![Community Renewal Team — Changing lives… Creating opportunity!]

# 2016 CRT CAP Report Executive Summary

## INTRODUCTION

The Community Action Plan (CAP) Report is a requirement outlined in the Community Services Block Grant (CSBG) statute in order for the Community Renewal Team (CRT), a community action agency (CAA), to receive CSBG funds. In Connecticut, the State Department of Social Services (CT DSS) coordinates the receipt of all CAP Report submissions from the CAAs throughout the state. As prescribed in the CT CSBG Community Action Plan Guidelines for FY 2014-2016, the CRT 2016 CAP Report includes the following seven sections:

Section A – Contact Information
Section B – Description of Agency Service Delivery System
Section C – Needs Assessment Update
Section D – Meeting Needs
Section E – Innovation
Section F – Linkages/Coordination of Funding
Section G – Performance Measurement

The CAP Report ensures that CRT continues to focus on the principles and ethics of community action while integrating the agency's core values, and the information and data in the CAP Report informs the agency's strategic plan. The CAP Report outlines the framework and context for the use of the funds made available under the CSBG Act by the agency.

The 2016 CRT CAP Report is a pragmatic and essential learning and planning tool used by agency leadership and program staff to develop the agency's strategic plan, guide program development and service delivery, and inform key stakeholders and community members about the 40-town area CRT serves. The CAP Report includes an update of the demographic, social, economic, and health indicators for CRT's service area in an effort to advise the agency's strategic planning process.
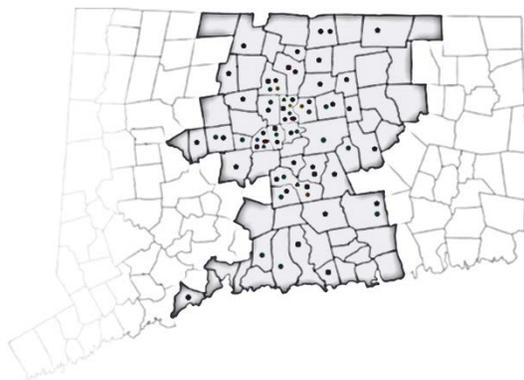
## SERVICE AREA

CRT's congressionally assigned service delivery area includes 40 of Connecticut's 169 towns, and stretches from the Long Island Sound to the Massachusetts border. CRT makes every effort to ensure service accessibility to residents in need throughout the agency's 40-town service area. The 40-town service area is located within three of Connecticut's eight counties – Hartford, Middlesex, and New Haven. Listed below are the 40 towns grouped by county. The residents of Hartford County continue to receive the largest concentrations 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 FY 2014-2016 CAP Update Guidance and to ensure a thorough assessment of community need, CRT obtained and analyzed data

from agency-based, local, statewide, and national data sources. The demographic, social, economic, and public health indicators for CRT's service areas were collected from federal, state, and local databases and reports including the U.S. Census American Community Survey (ACS), State of Connecticut Departments of Children and Families (DCF), Education (SDE), Public Health (DPH), Social Services (DSS), Department of Labor (DOL), State Police, Connecticut Economic Resource Center (CERC) among others. CRT also relied on program data gathered for the Community Services Block Grant Systems Survey (CSBG-IS) report, program surveys, and evaluation forms to improve and tailor service delivery, develop new programs, and determine program participants' needs.

For the 2016 Executive Summary, purposefully selected demographics and poverty indicators are shared. Additional data from each of CRT's 40-town service area can be found in the full report.

Population Description: CRT continues to touch the lives of over 100,000 individuals each year. According to the 2015 CSBG-IS report, CRT provided one or more services to 112,206 individuals from 44,256 families. (CRT CSBG-IS, 2015), an increase of nearly 1,000 families compared with the 2015 CAP Report. CRT program participants continue to be racially diverse with Blacks representing 30% of program participants, multi-racial 8%, and White 30%. Hispanic or Latino participants accounted for 30% of those served, an increase of 2% compared to 28% last year. Program participants were mostly female, 57% compared with 43% male.

Children younger than 18 years of age accounted for 37% of CRT program participants, and 21% of participants were 55 years of age and older, the same percent compared with last year. Over 27% of families reported an income up to 50% of the federal poverty guideline. Single parents accounted for 35% of all program participants for which a family type was documented (N=44,195), and single-parent females represented 94% of this population. Of the 45,208 program participants 24 years of age and older, 21% never completed high

school and 55% possessed a high school diploma or GED (CRT CSBG-IS, 2015). The 2015 CSBG-IS data demonstrate that CRT continues to reach Connecticut's most vulnerable citizens – children, seniors, the impoverished, single parents, and the under-educated.
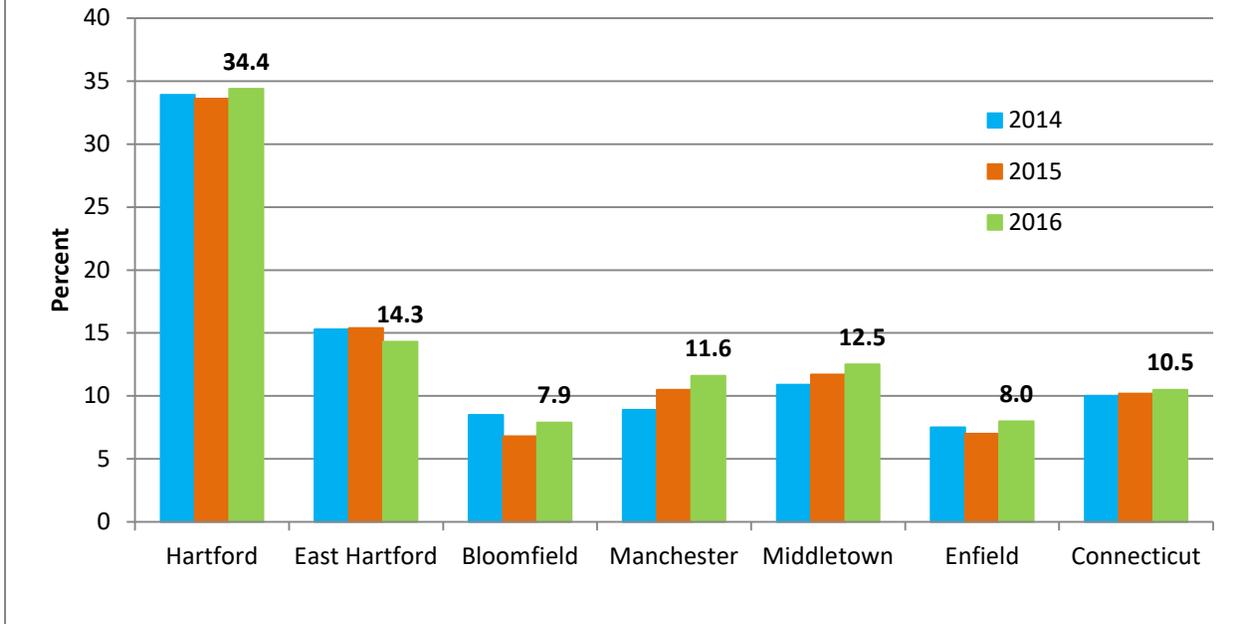
The U.S. Census estimates that the total population within the CRT service area is 893,578 (ACS, 2010-2014), approximately one-quarter of all Connecticut residents. Town populations vary greatly ranging from 4,223 in Chester to 125,211 in Hartford.

Poverty: Connecticut is one of wealthiest states in the nation and ties for the second lowest percentage of families with children under 18 years of age living in poverty (12.0%) in the U. S., including the District of Columbia (Kids Count, 2014). However, poverty in Connecticut continues to rise.

The percent of all Connecticut residents in poverty is 10.5%, up nearly 3% in the last 10 years. For Connecticut families with children under 18 years of age, the percentage increases to 12. If the family has children 5 years of age and under the percentage jumps to 12.6. In Hartford, the poverty rate for all people is 34.4% (ACS, 2010-2014), up about 1% from last year, and three times that of the state rate. East Hartford's rate is second highest at 14.3% followed by Middletown's rate of 12.5%, both rates are increases compared with the 2015 CAP Report.

The bar graph on the next page shows the poverty rates over the last three years for six towns where CRT offers a concentration of services. Connecticut's poverty rate has continued to increase over the last five years, growing slightly each year. While Hartford's poverty rate remains higher than other towns, the bar graph below demonstrates shows that all towns except East Hartford have increases in poverty rates among all people. Additionally, it is important to remember that poverty rates increase dramatically among specific populations, i.e. families with children, single mothers, Black and Hispanic households, etc.
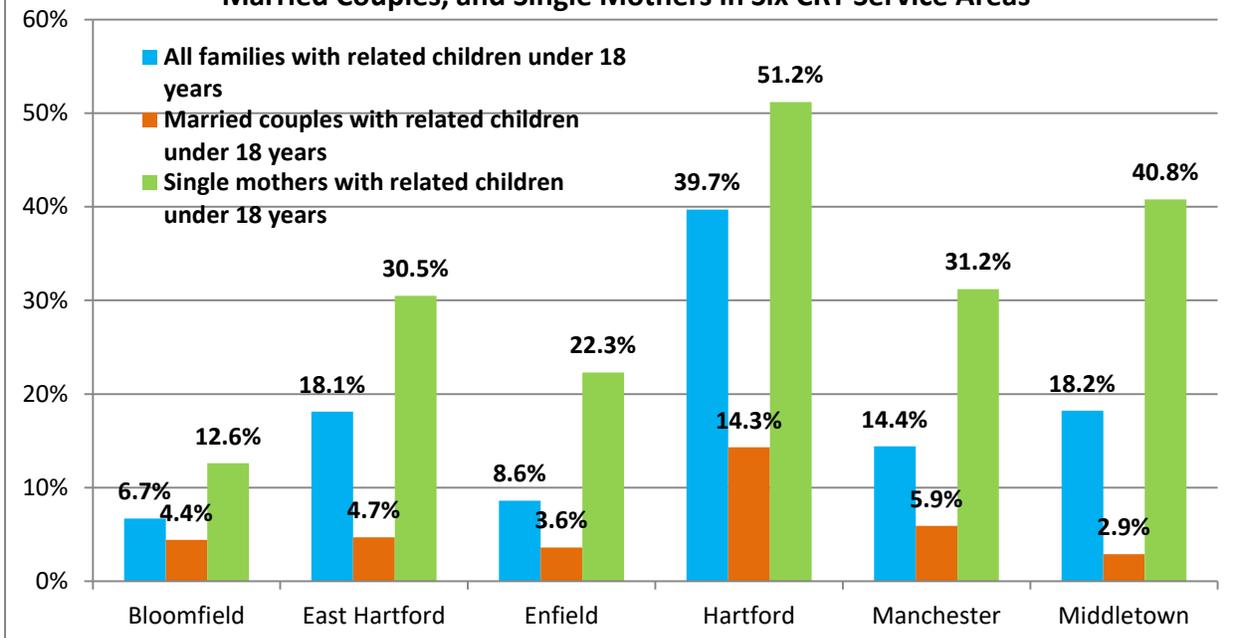
**Comparison of Poverty Rates for ALL People in Six CRT Service Areas and Connecticut**

Percent

- 2014
- 2015
- 2016

| | Hartford | East Hartford | Bloomfield | Manchester | Middletown | Enfield | Connecticut |
|---|---|---|---|---|---|---|---|
| 2016 label | 34.4 | 14.3 | 7.9 | 11.6 | 12.5 | 8.0 | 10.5 |

*U.S. Census, American Community Survey 2010-2013 Table S1701*

The bar graph below displays the percentage of families with children younger than 18 years of age living in poverty in the six service towns.

**Comparison of Families with Children Living in Poverty for All Familes, Married Couples, and Single Mothers in Six CRT Service Areas**

- All families with related children under 18 years
- Married couples with related children under 18 years
- Single mothers with related children under 18 years

| | Bloomfield | East Hartford | Enfield | Hartford | Manchester | Middletown |
|---|---|---|---|---|---|---|
| All families | 6.7% | 18.1% | 8.6% | 39.7% | 14.4% | 18.2% |
| Married couples | 4.4% | 4.7% | 3.6% | 14.3% | 5.9% | 2.9% |
| Single mothers | 12.6% | 30.5% | 22.3% | 51.2% | 31.2% | 40.8% |

*U.S. Census, American Community Survey 2010-2014 5-year Estimates, Table DP 03*

Greater percentages of Hispanic residents live below the poverty level compared with their Black, White, and Asian counterparts in the six highlighted CRT CAP Report service areas. Bloomfield is the only exception, where 21.6% of Asians live in poverty (ACS, 2010-2014). Residents who are "White alone, not any other race" category are less likely to live in poverty than any other group regardless of town.

Married couple families with related children typically have lower poverty rates than compared with other the family types. Single mothers with children under five only are much more impoverished than the other family types with the same aged children. In Deep River, 100% of single mothers with children less than five years live in poverty. Seven other CRT towns are estimated to have over 50% of single mothers with young children below poverty. Family poverty data, for many towns, present a very different view compared with the overall poverty rates. Many towns where poverty is perceived as "not an issue" have families with children where poverty is very, very much an issue – East Windsor, Granby, Rocky Hill, Old Saybrook, East Haddam, Branford, and Clinton.

Poverty rates in many of the towns in CRT's service area climb for children, and typically children under five years of age suffer the highest rates of poverty. Towns where over one-quarter of young children live in poverty include Hartford (52%), East Hartford (33.6%), and Deep River (27.1%) (ACS, 2010-2014). Sixteen towns in CRT service areas show very low (<2%) or no children living in poverty. *Table 10* in the full CAP Report shows the percent of all people and children in poverty in each of the 40 towns in CRT's service area.

Income: Median income varies greatly between CRT's 40 towns. The range for

household median income in the 40-town region is $88,015. Durham has the highest household median income at $117,328, and Hartford the lowest, $29,313. Hartford has the lowest income for all family types with the exception of families with female householder, no husband present. East Granby has the lowest for that family type at $21,885 (U.S. Census Bureau, ACS 2010-2014). A complete median income table by town is available in the full CAP Report.

Seniors (65 years+): Connecticut is one of only seven states with a median age over 40 (ACS, 2010-2014). The older population will grow rapidly over the next fifteen years with the most rapid increase being between now and 2030 when the baby boom generation reaches age 65. As the baby boom generation reaches retirement age, the growth of Connecticut's elderly population is expected to accelerate. In the report put out by the Connecticut Office of Legislative Research in December 2012, the proportion of Connecticut residents over 65 will increase to 21.5% by 2030 compared with the current 14.5%. With the increasing numbers of seniors come challenges and new opportunities.

Thirty of CRT's 40 congressionally assigned towns experienced increases. Killingworth had the highest percent increase of seniors as part of the total population at 3.2%, while Cromwell and Enfield had the lowest increase, 0.1%. The percentage of seniors making up a town's total population stayed the same in four towns (Canton, Clinton, Westbrook, and Madison). The remaining six towns had decreases. Old Saybrook had the greatest percentage decrease at 1.3% followed by Middletown at 0.4%

In eight CRT towns, seniors make-up 20% or more of the total population, up one town from last year – Old Saybrook (27.0%), Essex (26.7%), Chester (24.7%), Bloomfield (24.5%), Branford

(21.3%), Wethersfield (21.0%), Killingworth (20.4%), and Madison (20.4%). Hartford, with a senior population of 9.5%, is the only town in CRT's service area where seniors make up less than 10% of the population.

Grandparenting: The U.S. Census estimates that in Connecticut there are 66,087 grandparents living with one or more grandchildren less than 18 years of age, about 1,000 less compared with the last CAP Report. Within this grandparent population, 20,986 have the responsibility for their own grandchildren of which 12,645 (60%) are less than five years of age (ACS 2010-2014).

Despite Hartford's low elderly population, 3,697 grandparents lived with one or more of their own grandchildren, and of those grandparents, 1,747 (47.2%) are the children's primary caregivers (U.S. Census, ACS 2010-14). All of the towns except Manchester have higher percentages compared with the state. Bloomfield's percentage is the highest followed by Hartford and Middletown.

## MOVING FORWARD

The 2016 CAP Report provides an update of the demographic, socio-economic, and social conditions in CRT's 40-town service region, paying particular attention to the low- and moderate-income individuals and families, children, seniors, and Veterans.

Within CRT's area of geographic focus there is diversity among people, living conditions, and need. CRT has the challenge of setting priorities globally to address a 40-town geographic service area that have very different needs, then determining strategic approaches to address priorities within each community. The data contained in the 2016 CAP report highlight six areas of need that should be addressed in CRT's

strategic plan. Using the data from this report, STEPs, and the expertise of the program staff and community, intelligent and practical priorities need to be set along with goals, objectives, and detailed strategies addressing the priorities selected for the next CRT strategic plan.

*First*, the strategic plan must include specific program planning and outreach strategies for seniors, those 65 years of age and older. The senior population is growing throughout Connecticut and in the majority of CRT towns. The senior population of Old Saybrook, Essex, Chester, Bloomfield, Branford, Wethersfield, Killingworth, and Madison exceed 20%. Concentrated outreach efforts about existing CRT services and collecting data about the specific human service needs of older adults, particularly in Middlesex County is imperative to developing effective programming to meet the needs of this growing population.

*Second*, the strategic plan must include a plan to reduce poverty among single mothers with children, particularly moms with children five years of age and younger. A two-generation strategy specifically for this population would be ideal. This population continues to live in poverty at alarming high rates throughout CRT's service area. Sharp increases are noted in towns once thought to be poverty free. While single fathers also are impacted, they do not struggle financially as much as single mothers with young children do. Designing a plan to address increasing income, education, work skills, etc. for single mothers is critical to moving two generations out of poverty.

*Third*, poverty is growing, although it is still concentrated in Hartford at much higher rates than other towns throughout CRT's service area, the data shows increases in towns once thought

not to be poverty free. Manchester, East Windsor, Windsor Locks, Clinton, East Haddam poverty rates, particularly child poverty, is increasing. The percentage of school-aged children qualified for free or reduced school lunch is also growing throughout CRT's service area, another indicator of poverty growth. In-depth, facilitated discussions among agency leadership and program directors need to take place to understand the relationship between CRT's programming and its impact on poverty throughout every town in the 40-town service area, including which programs impact which segments of the population and which populations remain unserved. CRT produces a town report card that will assist in this process. Further cultivating the connection will deepen participants' understanding of gaps in service and help inform the priority setting process of the next strategic plan.

*Fourth*, Veterans have many needs, and the aging Veteran population is growing and will require additional health and human service supports. Among the younger Veterans, unemployment rates remain higher than among the general population. Specific goals, objectives, and strategies should be set to address the needs of Veterans living in the agency's service region.

*Fifth*, it is time to strategize how to apply the expertise learned from STEPs and the Generations program to expand outside of the city of Hartford and address the needs of grandparents raising their grandchildren in other towns. Higher percentages of grandparents are raising their own grandchildren for extended periods of time, and these numbers are increasing in the towns surrounding Hartford. CRT has learned that grandparents achieve stability and self-sufficiency when they are able to access a multitude of supports – behavioral

health, financial literacy, nutrition assistance, respite, etc. CRT's Steps to Success (STEPs) identifies family strengths and builds on community-based relationships to reinforce and support positive changes that will have a long-term impact on these families' lives.

*Finally*, marketing strategies and materials should continue to be reviewed and cross-referenced with demographic data throughout CRT's service area to determine the efficacy of the materials. For example, the population in towns throughout Middlesex Counties is aging, so reviewing materials for descriptions of age-related services, discussions with current program participants and key informants in the area, and targeted outreach strategies will help engage the growing senior population to address their human service needs.

The data make it clear that the current agency programming is relevant to the existing needs; however, the reduction and elimination of relevant and life-changing services in the upcoming year due to budget cuts will devastate individuals and families living in CRT's service towns. Hartford will be particularly impacted, as well as those in the Greater Hartford area and Middlesex County.

*For more information*:

Julie Ackerman
Director of Planning
860-560-**5772**
ackermanj@crtct.org