RWJF Culture of Health
Sentinel Community Snapshot:

New Haven, Connecticut
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9. **ABOUT THIS REPORT**

The Sentinel Communities project, conducted by RTI International in collaboration with the RAND Corporation, is sponsored by the Robert Wood Johnson Foundation. The project will monitor activities in each of 30 diverse communities around the country for at least 5 years. This Snapshot is the first in a series of planned reports about this Sentinel Community. Using data compiled in early 2016, it provides an initial overview of the community’s history, challenges, and approaches to building a Culture of Health. Visit cultureofhealth.org to see the full list of communities and links to other reports and information about the project.
Introduction

Best known as the home of Yale University, New Haven is located in south central Connecticut about halfway between New York and Boston. Founded in 1638, New Haven was a thriving agricultural township and served as the co-capital of Connecticut with Hartford between 1701 and 1873. World-renowned Yale University, which was founded in 1700 in nearby Old Saybrook and moved to New Haven in 1718, is the largest employer in the community, but also the source of occasional “town-gown” tension.¹

Once a thriving port and an industrial center specializing in the manufacture of clocks, wagons, and guns, New Haven suffered an economic decline after World War II, when new roads and car ownership resulted in a mass exodus of the middle class to suburbs.² New Haven experienced its most substantial blow in the 1980s when U.S. Steel, the city’s remaining large manufacturer, moved and took 1,200 jobs in the process.² Similar to many Northeastern and Midwestern industrial cities, New Haven saw steady population declines between 1960 and 2000. However, after years of weathering urban renewal and economic decay, New Haven began to embrace revitalization efforts in the early 2000s. These efforts continue to gain momentum in improving the economy and restoring health and wellness among its residents.

Today, New Haven is one of the fastest growing cities in Connecticut, with a current population of 130,553.³ An influx of immigrants spawned the city’s most rapid growth (5%) between 2000 and 2010, along with a shift in the city’s demographic mix.⁴ New Haven’s white and black
populations have decreased, while the Hispanic population has increased over the past decade, creating roughly equal distributions of white (32%), black (35%), and Hispanic (26%) residents, and a unique lens through which racial and ethnic disparities can be examined. With such a large proportion of Hispanic residents, including those who are undocumented, New Haven is a model for other cities with increasing Hispanic populations. It was one of the nation’s first sanctuary cities, with laws and policies that protect undocumented persons. These laws and policies facilitate positive interactions with police and access to financial services, and they ensure that parents are not afraid to enroll their children in school.

New Haven has been forging collaborative partnerships since 1997 to address key issues like chronic disease, employment and education, and overall economic stability, led by the city and by Yale University. Described as a “town and gown” community—in which the non-academic community (town) and the academic community (gown) hold sharply differing views about the city’s interests—New Haven and Yale have waged ongoing battles over income disparities, property acquisition, and taxation. At the same time, independent initiatives originating from the city and Yale are characterized by collaborative partnerships and inclusion of city residents. New Haven’s government has established initiatives with cross-sector community partners that aim to improve well-being, strengthen health services, and improve the built environment. Initiatives originating from Yale have also engaged the community through cross-sector partnerships to address disparities in chronic disease, risk behaviors, education, and the built environment.

**PROFOUND WEALTH DISPARITIES**

The financial resources provided by Yale’s immense endowment underscore the profound chasm between the university and New Haven. Yale’s endowment, which totals $27 billion, is the second largest for a U.S. higher educational institution after Harvard University. At about $1 billion in 2014, the endowment is also the largest source of revenue for the university’s operating budget, which totaled $3.2 billion that year. By contrast, New Haven’s 2014 budget totaled $720 million. In 2013, Yale’s properties had an assessed value of approximately $2.5 billion; however, under state law, Yale is exempt from taxes. In 2016, legislation introduced to the Connecticut General Assembly sought unsuccessfully to implement a new tax on the growth of Yale’s endowment and commercial property. Local support for the legislation exposed cracks in the Yale–New Haven relationship. Nonetheless, Yale is a major economic driver for New Haven and a source of funding for economic redevelopment efforts. In addition to developing commercial property and providing incentives to faculty to live in New Haven, Yale makes an annual $8.2 million voluntary payment to New Haven.

Against this backdrop, the economic struggles, poor health outcomes, and prevalence of chronic disease among non-white populations in New Haven are especially striking.

**LOW INCOME AND EDUCATION, HIGH CRIME**

New Haven’s median income ($37,508) is well below the state average ($69,899), as are median incomes for New Haven’s black and Hispanic

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**FIGURE 1. MEDIAN INCOME IN NEW HAVEN AND CONNECTICUT BY RACE/ETHNICITY**

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<td>$39,375</td>
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**FIGURE 2. EDUCATIONAL ATTAINMENT IN NEW HAVEN AND CONNECTICUT BY RACE/ETHNICITY**

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<tr>
<td>LESS THAN HIGH SCHOOL</td>
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<td>HIGH SCHOOL/ GED OR HIGHER</td>
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<td>SOME COLLEGE OR ASSOCIATE DEGREE</td>
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<td>BACHELOR’S DEGREE OR HIGHER</td>
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residents (Figure 1). Moreover, 26% of New Haven residents live in poverty—more than double the state average of 11%.3

New Haven’s Hispanic and black residents are also less likely than white residents to have completed a high school education or to have a bachelor’s degree or higher (Figure 2). Many of New Haven’s schools were in poor physical condition, which may also negatively affect student achievement.

Ranked as Connecticut’s most dangerous city, New Haven has more violent crimes (e.g., murders, rapes, robberies, assaults) compared with nearby cities (e.g., West Haven, Woodbridge, Orange).18

POOR HEALTH AND LIMITED ACCESS TO CARE

In addition to reporting lower incomes and educational attainment, Hispanic and black residents are less likely to rank their health as excellent, very good, or good compared with white residents (Figure 3). Hispanics are most likely to report not being able to access care when needed. They are also more likely to postpone medical care because of cost compared with white and black residents (Figure 4).

Approximately 12% of New Haven residents are uninsured, which is higher than the rate in the state (9%). Hispanic residents are most likely to be uninsured (24%), and white residents are least likely to be uninsured (7%) (Figure 5).3 Black residents experience a higher prevalence of chronic disease than their white and Hispanic counterparts (Figure 6). For example, black residents have twice the prevalence of hypertension and diabetes compared with white and Hispanic residents, whereas black and Hispanic residents are more likely to experience asthma and obesity than white residents.19

New Haven Initiatives: Specific Needs, Tailored Services, and Novel Solutions

New Haven’s city government and public agencies (e.g., police department and school district) have instituted a number of cross-sector initiatives to provide tailored services and programs to improve well-being, strengthen health services, and improve the built environment.

A 5-YEAR PLAN FOR TRANSFORMATION

In 2014, under New Haven’s Promise Zone designation, 67 organizations and city agencies came together to address poverty and health in the city’s poorer neighborhoods. Building from this foundation, in 2015, the city unveiled the New Haven City Transformation Plan, a 5-year blueprint that brings together a diverse group of more than 100 community partners, including nonprofit and faith-based organizations, agencies, community coalitions, and residents.

All partners participated in a strategic planning process to identify the city’s most pressing issues and key priorities. Led by a
steering committee and organized into work groups, the collaborative is implementing the New Haven City Transformation Plan around eight intersecting goals:

- enhance job creation and workforce preparation,
- sustain economic activity and growth,
- promote early childhood health and wellness,
- support education and youth development,
- raise adult literacy levels,
- support health and mental health,
- promote community cohesion and safety, and
- improve access to quality housing.

The Transformation Plan envisions a new generation of partnerships working to forge more effective approaches to job and workforce development, homelessness prevention, adult literacy, and early childhood education. To date, a handful of strategies have been implemented, such as a collaborative of social service providers working with homeless individuals and those returning from incarceration to establish them on a path to self-sufficiency.

**PROMOTING EDUCATIONAL EQUITY**

In addition to these initiatives, New Haven's city government has made significant investments to improve academic achievement and provide equitable learning environments for its students. Accordingly, the city launched the New Haven School Capital Construction Program, a 19-year construction project spanning pre-K through high school.

Billed as the largest school construction program in the state and the largest per capita school construction program in the nation, the $1.4 billion program is designed to enhance the learning environment, support student achievement, and provide facilities that can be used year-round by the school and the community. For example, most of the new or renovated schools have facilities that benefit the surrounding neighborhood, such as library/media centers, computer labs, gyms, and playgrounds. The construction program is expected to serve New Haven's educational system for many decades to come. By the time of its completion in 2017, the program aims to finish construction on 45 schools. To date, the program has built or rebuilt 37 schools from the ground up.

**CREATING SAFE NEIGHBORHOODS**

In addition to improving New Haven's built environment, the city has made progress in increasing neighborhood safety through Project Longevity. Launched in 2012, Project Longevity is a collaborative partnership that uses community involvement, social services, and...
focused policing efforts to reduce gun and gang violence in three Connecticut cities, including New Haven. Since implementation, gang shootings have dropped almost 75% per month on average and gunfire has declined by nearly 40%.

Project Longevity also offers a range of services for individuals who want to break away from gang associations, such as addiction and medical/mental health services, educational and employment opportunities, and housing. In New Haven, Project Longevity has partnered with multiple law enforcement and support and outreach entities, including the New Haven Police Department, New Haven Adult Probation, New Haven Parole and Community Services, the United Way, the New Haven Housing Authority, Yale-New Haven Hospital, City of New Haven Project Fresh Start, the New Haven Health Department, and more.

Yale’s Initiatives: Combatting Disease, Advancing Opportunities, and Improving the Built Environment

As a leading research and education institution, Yale has invested its wealth and expertise to help create a healthier and more equitable New Haven through collaborative partnerships with the community and residents.

COMMUNITY-DRIVEN APPROACH TO BETTER HEALTH

In 2007, the Yale School of Public Health created the Community Alliance for Research and Engagement (CARE) to identify solutions to New Haven’s chronic disease challenges, notably obesity, cardiovascular disease, diabetes, asthma, and cancer. CARE engages community organizations, neighborhood associations, hospitals and health centers, city government and public schools, and others to examine social, environmental, and behavioral risk factors to provide insight into and help reverse disease trends.

The group has implemented successful programs to combat infectious disease and promote healthy living. For example, CARE funded the development of a public 6-mile walking and biking trail throughout the city. The trail, which opened in April 2016, represents a long-lasting community asset intended to reduce chronic disease through increased, accessible physical activity.

Results of neighborhood surveys conducted by CARE in 2009 and in 2012 show signs of progress, although more work remains to achieve targeted reductions in risk factors for chronic disease. In 2012, 43% of New Haven respondents were obese, 26% were overweight, and the diabetes rate was 1.5 times higher than the national average. However, compared with findings from the 2009 survey, “clinically meaningful improvements in health-related outcomes” had taken place by 2012, evidenced by

• more insured adults;
• reductions in daily smoking, sedentary behavior, and consumption of sugar-sweetened beverages and high-fat foods; and
• improved school environments, such as school wellness policies and comprehensive health education.

FUNDING BRIGHTER FUTURES

Yale is also supporting initiatives to advance educational opportunities, revitalize the economy, and improve the built environment. It serves as the primary donor for scholarships offered by New Haven Promise, a program that provides up to $10,000 per year for residents who graduate from New Haven public schools and attend a 2- or 4-year college in Connecticut. New Haven Promise was launched in 2010 by the city of New Haven, the New Haven Public Schools, and the Community Foundation of New Haven. In 2013, the most recent year for which data are available, 143 students were accepted into Connecticut colleges under the program.

Yale has also had success in its efforts to boost the rate of home ownership in New Haven. The Yale University Homebuyer Program, one of the university’s most prominent and longstanding initiatives, has helped 1,134 faculty and staff make home ownership a reality. Under the program, university employees who work 20 or more hours per week get an income benefit of up to $30,000 over 10 years if they purchase and live in a home in designated areas of the city. The program has supported the purchase of homes with a total market value of $205 million, further strengthening New Haven’s tax base. Yale also supports the revitalization of built environments, ensuring that New Haven has more equitable neighborhoods, including restored parks and canals, improved streetscapes, and pedestrian bike paths.

Challenges and Opportunities

New Haven has weathered years of urban decline and renewal, and today is poised to consolidate some of the hard-won progress it has made toward greater equity across its diverse population. Opportunities for improvement remain, but it is clear that New Haven places a high priority on advancing the health and economic well-being of residents.

Additional surveillance, data, and information gathering, analysis, and reporting will examine the extent to which New Haven’s initiatives are successful in addressing inequities in chronic disease and mitigating social and economic disparities. The following questions will be explored in future reports:

• How will New Haven assess the impact of ongoing initiatives to reduce chronic disease?
• How is New Haven measuring the impact of completed and ongoing initiatives to improve the built environment, including the Capital Construction Program for the city’s schools?

• Have particular interventions to reduce chronic disease been particularly successful? If so, have they been widely shared throughout the community?

• Do ongoing town-gown tensions affect New Haven’s efforts to improve health and economic well-being for its residents? If so, to what extent?

• To what extent does the city of New Haven and Yale University coordinate efforts to address the burden of chronic disease among residents?

• In light of the recent unsuccessful effort to levy new taxes on Yale’s endowment, what efforts are underway to improve existing relations between the city and the university?

• How are Yale and New Haven measuring the impact of the New Haven Promise program? Has participation resulted in meaningful numbers of students graduating from 2- and 4-year colleges?
References