

# Community Health Report Card



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Serving the communities of  
Berlin, Newington, Rocky Hill  
and Wethersfield

[www.ccthd.org](http://www.ccthd.org)

December 2009



CENTRAL CONNECTICUT  
HEALTH DISTRICT

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*“A wise man should consider that health is the greatest of human blessings, and learn how by his own thought to derive benefit from his illnesses.”*

Hippocrates

## **Introduction**

This document is the eighth Community Health Report Card that has been developed in the Central Connecticut Health District. This report summarizes data on relevant and significant community indicators that provide an overall “health snapshot” of each town in comparison to Hartford County and the State (where possible).

Demographic characteristics describe populations, by age group, gender, race and ethnicity, level of education, and income level. Population demographics are used for planning appropriate health preventions and interventions to address identified health care needs and to evaluate their efficacy.

The District offers this community health report to strengthen our collaborative planning efforts with partners in preventive care and health promotion.

It is our hope that the information offered to the community will be used as a planning and evaluation tool from which we will document future progress and evaluate current activities aimed at improving the health status of all residents in the District.

*Thank you to those who contributed to the publication of this report.*

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## Current Available CCHD Programs

### Screenings and Education

Appointments are now being accepted for screenings/education sessions:

- Glucose (Blood Sugar) Screenings
- Diabetes Self Care Education Classes
- Cholesterol Screenings (complete lipid profile)
- Cholesterol Education Classes
- Pedicare Foot Clinics

Please call our main office in Wethersfield at 860-721-2822

### Radon Kits and Bicycle Helmets

Radon kits are \$8 and bicycle helmets are \$10. Please call 860-721 2818 for availability.

### Child Safety Seats

CCHD is currently working with the local police departments for free installation of infant and child safety seats. Please call your local police department to set up an appointment.

### Seasonal Flu Clinics

Seasonal clinics are typically in October and November.

### Community Health Education Programs

#### Smiles for Life

This program provides free dental cleanings for persons 60 or older. Clinics are held monthly. A total of 32 clinics serving 120 people will be held beginning in October 2009 and ending in September 2010. Smiles for Life is funded by the North Central Area Agency on Aging. For more information please call Hilary Norcia at 860-665-8571

#### Putting on Airm

CCHD has been funded by the Connecticut Department of Public Health for a three year grant providing free home visits to those at risk for asthma. A health educator/nurse and a sanitarian visit each home and provide education and an environmental assessment of the home to help in the reduction of triggers that may be present in the home. Referrals are provided by the patient, Aetna Better Health or a primary care physician or Allergist. For more information please call Hilary Norcia at 860-665-8571

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## CCHD Population

Towns (2008)	Total Population	% White	Median age	% over 65
Berlin	20,180	94%	43	16%
Newington	29,858	89%	44	18%
Rocky Hill	19,555	87%	43	16%
Wethersfield	26,369	90%	46	22%
Hartford County	881,915	75%	40	14%
Connecticut	3,540,846	79%	40	14%

Source: Connecticut Economic Resource Center 2008; Census.gov

### Population

The CCHD population has remained fairly stable over the past 5 years. Newington, Rocky Hill and Wethersfield had a slight increase in population growth while Berlin's population decreased slightly. The District median age range is 43-46 years, slightly higher than that of Hartford County and the State. Wethersfield has the greatest proportion of residents ages 65 and older compared to the other towns in the District, Hartford County and the State.

### Race

The majority of District residents are white (87-94%), which differs from both Hartford County (75%) and the State (79%) rates. Racial and ethnic minorities include African Americans (3.1%), Asian-Pacific (3.1%), Hispanic (any race) (4.4%) and Other Races (2.9%); this accounts for approximately 3,000 of all the District's residents.

Source: CERC-2008 Town Profile Report

## Birth Data

Live Births by Age Group					
By Town (2007)					
	≤19	20-29	30-39	40-49	Total
Berlin	2	38	96	12	148
Newington	6	120	169	14	309
Rocky Hill	2	63	91	10	166
Wethersfield	4	79	170	14	267
Hartford county	895	4,805	4,449	324	10,423
Connecticut	2,872	17,791	19,247	1,736	41,574

Source: CT DPH 2007

### Births by age group

Births to young women less than 19 (1.5% for the District) were lower than Hartford County and State rates of 8.1% and 6.9% respectively. Births to women age 40-49 ranged from 4.6% to 8.1% in the District compared to Hartford county at 3.1% and the state at 4.2%. In recent years, there has been an increase in babies being born to women 30-49 years old.

### Low birth weight

The percentage of low birth weight babies (< 2,500gms) for the District (7.8%) is comparable to Hartford county (9.2) and that of the state (8.2), with the exception of Rocky Hill, whose percentage of low birth weight babies is lower at 3.6%.

## Unintentional Falls/Injuries

### Unintentional Falls/Injuries

“Injuries are the leading cause of death in Connecticut residents between the ages of one and forty-four years and the fifth leading cause for all ages. Among young people, between the ages of 15-24, injuries are responsible for 72% of all the deaths” (CT Injury Prevention and Control Plan, 2009).

There are limited data available on injuries, but the State requires reports on emergency department (ED) visits for selected injuries to CT DPH:

1. Falls
2. Motor vehicle accidents
3. Assaults
4. Self-inflicted/self-harm

The population most at risk for falls are the very old ( $\geq 85$ ) and the very young (0-14 years old). Motor vehicle crashes are more frequent in the 15-34 age group, and self-inflicted/assault injuries are most common among 15-24 year olds.

Of these four reported categories, the highest rates of ED visits for injuries are due to falls in the elderly (over the age of 75) and the very young (0–4 years of age). This is consistent with State rates.

For more information on injury prevention, visit the Connecticut Department of Public Health website: <http://www.ct.gov/dph/cwp>

## Socio-Economic Data/Indicators( Source: CT DOL)

Towns (2008)	Education HS Grad. Rate (2007)	Median Household Income (2008)	Unemployment Rate (9/2009)	Poverty Rate (1999)
Berlin	94.4%	\$85,293	6.8%	2.5%
Newington	98.8%	\$71,496	7.3%	3.5%
Rocky Hill	98.8%	\$75,712	6.7%	2.9%
Wethersfield	96%	\$66,875	7.6%	4.4%
Hartford County	N/A	\$63,239	8.3%	9.3%
Connecticut	92.6%	\$67,336	8.2%	7.9%

	Berlin	Newington	Rocky Hill	Wethersfield
Medicaid (recipients)	789 (3.9%)	2,094 (7.0%)	1,115 (5.7%)	1,679 (6.4%)
Food Stamps (recipients)	224	500	213	648
Husky A (Kids)	406	924	426	743
Husky A (Adults)	245	533	264	422
Husky B	89	147	51	102
% school children eligible for free lunch	6%	16%	8%	12%
WIC (Children served)	53	180	82	173

## Socio-economic Data/Indicators

### Socio-Economic Data

The high school graduation rate in the district is higher than the State—97% versus 92.6% for the State. By race/ethnicity, the Newington school district serves the largest minority population (21%), and Berlin the smallest (8.0%). Among the four towns, less than 5% of the students are not fluent in English.

The average median household income for the District is \$74, 844, higher than Hartford County and the State. Wethersfield had the lowest median household income in the District, which is still slightly higher than Hartford County and the State.

While overall the unemployment rate for District towns is lower than Hartford County and the State, Wethersfield and Newington have the highest rates. This is consistent with a higher proportion of their residents utilizing Medicaid, Husky and WIC services and of school children eligible for free lunch. In Connecticut 29% of students are eligible for free lunch.

The poverty rate is also lower for the District compared to Hartford country and the State. Wethersfield has the highest poverty rate and Berlin has the lowest. While this information is from 1999, it is likely the trend remains the same.

### Economic Indicators

Newington has the highest percentage of Medicaid clients (7.0%) and Berlin the lowest (3.9%). Wethersfield and Newington have the highest numbers of people who receive food stamps in the District.

The Husky A enrollment for children and adults has increased in the last fiscal year (July 2008- July 2009) for all towns in the District. The enrollment for Husky B has increased for Berlin and Wethersfield.

Wethersfield has the highest number of children served by the WIC program while Berlin has the lowest.

## Lead Screening and Lead Poisoning

### Lead Screening of 1 – 2 year olds 2007

	Berlin	Newington	Rocky Hill	Wethersfield	Total
<b>Tested</b>	84	128	131	154	497
<10 µg/dL	84	128	130	152	494
10-14 µg/dL	-	-	-	-	0
15-19 µg/dL	-	-	-	1	1
20-44 µg/dL	-	-	1	1	2
45+ µg/dL	-	-	-	-	0
<b>Total 1-2 yr. old</b>	407	482	372	545	1806
<b>% Tested</b>	20.6%	21.2%	35.2%	28.3%	27.5%

Source: CT DPH 2007

### Lead Screening and Lead Poisoning

The major cause of lead poisoning is exposure to lead-based paints in the home. A blood lead level of  $\geq 20$  µg/dl indicates that a child has lead poisoning. Pediatricians screen children 1-2 years of age for this condition.

Less than 30 % of all children 1-2 years of age were screened for lead poisoning in 2007. Only 2 children had blood levels of  $\geq 20$  µg/dl requiring treatment and environmental evaluation. In 2007, the legislature mandated screening for all 1-2 year olds. This age group is most susceptible due to their tendency to chew and eat paint surfaces. Although today there are fewer risks from lead gas, there are still many homes in the District that contain lead paint.

The CCHD recommends being aware of peeling and flaking paint, as well as lead dust formed from renovation work, most of which occurs in houses built before 1978. Brochures and additional information are available at the CCHD main office in Wethersfield by calling (860) 721-2822.

## Lyme Disease

LYME DISEASE					
#Cases (Rate/100,000)					
	2004	2005	2006	2007	2008
Berlin	3 (16)	6 (33)	1 (5)	9 (49)	8 (44)
Newington	0	1 (3)	2 (7)	7 (24)	2 (7)
Rocky Hill	3 (17)	3 (17)	0	3 (17)	3 (17)
Wethersfield	0	2 (8)	3 (11)	2 (8)	8 (20)
Hartford county	73 (9)	96 (11)	132 (15)	219 (26)	328 (38)
Connecticut	1,348 (40)	1,810 (53)	1,788 (53)	3,058 (90)	3,893 (114)

Source: CT DPH, 2008

### Lyme Disease

The incidence of Lyme Disease among CCHD residents is well below the State's average and similar to that of Hartford County.

The key to preventing Lyme disease is to minimize the risk of exposure by taking personal protective measures such as, wearing long sleeve clothing when in wooded areas, putting trouser legs inside socks, using repellents containing DEET, and examining yourself, your family and your pets for ticks. Environmental measures to minimize ticks on your property have also been found to reduce exposure. Brochures and additional information can be obtained from our main office in the Wethersfield Town Hall or by calling:

(860) 721-2822 or visiting the website: [www.ccthd.org](http://www.ccthd.org).

## Leading Causes of Death, CCHD 2002-2006

Number of Deaths 2002-2006					
	District	Berlin	Newington	Rocky Hill	Wethersfield
CVD* (1)	1,502	260	411	295	536
Cancer (2)	1,278	238	415	275	354
Stroke (3)	344	58	106	58	122
CLRD** (4)	242	41	83	55	63
Unintentional Injuries/Accidents (5)	183	36	60	33	67
All Causes	5,135	910	1,505	1,073	1,647

Source: CT DPH, 2002-2006

CVD\* Cardiovascular Disease

CLRD\*\* Chronic Lower Respiratory Disease

## Causes of Death, CCHD 2002-2006

### Causes of Death

The leading causes of death (COD) in the District mirror national and State trends with heart disease, cancer, and stroke responsible for 61% of all deaths. Chronic lower respiratory disease and accidents (unintentional injuries) rank fourth and fifth. Age-adjusted mortality rates (AAMR) take into account the age distribution of the population and adjust it against a standard reference population (US Census, 2000). Overall, District AAMRs do not significantly differ from the State except for Rocky Hill, which has a significantly higher mortality rate for women with malignant neoplasms (cancer) than the State (301.9 per 100,000 population vs. 217.8 per 100,000).

About 1% of the District population dies each year. Of the 1,037 deaths in 2006, 82% were age 65 and older; with 84% of these deaths in persons 75 and older. Causes of death in this group reflect the leading causes of death. Deaths among persons less than 45 years old account for four percent of deaths. Where CODs were available, they included unintentional injuries, such as motor vehicle accidents, suicide, homicide, AIDS and cancer. In summary, future interventions and programs need to target life style behaviors and risks that are associated with heart and lung disease, diabetes and cancer. These include poor nutrition, lack of physical activity and tobacco use. These interventions are equally important to youth who are affected by these risk factors at an early age. In addition, interventions focused on the younger populations (under the age of 19) should address unintentional injuries, substance abuse, motor vehicle accidents and suicide in the school, community and home.

## Gastrointestinal Illnesses

### Gastrointestinal Illnesses

Among the 42 communicable diseases mandated by the State to be reported to local health departments by physicians and laboratories are a number of bacterial infections that cause gastrointestinal illnesses.

Each year, approximately 30 cases are reported to the CCHD, most of which are Salmonella and Campylobacter infections.

These bacteria along with E-coli and Shigella, are commonly found in animal products and have also been associated with contaminated vegetables.

Good food handling practices in the home can prevent these infections and include four simple steps:

1. Wash hands and clean surfaces often
2. Separate: don't cross contaminate one food with another
3. Cook foods to proper temperature
4. Chill—refrigerate foods promptly (keep hot foods hot and cold foods cold).



## Sexually Transmitted Diseases

Sexually Transmitted Diseases Laboratory Confirmed Cases in District (2006-2008)			
	2006	2007	2008
Chlamydia	94	110	132
Gonorrhea	15	12	12
Syphilis	1	1	1
Total	110	123	145

Source: CT DPH

### Sexually Transmitted Diseases

Over the last three years Newington (120) had the most reported cases of sexually transmitted diseases, followed by Wethersfield (106), Rocky Hill (89) and Berlin (63). Eighty-nine percent of all infections involved Chlamydia; three out of four cases occurred in women (74%). Among persons with gonorrhea, men (44%) and women (56%) were more equally affected.

Chlamydia infections have increased steadily over the past three years, whereas, cases of gonorrhea and syphilis remain stable. The prevalence of STDs has increased from 2006 to 2008 consistent with state trends.

Young adults aged 15–24 account for 68% of all reported cases. These diseases are easily transmittable, yet they are highly preventable if proper sex education is provided for this age group.

Targeting and providing early sex education to middle and high school students can decrease future incidence of STDs. Parents should take the initiative to speak to their children about sex and its consequences.

## Cancer Mortality, Both Sexes

Total Cancer Deaths (2002-2006)					
	District	Berlin	Newington	Rocky Hill	Wethersfield
Lung Cancer	320	52	110	70	88
Colorectal Cancer	138	30	33	31	22
Pancreatic Cancer	92	13	34	18	27
Female Breast Cancer	86	15	23	18	30
Prostate Cancer	77	13	22	17	25
Leukemia	51	6	19	12	14
Total	1,278	234	415	275	354

### Cancer Mortality

Lung cancer is the leading cause of cancer mortality with colorectal ranking second and pancreatic ranking third. However, when gender is considered, breast cancer is the second leading cause of mortality for women and prostate cancer for men.

It is important to note that there has been an increase in both colon and pancreatic cancers in all four District towns in both genders.

## Influenza/H1N1

H1N1 Laboratory Confirmed Cases Only 2009			
	Wave 1 - April 1, 2009 to August 29, 2009	Wave 2 - August 30, 2009 to November 24, 2009	Totals
Berlin	5	6	11
Newington	2	20	22
Rocky Hill	17	1	18
Wethersfield	6	11	17
Hartford County	369	411	780
State	1,996	1,295	3,291
Median Age (State)	14	16	
Deaths (State)	10	13	23
Hospitalizations ( State)	144	296	440

Source: CT DPH, 2009

### H1N1

The Novel H1N1 virus or Swine flu is a respiratory illness caused by the influenza virus. This virus spreads from person to person via sneezing, coughing and close person-to-person contact.

The State of Connecticut is closely monitoring and responding to the H1N1 virus pandemic. However, it is critical that communities, families and individuals continue to use preventative measures in the fight against this virus. These include: hand washing frequently with warm water and soap, covering your coughs and sneezes with a tissue or sneezing and coughing into your sleeves, not touching your eyes, nose and mouth, and staying home when you are sick.

CCHD is offering H1N1 vaccination clinics for those identified by the CDC as priority groups. Please call our main office at 860-721-2822 or visit our website at [www.ccthd.org](http://www.ccthd.org) to find out when these clinics will be held, and if you qualify for a shot.

## Asthma

Percentage of Students Diagnosed with Asthma Grades Pre-K, Kindergarten, 6 & 10				
	Berlin	Newington	Rocky Hill	Wethersfield
Pre-K	18.2	7.1	10.2	12.5
Kindergarten	14.1	14.4	9.1	10.4
6 <sup>th</sup> Grade	11.8	14.3	14.9	12.5
10 <sup>th</sup> Grade	14.9	17.7	4.5	4.9

\*Total enrollment for above grade levels is 2,918 for the District.  
Source: CT DPH, 2007-2008

### Asthma

Asthma is a leading cause of school absenteeism and one of the leading causes of hospitalization and emergency room (ER) visits for children and youth.

Children are required to have a physical examination for Pre-K, Kindergarten, 6th grade and 10th grade. The information reported for asthma is submitted to the CT DPH to estimate the burden of asthma among school children.

While the exact causes of asthma are unknown, asthma attacks or episodes can be triggered by exposures and conditions such as: respiratory infections, house dust mites, mold, pollen, exercise, tobacco smoke and indoor/outdoor air pollutants. Asthma can be controlled with effective treatment and management.

### Putting on Airs

The CCHD is funded by CT DPH to implement the "Putting on Airs" asthma home visitation program, along with several other towns from Hartford County. The goal for three years is to reach 126 families and conduct environmental home assessments and provide asthma education to families to reduce future emergency visits for asthma attacks.