

# *2012 CRT Community Action Plan Report*

## *Executive Summary*

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### **Introduction**

The following report is required by the Connecticut Department of Social Services (CT DSS) from the Community Renewal Team, Inc. (CRT). This Community Action Plan (CAP) Report includes the comprehensive three-year Community Needs Assessment, a Description of Service Delivery System, Identifying and Meeting Needs, Coordination of Funding, and Target Outcome Measures. Additionally, a full description documenting the incorporation of the Human Services Infrastructure (HSI) into agency practice is described.

The purpose of the annual CAP submission is to document CRT's adherence to the federal requirements regarding program planning and to demonstrate that CRT understands the populations and geographic areas it serves. This assessment guides CRT in the development of future programming needs and assists with adapting and tailoring current programs, all in an effort to best serve the residents within the 40-town service area.

### **40-Town Service Area**

**Hartford County:** Avon, Bloomfield, Canton, East Granby, East Hartford, East Windsor, Enfield, Glastonbury, Granby, Hartford, Manchester, Marlborough, Newington, Rocky Hill, Simsbury, South Windsor, Suffield, West Hartford, Wethersfield, Windsor and Windsor Locks.

**Middlesex County:** Chester, Clinton, Cromwell, Deep River, Durham, East Haddam, East Hampton, Essex, Haddam, Killingworth, Middlefield, Middletown, Old Saybrook, Portland, and Westbrook.

**New Haven County:** Branford, Guilford, Madison, and North Branford.

According to the 2011 CSBG-IS report, CRT provided one or more services to 131,988 individuals from 54,850 families from the 40 towns and beyond (CRT CSBG-IS, 2011). Those served by CRT were mostly female, (58%) compared to (42%) male, and among Connecticut's most vulnerable citizens - children, seniors, the impoverished, and single parents.

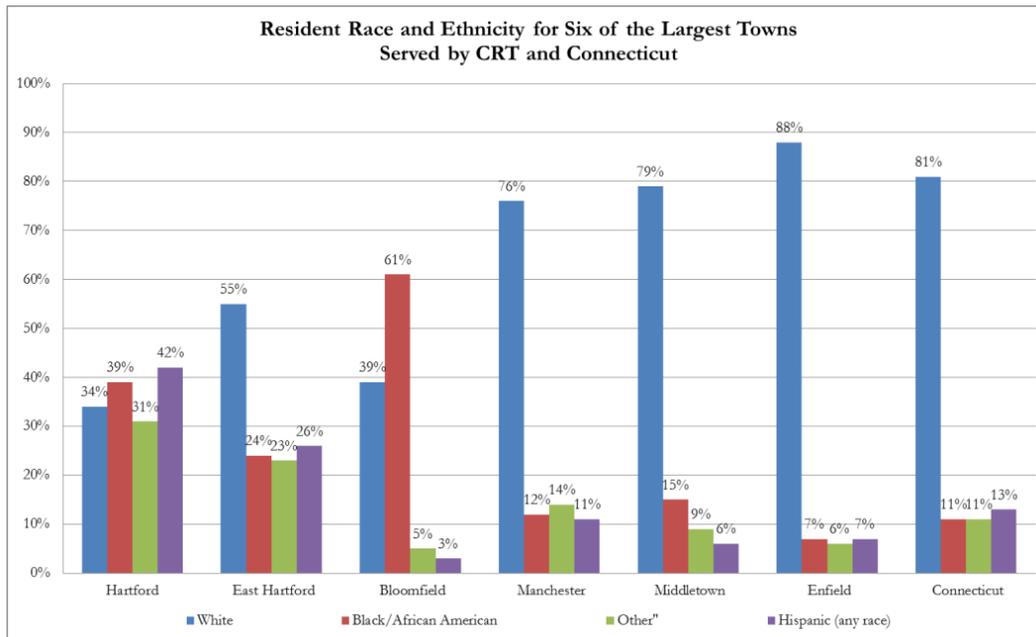
### **Methodology**

To ensure a thorough assessment of community need, address the Network Guide recommendations, ensure a thoroughly updated assessment of community need, CRT obtained and analyzed data from over 25 local, statewide, national, and agency-based sources.

### **Results**

The 2012 CAP Report confirmed that towns within CRT's service area are diverse in many different ways - poverty, racial/ethnic composition, income, age, and the range and degree of need. The full report contains general demographic, socio-economic, and health indicators that document the diversity of all CRT communities. Hartford remained the town with the greatest service needs among all of CRT service areas, however, specific needs are evident in other CRT towns.

Hartford is the most populated of all the cities and towns served by CRT and a greater proportion of the population, regardless of age, lives in poverty. The U.S. Census (ACS 2006-2010) estimated that the 2011 population for Hartford was 124,760. Hartford's estimated population was over twice that of Manchester, the second most populated town served by CRT. Hartford is the most racially and ethnically diverse of all towns.



Hartford's percentage of children less than 18 years of age in poverty is nearly 4 times that of the state's percentage; the same is true for the city's poverty rate overall. Hartford County and the city of Hartford's poverty rate stand in sharp contrast. Hispanic families are most likely to live in poverty in the larger towns served by CRT. Throughout the service area, single parent families headed by females with children less than 18 years of age continued to be disproportionately represented among the poor. The table below displays poverty rates for the larger CRT service towns and the state. Children in Hartford are the poorest.

	Hartford	East Hartford	Bloomfield	Manchester	Middletown	Enfield	Connecticut
Poverty Rate	32.1%	14.8%	7.4%	8.1 %	12.0%	7.1 %	9.2%
Children <18 years of age in Poverty	44.2%	23.2%	4.7%	12.4%	13.0%	8.9%	12.2%

U.S. Census, American Community Survey 2006-2010

Unemployment decreased slightly throughout most of the 40 towns compared to the 2011 report. Among the larger CRT service areas, all communities except for Enfield and Middletown exceeded the state's unemployment rate of 8.0%. Hartford experienced the highest rate at 14.4%, still a decrease of 2.2% compared to the 2011 CAP Report.

## Housing

- Owner-occupied housing units in Hartford represented only 18% of total dwellings, the same as the 2011 CAP Report.
- Other communities in CRT's area have owner occupied dwellings closer to or exceeding the state percentage (U.S. Census, American Community Survey, 2006-2010).
- The number of subsidized housing units in Hartford (N= 17,514) accounts for 34% of Hartford's total housing units and represents 11.7% of the subsidized housing units in Connecticut.

## Youth

- Hartford's school age population accounted for nearly one-third of the city's population, far exceeding the other larger town in percent and number.
- Hartford experienced the number of births to teens less than 18 years of age (N=116) among the CRT service towns, however, Enfield had the highest percentage of teen births, 12.5%. The latest data (CT DPH 2008) show that 21.4% of all Hispanic births were to a teen mother, compared to only 3.8% of white births.
- Hartford County's violent and property crimes indices for juveniles involved with the justice system were greater than Middlesex.
- East Hartford had the highest rate of substantiated child abuse and neglect at 27%.

## Seniors

- Greater percentages of seniors resided in suburban and rural areas compared to more heavily populated areas. For example, Hartford's percentage of seniors (9%) is much less compared to Old Saybrook (28%), Bloomfield (23%), and Canton (23%), CRT towns with the largest percentage of seniors.
- The percentage of Hartford seniors living in poverty (23.5%) is higher compared to the State percentage of 6.6% and the surrounding the towns of Manchester (7.9%), Middletown (7.9%), East Hartford (8.5%), and Bloomfield (7.9%). However, poverty rose among seniors in the most of the larger service areas.
- Despite Hartford's relatively low elderly population, 3,577 grandparents lived with one or more of their own grandchildren (less than 18 years of age) (ACS 2006-2010). Among those grandparents, 57% are the children's primary caregivers. The percentage of grandparents raising grandchildren in Hartford and Manchester is nearly triple that of the State's percentage

## Needs

CRT works diligently to identify unmet customer and community needs using results from needs assessments and program surveys; monitoring the changing demographics and key socio-economic, health, and public resource indicators; collecting data from interviews and focus groups; and relying on lessons learned from experiences in the CRT communities. Based on the data collected from the 2011 Community Needs Survey and newly obtained data presented in the current report, gaps in service do exist and the needs are numerous. The analysis underscores the need for CRT to continue working in the 10 core service areas (described in the first few pages of this assessment) and strengthening and/or modifying programs and services based on the data.

## Gaps In Service

CRT's adeptness when responding to gaps in service continues to be exceptional. Using the data in this report, CRT, should consider the following needs (not in any specific order) for prioritization in the upcoming year.

Job training - Although labor statistics showed marked improvement compared to last year, the need for job training to improve access to employment opportunities for hard-to-employ populations (undereducated, the formerly incarcerated, single parents, etc.) is needed.

Housing - Transitioning more people out of temporary living situations into more permanent options, including increasing home ownership. This includes expanding independent living options for veterans and seniors, especially those seniors raising their grandchildren.

Senior Services - Improve access to health and wellness service and programs, including physical activities, to CRT's senior program participants. Suggestions include placing exercise activities worksheets with the Meals on Wheels delivery or replicating the CATCH program at the current Congregate Meal sites.

Behavioral Health and Case Management Services - Expanding services to target populations most in need -- the formerly incarcerated, juveniles who have committed crimes, children who have experienced trauma, grandparents raising their grandchildren, and veterans.

Early Care and Education - CRT ECE staff should ensure all of the slots, regardless of funding sources are filled; providing referrals to families to other centers when capacity is reached. Enrolling in the CRT ECE program guarantees a child access to quality education and the family access to CRT's programs and services.

Education Attainment - Emphasizing the need for education with CRT staff and program participants is critical for increasing income among those in poverty. Program staff, particularly the CRT case managers and clinicians, should stress the need for attaining education. Completing high school, finishing trade school, and earning a college degree determine the employment opportunities one can apply for and the level of income attainable.