Focus on Seniors and Grandparents

SENIOR CAFÉS: Seasoned with friendship
Choosing the right SENIOR RESIDENCE
New hope for Hartford GRANDFAMILIES
SCAFFOLDING OF SERVICES Supports Seniors in the Community
You are holding the premier issue of CRT Vision, the Community Renewal Team’s new magazine covering issues of concern to the region. Through the pages of this publication, CRT will initiate dialogue on the challenges of reducing poverty and increasing stability and wellness. We will also explore some of the solutions that have been successful, and others which show promise.

In these pages, you will hear from experts in social services, and you will meet some of the residents of our cities and towns. We are excited to share these with you, and we hope that you will find both information and inspiration.

This first issue concentrates on the concerns shared by the state’s rapidly growing elderly population. The number of Connecticut residents who are aged 65 or older grew by 30% between 1980 and 2005, and will jump another 20% by 2015. If current trends continue, nearly 20% of the state’s population will be over 65 in 2025.

CRT is proud to be a leader in establishing attractive, safe housing for seniors. As we go to press, we have nearly completed a new development for grandparents raising their grandchildren in Hartford, which is discussed in this issue. The Retreat, our affordable assisted living facility, is such a successful pilot that it serves as an example for the state. An apartment complex in Bloomfield for lower-income seniors opened in 2006, and we expect to begin another during 2007. Among these residences, seniors can find a full continuum of options, from full independence to daily medical care and assistance.

In addition, CRT is known for its Meals on Wheels and Senior Cafés throughout Hartford and Middlesex counties. These are outstanding supports that help seniors live independently as long as possible. National studies show that vulnerable elderly who participate in one of these Elderly Nutrition Programs maintain nutritional status and avoid declines in health and quality of life.

In coming issues, CRT Vision will explore new initiatives to help preschool children enter kindergarten ready to learn, and the successes and challenges of those who are returning to our communities after incarceration. We genuinely look forward to your suggestions and feedback – both about the issues we raise, and about this magazine itself.

The strength of this community is in its people – those of you who are reading this magazine, and the many citizens that all of us work with every day. By focusing our skills and energy, we can accomplish almost anything!

Lena Rodriguez
President/CEO
Choosing the right senior residence

The Retreat

Today’s seniors live busy and fulfilling lives. Gerontologists tell us that we are remaining active more than ten years longer than our parents did just one generation ago.

But when declining physical or mental health prevents people from living safely on their own, they want a residence that supports their interests and enhances their engagement with others.

What questions do you ask to find the right place? What criteria do you review? And how do you know when the time is right to make the move?

“This can be one of the most difficult decisions a person faces,” says Hollis Hartman, an advisor who works for A Place for Mom, Inc., a consulting firm which helps families sort out these issues. “Often a son or daughter is helping a parent who is fearful and reluctant about moving. And the adult child may be overwhelmed with the choices that are available.”

Before opening the Yellow Pages or surfing the internet for nearby facilities, the Assisted Living Federation of America advises families to draw up a “wish list” of the characteristics that are most important to the prospective resident and the family.

Factors to consider might include location; cost and type of contract required; activities offered; quality and variety of food; level of on-site medical care; building cleanliness, aesthetics and security; staffing ratios; friendliness and respect shown by staff toward residents; services provided; function level of other residents, etc.

While some of these features can be explored through websites, brochures and telephone calls, there is no substitute for in-person visits where you can talk with staff and residents. AARP suggests planning at least two visits: One that is scheduled in advance with the Administrator and Admissions Director, and another “surprise” visit, when you can observe meals and activities.

“Once you’ve met with staff, spoken with residents, toured the facility inside and out, tasted the food, and received answers to your questions, you should have a pretty good sense of whether a facility ‘feels right’ and meets your criteria,” says the on-line course that AARP provides on choosing an Assisted Living Facility. All of that should precede the final negotiation of any contract.

BEST ENVIRONMENT FOR DAD

Celeste Steele considered all of this and more. As the Quality Assurance Director of a hospital, she conducted extensive research to find a residence where her father would be happy and secure. Her geographic parameters were broad: In moving her father from the West Coast, she was willing to look at anything between her home in Boston and her brother’s home in New Jersey.
Ms. Steele drew up a five-page checklist regarding each facility that she was considering. She asked to see everything from the staff turnover rates to the Public Health files. She reviewed monthly recreational calendars, looking for a balance of physical, social and intellectual opportunities. And she scrutinized costs, contracts and the “care continuum,” to see how her father would be treated if his need for assistance increased.

On all of these issues, the program that came out with top marks was The Retreat, CRT’s assisted living residence that opened in January, 2005 in Hartford. With 100 apartments and a full array of shared spaces and activities, The Retreat was the state’s first pilot project where lower-income seniors could use Medicaid to pay for assisted living.

But the reasonable cost wasn’t what drew the Steele family. Instead, they were impressed with the beautiful surroundings, the skills of the staff and the sense that residents truly consider this their “home,” where they take on projects and responsibilities.

In that sense, William Steele Sr., age 91, fits right in. Almost as soon as he moved to The Retreat, he began reorganizing the resident library. After he sorted, culled and created a catalog, he turned his passion for reading into starting a book lovers’ program for the other residents. “I enjoy this, and it was a nice way to meet people,” says Mr. Steele, a year after moving in. “It got me out of the apartment, made me feel that I had something to do.”

His daughter agrees. Although her father was not always such a social person, Celeste Steele says that her father has flourished since arriving at The Retreat. Dressed in business attire, he is a familiar sight in the first floor activity rooms.

“I have to say, I was quite surprised,” says Ms. Steele. “I really hadn’t expected to have him in a high-rise building in a city, but we are extremely pleased with everything we have found here.”

AFFORDABLE SUPPORT, COMMUNITY CONNECTIONS

In the course of Carrie Roberts’ career with the State of Connecticut, she ran a drop-in center for those with mental illness, provided occupational therapy and employment support, and ran an acute day treatment program. Most important, she says, she was a professional advocate on behalf of people with disabilities and mental health issues.

A decade after retirement, she found herself needing to use those research and advocacy skills on her own behalf. After three strokes, she could no longer live safely in her own condominium. She wanted a pleasant, social environment where she could be moderately independent, but would get help with bathing, dressing, and housework.

That level of care is provided in many assisted living residences, but such facilities are generally not covered by Medicare, Medicaid or private health insurance. With a modest state pension, Ms. Roberts didn’t see how she could afford an assisted living residence at $1,800 to $3,500 per month.
Then she heard about The Retreat. By pooling support from a variety of funders, CRT’s affordable assisted living facility is able to provide apartments, meals, daily support from Certified Nursing Assistants, on-site medical services and social/recreational activities for a fraction of what it costs in most private facilities. In fact, a resident like Ms. Roberts is paying just two-thirds of their income for rent, utilities, food, leisure activities, laundry, housekeeping and nursing services. The balance comes from the Department of Social Services and private grants.

Four months after moving to The Retreat, Ms. Roberts has become one of the “fireplace friends.” She and her companions, Marion Spinardi and Nannie Hamilton, can often be found chatting in front of the living room fireplace, listening to music and showing off photographs of the grandchildren.

With the help of Retreat staff, Ms. Roberts gets out several times a week. She enjoys shopping trips and holiday excursions, and attending church, wearing one of her well known hats.

“Our job is to help members retain or regain their quality of life,” says Heidi Caplinger, Community Liaison at The Retreat. “Mr. Steele wants to keep his mind active, so he purchased materials so that he and other members can learn to speak Spanish. Ms. Roberts enjoys social contact and the continuing connection with her church. At The Retreat, people aren’t letting age or disabilities get in the way of enjoying life!”

What is Assisted Living?

Assisted Living Residences, also known as Assisted Care Communities, are designed for seniors who are no longer able to live safely on their own, but who do not require the high level of care provided in a nursing home. According to the National Center for Assisted Living, about 800,000 people were living in this type of residence in 2000, and the numbers have continued to grow. At that time, the average resident was an 80-year-old female who participated in meals and recreational activities on her own, but needed assistance with housekeeping and personal hygiene.

In most cases, residents live in private apartments, which frequently have small kitchenettes. Three meals a day are provided in a central dining room. Some structured activities may be organized, and there are usually common areas where residents can initiate activities.

Staff is available 24 hours per day at an Assisted Living Residence, to ensure resident safety. However, staffing varies greatly from one residence to another. In addition to the meals, staff provide assistance with medications, housekeeping and activities of daily living (such as showers, dressing, etc.)

Most assisted living communities also provide some licensed nursing services, and may have some physical and occupational therapy. Hours and level of service vary greatly. It is important to ask whether the same staff will serve the facility regularly, or whether the staffing comes from a rotating pool of professionals.

Some assisted living programs are able to support persons with memory impairment, dementia or Alzheimer’s. Most of these programs have secured or locked areas to ensure that no one wanders off.

Price range for private-pay Assisted Living is from $1,800 to $3,500 per month, depending on the size of the apartment and level of assistance required. Alzheimer’s care ranges from $2,800 to $3,800 per month, according to the Assisted Living Federation of America.

www.retreatassistedliving.org
Senior Cafés: Seasoned with Friendship

By DANIEL DREW

They say breakfast is the most important meal of the day. But to Susan Lather, lunch might be even more important.

The director of the Enfield Senior Center sees scores of area residents eat a balanced, hot meal each weekday, prepared and delivered by the Community Renewal Team’s Nutrition Department. For a suggested donation of just $2 per person, or whatever they can afford, these seniors enjoy both healthy food and companionship. In fact, the center’s lunch program serves a dual role: to provide seniors with a nutritious, hot meal and to facilitate social activity.

In an era when many of these “Senior Cafés” have seen steeply declining participation – and some have stopped serving altogether – the Enfield site is serving lunch to an average of 100 people each day.

That’s a ringing endorsement of the balanced programming offered in Enfield. Delicious meals provided in an attractive, social atmosphere complement a full array of health and leisure activities, from Blood Pressure Screenings to Woodcarving Classes. The building, constructed four years ago, has a fitness center, art room, computer lab, game room and more. It is open from 8 a.m. to 8 p.m.

Several hundred people come through the center each day, but the largest single activity is the hot meal. CRT’s Café Manager Joanne Boucher oversees volunteers who serve participants at their tables, which helps to create a restaurant atmosphere.

Among the 80-120 seniors in the dining room each day, a core of 40-50 are the true “regulars,” who eat at the center at least four times a week. Many have formed lasting friendships over plates of spaghetti, pot roast or chicken and rice. Lather has seen strangers grow into friends who save seats for each other in the dining room. Many of her “customers” even make birthday cakes for one another, she said.

“For some people, that’s the meal of the day. The nutrition aspect is an important part,” Lather said. “But they’re also nourished by the social interaction.”

“Socialization is often the incentive for people to attend the congregate meal. They get good nutrition as well,” said John Migliaccio, president of Maturity Mark Services in White Plains, N.Y., and an expert in senior programs. Each meal prepared under contract with the state’s Area Agencies on Aging must meet strict nutritional guidelines, which cover vitamins, minerals, protein and fiber.

“You have professionally prepared meals,” Migliaccio continued. “You have a guarantee that people are getting at least one good meal per day. It’s got all the components of a great success story.”
Left to shop, cook and eat by themselves, these seniors would probably have eaten less-healthy meals, said Stefanie Belding, M.S. R.D., CRT’s Assistant Vice President for Nutrition and a board member of the National Association of Nutrition and Aging Service Programs. In fact, participants in Elder Nutrition Programs are better nourished and enjoy a higher level of socialization than a matched sample of non-participants, according to a study commissioned by Congress and published in 2002.

There are a variety of reasons for this, according to the USDA Center for Nutrition Policy and Promotion: Older people may not realize that food requirements change with age; they may struggle to obtain adequate nutrients as activity levels and appetite decline; and their access to food may be limited by issues of personal mobility, transportation, economic status or social isolation. Chronic diseases, physical limitations, prescription medications and depression can diminish an elderly person’s interest in food preparation and consumption.

By presenting a broad variety of attractive, inexpensive meals – which happen to be nutrient-dense and low in saturated fat, cholesterol and sodium – a nutrition program can go a long way toward mitigating these risk factors and improving the overall diet quality of a community’s elderly, the USDA states.

In addition to their meals, participants receive four nutrition lessons per year, which are geared toward the specific issues faced by older consumers or questions raised by the café guests themselves. Recent CRT nutrition topics have included sodium-sensitive high blood pressure and controlling diabetes.

Behind the Scenes
A lot goes into making the CRT meal program so successful. First the menus are developed by registered dieticians according to state and federal regulations, following dietary guidelines for people 60 and over. While CRT’s meals contain no added salt and are low in fat, they must also be palatable to the customers. Preferences and satisfaction are assessed annually through surveys; there is also a Suggestion Box at every Senior Café.

At 7:30 a.m. each day, CRT nutrition employees begin cooking in the Agency’s massive industrial kitchen on Windsor Street in Hartford. They steam vegetables in gigantic kettles and roast meats in huge ovens. Hot lunches for more than 800 seniors are portioned into serving dishes, loaded into heated trucks and delivered to the Enfield Senior Center and close to 30 other café locations in Hartford and Middlesex counties. (At the same time, meals are being prepared for hundreds of homebound elderly, for delivery by the Meals on Wheels program.)

To be successful, the food and programming must complement each other. A Senior Center’s activities attract people who may stay for the food, Belding said. And the food attracts people who might not otherwise have come to the center, Lather said. “We have people who want to know when we will be having vegetable soup, or crispy chicken, or many other meals,” Lather explained. “The meal is the center-point of their day.”

For more information about CRT’s Elderly Nutrition Programs, including Senior Cafés and Meals on Wheels, please call (860) 560-5825 or -5828. For a statewide listing of Elderly Nutrition providers, call 2-1-1.
For a growing number of Americans, dreams of enjoying an “empty nest” or a restful retirement have been supplanted by a very different reality: They find themselves with primary responsibility for raising their grandchildren. Today there are 4.5 million children in the United States being raised by their grandparents – approximately 6.3% of all children under the age of 18. In fact, the number of such households has increased by more than 30% in recent years.

In Connecticut, approximately 21,000 children live with grandparents who are formally recognized by the Department of Social Services as their official guardians. At least as many are living informally, and sometimes temporarily, with their grandparents. In fact, some school principals report that grandparents outnumber parents at PTO meetings and report card conferences.

Grandparent-headed households have become so common that a name has been coined for them: Grandfamilies. Like Francis Little, 39% of the grandparents who are caring for their grandchildren report that have served as the primary caregivers for five or more years.

In many cases, grandparents step in to keep children out of the foster care system; the arrangements are often informal and not legally recognized. In fact, eight times more children live informally with their grandparents than live in the entire foster care system. Some experts note that if even 50% of these grandparents became formal foster parents, it would cost taxpayers $6.5 billion annually and completely overwhelm the system.

Finding Adequate Housing and Other Challenges

Like others around the country, Hartford’s grandfamilies are likely to be people of color, living in relative isolation within urban centers and struggling with poverty. When households grow unexpectedly, they often face significant economic hardship. Retired or disabled grandparents may be living on fixed incomes, and employed grandparents modify their work schedules – or leave work altogether – to accommodate their childrearing responsibilities.

Without support from the younger generation, grandfamilies are far more likely to live in poverty. Overall, 30% of grandfamilies live below the federal poverty line. That means that a family of three is trying to get by on less than $17,500, when economists say that “self-sufficiency” in Connecticut costs at least twice as much.

The poverty rate soars to 60% if the family is headed by a single grandmother who has no support from her offspring. Nationwide, 64% of grandfamilies are headed by single grandmothers, most between the ages of 50 and 59.
Adequate Housing

Like most families confronting poverty, poor grandfamilies struggle to meet the demands of daily living. Finding adequate, affordable housing is one of the greatest challenges. More than one quarter of grandfamilies live in overcrowded quarters, as defined by both the Census Bureau and the US Department of Housing and Urban Development; children may share their grandparents’ bedrooms or sleep in the living room.

Most landlords restrict the number of people who are permitted in an apartment. Age-restricted buildings (including public housing for the elderly) may fine or evict grandparents if they move children into their apartments. Until they can afford to move, they may find themselves living covertly with the constant threat of penalties and homelessness.

As with many other households living in poverty, grandfamilies who rent are likely to spend a disproportionately large sum on housing. By some estimates, 57% of low-income grandfamilies spend at least half of their income on rent and utilities. Families that find a way to move to larger homes often leave neighborhoods in which they lived for many years and developed strong friendships. As a result, they often report feeling isolated, and lacking the extended community support they had in their former neighborhoods.

In addition to housing, many grandfamilies face a host of other problems:

Informal grandfamilies (where grandparents do not have legal custody) often struggle with enrolling children in school, obtaining medical care, or even applying for a child’s Social Security number, which is the gateway to benefits such as food stamps.

Many grandparents and grandchildren experience emotional and psychological strain because of the loss of parents and difficult living conditions. Lacking the time, energy or resources for social activities, many grandparents report an increased sense of isolation. A 2002 report, “Mind the Gap: Grandparents Raising Grandchildren,” found that grandparent caregivers are twice as likely to be clinically depressed as other grandparents.

An Urban Institute study found that children raised in grandfamilies are twice as likely as their peers to exhibit low engagement in school, skip school, and be suspended or expelled. In addition, 13% of these children exhibit high levels of behavioral and emotional problems. Grandparents in Hartford-area support groups report that the children are particularly upset after a court appearance or a visit with their parents.

“You can find a child who had been in very good shape is lying on the couch in a fetal position, unwilling to talk with anyone,” said Laura McCrae, who is raising two grandchildren along with her own son.

Lack of access to government benefits compounds all of the problems faced by poor grandfamilies. According to the Urban Institute, grandparents under-use Temporary Aid to Needy Families (TANF) and other supports like Medicaid, food stamps, and subsidized child care for a variety of reasons. Many are either unaware of the benefits, or misinformed by workers who think grandfamilies are ineligible. Some grandparents refuse help because they perceive a stigma in taking “handouts,” or they fear that increased government attention could result in the removal of their grandchildren.

Finally, some grandparents who do apply for benefits are encountering two obstacles created by the 1996 reform of the welfare system: the 24-month lifetime limit for receiving TANF and the end to the grandparents’ exemption from the work requirement.
Given these challenges, many grandfamilies struggle on a daily basis to provide adequate care for their grandchildren.

Hartford Grandfamily Housing
Those who work full time with grandparents raising their grandchildren state that there are many unmet needs.

“Our grandparents talk about all kinds of things: The costs, the behavior of some of the teens today, the sense that the commitment is endless, we hear all of that,” says Elby Gonzalez-Schwapp, Program Manager of the City of Hartford’s Grandparents Program, and staff to the Commission on Grandparents Raising Grandchildren.

CRT is taking a significant step in closing the service gap through a new initiative, the Hartford Grandfamily Housing Development, which is being built in conjunction with the city. The program combines a full array of supportive services with beautiful, affordable residences. In October 2006, ground was broken on 24 spacious two-, three-, and four-bedroom town houses and apartments, where grandparents can raise grandchildren. Next door, an historic three-story elementary school is being renovated into 16 one-bedroom apartments for seniors.

In keeping with CRT’s mission to provide comprehensive and holistic services, Hartford Grandfamily will offer a variety of opportunities to develop new skills and become self-sufficient. The complex will include recreational space for youth and adults, exam rooms for health screenings, and an intake, assessment and referral center focusing on social services and medical assistance. Grandparents will benefit from financial literacy and job training programs, as well as education in positive parenting skills and navigating today’s school system. They will also have access to counselors and case managers, helping them to overcome personal and financial obstacles. Just as important, child care and respite services will give grandparents time to fulfill the obligations of daily living and work through personal issues.

However, the most enduring impact of this project will be on grandchildren. Youth of all ages will have access to programs and services that will help them succeed in school and take them through to a healthy and productive adulthood. CRT’s preschool already ensures that children enter school ready to learn. The afterschool activities will keep youth and teens engaged in sports, the arts, technology and other safe and educational activities, instead of drifting into high-risk behavior. Children and youth will also develop relationships with counselors and case managers, learning strategies to cope with loss and new family dynamics, as well as accessing the services that are offered in the community.

When it opens, later this year, this Grandfamily Housing Development will provide clean, safe, and low-cost residences in Hartford’s Northeast neighborhood, where grandparents can be proud to raise their grandchildren. This is an exciting initiative, linking social services with bricks-and-mortar construction to meet the needs of the seniors who step in to raise a second generation of children when the parents cannot handle the responsibility. Only five other grandfamilies housing programs exist in the nation, and none are taking this intensive approach.

Given the great sacrifices grandparents make to care for their grandchildren and the courage of children living without their parents, grandfamilies deserve all this and more.

For a reference and reading list on Grandfamilies, please contact info@crtct.org

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Scaffolding of services supports seniors in the community

In 15 years of providing social services to seniors, Heidi Caplinger has learned an important lesson: Programs must be individualized to be effective.

“Connection is the key to success,” said Caplinger, who oversees services at several of CRT’s senior programs, including Coventry Place, a new apartment complex on the Bloomfield/Hartford line. The 30 units, first occupied in fall 2006, are designed for independent seniors over age 62.

“There isn’t one ‘typical person,’” she said of those who use CRT senior programs. People come in with varying physical and social needs – some acknowledged, some unrecognized. The challenge is to customize services so elderly individuals remain successful in the community.

Seniors are often reluctant to admit that they could use some assistance. The reasons are varied, and may include concerns about cost, loss of privacy, desire to remain independent, and lack of knowledge about available resources.

The key to getting beyond this resistance is to establish a good rapport, says Deborah Jack, the Resident Services Coordinator at Coventry Place. “It only happens over time, when you build a relationship and the clients begin to trust you,” she said. In the first few months after Coventry Place opened in 2006, she says that she concentrated on informal conversations with residents, and doing a lot of listening.

“One once you build the rapport, it’s wonderful,” she said. When people are willing to share their concerns, CRT’s Service Coordinators can help to locate the appropriate supports in the community, and show clients and their families how to pay for them.

For example, Jack may determine that a Coventry Place resident would benefit from assistance with medication delivery, transportation, meals and housekeeping. As a Service Coordinator, she knows what services are offered in the community, and how to match clients to funding sources, which have differing eligibility guidelines. Her plan for this resident might include medication delivery from either a local or national pharmacy; use of local buses and senior vans to get to destinations around the city; participation in a nearby Senior Café for meals and socializing; and using CRT’s Community Home Services to help with light housekeeping.

Once a plan is developed, Jack reviews recommendations with the resident and family, assists them to access the programs and follows up to ensure that those services are properly delivered.

That review is a hallmark of the CRT approach: Integrating communication across the generations, including both the elderly residents and their adult children. “Families are concerned about physical needs, social needs, and family dynamics,” Caplinger said. “We have to make sure that the family feels as good as the client feels.”

Social isolation can be insidious, although rarely mentioned. The Coventry Place Resident Council works with Ms. Jack and CRT’s Retired Senior Volunteer Program (RSVP) to organize crafts, card and bingo games, dances, monthly birthday parties and intergenerational activities. Many residents start the day in the Activity Room, where there’s free coffee, tea and pastry every morning.

“You might look at this as ‘Independence Plus,’” says Caplinger. “Some complexes for independent seniors leave people to fend for themselves entirely. Here we offer a structure of suggestions and support. People can take advantage of as much or as little as they need.”
RSVP

Volunteers with Greater Hartford & Mid-State RSVP follow their passions! The program’s 668 volunteers work in nearly 70 locations, including Vernon public schools (at left) or the Bradley Airport Ambassadors Desk. Volunteers also untangle consumer problems, operate antique trolleys, cook for a women’s shelter, and much more.

CRT serves the Community

CRT VISION is a publication of the Community Renewal Team, Inc. a non-profit organization dedicated to reducing poverty. Programs throughout Central Connecticut help low-income and disadvantaged people and families become self-sufficient.

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