Welcome to Shining a Spotlight on the Valley Region, the Executive Summary of the 2022 Valley Community Index.

A lot has happened since the last Community Index was released in 2019—most of which has been exacerbated by the onset of the COVID-19 pandemic. Our most vulnerable Valley residents have experienced housing and food insecurity, lack of affordable, high-quality childcare, and continued uncertainty about the economy and access to living wage jobs.

Here in the Valley, our desire is for all to thrive. We recognize the impact that systemic, institutional, and historical barriers have in creating the economic, health, educational, and racial disparities in our region. We hope that the data contained in this report will assist readers in recognizing, addressing, and ultimately dismantling these barriers, so that greater equity may be achieved, and all Valley residents are able to reach their highest potential.
EQUITY IN THE VALLEY
According to the National Association of Colleges and Employers, equity refers to fairness and justice and is distinguished from equality: whereas equality means providing the same to all, equity means recognizing that we do not all start from the same place and must acknowledge and make adjustments to imbalances. The process is ongoing, requiring us to identify and overcome intentional and unintentional barriers arising from bias or systemic structures.

We have incorporated references to equity issues where appropriate in this report, marked with the equity icon shown above.

THE IMPACT OF COVID-19
Since the last Valley Community Index was published in 2019, the emergence of the SARS-CoV-2 (COVID) global pandemic has changed the health and life of communities across the globe.

We have incorporated references to the COVID-19 pandemic’s consequences where relevant in this report, marked with the COVID icon shown above.

IN THE SPOTLIGHT
Between 1990 and 2020, the Valley’s non-White population increased from 6 to 23 percent, although this shift is not equal across the region.

WHAT IS IT?
The federal Free and Reduced Price Meals (FRPM) program provides meals for students, based on low family income.

A major risk factor for student academic success, chronic absence is defined as missing more than 10 percent of school days.

18% of Valley students were chronically absent in the 2020–2021 school year, 8 percentage points higher than the pre-pandemic average.

40% of Valley students (and as high as 69 percent in some communities) were FRPM-eligible in the 2021–2022 school year.
139,085 people live in the Valley, as of the 2020 Census.

12% of Valley residents are immigrants—over 16,000 people.

Children and seniors make up equal shares of the Valley’s population:

- 19% under 18
- 19% over 65

IN THE SPOTLIGHT
Graduation rates are stable: 89 percent of Valley public schools’ class of 2021 graduated on time.

 Students who attended school in a hybrid mode or in a remote environment showed substantially weaker achievement and growth and increased rates of absenteeism.

 More vulnerable students—Black and Latino students, students in special education, FRPM-eligible students, and English language learners—have higher rates of absenteeism.

There is a severe shortage of affordable childcare for infants and toddlers in the Valley:

- Infant & toddler population: 3,439
- OEC-regulated childcare slots: 2,607
- Childcare slot gap: 832
In total, 40 percent of households in the Valley are considered either ALICE or living in poverty.

**WHAT IS IT?**

**People living in poverty** have annual household incomes below the federal poverty guideline of $18,310 per year for a family of two, or $27,750 for a family of four.

**Low-income households** have annual incomes less than two times the federal poverty guideline.

The United Way’s ALICE Project (Asset Limited, Income Constrained, Employed) establishes an income threshold for making ends meet. For a single adult in Connecticut in 2018, the threshold was $28,908; for a family with two young children, it was $90,660.

Household overcrowding is six times as likely to affect Latino households than White households. Overcrowding may increase the spread of illness in a household and make it difficult to quarantine if needed.

Disparities in homeownership rates persist between racial and ethnic groups:

- **White**: 78%
- **Black**: 39%
- **Latino**: 58%

The low-income rate for Valley children is 5 percentage points higher than that of residents overall.

**Women are twice as likely to be food insecure as men.**

In the 40 years between 1980 and 2020, the homeownership rate in the Valley only increased from 68 to 72 percent.
IN THE SPOTLIGHT

The region’s labor force is still 2 percent smaller than it was in March 2020.

Unemployment in the Valley spiked from 4.7 percent in March 2020 to 8.7 percent the next month, before gradually subsiding again over the course of 2020.

5,000+ people left the Valley’s labor force between March and April 2020, a 7% decrease.

IN THE SPOTLIGHT

In 2020, the average annual wage of a job located in the Valley was $69,000, almost $8,000 below the state average.

Wages vary widely by sector: the rate of pay for manufacturing is $92,000 per year, while accommodation and food services wages average only $23,000 per year.

Households in the Valley that are led by Black and Latino adults have lower median annual incomes—$63,000 and $78,000, respectively in 2019—compared to $96,000 for a household that is led by a White adult.

White men $1.00
White women $0.83
Black women $0.67
Latina women $0.51

White women in the Valley earn only about 83 cents per dollar earned by White men.

The income gap widens across race and ethnicity: Black and Latina women earn only 67 cents and 51 cents, respectively, per White male dollar.
In 2021, 53 percent of Valley adults reported being in very good health, compared to 59 percent statewide.

From 2015 to 2021, the top five causes of premature death in the Valley were:

1. Accident and injury
2. Cancer
3. Overdoses and poisoning
4. Heart disease and stroke
5. COVID-19

Over half of Valley adults who postponed medical care in the past year couldn’t get care for reasons related to the pandemic.

35% of Valley adults know at least one person who has struggled with addiction to heroin or another opiate.

65 Valley residents died from an opioid overdose in 2021—more than three times the number in 2014.

Hospital encounters due to behavioral and depressive conditions have increased in the Valley.

- 13% of adults experienced anxiety regularly.
- 20% of youth felt sad or hopeless in the last year.
- 13% of youth hurt themselves on purpose.
- 11% of adults were bothered by depression.
- 20% of youth had thoughts about hurting themselves.
- 11% of youth thought about attempting suicide.

IN THE SPOTLIGHT

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Income and employment status often drive differences in access to healthcare.

Race and gender-based discrimination can also lead to disparate health outcomes.

21% of Valley adults earning less than $30,000 per year did not get medical care that they needed, versus just 10% of those earning over $100,000.

12% of Valley adults earning less than $30,000 per year could not afford their prescription medicines, compared to only 4% of those earning over $75,000.

7% of Black and Latina mothers received late or no prenatal care, compared to 4% overall in the Valley.

The infant mortality rate for Black parents was 9.5 per 1,000 versus 3.1 per 1,000 for White parents.

WHAT GOES INTO YOUR HEALTH?
The conditions that shape the health a person experiences are known as the social determinants of health.

40% socioeconomic factors such as income, education, and a support network

30% health behaviors such as diet and exercise or substance abuse

20% health care such as access to and quality of health care

10% physical environment such as where you live and work
Using data to examine disparities and shine light on areas where change can occur helps us to understand how connected we all are. Join the community in acting to improve our Valley.

COMMUNITY HEALTH IMPROVEMENT PLAN
Griffin Hospital, the Naugatuck Valley Health District (NVHD), and the Yale Griffin Prevention Research Center are working together to identify and address priority concerns. They use the Community Index to inform the work of the Community Health Improvement Plan (CHIP), which is updated every three years, as well as to meet regulatory and accreditation requirements.

This group provided opportunities for residents to weigh in on the most pressing issues that are facing the Valley region by incorporating information from community listening sessions which began in the summer of 2022. To amplify community voices further through this process and modify the Community Health Improvement Plan (CHIP) as needed, the Valley Health Advisory Committee will continue to hold listening sessions to inform this work. Watch for opportunities to join conversations in your neighborhood.

Keep track of the progress of health and wellbeing in the Valley at griffinhealth.org, nvhd.org, yalegriffnprc.org, and bhcare.org.

WHAT CAN YOU DO?
Read the full Community Index report, and share your observations with family, friends, co-workers, community leaders, and public officials.

Help instill the importance of community engagement in all of our residents.

Become an advocate for change in your city or town.

Participate in local and regional community forums to keep the conversation going.

Practice continuous self care.

THANK YOU
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For a complete listing of funders and Advisory Committee members, and to view the full 2022 Valley Community Index, visit valleyfoundation.org.

MORE INFORMATION
For more information, please call the Valley Community Foundation at 203-751-9162.