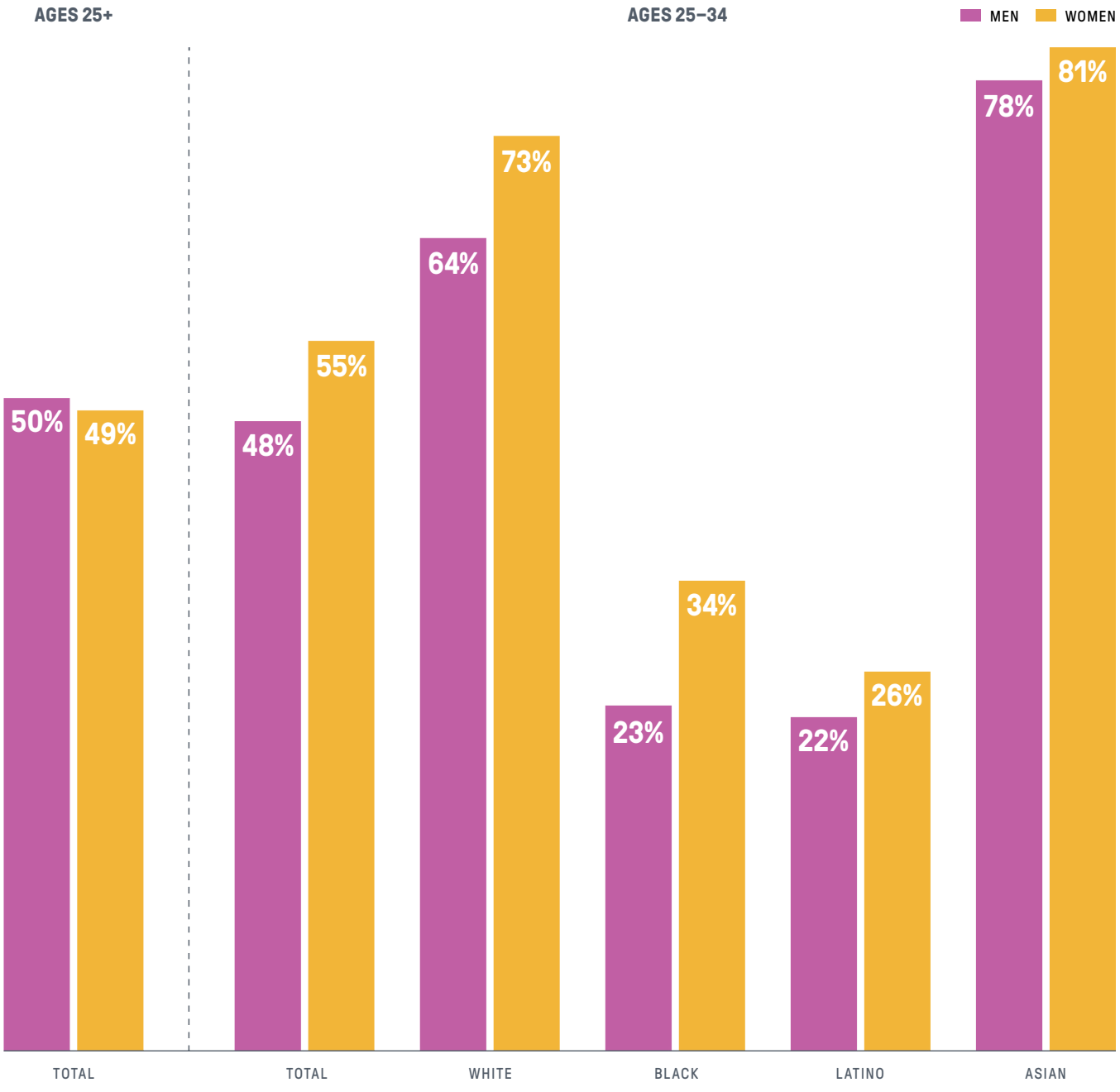
HIGHEST EDUCATIONAL ATTAINMENT, FAIRFIELD COUNTY ADULTS AGES 25 AND UP BY TOWN AND RACE/ETHNICITY, 2020

		LESS THAN HIGH SCHOOL DIPLOMA		BACHELOR'S DEGREE OR HIGHER	
LOCATION	POPULATION AGES 25+	COUNT	SHARE	COUNT	SHARE
Connecticut	2,489,205	225,550	9%	996,000	40%
Fairfield County	646,052	63,181	10%	316,013	49%
Bethel	13,490	705	5%	6,214	46%
Bridgeport	93,854	22,394	24%	18,484	20%
Brookfield	11,816	471	4%	6,185	52%
Danbury	58,479	9,116	16%	19,608	34%
Darien	13,280	274	2%	11,442	86%
Easton	5,556	141	3%	3,921	71%
Fairfield	39,065	1,601	4%	26,354	67%
Greenwich	42,495	1,615	4%	29,579	70%
Monroe	12,864	505	4%	6,308	49%
New Canaan	12,943	239	2%	10,252	79%
New Fairfield	9,175	286	3%	4,169	45%
Newtown	19,500	682	3%	10,008	51%
Norwalk	64,192	7,699	12%	27,996	44%
Redding	6,458	151	2%	4,293	66%
Ridgefield	17,206	376	2%	12,382	72%
Shelton	30,655	1,727	6%	13,193	43%
Sherman	2,827	50	2%	1,643	58%
Stamford	93,469	10,013	11%	48,759	52%
Stratford	37,493	3,352	9%	12,388	33%
Trumbull	23,858	1,094	5%	13,621	57%
Weston	6,875	119	2%	5,377	78%
Westport	18,830	361	2%	14,865	79%
Wilton	11,672	210	2%	8,972	77%
BY DEMOGRAPHIC WITHIN FAIRFIELD COUNTY					
White	416,572	16,192	4%	246,063	59%
Black	71,064	9,909	14%	17,808	25%
Latino	113,770	32,900	29%	22,729	20%
Asian	35,853	3,893	11%	24,354	68%

FIGURE 6E

While the gender-education gap among young adults has closed, racial and ethnic disparities persist

SHARE OF ADULTS WITH A BACHELOR'S DEGREE OR HIGHER, FAIRFIELD COUNTY ADULTS BY AGE, SEX, AND RACE/ETHNICITY, 2020



CHAPTER 7

Health

AT A GLANCE

- → The coronavirus pandemic caused a spike in all-cause mortality in 2020, with some communities hit harder than others. Between 2020 and 2021, across the state and region, Black and Latino residents experienced more than double the mortality due to COVID-19 than white residents.
- → The pandemic cast ripple effects through other aspects of health, from skipped doctor visits to an increase in mortality from other causes that may have gone untreated.
- → Telehealth emerged as an alternative to in-person doctor visits during the pandemic, and appears to be here to stay.
- → Communities affected by poor access to basic needs such as food, transportation, or housing often experience poor health outcomes related to nutrition and environmental determinants. Issues such as extreme heat and neighborhood safety impact the health of communities in different ways.

Barriers to Healthcare

Although Connecticut is home to many top-tier medical facilities, many people still delay or skip receiving health care for a number of reasons. The coronavirus pandemic led more than 30 percent of adults in Fairfield County to delay or avoid visiting a doctor altogether in an effort to reduce disease transmission and relieve pressure on the healthcare system. In fact, more than two-thirds of adults who skipped or delayed care in Fairfield County cited the pandemic as the primary reason.

Having a medical home—a place or person one considers their primary health care provider—can reduce the overall cost of health-care and boost patient satisfaction, both of which are associated with lower likelihood of skipping medical care.[97] According to the 2021 DataHaven Community Wellbeing Survey, nearly 20 percent of young adults in Fairfield County lack a medical home. Similarly, having health insurance signifi-cantly increases the likelihood of seeking timely medical care,[98] yet Black adults and low-income adults in Fairfield County are twice as likely to lack health insurance compared to the county and state overall (SEE TABLE 7A).

Many people feel they do not have the same opportunity to receive quality care due to experiences of discrimination. In the DataHaven Community Wellbeing Survey, women were more than twice as likely as men to report feeling discriminated against in health care settings, Black and Latino adults twice as likely as white adults, and low-income adults more than four times as likely as higher income adults. Similar trends are seen in perceptions of discrimination in workplace settings and during interactions with police. The similarities in perceived discrimination echo the larger economic and social disparities that affect a person's well-being (SEE TABLE 7B).

Transportation problems are another significant barrier to accessing care (SEE CHAPTER 3). In 2022, 6 percent of adults in Connecticut, including 13 percent of adults in urban core cities such as Bridgeport, said that they stayed home from a doctor's appointment or a visit to a health care provider because they had no access to reliable transportation.[99]

Meanwhile, pandemic response has changed how some people interact with their healthcare providers. In 2021, 52 percent of adults in Fairfield County reported having a telehealth visit, with 68 percent reporting it was as good or better than an in-person visit.[100] DH

TABLE 7A

Barriers to health care

SHARE OF FAIRFIELD COUNTY ADULTS, 2021

LOCATION	DELAYED MEDICAL CARE	DIDN'T GET MEDICAL CARE	NO DENTIST IN PAST YEAR	NO MEDICAL HOME	UNINSURED
Connecticut	30%	11%	28%	11%	5%
Fairfield County	31%	12%	28%	12%	5%
Bridgeport	31%	13%	36%	17%	11%
Stamford	35%	16%	28%	9%	6%
BY DEMOGRAPHIC WITHIN FAIRFIELD COUNTY					
Male	26%	11%	30%	15%	5%
Female	35%	13%	27%	8%	5%
Age 18–34	41%	17%	34%	19%	5%
Age 35–49	33%	13%	28%	12%	6%
Age 50–64	31%	11%	27%	10%	5%
Age 65+	18%	7%	24%	3%	2%
White	31%	10%	26%	12%	3%
Black	32%	11%	36%	10%	10%
Latino	36%	17%	31%	13%	6%
Under $30K	39%	20%	44%	7%	10%
$30K-$100K	31%	12%	32%	14%	5%
$100K+	30%	10%	20%	11%	2%

Weather, Climate, and Public Safety

The places where we live—our homes, neighborhoods, and the regional climate—influence our health and well-being. Policymakers are positioned to improve the built environment and public safety to bolster public health. They must also consider how actions taken today can mitigate the worst climatic outcomes in the future.

Although Connecticut is in a temperate climate region, with coastal cities enjoying temperature mitigation from the Long Island Sound, weather patterns indicate that temperatures year-round are rising. The National Oceanic and Atmospheric Administration (NOAA) estimates that Connecticut's average temperature has risen 3.5 degrees Fahrenheit since the beginning of the 20th century, with a notable acceleration in temperature increases since 2010.[101] Our analysis of daily temperatures since 2001 indicates that average high and average low temperatures have each risen about 1 degree Fahrenheit in Fairfield County.[102]

Meteorological summer (June 1 through August 31) high temperatures in 2001 averaged approximately 80 degrees. In 2021, they averaged 81.3 degrees. The average duration of a summer heatwave is up from 2.8 days in 2001 to 3.6 days in 2021, with heat indexes hovering around 95 degrees.[103] These trends account for normal seasonality. Heat waves can be dangerous in New England as air conditioning is not always available. Older and low-income populations are especially vulnerable. Heat exhaustion and heat stroke are potentially lethal conditions in which the body overheats and organs can be irreparably damaged.[104] In fact, research conducted among New England's Medicare population found that a 1 degree Celsius (1.8 degrees Fahrenheit) increase in summer temperatures is associated with a 1 percent increase in mortality.[105]

TABLE 7B

Experiences of discrimination

SHARE OF ADULTS REPORTING BEING TREATED UNFAIRLY IN THE PAST 3 YEARS BY SCENARIO, FAIRFIELD COUNTY, 2021

LOCATION	ACCESSING HEALTH CARE	AT WORK OR LOOKING FOR WORK	INTERACTING WITH POLICE
Connecticut	7%	9%	4%
Fairfield County	7%	8%	4%
Bridgeport	8%	11%	7%
Stamford	8%	10%	8%
BY DEMOGRAPHIC WITHIN FAIRFIELD COUNTY			
Male	4%	8%	5%
Female	10%	8%	3%
Age 18–34	10%	10%	6%
Age 35–49	7%	12%	6%
Age 50–64	9%	9%	3%
Age 65+	2%	3%	<1%
White	5%	5%	1%
Black	10%	16%	9%
Latino	10%	13%	9%
Under $30K	13%	10%	7%
$30K-$100K	9%	10%	6%
$100K+	3%	7%	1%

Public safety affects physical and mental health by promoting a sense of comfort and good will among neighbors. While 88 percent of Fairfield County adults overall report trusting their neighbors, only 67 percent of Bridgeport adults say they do (SEE TABLE 7D). This metric is interrelated with feelings of safety. Fewer than half of Bridgeport adults say they feel safe walking alone in their neighborhood at night.

Three percent of Fairfield County adults reported that they themselves had been physically attacked in the past year, and about a quarter of those people knew their attacker.[106]

Statewide, 15 percent of adults reported being afraid they or their family members could be hurt by gun violence. This share is three times as high in the urban core towns, and is elevated for Black and Latino adults and residents of Bridgeport specifically. Six percent of urban core residents had a family member hurt or killed by gun violence in the past year, and 11 percent had witnessed a shooting in the past year, creating undue chronic stress and trauma on those communities (SEE TABLE 7C).[107] DH

Health Risks

Access to health care and safe, healthy places to live are important for reducing health risks and preventing poor health outcomes. Behaviors like binge drinking or smoking introduce health risks and are unfortunately often directly linked to socioeconomic status. Other risk factors, such as obesity and diabetes, can trigger a number of adverse health outcomes.

In Fairfield County, obesity, diabetes, and smoking are elevated among Black and low-income adults (SEE TABLE 7E). Diabetes affects one in five adults ages 65 and over. Adult asthma, often linked to environmental conditions such as poor housing or air quality (including allergens like mold and dust, air pollution, or tobacco smoke),[108] affects one in four Bridgeport residents compared to one in ten Stamford residents.

Data for more health risk factors are available at the town and region level in our town equity reports, available at ctdatahaven.org/reports/connecticut-town-equity-reports. DH

TABLE 7C

Gun violence

SHARE OF ADULTS, BY CITY (2021) AND CONNECTICUT BY DEMOGRAPHIC (2022)

LOCATION	AFRAID OF GUN VIOLENCE	RELATIVE SHOT IN PAST YEAR	WITNESSED SHOOTING IN PAST YEAR
Connecticut	15%	4%	5%
Bridgeport*	43%	8%	12%
Stamford*	18%	2%	1%
Wealthy towns	2%	1%	2%
Suburban towns	5%	2%	3%
Rural towns	6%	5%	2%
Urban Periphery towns	15%	4%	6%
Urban Core towns	44%	6%	11%
White	10%	2%	3%
Black	29%	5%	5%
Latino	33%	10%	13%

*2021 survey data; all others are 2022

TABLE 7D

Public safety

SHARE OF ADULTS, FAIRFIELD COUNTY, 2021

LOCATION	TRUST NEIGHBORS	SAFE AT NIGHT
Connecticut	87%	70%
Fairfield County	88%	71%
Bridgeport	67%	49%
Stamford	86%	67%
BY DEMOGRAPHIC WITHIN FAIRFIELD COUNTY		
Age 18–34	84%	66%
Age 35–49	88%	77%
Age 50–64	90%	76%
Age 65+	92%	66%
White	91%	75%
Black	76%	48%
Latino	82%	70%
Under $30K	74%	53%
$30K-$100K	85%	67%
$100K+	96%	84%

TABLE 7E

Health risk factors

SHARE OF ADULTS, FAIRFIELD COUNTY, 2021

LOCATION	ASTHMA	DIABETES	OBESITY	SMOKING RATE
Connecticut	17%	10%	30%	12%
Fairfield County	15%	9%	27%	10%
Bridgeport	26%	13%	44%	17%
Stamford	10%	9%	28%	10%
BY DEMOGRAPHIC WITHIN FAIRFIELD COUNTY				
Male	13%	9%	30%	11%
Female	16%	8%	25%	9%
Age 18–34	23%	2%	26%	10%
Age 35–49	14%	5%	30%	13%
Age 50–64	12%	9%	29%	11%
Age 65+	10%	20%	26%	6%
White	13%	8%	24%	9%
Black	13%	14%	43%	15%
Latino	25%	7%	34%	13%
Under $30K	22%	15%	36%	19%
$30K+	14%	7%	27%	8%

Maternal and Infant Health

Birth outcomes are a strong indicator for overall community health and should be examined in the context of other issues such as discrimination, housing quality, environmental conditions, and economic security. The U.S. lags behind similarly wealthy nations in terms of infant mortality rates, at 5.7 per 1,000 live births compared to an average of 4.1 in other rich nations.[109] Connecticut's overall rate is slightly better at 4.6 deaths per 1,000 live births.

In Fairfield County, major disparities are apparent by race (SEE TABLE 7F). Infant mortality rates for Black babies stand at 9.2 deaths per 1,000 live births compared to just 2.7 for white babies. Similarly, low-weight births for Black babies are twice that of white babies (13 percent compared to 6 percent), and the share of births with late or no prenatal care is twice as high for Black mothers than white mothers (about 7 percent compared to about 3 percent).

The maternal mortality rate in the U.S. is alarmingly high compared to other developed nations, and it is rising. For the period ranging from 2016 to 2020, Connecticut's maternal mortality rate was 15.5 per 100,000 live births—lower than the national rate of 19.3 for the same period.[110] DH

TABLE 7F

Birth outcomes

BIRTH OUTCOMES BY RACE/ETHNICITY OF PARENT, 2016–2018

LOCATION	RACE/ ETHNICITY OF PARENT	PERCENT OF BIRTHS WITH LATE OR NO PRENATAL CARE	PERCENT LOW BIRTH WEIGHT	INFANT MORTALITY RATE PER 1,000 LIVE BIRTHS
Connecticut	Total	3.4%	7.8%	4.61
Fairfield County	Total	4.1%	7.5%	3.96
	White	3.1%	6.0%	2.68
	Black	6.7%	13.0%	9.23
	Latina	4.6%	7.4%	4.23
	Puerto Rican	2.6%	10.3%	N/A
	Other Latina	5.2%	6.5%	N/A
	Asian	3.4%	7.7%	N/A
Bridgeport	Total	5.4%	9.7%	6.84
	White	5.3%	6.2%	N/A
	Black	6.7%	13.2%	13.40
	Latina	4.6%	8.3%	N/A
	Puerto Rican	2.3%	10.7%	N/A
	Other Latina	6.6%	6.2%	N/A
	Asian	N/A	7.8%	N/A
Stamford	Total	4.3%	8.0%	3.79
	White	3.4%	6.6%	N/A
	Black	8.0%	12.9%	N/A
	Latina	4.4%	7.8%	N/A
	Puerto Rican	N/A	12.5%	N/A
	Other Latina	4.4%	7.4%	N/A
	Asian	3.5%	7.4%	N/A

FIGURE 7A

Hospital encounter rates vary across the region

ANNUALIZED AGE-ADJUSTED HOSPITAL ENCOUNTER RATES PER 10,000 RESIDENTS, 2018–2021

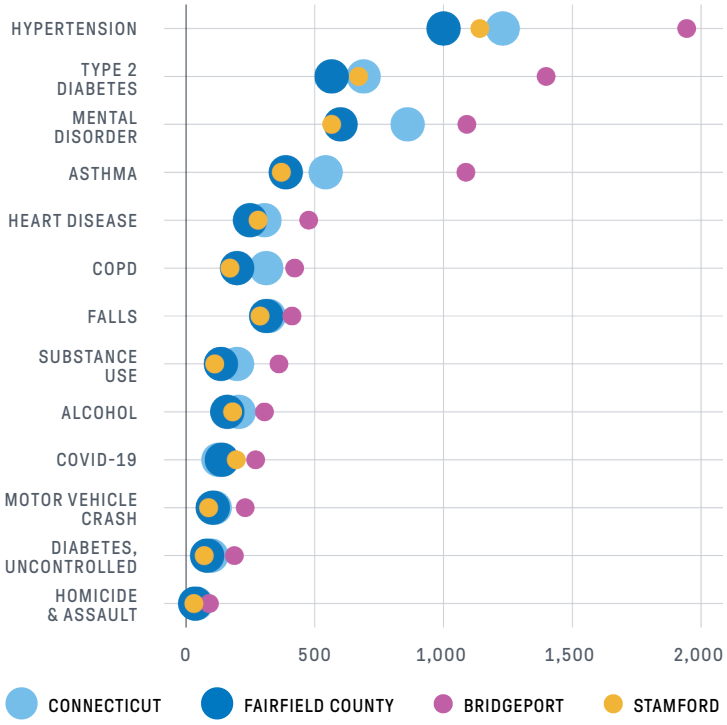


TABLE 7G

Comparative hospital encounter rates

ANNUALIZED AGE-ADJUSTED HOSPITAL ENCOUNTER RATES PER 10,000 RESIDENTS, 2018–2021

INDICATOR	FAIRFIELD COUNTY	BRIDGEPORT	RELATIVE RISK OF ENCOUNTER IN BRIDGEPORT VERSUS FC
Alcohol	150	296	1.97
COPD	189	412	2.18
COVID-19	137	262	1.91
Diabetes, Uncontrolled	66	180	2.73
Type 2 Diabetes	562	1,398	2.49
Falls	287	404	1.41
Heart Disease	241	469	1.95
Homicide & Assault	27	80	2.96
Hypertension	1,000	1,946	1.95
Mental Disorder	593	1,086	1.83
Motor Vehicle Crash	93	219	2.35
Substance Use	126	351	2.79
Asthma	379	1,082	2.85

Child Health

Privileged populations, particularly wealthy white populations in the suburbs, tend to enjoy newer, higher-quality housing and better air quality than people in cities, and as a result have fewer environmentally related health outcomes that affect children, such as asthma or lead poisoning. Between 2018 and 2021, 3 percent of children in Bridgeport tested positive for elevated blood lead levels, compared to about 1 percent in Stamford and just one quarter of 1 percent in Greenwich.[111] Similarly, asthma prevalence for children in Bridgeport was more than 18 percent, compared to 13 percent statewide and just 7 percent in Greenwich.[112] Ground-level pollution emitted from traffic and industry, among other sources, is concentrated in urban areas and thus disparately affects urban populations, often low-income and communities of color. From 2017 to 2021, Bridgeport averaged 52 days per year of "poor" air quality or worse.[113] Just 10 miles away, during that same period, Westport averaged 41 days per year.[114] DH

Chronic Conditions

Cancer, diabetes, and heart disease disproportionately affect people of color and low-income people. Among these populations, rates of chronic conditions are greater[115] and the onset of disease is often earlier than it is for wealthier, white, and more privileged populations.[116] When people have no insurance or medical home, or experience discrimination in healthcare settings, these chronic conditions can often go untreated, leading to higher rates of emergency department visits and hospitalizations.

Some of the leading reasons for emergency department visits and hospitalizations in Fairfield County are for chronic conditions. Hypertension tops the list, followed by diabetes and asthma, along with mental disorders like depression and anxiety. Notably, the encounter rates for these issues are disproportionately common in Bridgeport compared to the county. Encounter rates for hypertension and diabetes in Bridgeport are nearly twice as common as for Fairfield County overall (SEE FIGURE 7A, TABLE 7G). DH

Mortality

The pandemic has significantly affected mortality, spiking in 2020 with many deaths attributed to the virus. The sudden shock of the pandemic on the healthcare system also resulted in excess deaths—that is, deaths above and beyond what might usually be observed in a given period—due to conditions related to the virus as well as other causes, such as cancer and heart disease. Conditions may have gone untreated. Elective surgeries were canceled. Some patients simply stayed away from hospitals and clinics to avoid contracting COVID-19.

The 2020 spike in mortality showed up disproportionately in low-income communities and communities of color. Bridgeport residents saw much greater increases in mortality than residents of wealthier towns like Stamford. Wealthier residents were often able to avoid contact with the virus by working from home and relying on delivery services, while lower-income, Black, and Latino residents were often those supporting the essential service economy before and after vaccines became widely available (SEE FIGURE 7B, TABLE 7H).

Another way to think about mortality is not only in the overall rate of deaths, but in the years of potential life lost (usually measured to age 75) due to various causes. This allows us to compare how each cause of death can affect a population. Here again, the trends underscore how communities with fewer resources, and whose populations have lower access to basic needs and basic health care, are adversely and disproportionately affected.

In Connecticut and Fairfield County, cancer and heart disease are among the top causes of death and accumulate the highest number of life-years lost. But in some locations, other causes of death eclipse those averages. In Bridgeport, COVID, overdoses, and firearm deaths outpace the regional average. Firearm deaths in particular cause more than four times the rate of life-years lost in Bridgeport compared to Fairfield County overall. Generally, the rate of life-years lost in Bridgeport is more than three times higher than in Greenwich and nearly twice as high as in Stamford (SEE FIGURE 7C, TABLE 7I).

TABLE 7H

Mortality

AGE-ADJUSTED ALL-CAUSE MORTALITY RATES PER 1 MILLION RESIDENTS, 2019–2021

LOCATION	2019	2020	2021
Connecticut	11,899	14,336	11,848
Fairfield County	10,012	12,936	10,059
Bridgeport	12,686	17,799	13,283
Danbury	11,557	13,827	10,258
Fairfield	8,895	10,902	8,392
Greenwich	7,597	9,370	7,681
Norwalk	10,457	14,123	10,319
Stamford	8,771	13,049	9,353
Stratford	11,704	15,580	11,547

FIGURE 7B

All-cause mortality spiked in 2020 due to the Coronavirus pandemic

AGE ADJUSTED, ALL-CAUSE MORTALITY RATES PER 1 MILLION RESIDENTS, 2015–2021

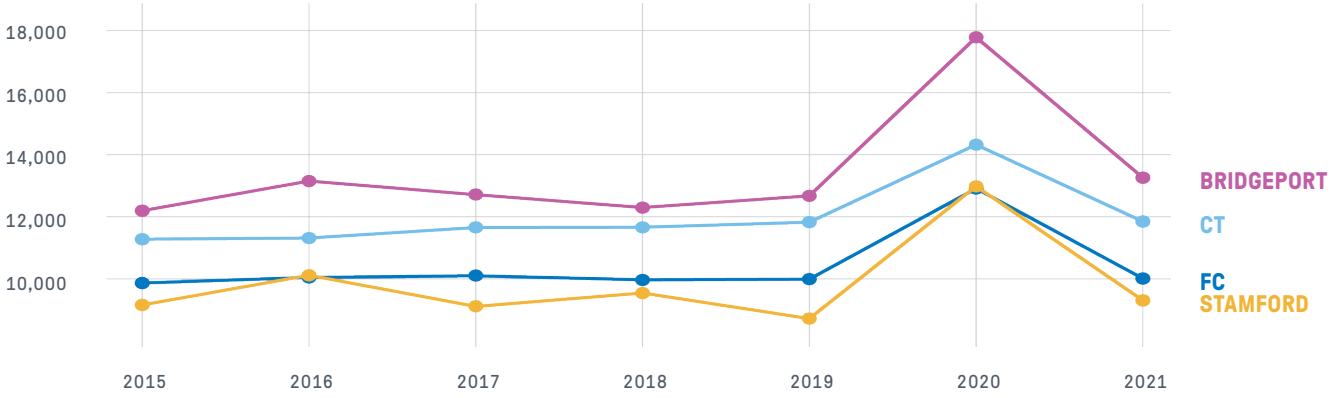


FIGURE 7C

Bridgeport has a high burden of premature death

ANNUALIZED YEARS OF POTENTIAL LIFE LOST BEFORE AGE 75 PER 100,000 RESIDENTS, ALL CAUSES, 2015–2021

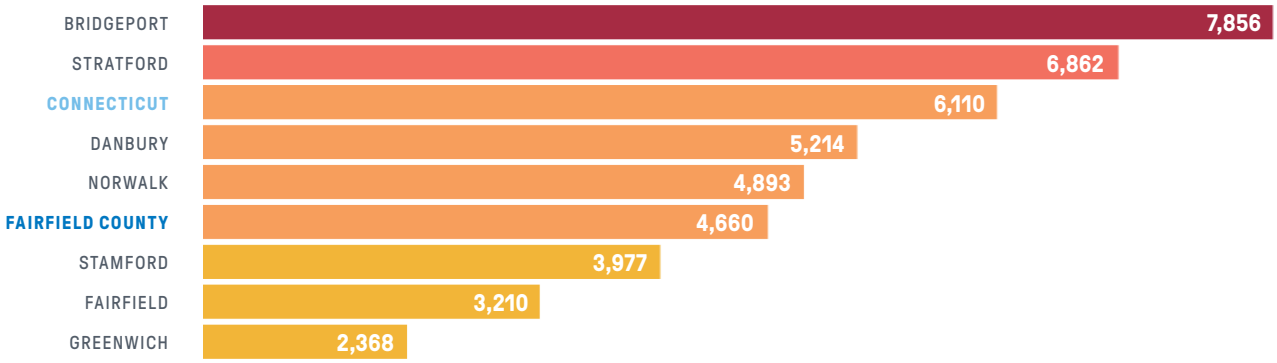


TABLE 7I

Years of potential life lost by cause of death

ANNUALIZED YEARS OF POTENTIAL LIFE LOST BEFORE AGE 75 PER 100,000 RESIDENTS, 2015–2021

LOCATION	CANCER	POISONING (INCL. OVERDOSE)	HEART DISEASE (INCL. STROKE)	COVID-19	MOTOR VEHICLE CRASH	LUNG DISEASE	FIREARM (INCL. HOMICIDE & SUICIDE)
Connecticut	1,532	1,303	1,186	599	409	348	267
Fairfield County	1,245	858	954	542	281	219	222
Bridgeport	1,547	1,370	1,547	968	521	417	955
Danbury	1,295	1,154	1,044	637	346	237	78
Fairfield	1,055	639	600	315	56	137	81
Greenwich	922	494	470	210	44	82	72
Norwalk	1,329	818	1,201	916	234	286	89
Stamford	1,161	526	863	575	284	142	145
Stratford	1,718	1,644	1,317	839	291	325	236

Between 2020 and 2021, across the state and region, Black and Latino residents experienced more than double the mortality due to COVID-19 than white residents. Town-by-town disparities are evident as well, as white residents in Bridgeport experienced in excess of 70 percent more COVID-related mortality than white residents of Stamford (SEE FIGURE 7D).

Fatal overdoses also spiked during 2020 as vital harm reduction resources and treatment programs paused to reduce the spread of COVID-19. Despite not growing at as high a rate as in the period from 2019 to 2020, the period from 2020 to 2021 still saw the rate of overdoses increase significantly. The year 2021 was the most fatal year for overdoses in history.[117] In Fairfield County, the fatal overdose rate for Black residents far eclipsed the rates of white and Latino residents. Fentanyl continues to drive drug fatalities, accounting for more than 80 percent of drug-related deaths in the region (SEE FIGURE 7E, TABLE 7J).

Due to the excess mortality driven by the pandemic, life expectancy nationwide dropped an overall average of 1.8 years from 2019 to 2020, and an additional 0.6 year between 2020 and 2021. According to the CDC, in 2019, overall life expectancy in the United States was 78.8 years. By the end of 2021, it was 76.4 years.[118] COVID and drug overdoses contribute to this decrease.

While the CDC estimates totals for the nation, the Institute for Health Metrics and Evaluation (IHME) provides county-level estimates for race and ethnicity, although their most recent estimates are for 2019. At that time, overall life expectancy in Fairfield County was estimated at 83.2 years and the state at 81.1 years. The totals mask disparities by race and ethnicity, though. In Fairfield County in 2019, life expectancy for white residents was 83.3 years, compared to 80.6 years for Black residents. Latino residents generally enjoyed higher life expectancy, at 85.1 years in the county.[119] The trends estimated by the CDC for national-level drops in life expectancy likely hold across Fairfield County, and disproportionately affect people of color, especially Black people. DH

FIGURE 7D

Mortality due to COVID-19 was higher for residents of color than white residents

ANNUALIZED, AGE ADJUSTED MORTALITY RATE PER 1 MILLION RESIDENTS FOR COVID-19, BY RACE/ETHNICITY, 2020–2021

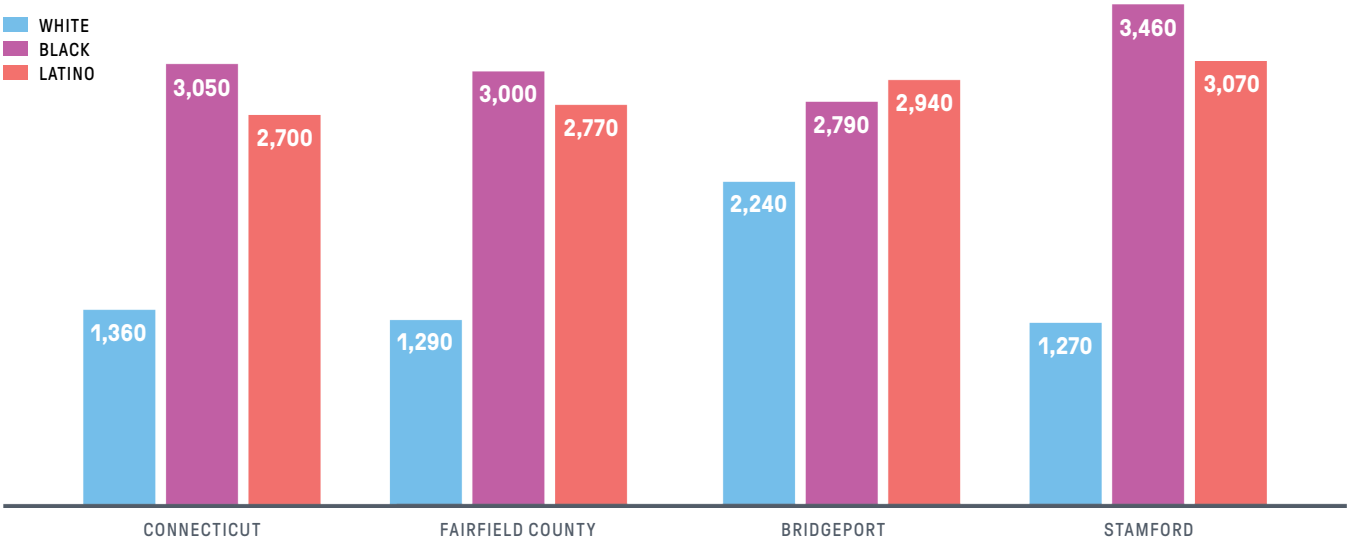


FIGURE 7E

Drug overdose deaths have recently risen for Black residents

AGE-ADJUSTED ACCIDENTAL OVERDOSE DEATH RATE PER 1 MILLION RESIDENTS BY RACE/ETHNICITY, FAIRFIELD COUNTY, 2012–2021 6-MONTH ROLLING MEAN

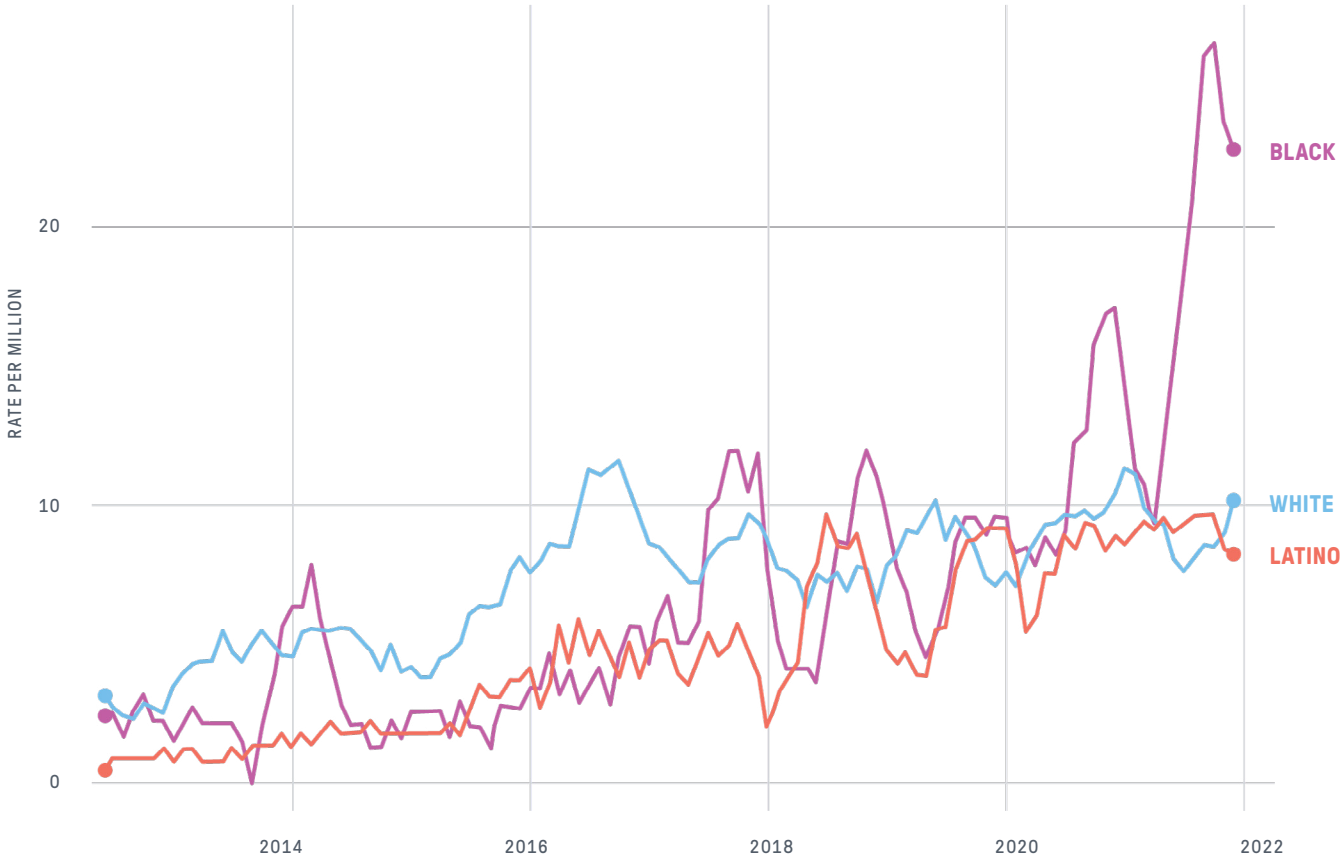


TABLE 7J

Overdose deaths increased during the pandemic

ANNUALIZED ACCIDENTAL OVERDOSE DEATH COUNTS AND AGE-ADJUSTED RATES PER 1 MILLION RESIDENTS, 2014–2016 TO 2020–2021

	2014–2016		2017–2019		2020 AND 2021	
LOCATION	COUNT	RATE PER MILLION	COUNT	RATE PER MILLION	COUNT	RATE PER MILLION
Connecticut	2,137	102	3,119	149	2,781	193
Fairfield County	337	62	463	83	427	112
Bridgeport	95	107	169	194	155	257
Danbury	35	66	49	91	47	135
Fairfield	19	59	13	51	19	82
Greenwich	11	33	10	37	9	41
Norwalk	28	53	41	70	37	92
Stamford	22	27	39	46	43	74
Stratford	39	125	47	153	36	161

Mental Health and Suicide

Poor mental health conditions, including depression and anxiety, are strongly linked to the onset of chronic physical conditions including cancer, heart disease, stroke, diabetes, asthma, arthritis, and many others that can reduce life expectancy by decades, in some cases.[120,121] Some of the reasons for this may include higher stress levels, disruptions in sleep and nutrition, increased risks from substance use disorders, and greater difficulties in securing medical care or social support. Concerns about mental health and suicide rose during the COVID-19 pandemic, as many people were impacted by social isolation, job loss, or other hardships.[122] Between February 2020 and the end of 2021, about 1 in 4 Connecticut adults lost a job, 1 in 5 reported that they or a member of their household had consumed alcohol more often than usual, and 18 percent had experienced the death of a close friend or family member from COVID-19.[123] Adults experiencing hardships such as food and transportation insecurity, unemployment, lack of timely medical care, and limited social support were more likely to report depression, and had much lower levels of personal well-being as measured by the DataHaven Community Wellbeing Survey (SEE CHAPTER 1, FIGURE 1D).

As of 2022, 12 percent of Connecticut adults reported that they felt down, depressed, or hopeless for more than half of the days during the past 2 weeks, but there were notable differences within the population, with 19 percent of young adults age 18 to 34 reporting this (2.4 times more likely than all other age groups). Black and Latino adults were 1.6 and 2.3 times more likely, respectively, to report feeling down or depressed when compared to white adults, and adults earning less than $15,000 per year were 7.4 times more likely to report this when compared to adults earning $200,000 or more.[124]

Suicide is a major public health issue that disproportionately impacts men and non-Hispanic white populations, both in Connecticut and nationally.[125] Depression, substance use disorder, and other mental health needs are major risk factors for suicide, especially when untreated.[126] The pandemic had an disproportionate impact on vulnerable populations, which may have contributed to additional suicides among those populations. After rising for decades nationally, suicide rates peaked in 2018, fell in 2019 and 2020, and then increased slightly in 2021.[127] However, although suicide rates fell for white Americans, they continued to rise for Black and Latino Americans through 2020.[128] In Connecticut, suicide rates from 2018 to 2020 averaged to 10.4 per year per 100,000 population, compared to 13.6 nationwide.[129] Among Connecticut teens aged 15 to 19, the suicide rate was 6.4 per 100,000, which was one of the lowest state-level rates in the U.S. for that age group.[130] Firearms are used in more than half of all suicides in the U.S.[131] DH

FOCUS: ROAD SAFETY

Improving mass transit and active transportation options, such as walking or biking, while reducing reliance on motor vehicles can greatly improve health outcomes for individuals and communities. Crash-related injuries and fatalities are substantially lower on transit than other modes of travel.[132] People who walk or bike to transit or their final destination are more likely to achieve 30 minutes of exercise per day, improving cardiovascular fitness and reducing chances of diabetes or obesity.[133] Active modes of transportation are far more environmentally friendly than driving, and transit contributes far less pollution to the environment, providing health benefits to all.

Connecticut enjoys relatively good rail service provided by New York MTA, CT Rail, and Amtrak, with stops along nearly every town in coastal Fairfield County. Due in large part to employees working from home, rail ridership has not returned to pre-pandemic levels. However, CT Transit buses and Greater Bridgeport Transit have improved ridership over pre-pandemic levels thanks to a fare holiday that has extended from April 2022 through March 2023.[134]

Safety improvements are needed to ensure road users who walk or cycle are protected from crashes involving cars. In Connecticut, when drivers of vehicles collide with pedestrians and cyclists, the chance of injury or death is nearly six times higher than when vehicles collide with each other. In urban areas, the rates of injuries and fatalities are even higher (SEE TABLE 7K). Sixty-six percent of adults in Fairfield County and just 57 percent in Bridgeport say there are safe biking options in their area.[135] Similarly, 71 percent of adults in Fairfield County and 49 percent in Bridgeport say they feel safe walking alone at night.[136]

TABLE 7K

Traffic crashes

TRAFFIC CRASHES BY PERSON TYPE AND INJURY TYPE, 2018-2021

	PEDESTRIAN			CYCLIST			DRIVER		
AREA OF OCCURRENCE	NUMBER	NUMBER FATAL	PERCENT WITH FATALITY OR POSSIBLE INJURY	NUMBER	NUMBER FATAL	PERCENT WITH FATALITY OR POSSIBLE INJURY	NUMBER	NUMBER FATAL	PERCENT WITH FATALITY OR POSSIBLE INJURY
Connecticut	5,758	237	85%	1,740	12	82%	950,098	911	14%
Fairfield County	1,702	45	91%	437	1	80%	278,032	131	12%
Bridgeport	531	11	93%	94	0	82%	55,791	24	17%
Stamford	385	4	93%	67	1	78%	39,464	10	10%

CHAPTER 8

Civic Life

AT A GLANCE

- → Between 2016 and 2020, voter turnout increased among all demographic groups.
- → Public health officials enjoy high levels of trust across the board, but advantaged populations are more likely to approve of their local governments and police.
- → Municipal services like roads, libraries, schools, and public safety are funded through each town's grand list. Wealthy towns with larger tax bases enjoy higher per capita expenditures and often rate the quality of their amenities more highly.
- → Disparate impacts of policing, incarceration, and neighborhood violence on Black and Latino residents impact community-wide health, social cohesion, and well-being.

Civic Engagement

Between the 2016 and 2020 presidential elections, voter turnout increased among all demographic groups statewide (SEE FIGURE 8A). In Connecticut, 67 percent of eligible voters went to the polls in 2020, compared to 64 percent in 2016 and 67 percent nationwide in 2020.[137] The increases among demographic groups may be due partly to increased political engagement after 2016, an increase in young voters under age 24 (Generation Z), and the broad expansion of COVID-related absentee voting permitted in Connecticut during the 2020 election cycle.[138] DH

FIGURE 8A

Voter turnout increased from 2016 to 2020 among all demographic groups in Connecticut, especially among young people and people of color

SHARE OF ELIGIBLE CONNECTICUT VOTERS WHO VOTED IN THE 2016 AND 2020 PRESIDENTIAL ELECTIONS, BY DEMOGRAPHIC GROUP

Institutional Trust

Turning to local governments, advantaged groups are more likely to approve of police and believe they can influence local government. In total, 77 percent of adults in Fairfield County had a great or fair amount of trust in their local governments. Adults with college degrees were 1.3 times as likely as adults with a high school diploma or less to say they could influence their local governments. Adults ages 65 and over were 1.4 times as likely as adults ages 18 to 34 to say their local government was responsive, and 1.5 times as many white adults as Black adults approved of their local police (SEE FIGURE 8B, TABLE 8A).

Trust in institutions may be influenced by many factors, including experiences of discrimination (SEE CHAPTER 7) and other injustices. These measures are important because of their relationship with activities that can improve health and well-being, such as voting, volunteering, forming social connections, and accessing critical services.DH

FIGURE 8B

Local health officials and healthcare workers are generally well-trusted

SHARE OF FAIRFIELD COUNTY ADULTS REPORTING GREAT OR FAIR AMOUNT OF TRUST IN INSTITUTIONS, 2021

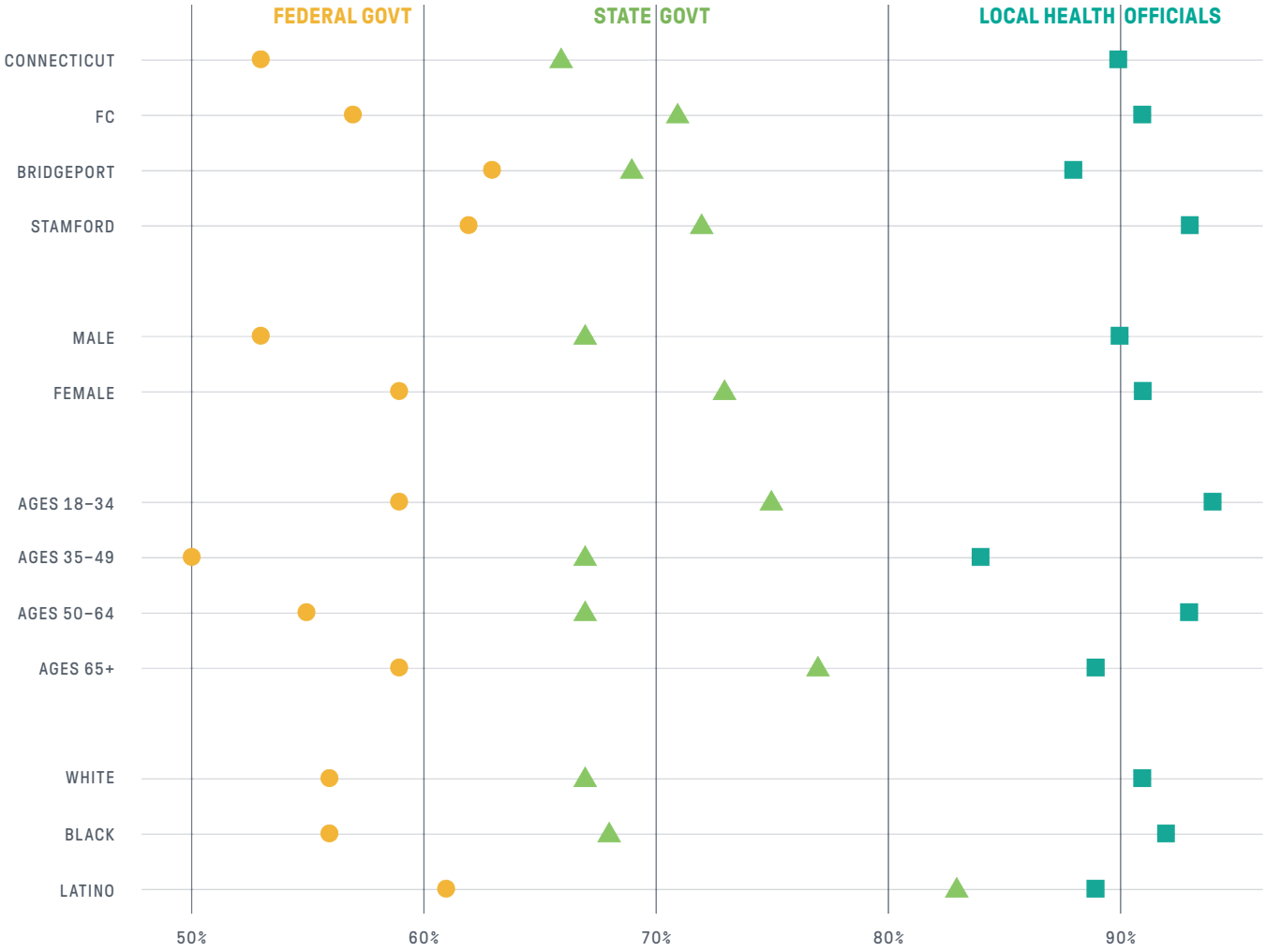


TABLE 8A

Views of local government

SHARE OF ADULTS, FAIRFIELD COUNTY, 2021

LOCATION	INFLUENCE LOCAL GOVERNMENT	GOVERNMENT IS RESPONSIVE	APPROVE OF POLICE
Connecticut	73%	58%	75%
Fairfield County	73%	60%	78%
Bridgeport	60%	32%	46%
Stamford	70%	53%	74%
BY DEMOGRAPHIC WITHIN FAIRFIELD COUNTY			
Male	70%	57%	79%
Female	76%	63%	79%
Age 18–34	79%	49%	65%
Age 35–49	68%	57%	78%
Age 50–64	75%	63%	84%
Age 65+	73%	71%	86%
White	75%	63%	84%
Black	62%	46%	55%
Latino	73%	55%	67%
High school or less	58%	52%	70%
Some college or Associate's	73%	49%	69%
Bachelor's or higher	76%	68%	85%
<$30K	66%	48%	64%
$30K-$100K	76%	56%	72%
$100K+	74%	67%	87%
Kids in home	75%	57%	77%
No kids	72%	60%	78%

Community Satisfaction

Those who believe their local government is responsive to resident needs often believe that their area is a good place to raise children. The inverse also holds. Only about a third of adults in Bridgeport believe their area is a good place to raise children compared to nearly 80 percent of the county overall (SEE TABLE 8B).

While most adults are satisfied with the area where they live, many believe that employment opportunities in the area are less than satisfactory. Approval for area jobs increases with educational attainment, age, and income, suggesting that well-paying technical or entry level positions within the county may be in demand.

Public safety, discussed in Chapter 7, is another important factor in community satisfaction. DH

TABLE 8B

Views of local resources

SHARE OF ADULTS, FAIRFIELD COUNTY, 2021

LOCATION	SATISFIED WITH AREA	SUITABLE EMPLOYMENT IN AREA	GOOD PLACE TO RAISE KIDS
Connecticut	88%	63%	76%
Fairfield County	89%	66%	79%
Bridgeport	78%	40%	34%
Stamford	90%	68%	76%
BY DEMOGRAPHIC WITHIN FAIRFIELD COUNTY			
Male	87%	66%	77%
Female	90%	65%	80%
Age 18–34	87%	55%	69%
Age 35–49	88%	69%	78%
Age 50–64	89%	67%	83%
Age 65+	92%	72%	87%
White	89%	71%	85%
Black	86%	51%	62%
Latino	88%	51%	72%
High school or less	88%	57%	70%
Some college or Associate's	83%	59%	71%
Bachelor's or higher	92%	69%	85%
<$30K	80%	51%	63%
$30K-$100K	89%	61%	76%
$100K+	93%	74%	87%
Kids in home	89%	65%	78%
No kids	89%	65%	80%

Municipal Spending and Community Assets

Residents rely on their governments to distribute taxes in the form of services and amenities, from road repair and waste collection to school and library funding. Wealthier towns with higher levels of homeownership and fewer tax-exempt properties have greater grand list revenue, and are more likely to spend more per person on these services, facilities, and programs. Greenwich nets more than 10 times its grand list per capita than Bridgeport and allocates more funds per capita for various services (SEE FIGURE 8C).

In towns that serve as employment centers, expenditure per daytime population, including workers who commute into the town, reveal the extent to which those areas bear the brunt of infrastructure services like road maintenance, as well as safety services such as police and fire departments. Connecticut's large cities are such employment hubs, and as a result, towns like Bridgeport and Stamford spend less per capita for daytime populations than wealthier suburbs do.

Libraries provide a wide variety of programs in addition to lending books, such as literacy, language, and skills training programs that serve the public by improving economic and educational outcomes, particularly for low-income residents. However, in cities like Danbury with lower per capita grand list revenue, per capita library spending is among the lowest in the county.

Similarly, tax dollars fund municipal schools, and in towns with smaller tax bases, per-pupil spending is lower. This fuels the gaps between wealthy and less-wealthy school districts. There is also a positive relationship between more school funding and adults believing that their area is a good place to raise children. Stamford spends an average of $19,000 per student per year, and 76 percent of adults believe the city is a good place to raise kids. Bridgeport spends $15,000 per pupil per year and only 34 percent believe the same (SEE FIGURE 8C, TABLE 8B).

Urban residents enjoy more stores within walking distance as well as greater sidewalk connectivity and walkability. About three-quarters of adults in both Bridgeport and Stamford say they have stores within walking distance in their neighborhoods, but Bridgeport adults rate the quality of available produce much lower, suggesting the quality of those stores matters as well as walkability. Municipal dollars are also used to fund recreational facilities like parks, community centers, and off-street walking and biking trails. Towns with higher per capita grand lists often have higher levels of satisfaction with those facilities in their area (SEE TABLE 8C). DH

FIGURE 8C

Wealthier towns net more income from property values and often spend more on libraries and education

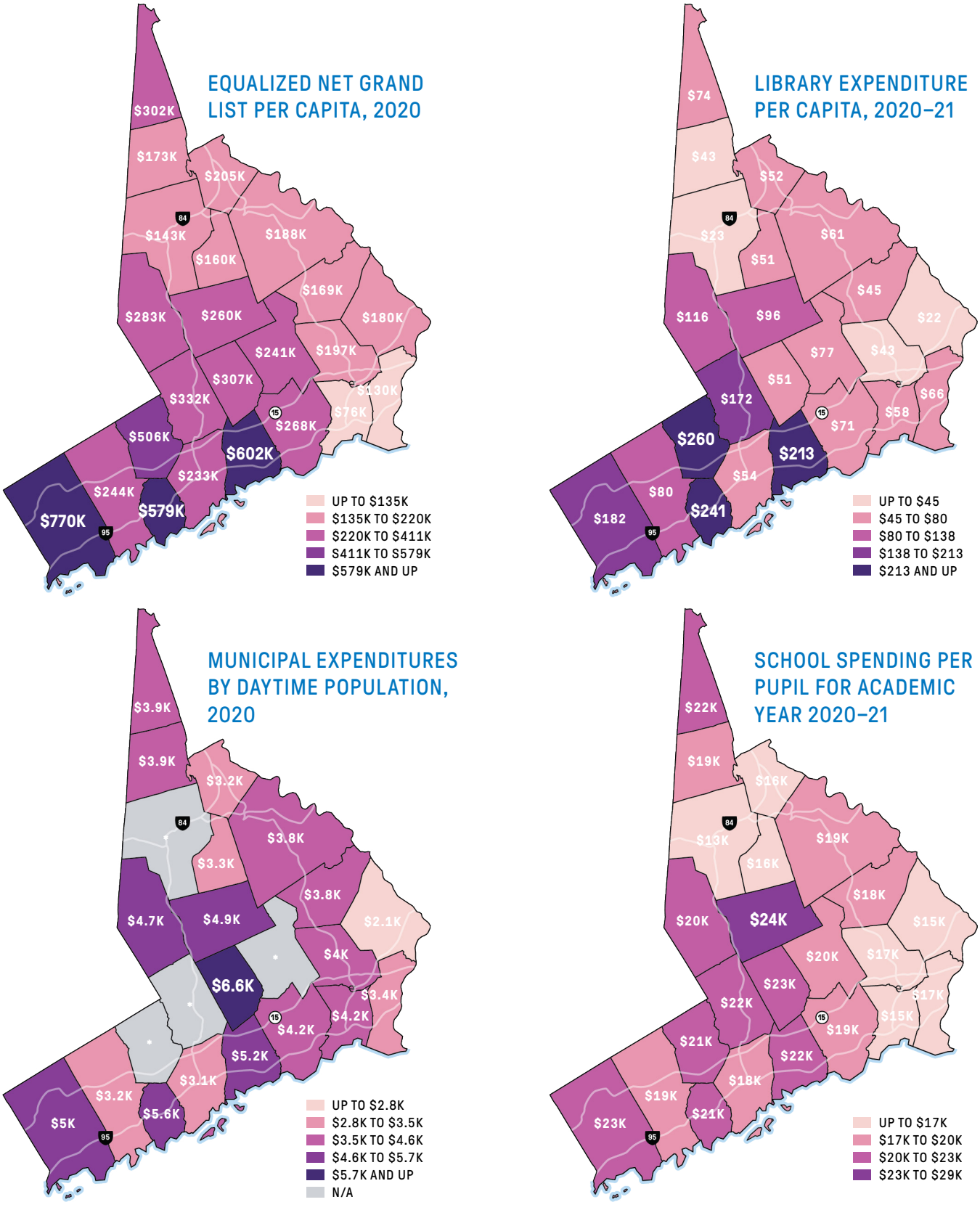


TABLE 8C

Views of local community assets

SHARE OF ADULTS, FAIRFIELD COUNTY, 2021

LOCATION	GOOD PARKS	HIGH QUALITY RECREATIONAL FACILITIES	SAFE BIKING	STORES IN WALKING DISTANCE	AFFORDABLE, HIGH QUALITY PRODUCE
Connecticut	78%	74%	68%	56%	76%
Fairfield County	82%	76%	66%	61%	76%
Bridgeport	58%	69%	57%	78%	52%
Stamford	81%	77%	73%	75%	75%
BY DEMOGRAPHIC WITHIN FAIRFIELD COUNTY					
Male	79%	78%	67%	62%	77%
Female	83%	72%	66%	60%	73%
Age 18–34	75%	79%	68%	70%	67%
Age 35–49	81%	77%	68%	65%	74%
Age 50–64	84%	78%	64%	55%	81%
Age 65+	88%	69%	64%	51%	83%
White	86%	75%	65%	54%	82%
Black	76%	74%	71%	70%	63%
Latino	72%	77%	67%	75%	63%
High school or less	77%	73%	70%	72%	68%
Some college or Associate's	76%	74%	63%	63%	72%
Bachelor's or higher	87%	78%	66%	55%	79%
<$30K	74%	74%	64%	73%	67%
$30K-$100K	78%	72%	64%	66%	71%
$100K+	88%	79%	67%	51%	84%
Kids in home	79%	79%	68%	59%	74%
No kids	83%	73%	64%	62%	76%

Policing and Criminal Justice

Many aspects of the criminal justice system—from policing to court proceedings to incarceration and sentencing—disparately affect Black and Latino communities across both adult[139] and juvenile systems.[140] While Connecticut has been lauded for criminal justice reforms made over the past decade, these reforms have not been felt equally.[141]

Annual surveys from the Bureau of Justice Statistics find that Black people were over 10 times more likely than white people to report that their most recent contact with police involved some form of misconduct, including bias, use of slurs, or sexual misconduct.[142] Even when residents initiate contact with police, Black and Latino residents are less likely to report feeling satisfied with the police response.[143,144]

Statewide and within Fairfield County, white and higher-income adults see their local police much more favorably than Black, Latino, and lower-income adults do. According to the 2021 DataHaven Community Wellbeing Survey, 84 percent of white adults in Fairfield County rated the job done by local police as excellent or good, compared to 55 percent of Black adults and 67 percent of Latino adults. Similar trends are seen at the town level, where views of the same department differ. In Bridgeport, 50 percent of white adults and 48 percent of Latino adults approve of the police, compared to 34 percent of their Black neighbors (SEE CHAPTER 7 FOR ADDITIONAL DISCUSSION OF PUBLIC SAFETY).[145]

Ten percent of white adults in Fairfield County, 24 percent of Black adults, and 17 percent of Latino adults reported having been unfairly stopped, mistreated, or abused by police. Nine percent of Black and Latino adults said this had happened to them multiple times within the past three years, compared to only 1 percent of white adults.[146]

A major review of literature finds connections between Black youth contact with police and a variety of adverse health behaviors and outcomes, including anxiety, aggression, coping behaviors such as drug use, and self-isolation.[147] These feelings can arise from witnessing another person's experiences, and ripple through families, communities, and even across social media.[148] DH

Incarceration

Similar to nationwide trends, Connecticut's incarceration rate skyrocketed from the late 1970s through the early 2000s.[149] Since then, Connecticut has enacted a variety of prison reform measures and now has among the lowest incarceration rates of any U.S. state, leading to the closure of several adult and juvenile facilities,[150,151] yet disparities persist.[152]

One major recent change is Connecticut's end of prison gerrymandering, the practice of counting incarcerated people as residents of the place where they are incarcerated rather than the place where they will most likely return upon release. In its decennial data, the Census Bureau counts prisoners where they are incarcerated, then gives this to state legislatures for redistricting. Using these data skews the allocation of state legislators, funding, and other resources tied to these population counts[153] in favor of areas where prisons are located and against places where incarcerated people will be returning to, penalizing their entire neighborhoods.[154] Such resources could help prevent criminal justice involvement and incarceration in the first place. Under a 2021 law and starting with the 2020 data, Connecticut now draws its legislative boundaries based on last known residence of incarcerated people. The difference between these numbers can be dramatic: in some towns, as many as one in 10 residents reported by the Census are people held in prisons there (SEE FIGURE 8D, TABLE 8D).[155]

In Fairfield County, 26 percent of adults say a member of their immediate family has been jailed for at least one night. This ranges from 16 percent in Trumbull to 44 percent in Bridgeport, and is highest among Latino adults (35 percent), Black adults, and adults with incomes below $30,000 (both 38 percent).[156]

After being released from prison, people reentering their communities can find it difficult to get a job, find housing, reunite with family, and obtain documents like drivers' licenses.[157] Meanwhile, the state requires people to pay back some costs of their incarceration, leaving them saddled with debt. These fees are the subject of policies targeted for reforms,[158,159] as they may contribute to recidivism. Of the people released from Connecticut prisons in 2018, 44 percent had returned to prison within the next 36 months.[160] DH

FIGURE 8D

In some neighborhoods, more than 1 in 100 residents are incarcerated and counted as living elsewhere

ESTIMATED INCARCERATION RATE PER 1,000 PEOPLE BY TRACT OF RESIDENCE, FAIRFIELD COUNTY, 2020, WITH CT DEPARTMENT OF CORRECTION (DOC) FACILITIES

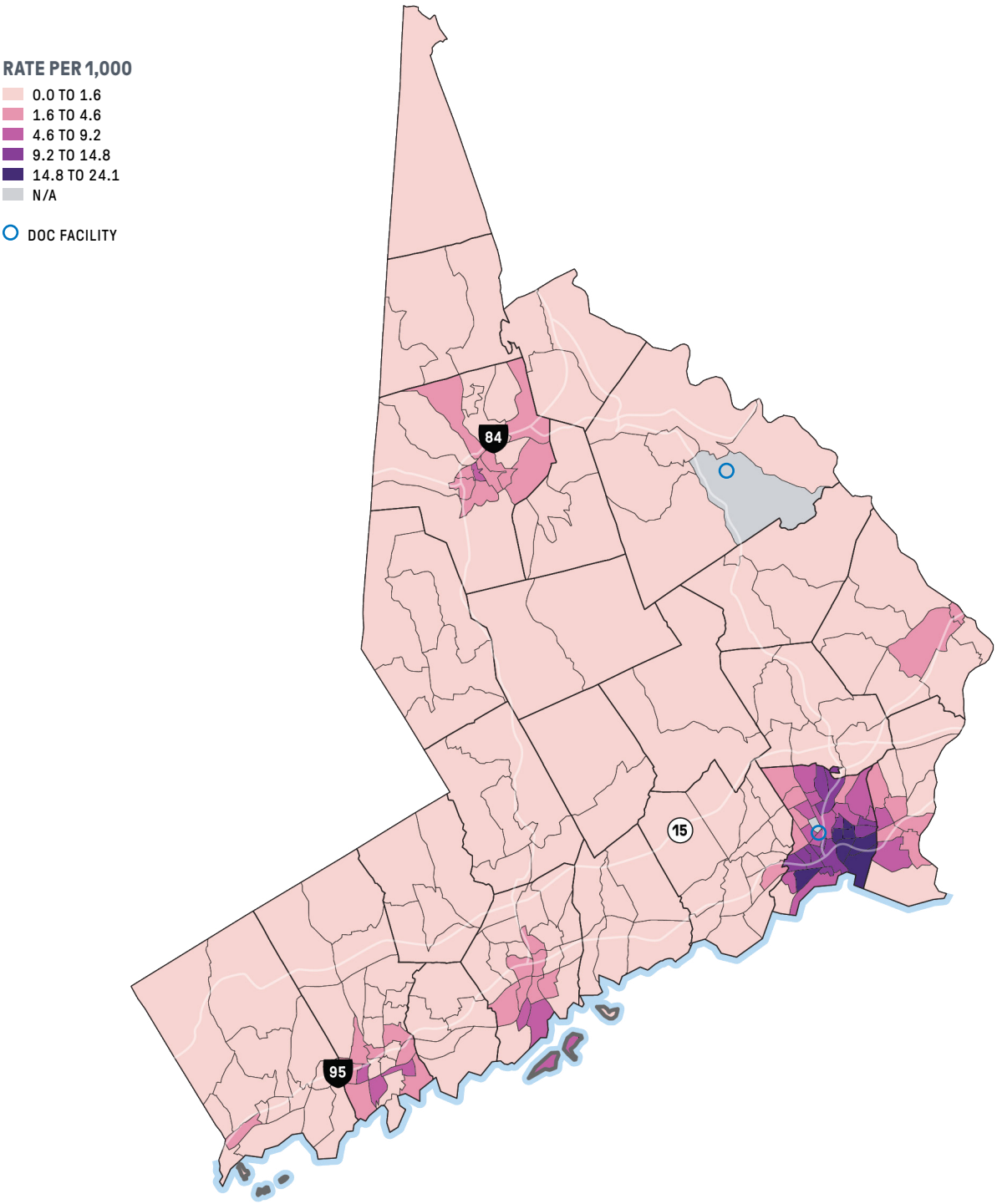


TABLE 8D

Incarceration

ESTIMATED COUNT AND RATE OF INCARCERATED PEOPLE BY TOWN OF RESIDENCE, FAIRFIELD COUNTY, 2020

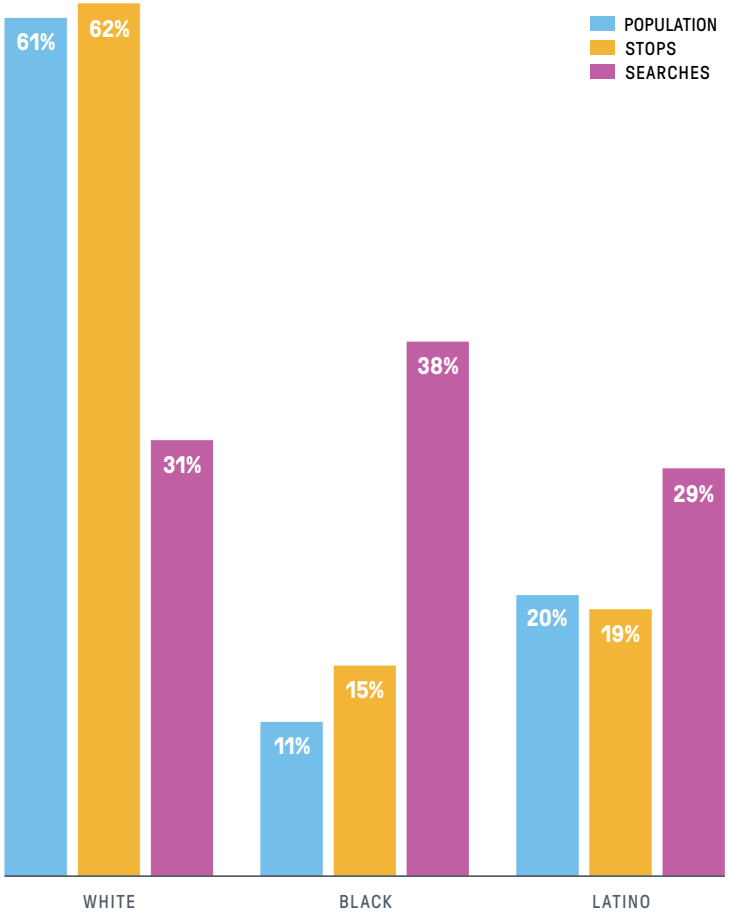
TOWN	INCARCERATED POPULATION	REPORTED CENSUS POPULATION	TOTAL POPULATION, INCL. INCARCERATED	EST. INCARCERATION RATE PER 1,000
Bethel	19	20,358	20,377	0.9
Bridgeport	1,349	148,654	149,360	9.0
Brookfield	12	17,528	17,540	0.7
Danbury	183	86,518	85,644	2.1
Darien	1	21,499	21,500	<0.1
Easton	4	7,605	7,609	0.5
Fairfield	22	61,512	61,534	0.4
Greenwich	20	63,518	63,538	0.3
Monroe	7	18,825	18,832	0.4
New Canaan	0	20,622	20,622	0
New Fairfield	7	13,579	13,586	0.5
Newtown	14	27,173	26,631	0.5
Norwalk	180	91,184	91,364	2.0
Redding	1	8,765	8,766	0.1
Ridgefield	4	25,033	25,037	0.2
Shelton	45	40,869	40,914	1.1
Sherman	4	3,527	3,531	1.1
Stamford	290	135,470	135,760	2.1
Stratford	140	52,355	52,495	2.7
Trumbull	15	36,827	36,842	0.4
Weston	1	10,354	10,355	<0.1
Westport	6	27,141	27,147	0.2
Wilton	1	18,503	18,504	<0.1

Census populations here may not match town populations reported elsewhere, as tracts with state jails or prisons are excluded from these calculations. See endnotes for more details.

FIGURE 8E

Black residents make up a far larger share of drivers searched by police than their share of the population

SHARE BY RACE OF POPULATION, DRIVERS STOPPED BY POLICE, AND DRIVERS SEARCHED BY POLICE WHERE RACE IS KNOWN, FAIRFIELD COUNTY POLICE DEPARTMENTS, 2018–2020



FOCUS: POLICE STOPS

Since 2013, Connecticut's law against racial profiling has required law enforcement agencies to collect and publish data on all traffic stops.[161] Within stops made by Fairfield County police departments,[162] Black residents are slightly overrepresented,[163] making up 15 percent of traffic stops, compared to 11 percent of the population overall; Latinos are 19 percent of stopped drivers and 20 percent of the population. At the town-level, these gaps are often wider: in several towns Black people made up less than 2 percent of the population but between 8 and 15 percent of drivers stopped.[164]

Starker disparities occur in the share of stops that lead to searches: 9 percent of stops of Black drivers and 5 percent of stops of Latino drivers by Fairfield County departments led to a search, compared to 2 percent of white drivers. While there are various reasons for stopping and searching a car, stops related to tinted windows, expired registration, and display of license plates are most strongly associated with the driver's race, with Black and Latino drivers much more likely to be searched than white drivers stopped for the same offenses. Yet these searches show that it is actually white drivers on whom contraband is most commonly found: among Fairfield County departments, 39 percent of searches of white drivers, 33 percent of searches of Black drivers, and 29 percent of searches of Latino drivers turned up some type of contraband.[165]

Despite the clear disparities when looking at these average measures, pinpointing exactly where, when, and how racial profiling occurs on a local level—if it does occur—is not so straightforward. Throughout the county, Black and Latino drivers are more likely to be pulled over in majority-white neighborhoods than to actually live in them; that is, while these drivers may be pulled over in a variety of types of neighborhoods, there is a pattern of them being pulled over in neighborhoods where they stand out.[166] Race and ethnicity certainly play a role in patterns of police stops, at the very least insofar as there seem to be measurable disparate effects on Black and Latino drivers, but how exactly those effects play out warrants more study.[167]

CHAPTER 9

Conclusion and Endnotes

Conclusion

Health, education, housing, transportation and public safety are so often treated as distinct areas of public policy, but together they crucially shape the lives of residents and their communities. While some have more direct connections to well-being—such as access to healthcare and food security—others may be less obvious—such as mass incarceration, housing stability, and feelings of safety and trust.

In the first chapter, we combine survey data from the U.S. Census Bureau with DataHaven's in-depth interviews completed by tens of thousands of randomly selected Connecticut residents. Together, these sources provide a first-hand view of residents' lives, and the way that housing, healthcare, and education affect their overall happiness and satisfaction with life. By combining traditional indicators of government services and the economy with these measures of evaluative well-being, we can augment our understanding of factors that are responsible for differences in quality of life in the region.

There is, however, never enough space to discuss every aspect of well-being for every community. Data limitations also present a challenge. Data collection is never objective. Decisions that agencies make when they define and gather data can lead to inaccuracies or unintentional biases. Survey sample sizes can limit the availability of point-in-time information about smaller populations. The imperfections of survey questions that capture information on complex topics such as race, tribal affiliation, sexual orientation, gender identity, language, immigration status, and disability—or the omission of such questions altogether—can prevent everyone from having the information they need about themselves and how social conditions affect them. Further information about communities and population groups throughout Connecticut may be found in our reports (https://www.ctdatahaven.org/reports), including previous editions of this publication and our Town Equity Reports, or by contacting DataHaven directly. Ultimately, creating more meaningful community-level information requires investment in policy and systems-level reforms and strengthened data collection.

This report examines present residents' well-being, but many of the underlying forces shaping that have been in play for generations. Some of our previous reports have explored historical and cultural factors in more detail; these issues require interdisciplinary analysis, storytelling, and approaches to promote healing across entire communities. Likewise, it is vital for policymakers to look beyond current trends and consider how present conditions may influence future generations' well-being. With a more holistic view, some issues—such as reducing adverse childhood experiences linked to eviction, job loss, incarceration, and other family experiences—become more urgent. Today's decisions relating to the built environment could profoundly affect our towns and cities for many generations. Centuries of structural inequities fueled by white supremacy have perpetuated and continue to shape community-level differences, many of which have been illuminated by the past three years of the pandemic and its fallout. Residents and policymakers should prioritize these areas for the sake of future generations' well-being.

We are grateful to the Advisory Council and residents who participated in interviews and focus groups, which helped to validate which issues were of greatest concern within each community. Likewise, support from funders and statistics produced by government agencies made our work possible. We hope policymakers and elected officials—and furthermore, nonprofits, residents, activists, and community organizations—can use this report to understand how their own communities fit into the larger tapestry of the region. We invite you to expand it beyond its limitations and use it in innovative ways. DH

SECTION 1. NOTES ON FIGURES AND TABLES

GENERAL NOTE ON GEOGRAPHY

Fairfield County is made up of 23 towns: Bethel, Bridgeport, Brookfield, Danbury, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, New Fairfield, Newtown, Norwalk, Redding, Ridgefield, Shelton, Sherman, Stamford, Stratford, Trumbull, Weston, Westport, and Wilton. In some parts of this report, we refer to the county's 6 wealthiest towns in aggregate; these are Darien, New Canaan, Ridgefield, Weston, Westport, and Wilton. In some charts and tables, the county's larger towns are highlighted, often Bridgeport, Danbury, Fairfield, Greenwich, Norwalk, Stamford, and Stratford, as are the 6 wealthiest towns. The group "other towns" would then be the remaining towns of Bethel, Brookfield, Easton, Monroe, New Fairfield, Newtown, Redding, Shelton, Sherman, and Trumbull.

Analyses of public use microdata sample (PUMS) data throughout the report are done for combinations of public use microdata areas (PUMAs), the smallest geographic unit for which PUMS data is available. Fairfield County is made up of the Connecticut PUMAs with FIPS codes 00100, 00101, 00102, 00103, 00104, and 00105.

GENERAL NOTE ON DATAHAVEN COMMUNITY WELLBEING SURVEY

One of the major sources used in this report is the DataHaven Community Wellbeing Survey (DCWS), which conducts live interviews with randomly-selected adults in all 169 Connecticut towns. This report focuses on data from the most recent DCWS, which was carried out from May to December 2021, during which 9,139 adults were interviewed, and again in August 2022, during which 1,196 adults were interviewed. Large surveys were also fielded in 2012, 2015, 2018, and 2020. Questions on the DCWS are compiled from local, national, and international sources and best practices, and are developed with input from an advisory committee of leading experts in survey research. All reported DCWS estimates are weighted in order to accurately represent the underlying adult population within each region, town, or neighborhood. In many cases and where sample sizes allow, data are disaggregated by geographic area and self-reported demographic groups such as age, gender, education, race or ethnicity, and income. For more information and crosstabs of data, see https://www.ctdatahaven.org/wellbeingsurvey

GENERAL NOTE ON PUBLIC USE MICRODATA SAMPLES (PUMS) ANALYSIS

In several cases, the specific analyses we wanted to do were not possible using published data, most commonly data from the U.S. Census Bureau American Community Survey. For this reason, the Census Bureau and other sources publish public use microdata samples (PUMS) at the individual respondent level. Analysis of PUMS data involves weighting survey responses to reflect overall population demographics. In many cases, PUMS data were accessed via IPUMS, Ruggles, S., Flood, S., Goeken, R., Schouweiler, M., & Sobek, M. (2022). IPUMS USA: Version 12.0 [dataset]. IPUMS. https://doi.org/10.18128/D010.V12.0.

Chapter 1. Introduction and Community Index

TABLE 1A. QUALITY OF LIFE RANKINGS FOR NEW ENGLAND AND NEW YORK

State rankings for the six states in New England plus New York were compiled from multiple sources, including: 1) Lewis, K. & Gluskin, R. (2018). Measuring America: Ten Years and Counting. Measure of America, Social Science Research Council. 2) Opportunity Nation. (2020). Opportunity Index 2019. https://opportunityindex.org 3) Education Week. (2021). Quality Counts 2021. https://www.edweek.org/leadership/quality-counts-2021-grading-the-states 4) Bloomberg. Innovation Index (2020). Bloomberg analysis of data from Bureau of Economic Analysis, Bureau of Labor Statistics, National Science Foundation, U.S. Census, U.S. Patent and Trademark Office & Bloomberg data. 5) United Health Foundation. (2021). America's Health Rankings 2021. americashealthrankings.org 6) Prosperity Now. (2020). Prosperity Now Scorecard 2020. https://scorecard.prosperitynow.org/reports#report-state-profile

TABLE 1B. DATAHAVEN COMMUNITY INDEX, 2015–2020

DataHaven analysis (2022). The 8 indicators used in the Community Index include: (1) homeownership rate; (2) the share of adults ages 25 and up with a high school education or more; (3) labor force participation for the population ages 25 to 44; (4) the share of workers whose commutes as 30 minutes or less; (5) housing cost burden, or the share of households paying 30 percent or more of their income towards housing costs; (6) low-income rate, or the share of the population living in a household with an income less than two times the federal poverty level; (7) the share of children living in poverty; and (8) the share of the population with health insurance.

The Community Index assigns each of the 8 component indicators a relative value from 0 to 1,000, where 1,000 is assigned to the best/preferred outcome. In other words, the value is generated relative to the areas with the highest and lowest indicator values. This helps to control for the different distributions of each indicator, but may exaggerate the effect of outliers. In addition to major geographic regions and large towns, values were calculated for lower- and higher-income census tracts in the largest towns.

Because the data used for these indicators are available at different geographic levels nationwide, local neighborhoods, towns, and regions in Connecticut were compared not just to each other, but to U.S. averages and metropolitan areas.

All data are from the U.S. Census Bureau American Community Survey (ACS) 2015 and

2020 5-year estimates, Tables B08303, Travel Time to Work; B15002, Sex by Educational Attainment for the Population 25 Years and Over; B17001, Poverty Status in the Past 12 Months by Sex by Age; B17024, Age by Ratio of Income to Poverty Level in the Past 12 Months; B18135, Age by Disability Status by Health Insurance Coverage Status; B23001, Sex by Age by Employment Status for the Population 16 Years and Over; B25015, Tenure by Age of Householder by Occupants per Room; B25070, Gross Rent as a Percentage of Household Income in the Past 12 Months; B25091, Mortgage Status by Selected Monthly Owner Costs as a Percentage of Household Income in the Past 12 Months.

The Community Index uses Census ACS estimates for health insurance coverage to allow for nationwide comparisons at many geographic levels. Elsewhere in this report, health insurance coverage is reported from DataHaven's Community Wellbeing Survey. The average (mean) of the 8 scaled indicators represents the area's Community Index score. Five-year averages for 2011–2015 and 2016–2020 were used because they represent non-overlapping estimate ranges.

For "high" and "low" income neighborhoods in select Connecticut cities, the five wealthiest and five poorest tracts were grouped together.

FIG 1A. INDEX SCORE BY TOWN, 2020

SEE TABLE 1B

TABLE 1C. DATAHAVEN COMMUNITY INDEX AND ITS COMPONENTS, 2020

SEE TABLE 1B

FIG 1B. PERSONAL WELLBEING INDEX (2021) VERSUS COMMUNITY INDEX SCORES (2020)

SEE TABLE 1B

TABLE 1D. DATAHAVEN INDEX SCORES

SEE TABLE 1B AND FIG 1B

FIG 1C. SHARE OF ADULTS REPORTING BEING SATISFIED WITH LIFE BY INCOME AND DEMOGRAPHIC GROUP, CONNECTICUT, 2015–2021

DataHaven analysis (2022) of questions from the 2015, 2018, and 2021 DataHaven Community Wellbeing Survey. Respondents were asked how satisfied they are with their lives, and are considered satisfied if they answered "mostly" or "completely" satisfied.

FIG 1D. SHARE OF ADULTS REPORTING BEING SATISFIED WITH LIFE BY SELECT EXPERIENCES, CONNECTICUT, 2015–2021

SEE FIG 1C Additional survey questions were used to determine life experiences. These include questions pertaining to household income, financial security, self-rated health, social support, food security, trust in neighbors, employment status, access to a car, and whether the respondent received medical care when needed.

Chapter 2. Population

TABLE 2A. POPULATION AND GROWTH, 2010–2020

DataHaven analysis (2022) of U.S. Census Bureau 2010 and 2020 Decennial Census Redistricting Data, Table P2. Hispanic or Latino, and Not Hispanic or Latino by Race.

TABLE 2B. CHARACTERISTICS BY RACE/ETHNICITY AND ORIGIN, 2020

DataHaven analysis (2022) of U.S. Census Bureau 2010 and 2020 Decennial Census Redistricting Data, Table P2. Hispanic or Latino, and Not Hispanic or Latino by Race; and U.S. Census Bureau American Community Survey 2020 5-year estimates, Table B05001, Nativity and Citizenship Status in the United States. Percent foreign-born is calculated based on populations from the American Community Survey, and may not exactly match what would be expected based on the redistricting population.

FIG 2A. SHARE OF POPULATION BY RACE/ETHNICITY, 1980–2020

DataHaven analysis (2022). 2020 values are from U.S. Census 2020 Decennial Census Redistricting Data, Table P2. Hispanic or Latino, and Not Hispanic or Latino by Race. 1980 values are from the Neighborhood Change Database (NCDB), a dataset developed by GeoLytics and the Urban Institute with support from the Rockefeller Foundation (2012). The NCDB is designed to hold neighborhood-level geographic boundaries constant over time, and is used for historical figures several times in this document.

FIG 2B. POPULATION BY RACE/ETHNICITY AND AGE, 2020

DataHaven analysis (2022) of U.S. Census Bureau American Community Survey 2020 5-year estimates, Table B01001, Sex by Age, and subtables by race/ethnicity.

FIG 2C. SHARE OF POPULATION BY NEIGHBORHOOD INCOME LEVEL, 2020

DataHaven analysis (2022) of household income and population data by census tract from the Neighborhood Change Database. For detail on NCDB, SEE FIG 2A. 2020 values are calculated from U.S. Census Bureau American Community Survey 2020 5-year estimates Tables B01003, Total Population; B19025, Aggregate Household Income in the Past 12 Months (in 2020 Inflation-Adjusted Dollars); and B25003, Tenure. Neighborhood income categories are determined by comparing average household income by census tract to the state average household income, using ratios described in the table to the right of the figure. The percent of total population living in each neighborhood income category is compared across decades to illustrate change in neighborhood inequality.

FIG 2D. SHARE OF HOUSEHOLDS BY HOUSEHOLD TYPE, 2020

DataHaven analysis (2022) of U.S. Census Bureau American Community Survey 2020 5-year estimates, Tables B11001, Household Type (Including Living Alone); and B11003, Family Type by Presence and Age of Own Children Under 18 Years.

FIG 2E. NUMBER OF RESIDENTS BY PLACE OF BIRTH, 2000 AND 2020

DataHaven analysis (2022) of U.S. Census Bureau American Community Survey 2000 and 2020 5-year public use microdata sample (PUMS) data. See general note on PUMS analysis. Additionally, world regions were standardized using Natural Earth, a public domain geographic dataset supported by the North American Cartographic Information Society.

Natural Earth data were accessed via South, A. (2022). Rnaturalearth: World map data from natural earth [Computer software].

FIG 2F. HIGH/LOW CLASSIFICATION OF MEAN HOUSEHOLD INCOME AND RACIAL/ETHNIC DIVERSITY BY CENSUS TRACT, 2020

DataHaven analysis (2022) of U.S. Census Bureau American Community Survey 2020 5-year estimates Tables B03002, Hispanic or Latino Origin by Race; B19025, Aggregate Household Income in the Past 12 Months (in 2020 Inflation-Adjusted Dollars); and B25003, Tenure.

The measure of racial/ethnic diversity used here is a localized version of the Shannon-Wiener diversity index and implemented with Tivadar, M. (2019). OasisR: An R package to bring some order to the world of segregation measurement. Journal of Statistical Software, 89, 1–39. https://doi.org/10.18637/jss.v089.i07. Put simply, a diversity index such as this one measures how heterogeneous an area is, where a value of 0 would mean all residents are of one group, and a value of 1 would mean all possible groups are present in equal proportions. High/low classifications are then calculated as a bivariate local Moran's I index; this type of index identifies the locations of clusters, where values in one tract are either much higher or much lower than the average, and where that tract is neighbored by other tracts with similarly high or low values. Implementation is based on Anselin, L. (1995). Local indicators of spatial association—LISA. Geographical Analysis, 27(2), 93–115. https://doi.org/10.1111/j.1538-4632.1995.tb00338.x; and Anselin, L. (2019). A local indicator of multivariate spatial association: Extending Geary's c. Geographical Analysis, 51(2), 133–150. https://doi.org/10.1111/gean.12164

FIG 2G. AVERAGE RACIAL/ETHNIC MAKEUP OF A RESIDENT'S NEIGHBORS, 2020

DataHaven analysis (2022) of U.S. Census Bureau American Community Survey 2020 5-year estimates Tables B03002, Hispanic or Latino Origin by Race. Neighborhood makeup is conceptualized as a spatial index of exposure or interaction, a measure of the likelihood that people of two groups live in the same area. These indices are calculated from the perspective of a member of each group, such that there is a set of values with respect to the average white resident, a set of values for the average Black resident, and so on. Isolation is a subset of these interaction indices, giving the likelihood that a person of one group lives near another person of that same group. Implementation is done with Hong, S.-Y., & O'Sullivan, D. (2019). seg: Measuring spatial segregation (Version 0.5-7) [Computer software]. https://CRAN.R-project.org/package=seg based on Reardon, S. F., & O'Sullivan, D. (2004). 3. Measures of spatial segregation. Sociological Methodology, 34(1), 121–162. https://doi.org/10.1111/j.0081-1750.2004.00150.x

Chapter 3. Economic Security

FIG 3A. MEDIAN HOUSEHOLD INCOME IN 2020 DOLLARS, 1980–2020

DataHaven analysis (2022) of U.S. Census Bureau American Community Survey 2020 5-year estimates Table B19013, Median Household Income in the Past 12 Months (In 2020 Inflation-Adjusted Dollars). 1980 values come from the 1980 Decennial Census and were obtained from IPUMS NHGIS, a database maintained by the Institute for Social Research and Innovation at the University of Minnesota. Inflation adjustments were made using the consumer price index for all urban consumers.

FIG 3B. POVERTY RATE BY FAMILY TYPE AND AGE OF HOUSEHOLDER, 2020

DataHaven analysis (2022) of U.S. Census Bureau American Community Survey 2020 5-year estimates Table B17017, Poverty Status in the Past 12 Months by Household Type By Age of Householder.

TABLE 3A. POVERTY AND LOW-INCOME RATES, 2020

DataHaven analysis (2022) of U.S. Census Bureau American Community Survey 2020 5-year estimates Table B17024, Age by Ratio of Income to Poverty Level in the Past 12 Months. Low income is defined as individuals living in households where the household income is less than two times (200 percent of) the federal poverty level.

FIG 3C. SHARE OF ADULTS REPORTING FOOD INSECURITY BY RACE/ETHNICITY AND PRESENCE OF CHILDREN, CONNECTICUT, 2015–2022

DataHaven analysis (2022) of the 2015, 2018, 2020, 2021, and 2022 waves of the DataHaven Community Wellbeing Survey. Food insecurity is defined as having been unable to support food for oneself or one's family at any point in the past 12 months. For years with smaller sample sizes (i.e. 2020 and 2022) only statewide values are available.

FIG 3D. SHARE OF HOUSEHOLDS WITHOUT VEHICLE ACCESS BY NUMBER OF WORKERS AND RACE/ETHNICITY OF HEAD OF HOUSEHOLD, 2020

DataHaven analysis (2022) of U.S. Census Bureau American Community Survey 2020 5-year public use microdata sample (PUMS) data. SEE GENERAL NOTE ON PUMS ANALYSIS Households included here are those with at least one member between ages 25 and 64.

When discussing race and ethnicity of households, values are based on the race/ethnicity of the person designated as head of household when filling out the census, which may differ from other members of the household.

TABLE 3B. FINANCIAL SECURITY, 2021

DataHaven analysis (2022) of questions from the 2021 DataHaven Community Wellbeing Survey. For share "just getting by," survey participants, when asked how well they were managing financially, responded that they were just getting by, finding it difficult, or finding it very difficult. Negative net worth is based on participants' estimates of whether they would have money left over were their household to liquidate its assets and major possessions and pay off all debts. Transportation insecurity is defined as the share of participants reporting that at some point in the past 12 months, they could not go somewhere due to lack of reliable transportation. Likewise, food insecurity is defined as the share of participants reporting that at some point in the past 12 months, they were unable to afford to buy food they needed. Adults without car access report not having access to a car when they need one. SEE GENERAL NOTE ON THE COMMUNITY WELLBEING SURVEY

TABLE 3C. INTERNET ACCESS, 2020

DataHaven analysis (2022) of U.S. Census Bureau American Community Survey 2020 5-year estimates, Table B28004, Household Income in the Last 12 Months (in 2020 Inflation-Adjusted Dollars) by Presence and Type of Internet Subscription in Household.

FIG 3E. SHARE OF RESIDENTS WITH DEBT IN COLLECTIONS BY MAJORITY RACE/ETHNICITY OF ZIP CODE, 2021

DataHaven analysis (2022) of data from the Debt in America study, which provides statistics based on a 4 percent nationally representative sample of five million consumer records. The data were obtained from a major credit bureau and compiled by researchers at the Urban Institute. Consumer-level information was aggregated to the zip code level and joined with demographic data from the 2020 American Community Survey 5-year estimates.

Chapter 4. Housing

FIG 4A. MEDIAN HOUSING VALUE BY RACE/ETHNICITY OF HEAD OF HOUSEHOLD, 2020

DataHaven analysis (2022) of U.S. Census Bureau American Community Survey 2020 5-year public use microdata sample (PUMS) data. Included here are households occupied by the owner(s). SEE GENERAL NOTE ON PUMS ANALYSIS / SEE FIG 3D FOR DETAILS ON RACE/ETHNICITY OF HOUSEHOLDS

TABLE 4A. HOMEOWNERSHIP, 2020

DataHaven analysis (2022) of U.S. Census Bureau American Community Survey 2020 5-year estimates, Tables B25003, Tenure; B25003B, Tenure (Black or African American Alone Householder); B25003H, Tenure (White Alone, Not Hispanic or Latino Householder); B25003I, Tenure (Hispanic or Latino Householder); and B25003D, Tenure (Asian Alone Householder).

FIG 4B. REJECTED SHARE OF MORTGAGE APPLICATIONS BY INCOME AND RACE/ETHNICITY OF MAIN APPLICANT, 2021

DataHaven analysis (2022) of 2021 Home Mortgage Disclosure Act data, a dataset of loan-level information about mortgages. The Home Mortgage Disclosure Act requires that financial institutions maintain and disclose mortgage information. This data is collected and compiled by the Federal Financial Institutions Examination Council. The public data are altered to protect applicant confidentiality. DataHaven used three fields from this data: applicant race and ethnicity, applicant income, and application outcome. Application data were aggregated to the county level.

TABLE 4B. AVERAGE RENT, 2018–2022

DataHaven analysis (2022) of the Zillow Observed Rent Index (ZORI), created by Zillow. ZORI is a weighted mean of the rental housing stock. Weights are used to account for differences between Zillow's rental housing and the entire market. Rental unit price changes are used to account for differences between the rental housing stock and what is available to rent at a given point in time. Metropolitan statistical area (MSA)-level ZORI estimates were used for this analysis.

FIG 4C. HOMEOWNERSHIP RATE BY HOUSEHOLD INCOME QUINTILE, 2020

DataHaven analysis (2022) of U.S. Census Bureau American Community Survey 2020 5-year public use microdata sample (PUMS) data. Income quintiles are based on U.S. Census Bureau American Community Survey 2020 5-year estimates, Table B19080, Household Income Quintile Upper Limits. SEE GENERAL NOTE ON PUMS ANALYSIS

FIG 4D. PERCENT CHANGE IN MEDIAN HOME PRICES AND MONTHLY RENT BY COUNTY, 2018–2022

DataHaven analysis (2022) of the Zillow Observed Rent Index (ZORI), created by Zillow. SEE TABLE 4B FOR DETAILS ON ZORI Home price change estimates are based on the house price index (HPI) from the Federal Housing Finance Agency. HPI is a measure of change in single family house prices. HPI is computed by taking a weighted average of price changes based on repeat sales or refinancings on the same property.

FIG 4E. COST-BURDEN RATES BY TENURE AND RACE/ETHNICITY OF HEAD OF HOUSEHOLD, 2020

DataHaven analysis (2022) of U.S. Census Bureau American Community Survey 2020 5-year public use microdata sample (PUMS) data. SEE GENERAL NOTE ON PUMS ANALYSIS / SEE FIG 3D FOR DETAILS ON RACE/ETHNICITY OF HOUSEHOLDS

FIG 4F. AVERAGE HOUSING VALUE BY TOWN, 2022

DataHaven analysis (2022) of the Zillow Home Value Index (ZHVI), created by Zillow. The ZHVI is a weighted mean based on Zestimates for over 100 million homes, including new constructions and homes that have been off the market for several years. Home values are smoothed to account for short-term fluctuations in the housing market and seasonally adjusted. ZHVI is available at the ZIP code level. DataHaven computed town-level estimates by using a zip code-to-town crosswalk, which is based on the Census Bureau's ZIP code tabulation area to county subdivision relationship file.

TABLE 4C. SEVERE COST BURDEN AND EVICTION

DataHaven analysis (2022). Severe cost burden values are from U.S. Census Bureau American Community Survey 2020 5-year estimates, Tables B25070, Gross Rent as a Percentage of Household Income in the Past 12 Months; and B25091, Mortgage Status by Selected Monthly Owner Costs as a Percentage of Household Income in the Past 12 Months. Eviction filings are from Hepburn, P., Louis, R., & Desmond, M. (2020). Eviction Tracking System: Version 1.0 [Dataset]. Princeton University. https://evictionlab.org. Households are considered severely cost-burdened when they spend at least 50 percent of their income on housing costs. The Eviction Lab collects records of "formal" eviction filings and evictions of renters. The former are eviction orders officially filed in court, while the latter are evictions that are fully carried out. These do not include "informal" evictions, where a landlord makes a tenant leave without going through the court system. It is possible for eviction orders to be filed multiple times against a single address in a year; these would be counted multiple times in the data.

FIG 4G. MONTHLY EVICTION FILINGS, JAN 2020–OCT 2022

SEE TABLE 4C

The federal government placed a moratorium on evictions from March 2020 through July 2021 (see the majority opinion of a ruling by the Supreme Court to end the moratorium https://www.supremecourt.gov/opinions/20pdf/21a23_ap6c.pdf). Connecticut had issued an eviction moratorium which ended a month earlier (https://portal.ct.gov/Coronavirus/Covid-19-Knowledge-Base/Rent-and-Eviction).

The prepandemic monthly average was computed by taking the average of each month's baseline eviction count, which is the average of that month's eviction count for each year from 2017 to 2019.

TABLE 4D. HOUSING CONSTRUCTION, 2018–2021

SEE FIG 4H FOR INFORMATION ON CONSTRUCTION PERMIT DATA Permit counts per 10K households were estimated using household counts from U.S. Census Bureau American Community Survey 2020 5-year estimates, Table B25003, Tenure.

FIG 4H. YEARLY AVERAGE HOUSING CONSTRUCTION PERMITS BY TYPE OF STRUCTURE, 2002–2021

DataHaven analysis (2022) of data on housing permits from Connecticut Department of Economic and Community Development Export, Housing, and Income Data, available at https://portal.ct.gov/DECD/Content/About_DECD/Research-and-Publications/01_Access-Research/Exports-and-Housing-and-Income-Data. Numbers of permits are averaged over four-year periods to smooth out fluctuations in construction from year to year, for example when a single large building is built.

Chapter 5. Youth and Education

TABLE 5A. K-12 ACHIEVEMENT

DataHaven analysis (2022) of data from the Connecticut State Department of Education, accessed via EdSight at http://edsight.ct.gov. The Smarter Balanced Assessment Consortium (SBAC) standardized test is the Common Core-aligned test used in Connecticut since 2015 for both English/language arts (ELA) and math. Students are considered to pass a test if they score as meeting or exceeding grade-level goals; proficiency rates here are the share of third-grade students taking each test who passed. Graduation rates presented are four-year cohort graduation rates, giving the percentage of students in the graduating class of 2021 who earned a high school diploma alongside the cohort with which they started 9th grade. Suspensions and SBAC proficiency rates are from the 2021–22 school year.

FIG 5A. SHARE OF STUDENTS CHRONICALLY ABSENT BY RACE/ETHNICITY AND ELIGIBILITY FOR FREE/REDUCED PRICE MEALS, 2015–16 TO 2022–23 SCHOOL YEARS

DataHaven analysis (2023) of data from the Connecticut State Department of Education (CTSDE), accessed via EdSight at http://edsight.ct.gov. A student is considered chronically absent if they miss at least 10 percent of the school days for which they were enrolled in a year for any reason; the chronic absenteeism rate is then the percentage of enrolled students who are chronically absent in a year. For some groups, CTSDE makes available a preliminary chronic absenteeism rate through the end of December; these are shown with a dashed line where available. For this and other indicators based on public school districts, regional districts were included as parts of regions to which their sending towns belong; in some cases, these towns also run their own districts for elementary school, but send middle and/or high school students to the regional district. Fairfield County values include Regional School District 9, comprised of high school students from Easton and Redding.

FIG 5B. GRADE 8 ENGLISH/LANGUAGE ARTS SBAC PASS RATES, PRE-2020 AVERAGE VERSUS 2021–22 SCHOOL YEAR

DataHaven analysis (2022) of data from the Connecticut State Department of Education, accessed via EdSight at http://edsight.ct.gov. Because schools were online or in hybrid mode early in the COVID-19 pandemic, statewide testing was canceled in the 2019–20 school year and waived for 2020–21. Pre-2020 averages are made up of all the years prior to the cancellation that the SBAC was administered, those being 2014–15 through 2018–19.

FIG 5C. NUMBER AND PERCENTAGE OF STUDENTS ENROLLING IN, PERSISTING IN, AND GRADUATING FROM COLLEGE OF PUBLIC HIGH SCHOOL GRADUATES, CLASSES OF 2014 AND 2018

DataHaven analysis (2022) of data from the Connecticut State Department of Education, accessed via EdSight at http://edsight.ct.gov. Enrollment rates are defined as the percentage of students from a given graduating class who enroll in college within one year of graduation. Persistence rates are defined as the percentage of students who, after enrolling in college within one year of high school, continue into a second, consecutive year of college. Attainment rates are the percentage of students who earn a two or four-year degree within six years of graduating high school, out of the entire high school graduating class. The most recent available data are shown here, which are the high school graduating class of 2018 for graduation, enrollment, and persistence rates, and the class of 2014 for degree attainment rates.

FIG 5D. NON-WHITE SHARE OF STUDENTS AND EDUCATORS BY DISTRICT, 2021–22 SCHOOL YEAR WITH LINE SHOWING EQUAL SHARES OF STUDENTS AND EDUCATORS

DataHaven analysis (2022) of data from the Connecticut State Department of Education, accessed via EdSight at http://edsight.ct.gov.

TABLE 5B. STUDENT AND TEACHER DIVERSITY

DataHaven analysis (2022) of data from the Connecticut State Department of Education, accessed via EdSight at http://edsight.ct.gov.

Chapter 6. Economy

TABLE 6A. JOBS BY SECTOR

DataHaven analysis (2022) of U.S. Census Bureau Quarterly Workforce Indicators, available at http://qwiexplorer.ces.census.gov at county level. Industries are categorized based on the North American Industry Classification System (NAICS).

FIG 6A. MEDIAN EARNINGS BY MAJOR OCCUPATION GROUP, SEX, AND RACE/ETHNICITY, ADULTS AGES 25+ WORKING FULL-TIME, 2020

DataHaven analysis (2022) of U.S. Census Bureau American Community Survey 2020 5-year public use microdata sample (PUMS) data. Occupation groups are based on the Census Bureau's 2018 standardization available at https://www.census.gov/topics/employment/industry-occupation/guidance/code-lists.html. SEE FIG 6B FOR DEFINITION OF FULL-TIME EARNINGS / SEE GENERAL NOTE ON PUMS ANALYSIS

FIG 6B. MEDIAN EARNINGS BY SEX AND RACE/ETHNICITY, ADULTS AGES 25+ WORKING FULL-TIME, 2020

DataHaven analysis (2022) of U.S. Census Bureau American Community Survey 2020 5-year public use microdata sample (PUMS) data. Included here are adults ages 25 and older who worked an average of 35 hours or more for 50 weeks or more in the previous 12 months and had positive earnings. SEE GENERAL NOTE ON PUMS ANALYSIS

FIG 6C. MEDIAN EARNINGS BY MAJOR OCCUPATION GROUP, SEX, AND EDUCATIONAL ATTAINMENT, CONNECTICUT ADULTS AGES 25+ WORKING FULL-TIME, 2020

SEE FIG 6A Due to small sample sizes within some groups, only values for Connecticut as a whole are shown.

FIG 6D. SHARE OF ADULTS AGES 25+ BY HIGHEST EDUCATIONAL ATTAINMENT AND RACE/ETHNICITY, 2020

SEE TABLE 6B

TABLE 6B. EDUCATIONAL ATTAINMENT, 2020

DataHaven analysis (2022) of U.S. Census Bureau American Community Survey 2020 5-year estimates, Tables B15003, Educational Attainment for the Population 25 Years and Over; C15002H, Sex by Educational Attainment for the Population 25 Years and Over (White alone, not Hispanic or Latino); C15002B, Sex by Educational Attainment for the Population 25 Years and Over (Black or African American); C15002I, Sex by Educational Attainment for the Population 25 Years and Over (Hispanic or Latino); and C15002D, Sex by Educational Attainment for the Population 25 Years and Over (Asian alone).

FIG 6E. SHARE OF ADULTS AGES 25+ BY HIGHEST EDUCATIONAL ATTAINMENT AND AGE, SEX, AND RACE/ETHNICITY, 2020

SEE TABLE 6B

Chapter 7. Health

TABLE 7A. BARRIERS TO HEALTHCARE, 2021

DataHaven analysis (2022) of questions from the 2021 DataHaven Community Wellbeing Survey. Survey participants were asked several questions about their access to and use of medical care, including whether at any point in the previous 12 months they postponed or did not receive medical care they needed, and whether they have any person or place they think of as their personal doctor or medical care provider. SEE GENERAL NOTE ON THE COMMUNITY WELLBEING SURVEY

TABLE 7B. EXPERIENCES OF DISCRIMINATION, 2021

DataHaven analysis (2022) of questions from the 2021 DataHaven Community Wellbeing Survey. Survey participants were asked a bank of questions on experiences of discrimination, namely whether at any point in their lives they had been discriminated against or treated unfairly in each of several settings, including workplace hiring and promotion, police encounters, and quality of health care services. SEE GENERAL NOTE ON THE COMMUNITY WELLBEING SURVEY

TABLE 7C. GUN VIOLENCE, 2021 AND 2022

DataHaven analysis (2022) of questions from the 2021 and 2022 DataHaven Community Wellbeing Survey. In 2021, only residents of Bridgeport, Hartford, New Haven, Stamford, and Waterbury were asked about gun violence. In the smaller 2022 wave, these questions were asked of all participants, but the smaller sample size makes town-level values unavailable. Town types are based on the Five Connecticuts model developed in Levy, D., Rodriguez, O., & Villemez, W. (2004). The changing demographics of Connecticut: 1990 to 2000. Part 2: The Five Connecticuts (OP 2004-01). Connecticut State Data Center. SEE GENERAL NOTE ON THE COMMUNITY WELLBEING SURVEY

TABLE 7D. PUBLIC SAFETY, 2021

DataHaven analysis (2022) of questions from the 2021 DataHaven Community Wellbeing Survey. SEE GENERAL NOTE ON THE COMMUNITY WELLBEING SURVEY

TABLE 7E. HEALTH RISK FACTORS, 2021

DataHaven analysis (2022) of questions from the 2021 DataHaven Community Wellbeing Survey. Respondents were asked whether they had ever been told by a doctor or medical professional that they had diabetes or asthma. Participants reported their height and weight, from which their body mass index (BMI) was calculated; obesity in adults is defined as a BMI of 30 or higher. Smoking rates were calculated based on the number of participants who estimated having smoked at least 100 cigarettes in their entire lives; those who said they had were then asked whether they smoked every day, some days, or not at all. Smoking prevalence for the entire population was then extrapolated from these two figures. SEE GENERAL NOTE ON THE COMMUNITY WELLBEING SURVEY

TABLE 7F. BIRTH OUTCOMES, 2016–2018

DataHaven analysis (2022) of data from the Connecticut Department of Public Health Vital Statistics, available at https://portal.ct.gov/DPH/Health-Information-Systems–Reporting/Hisrhome/Vital-Statistics-Registration-Reports. Low birthweight is defined as 2,500 grams (roughly 5.5 pounds). Non-adequate prenatal care indicate that the mother attended fewer than 80 percent of expected prenatal care visits, or did not start attended visits until the second trimester. Both the low birthweight rate and non-adequate prenatal care rates are given as a percent of total births over the period. Because small numbers are suppressed by the Department to protect privacy, for rare events like infant mortality it is common for many values to be unavailable. Race/ethnicity shown is that of the parent giving birth.

FIG 7A. ANNUALIZED AGE-ADJUSTED HOSPITAL ENCOUNTER RATES PER 10,000 RESIDENTS, 2018–2021

DataHaven analysis (2022) of CHIME data provided by the Connecticut Hospital Association upon request from and special study agreement with partner hospitals and DataHaven. The CHIME hospital encounter data extraction included de-identified information for millions of Connecticut hospital and emergency department encounters incurred by any residents of any town in Connecticut during the study period. Any encounter incurred by any resident of these towns at any Connecticut hospital would be included in this dataset, regardless of where they received treatment. Each encounter observation had a unique encounter ID and was populated with one or more indicator flags representing a variety of conditions. Each encounter could include multiple indicator flags. Because CHIME is Connecticut-based, only hospital encounters occurring in Connecticut were captured; therefore, encounters for individuals residing in Connecticut towns bordering other states may be underreported.

Annualized encounter rates were calculated for the indicator flags assigned within the dataset including asthma, COPD, substance abuse, and many other conditions. Analyses in this document describe data on all hospital encounters including inpatient, emergency department (ED), and observation encounters. Annualized encounter rates per 10,000 persons were calculated for the three-year period 2018 to 2021 by merging CHIME data with population data. For each geographic area and indicator, our analysis generally included an annualized encounter rate for populations in each of six age strata (0–19, 20–44, 45–64, 65–74, 75–84, and 85+ years), and by gender, as well as a single age-adjusted annualized encounter rate. It is important to note that there is no way to discern the unique number of individuals in any zip code, town, area, or region who experienced hospital encounters during the period under examination or the number of encounters that represented repeat encounters by the same individual for the same or different conditions. Please contact DataHaven for further information.

TABLE 7G. HOSPITAL ENCOUNTERS, 2018–2021

SEE FIG 7A Relative risks are the ratios of Bridgeport rates divided by Fairfield County rates.

TABLE 7H. MORTALITY, 2019–2021

DataHaven analysis (2022) of data from the Connecticut Department of Public Health Occurrent Deaths 2015–2021. Retrieved from https://portal.ct.gov/DPH/Health-Information-Systems--Reporting/File-Transfer-Page/Connecticut-DPH-File-Transfer-Page (encrypted). Rates are weighted to a Connecticut standard million (based on 2019 ACS data, calculated by DataHaven). Annualized values for COVID-19 are scaled from the start of the pandemic. For all-cause mortality, all causes of death are summarized. For selected primary causes of death, only major causes and their sub-categories are included.

FIG 7B. AGE-ADJUSTED, ALL-CAUSE MORTALITY RATES (PER MILLION), 2015–2021

SEE TABLE 7H

FIG 7C. ANNUALIZED YEARS OF POTENTIAL LIFE LOST BEFORE AGE 75 PER 100,000 RESIDENTS, ALL CAUSES, 2015–2021

SEE FIG 7B Years of potential life lost are calculated by subtracting years of life lost per death until age 75. Data represent annualized averages over the 6 year period of time (COVID-19 is scaled from the start of the pandemic).

TABLE 7I. YEARS OF POTENTIAL LIFE LOST BY CAUSE OF DEATH, 2015–2021

SEE FIG 7C This procedure was carried out for each of the selected major causes of death. Because COVID-19 was not a cause of death in the U.S. until 2020, annualized values are only averaged over 2020 and 2021.

FIG 7D. ANNUALIZED, AGE-ADJUSTED MORTALITY RATE (PER MILLION) FOR COVID-19, BY RACE/ETHNICITY, 2020–2021

SEE FIG 7B

FIG 7E. AGE-ADJUSTED ACCIDENTAL OVERDOSE DEATH RATE PER 1 MILLION RESIDENTS BY RACE, 2012–2021 6-MONTH ROLLING MEAN

DataHaven analysis (2022) of data from the Connecticut Office of the Chief Medical Examiner, available at https://data.ct.gov/resource/rybz-nyjw. Data are given for each

individual to have died in Connecticut of a drug overdose from 2012 to 2021. For this analysis, data was filtered to only include people with a Connecticut town listed as their place of residence at the time of death and with their age on record. Monthly counts by age were used to calculate crude rates of overdose deaths per 1 million residents of each age group. To get age-adjusted rates, crude rates by age group were then 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. The rates shown here are 6-month rolling averages; that is, the rate for any given point shown in the chart represents the age-adjusted overdose death rate for that month averaged with the rates of the five months preceding it.

TABLE 7J. OVERDOSE DEATHS, 2020–2021

SEE FIG 7E

TABLE 7K. TRAFFIC CRASHES, 2018–2021

DataHaven analysis (2022) of data retrieved from the Connecticut Crash Data Repository, managed by the Connecticut Transportation Safety Research Center at the University of Connecticut. Crash data is based on the information the officer was able to obtain during their investigation. Some information may be incomplete due to lack of evidence for such details. Available at https://www.ctcrash.uconn.edu

Chapter 8. Civic Life

FIG 8A. SHARE OF ELIGIBLE CONNECTICUT VOTERS WHO VOTED IN THE 2016 AND 2020 PRESIDENTIAL ELECTIONS, BY DEMOGRAPHIC GROUP

DataHaven analysis (2022) of U.S. Census Bureau Current Population Survey, 2016 and 2020 P20 Tables 4b and 4c. Available at https://www.census.gov/topics/public-sector/voting/data/tables.html

FIG 8B. SHARE OF ADULTS REPORTING GREAT OR FAIR AMOUNT OF TRUST IN INSTITUTIONS, 2021

DataHaven analysis (2022) of questions from the 2021 DataHaven Community Wellbeing Survey. Survey participants were asked how much they trusted each of several public institutions to look out for their and their family's best interests. Values shown here are the share reporting a great deal or a fair amount of trust. SEE GENERAL NOTE ON THE COMMUNITY WELLBEING SURVEY

TABLE 8A. VIEWS OF LOCAL GOVERNMENT, 2021

DataHaven analysis (2022) of questions from the 2021 DataHaven Community Wellbeing Survey. Influence over local government is the share of adults who felt they have at least a little influence over their local government. Police approval is the share who rate the job done by police to keep residents safe as excellent or good. SEE GENERAL NOTE ON THE COMMUNITY WELLBEING SURVEY

TABLE 8B. VIEWS OF LOCAL RESOURCES, 2021

DataHaven analysis (2022) of questions from the 2021 DataHaven Community Wellbeing Survey. SEE GENERAL NOTE ON THE COMMUNITY WELLBEING SURVEY

FIG 8C. MUNICIPAL SPENDING BY TOWN

DataHaven analysis (2022). Equalized net grand list, municipal expenditures, and school spending data are from the Connecticut Office of Policy and Management, available at https://portal.ct.gov/OPM/Root/Databases/DatabasesResources. Library expenditures are from the Connecticut State Library, available at https://libguides.ctstatelibrary.org/dld/stats. Grand list and library expenditures are each divided by 2020 town populations to get per-capita values. School spending is divided by total enrollment in the 2019–20 school year to get per-pupil values. Total expenditures are divided by towns' daytime population, calculated as a town's population plus the number of people who work in that town minus the number of residents who leave the town for work; this better captures the financial strains put on towns with large numbers of incoming commuters. Daytime populations are calculated based on U.S. Census Bureau American Community Survey 2020 5-year estimates, Tables B01003, Total Population; B08009, Sex of Workers by Place of Work–Minor Civil Division Level for 12 Selected States; and B08604, Worker Population for Workplace Geography.

TABLE 8C. LOCAL COMMUNITY ASSETS, 2021

DataHaven analysis (2022) of questions from the 2021 DataHaven Community Wellbeing Survey. SEE GENERAL NOTE ON THE COMMUNITY WELLBEING SURVEY

FIG 8D. ESTIMATED INCARCERATION RATE PER 1,000 PEOPLE BY TRACT OF RESIDENCE, 2020

Data from Widra, E., Desir, K. M., Ray, K., & Jeter, J. (2022). Where people in prison come from: The geography of mass incarceration in Connecticut. Prison Policy Institute. https://www.prisonpolicy.org/origin/ct/2020/report.html. Under a recent state law, Connecticut now redraws its legislative districts based on population counts that include currently incarcerated people as residents of the place they last lived, while official counts from the 2020 Decennial Census count incarcerated people as residents of the place where they are being held. Researchers at the Prison Policy Institute (PPI) used the gap between these two numbers to estimate the number of people incarcerated from each census tract in the state. The Connecticut Department of Corrections publishes addresses of its prisons available at https://portal.ct.gov/DOC/Miscellaneous/Facilities. Of the facilities currently operating, addresses were geocoded using Google's Geocoding API via Kahle, D., & Wickham, H. (2013). ggmap: Spatial Visualization with ggplot2. The R Journal, 5(1), 144–161. https://doi.org/10.32614/RJ-2013-014.

TABLE 8D. INCARCERATION BY TOWN OF RESIDENCE, 2020

SEE FIG 8D

FIG 8E. SHARE BY RACE/ETHNICITY OF POPULATION, DRIVERS STOPPED BY POLICE, AND DRIVERS SEARCHED BY POLICE WHERE RACE IS KNOWN, 2018–2020

DataHaven analysis (2022) of data from Connecticut Racial Profiling Prohibition Project (CTRP3) (2021) and U.S. Census Bureau American Community Survey 2020 5-year estimates, Table B03002, Hispanic or Latino Origin by Race. CTRP3 data retrieved from Connecticut Racial Profiling Prohibition Data Project at http://trafficstops.ctdata.org. Only towns with their own police departments are included in DataHaven analysis of population totals. Under the CTRP3 project, police departments record details of every traffic stop, including whether a search was conducted. Shares of stops and searches by race/ethnicity are based only on stops that include valid responses for the driver's race/ethnicity.

SECTION 2. TEXT ENDNOTES

1 Throughout this document, to distinguish race and ethnicity, a person of Hispanic/Latino ethnicity is considered Latino regardless of race. White, Black, Asian, and any other racial categories are people of those groups who do not have Hispanic/Latino ethnicity.

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4 DataHaven analysis (2022) of U.S. Census Bureau. American Community Survey 2020 5-year estimates.

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21 SEE NOTES FOR FIGURE 2G for detailed methodology used in this section.

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163 For this analysis, stops are being compared to the population at large.

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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, DC.

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Fairfield County's Community Foundation is partnering with our community to create a county where every person has an equitable opportunity to thrive. We work closely with community organizations, nonprofits, businesses, and philanthropists to address challenges and identify opportunities to create a stronger, more vibrant community. Informed by three decades of partnering with and serving our community, we have awarded more than $390 million in grants to nonprofits in Fairfield County and beyond. Learn more at FCCFoundation.org.

Additional information related to this report is posted on our websites. Follow the story and access resources at **#CommunityIndex**

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