

# 2013 CRT Community Action Plan Report

## Executive Summary

### Introduction

The intent of the Community Action Plan (CAP) Report is to ensure that the Community Renewal Team (CRT) continues its focus on the principles and ethics of community action while integrating the agency's core values. The CRT 2013 CAP Report provides a framework and context for the use of the Community Service Block Grant (CSBG) funds by the agency and aligns with the strategic plan. The Report provides an update of the social, economic, health, and demographic conditions within the 40-town service area, paying particular attention to low- and moderate-income individuals and families, and describes how the agency uses CSBG funds to respond. Finally, when pragmatically applied, the Report is an essential learning and planning tool that familiarizes the agency, key stakeholders, and community members with the populations, service needs, and geographic areas served by CRT.

The format of the 2013 CAP Report was modified from previous years by the CT Department of Social Services (DSS). As prescribed in the March 2013 CT CSBG Community Action Plan Update-Interim Guidance, issued by DSS, CRT's full 2013 CAP Report included the following seven sections:

1. Section A – Contact Information
2. Section B – Description of Agency Service Delivery System – Governance, Organizational Chart, Key Roles and Responsibilities, Staff Training and Development, Programmatic Changes, Change in Location of Services, Agency Description, and Service Area
3. Section C – Needs Assessment Update – Methodology and Population Description
4. Section D – Meeting Needs – Needs and Gaps in Service
5. Section E – Innovation
6. Section F – Linkages/Coordination of Funding
7. Section G – Performance Measurement

Below are highlights from CRT's 2013 CAP Report.

### Service Area

CRT's congressionally assigned service delivery area includes 40 of Connecticut's 169 towns of all Connecticut towns, and stretches from the Long Island Sound to the Massachusetts border. Funding sources for specific programs expand CRT's service area to 62 towns. For the purpose of the 2013 CAP Report, the 40-town designation is the primary focus. The 40 towns are located

within three of Connecticut's eight counties – Hartford, Middlesex, and New Haven. To provide further context, listed below are the 40 towns grouped by county. The residents of Hartford County continued to receive the largest portion of services followed by Middlesex County residents.

**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.

### Needs Assessment Update

#### Methodology

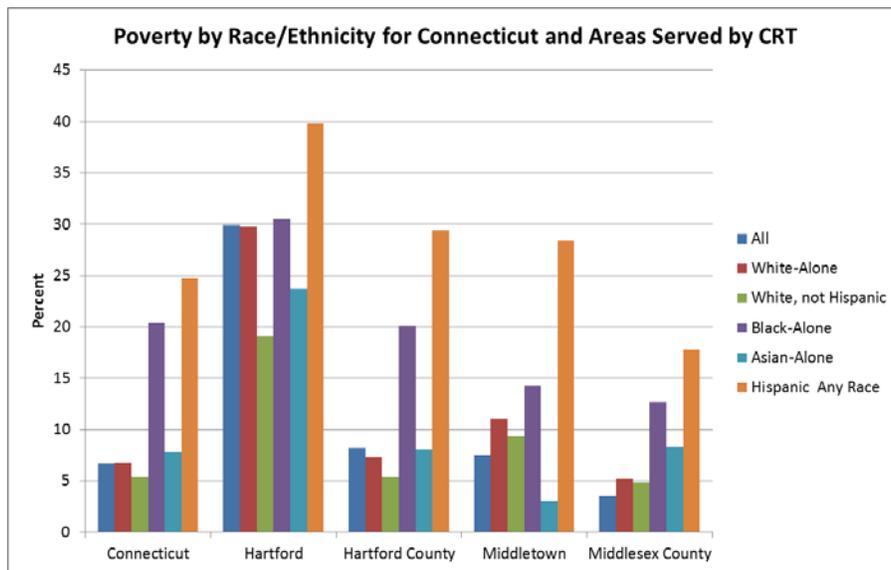
To meet the requirements outlined in the Interim Guidance and ensure a thoroughly updated assessment of community need, CRT obtained and analyzed data from agency-based, local, statewide, and national sources.

#### Population Description

In 2012, 112,467 individuals from 45,468 families from nearly all 169 towns accessed CRT for services. The numbers are lower when compared to the 2012 CAP Report, however, CRT experienced a decline in the number of grants awarded in 2012 resulting in the closing of programs. CRT 2012 program participants were racially and ethnically mixed, Black (33%), multi-racial (30%), Hispanic (25%), and White (10%). Program participants were mostly female, 58% compared to male, and among Connecticut's most vulnerable citizens – children, seniors, the impoverished, and single parents. Children younger than 18 years of age accounted for 36% of participants, and 17% were 55 years of age and older. Over 28% of families reported an income 50% of the federal poverty guideline. Single parents accounted for 38% of all program participants, and single-parent females represented 93% of this population. Of the 11,281 program participants 24 years of age and older, 40% never completed high school and 44% possessed only a high school diploma or GED. The CSBG-IS data shows that CRT continues to reach those most in need.

The 2013 CAP Report confirmed that towns within CRT’s service area are diverse in many different ways – poverty rates, racial/ethnic composition, income, age, and the range and degree of need. Hartford remained the town with the greatest service needs among all of CRT service areas; however, specific needs are evident in other CRT towns.

The U.S. Census (ACS 2007-2011) estimated the current population for CRT’s service area is 888,790. Hartford, Connecticut is the state capital and remains the core of CRT’s service delivery area representing 14% of the total service area population. Hartford’s estimated population was more than twice that of Manchester, the second most populated town served by CRT. Hartford is also the most racially and ethnically diverse of all towns, and continued to report the highest percentages of poverty. Poverty remained about the same throughout Connecticut, but increases were noted for the counties and most of the towns served by CRT. Generally, Hispanics had higher rates of poverty throughout CRT’s service area.



Hartford’s children remained the poorest by far compared to any other town within CRT’s service area. Hartford’s percentage of children in poverty was nearly four times that of the state percentage; as was true for the city’s poverty rate overall. Hartford County and the city of Hartford’s poverty rate stand in sharp contrast.

*Percentage of Poverty and Children in Poverty for the Six CRT Service Areas and Connecticut*

|                                      | Hartford | East Hartford | Bloomfield | Manchester | Middletown | Enfield | Connecticut |
|--------------------------------------|----------|---------------|------------|------------|------------|---------|-------------|
| Poverty Rate                         | 32.9%    | 16%           | 7.6%       | 8.2 %      | 11.5%      | 7.2 %   | 9.5%        |
| Children <18 years of age in Poverty | 44.5%    | 25.1%         | 6.3%       | 11.7%      | 15.2%      | 9.2%    | 12.6%       |

*U.S. Census, American Community Survey 2007-2011*

Throughout the service area, single parent families headed by females with children continued to be disproportionately represented among the poor.

*Percentage of Female-Headed Households with No Husband Present and Children <18 years and Percentage in Poverty by CRT Service Area*

| Area             | Percent of Households | Percent in Poverty |
|------------------|-----------------------|--------------------|
| Connecticut      | 7.3                   | 30.8               |
| Hartford         | 19.8                  | 51.6               |
| Hartford County  | 8.4                   | 33.5               |
| Middletown       | 8.2                   | 32.9               |
| Middlesex County | 5.3                   | 22.2               |

*U.S. Census, American Community Survey 2007-2011 5-Year Estimates*

Hartford's median household income is nearly \$20,000 less than any other CRT service areas. The median household income for six of CRT's service areas and the state are listed in the table. The median income for a household in Simsbury is \$116,554 while 13 miles away in Hartford the median income is only \$29,107. Other towns' income data are found in Table 17 of the full 2013 CAP Report.

*Median Household Income for Six CRT Service Areas and Connecticut*

|                         | Hartford | East Hartford | Bloomfield | Manchester | Middletown | Enfield  | Connecticut |
|-------------------------|----------|---------------|------------|------------|------------|----------|-------------|
| Median Household Income | \$29,107 | \$49,611      | \$72,065   | \$62,436   | \$59,966   | \$67,809 | \$68,243    |

*U.S. Census, American Community Survey 2007-2011 5-year Estimates*

Unemployment remained relatively the same throughout most of the 40 towns compared to the 2012 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 15.2%, a 0.8% increase compared to the 2012 CAP Report.

### Housing

- Owner-occupied housing units in Hartford represented only 18% of total dwellings, the same compared to the 2012 CAP Report
- Most other CRT towns have home ownership rates close to or exceed the state percentage of 57%
- Subsidized housing units in Hartford (N= 17,514) accounted for 38% of Hartford's total housing units and represented 11.7% of the subsidized housing units in Connecticut

### Youth

- Arrest and crime rates among juveniles fell in Hartford and Middlesex Counties compared to the 2012 CAP Report
  - Violent crime rate fell by nearly 50% in Hartford County
- Overall decrease in the number of births to teens less than 18 years of age (CT DPH, 2009) – 92 reported in Hartford
- Hartford reported the greatest number of substantiated cases; the city's rate was similar to other CRT towns and Connecticut. In all towns, physical neglect was the most frequently substantiated type of abuse
- 12 towns in the service area reported decreases in the percentage of students eligible to receive free and reduced lunch compared to the 2012 CAP report, decreases ranged from 0.1% (Branford and West Hartford) to 4.4% (Cromwell). Hartford's percentage fell by 2.6%
- 28 towns experienced increases in the percentage of students eligible to receive free or reduced lunch compared to last year's CAP report, from 0.2% in Glastonbury to 5.3% in East Windsor

### Seniors

- Seniors made-up 20% or more of the total population in seven CRT towns – Old Saybrook (28%), Bloomfield (23%), Essex (21%), Wethersfield (21%), Westbrook (20%), Chester (20%) and Branford (20%)
- Hartford had the lowest percentage of seniors (9%); however, the percentage of seniors living in poverty (24.2%) was higher compared to the 2012 CAP Report and other CRT towns.
- In Hartford, 3,845 grandparents lived with one or more of their own grandchildren (U.S. Census, ACS 2007-11). Among those grandparents, 2,034 (53%) were the children's primary caregivers.
  - Bloomfield's percentage (22%) doubled compared to last year, while Manchester and Middletown percentages decreased over 50%. All of the towns, with the exception of Enfield and Middletown, had higher percentages of grandparents as primary caregivers compared to the state.

*Percentage of Veterans in the Population 65 Years and Older in Six CRT Towns and Connecticut*

|                                      | Hartford | East Hartford | Bloomfield | Manchester | Enfield | Middletown | Connecticut |
|--------------------------------------|----------|---------------|------------|------------|---------|------------|-------------|
| Total Veteran Population             | 3,422    | 3,145         | 1,565      | 4,306      | 3,961   | 2,887      | 235,132     |
| Percentage of Veteran Population 65+ | 47%      | 42%           | 69%        | 47%        | 46%     | 45%        | 49%         |

*U.S. Census American Community Survey 2007-2011 5-Year Estimates*

## Meeting Needs & Gaps in Service

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. The results of the CRT Community Needs Assessment Survey (2011) found that the top needs among respondents (N=933) included help with energy assistance, food, dental and medical care, prescriptions, employment, clothing, and housing.

Related to the needs CRT continued to expand its outreach efforts for the federal and state-funded energy assistance programs and accepted 29,021 applications for assistance in 2012 within the agency's assigned region. To respond to the need for adequate access to food, CRT coordinated efforts with FoodShare and continued to expand the agency's Elderly Nutrition Program (including Meals on Wheels), the Child and Adult Care Food program, the Day Care Homes program, and the Summer Food Service programs. Responding to the need for jobs is difficult even with the improving economic climate. CRT also continued to secure funds for job training programs (e.g. YouthBuild, SafeServ, and CNA), placed over 200 youth in summer youth employment experiences, and worked to develop new business opportunities for job growth. Finally, CRT, through its Human Service Infrastructure (HSI) emphasis, continued to connect customers with services inside and outside of the agency to respond to participants' immediate and long-term needs, e.g. medical and dental care. CRT's adeptness when responding to gaps in service continues to be exceptional.

## Summary

The demographic, socio-economic, and health data presented in the 2013 report underscores the change in needs from town to town. To respond efficiently and effectively to the needs, CRT has the challenge of setting priorities globally, i.e. territory-wide (40 towns), then determining strategic approaches to address priorities within each community. The data make it clear that the current programming (10 core service areas named earlier) is relevant to the existing needs. In addition, the following are also existing or emerging service priorities in CRT's service region needing attention:

- Job Training – Although labor statistics showed small improvement compared to 2012, the need for job training and improving 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.

- 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 Healthy Habits 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(ECE) – 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.

*For more information:*

*Krista Heybruck-Santiago  
CRT Director of Research  
860-560-5683  
heybruck.k@crtct.org*