



# EASTCONN Head Start Community Assessment

August 2021

It is with deep gratitude that we thank all those who participated in this seven-month community assessment project. The dedication of the individuals who attended the biweekly lead meetings and their passion for improving lives in Head Start is truly commendable. While it is clear that no single individual, organization, or agency can resolve all the issues addressed in this report, much-needed change is possible when caring individuals work together. It is the hope of all those who collaborated in this process that it will influence our practice to build a brighter future for all EASTCONN children and families.

# Executive Summary

The EASTCONN Head Start community assessment is designed to serve as a guide to shape future program plans based on area demographics and community strengths and needs. EASTCONN conducted the assessment between January and August 2021.

The New England Head Start Training and Technical Assistance Network providers launched the community assessment with a meeting detailing the process. EASTCONN Head Start leadership convened a cross-disciplinary team to lead the data collection process, which included management, a Family Advocate, Service Coordinator, parents, and additional staff members. Five subgroups focused on key topic areas relevant to the community, collaborating with additional partners as needed. The process also included surveying Head Start families and community providers; conducting focus groups with Family Service Staff and Head Start families, and analyzing administrative and public data.

Comprehensive information gathered through this community assessment provided EASTCONN Head Start decision-makers with a clear picture of community and family needs in Windham and Tolland County. This included identifying the top community issues, barriers to accessing services, and populations that are currently underserved in the community. While the community assessment team acknowledges that no one entity can resolve these issues, we hope that it lays the groundwork for greater collaboration among all who seek to improve the quality of life for Head Start families.

## Highlights & Program Strengths

The community assessment process fostered new learning and illuminated the strengths, values, and needs of staff, families, and the community. EASTCONN Head Start was pleased to hear that the program supports many identified needs. Highlights include:

- The value of community partners to program development;
- Strong partnerships, and strong desire for continued and expanded collaborative relationships among community partners that serve similar populations;
- Highly skilled staff with in-depth community knowledge; and
- Comprehensiveness of services.

## Challenges & Identified Needs

Common challenges emerged across the content areas explored throughout the community assessment process. Challenges include:

- Windham and Tolland counties are very rural and dispersed, making collaborations between sites difficult; and

- The Covid 19 pandemic had a significant impact on school attendance, population changes, unemployment rates, food insecurity, trauma, and data collection during 2020 and 2021. The impact meant that many meetings occurred virtually, consultants were often unable to travel, staff was frequently under quarantine, and programs closed. Overall changes to the community included empty Head Start slots, low attendance at schools, children and families who faced uncertainty, and the need to quickly respond to ever-changing public health guidelines.

Priority community needs identified during the assessment included:

- Affordable child care;
- Expanded access to behavioral health;
- Increased affordable housing;
- Available and accessible public transportation;
- Additional supports for non-custodial parents/non-traditional caregivers; and
- Increased adult education opportunities.

## Recommendations

- 1 Conduct a transportation assessment.**  
EASTCONN Head Start will conduct a program-wide transportation assessment of transportation needs for families to understand barriers and opportunities.
- 2 Explore expanded child care options.**  
EASTCONN Head Start will review the impact of childcare needs in our area and research the possibility of partnering with Local Education Agencies (LEAs) to offer wrap-around care and develop a community waitlist or referral process.
- 3 Increase community collaborations.**  
EASTCONN Head Start will establish and update MOUs with our LEA partners and current providers while researching opportunities for new collaborations.
- 4 Diversify program materials and staffing.**  
EASTCONN Head Start will recruit, hire, and retain diverse staff that are representative of the community and translate materials into multiple languages to ensure families can engage with the program.
- 5 Increase awareness of Head Start in Tolland and Windham Counties.**  
EASTCONN Head Start will engage in a marketing and rebranding strategy presenting Head Start as a quality alternative to public school.
- 6 Expand state and national advocacy efforts**  
EASTCONN Head Start will collaborate with partners to establish an advocacy agenda to revise eligibility requirements based on local data.

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# About EASTCONN



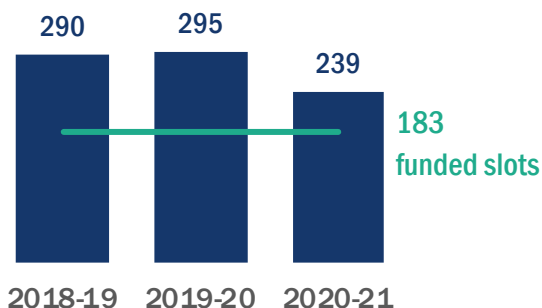
Established in 1980, under [Connecticut General Statute 10-66a](#), EASTCONN is one of Connecticut's six, public, non-profit, Regional Educational Service Centers. EASTCONN was formed when two small, eastern Connecticut public service agencies merged in order to more effectively provide regional, affordable education programs and services to the region's smaller, often under-resourced, schools and communities.

Initially, EASTCONN started with a small staff, but quickly grew as it demonstrated its expertise across a range of programs and services, including K-12 professional learning, special education, adult education and early childhood. Today, EASTCONN employs more than 670 staff across 127 programs, which cover areas such as early childhood, K-12 student programs (magnet high schools, autism, clinical day treatment, psychological-behavioral consultation, related services, transition programs), adult education, employment and training, teaching and learning, organizational support services, technology solutions, and student transportation, among others.

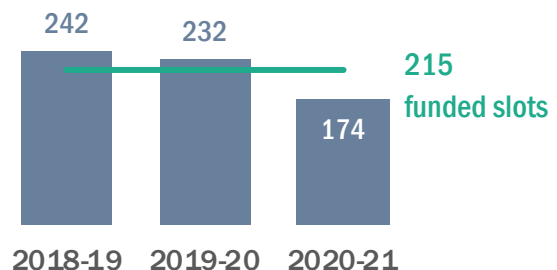
EASTCONN provides high-quality, competitively priced, educational and related services to the 33 towns and 36 school districts in northeastern Connecticut that comprise the EASTCONN region. The agency is governed by a [Board of Directors](#), who are also members of locally elected Boards of Education. Agency funding comes from program fees and is supplemented by competitively awarded grants and contracts.

As part of its services, EASTCONN operates both Early Head Start and Head Start programs in Windham and Tolland counties. **The funded enrollment for EASTCONN since the 2018-2019 program year is 183 children for Early Head Start and 215 children for Head Start.** During 2020-2021, Early Head Start served 239 children and Head Start served 174 children.

### Early Head Start Enrollment



### Head Start Enrollment



EASTCONN Early Head Start is more likely to experience under-enrollment in any given month, compared to Head Start. The Office of Head Start defines under-enrollment as enrollment falling below 97%.

Both programs were more likely to have under-enrollment during the 2020-2021 program year, which may be attributed to the Covid-19 pandemic. As seen in the table below, some 97% values are highlighted in orange. This means that when the percentage is broken out into one or more decimal points, enrollment falls below the cut off value of 97.0%.

**EASTCONN 30-day enrollment**

The Office of Head Start defines **under-enrolled as enrollment below 97%** in either HS or EHS.

Total Funded Enrollment: Early Head Start: 183, Head Start: 215

Early Head Start	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
2020-21	91%	90%	68%	69%	69%	69%	69%	71%	74%	77%	73%	74%
2019-20	97%	97%	97%	95%	95%	94%	98%	97%	97%	97%	95%	92%
2018-19	94%	95%	89%	94%	97%	97%	99%	99%	98%	98%	97%	97%

Head Start	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
2020-21	--	--	83%	67%	67%	68%	68%	72%	72%	72%	74%	73%
2019-20	--	100%	99%	100%	100%	99%	100%	100%	100%	100%	100%	100%
2018-19	--	100%	98%	93%	95%	96%	98%	100%	100%	100%	100%	100%

**Early Head Start**

Early Head Start (EHS) is a federally funded program that provides support and resources to pregnant women, children ages birth to 3, and their families. EASTCONN provides home-based and center-based EHS programs in Windham County. Windham Public Schools administers center-based EHS programs for the Windham area and Stafford Public Schools provides a home-based program in Stafford and surrounding towns. The EHS home-based program serves Windham County (102 funded enrollment spots) and Stafford (17 funded enrollment spots).

EASTCONN Early Head Start centers provide:

- Full-day, full-year care, with a child-centered approach to learning,
- Daily nutritious meals, and
- Coordinated services to provide tools and resources addressing the child's health and educational needs.

EASTCONN Early Head Start home-based programs provide:

- Weekly 90-minute education sessions at participants' homes,
- Opportunities for families to gather together regularly for play and socialization, and
- Linkages with community resources and services.

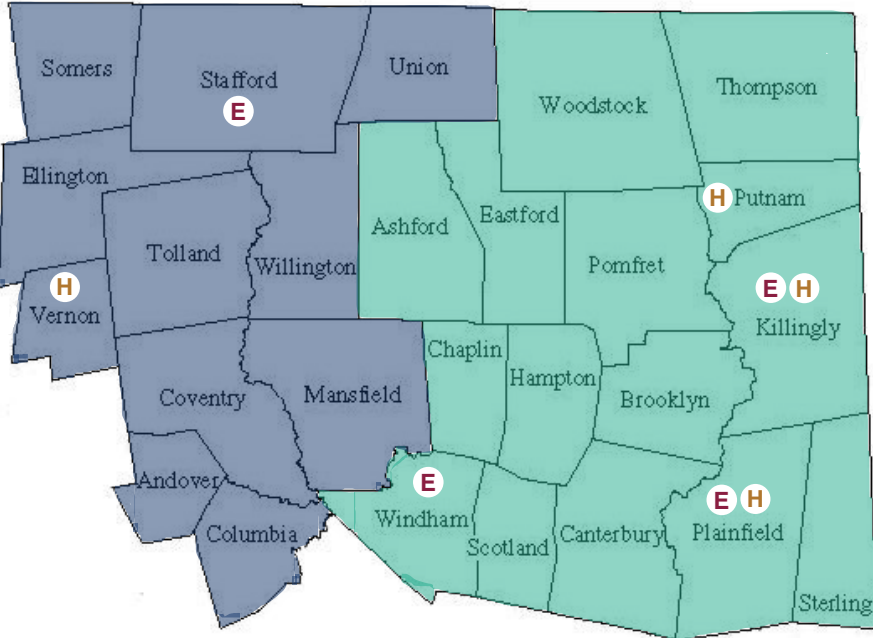
## Head Start

Head Start is a federally funded program serving children ages 3 to 5 and their families. EASTCONN offers a variety of Head Start program options including center-based programming in Killingly, Putnam, and Plainfield; and a home-based program serving Tolland County. The Tolland County home-based program offers 16 funded enrollment slots. Home-based Head Start includes home visiting sessions as well as weekly play and socialization groups. Windham Public Schools administers a center-based program for families in the greater Windham area.

EASTCONN Head Start early childhood programming includes highly qualified teachers and home visitors, ongoing professional development, small class size, a low child-to-staff ratio, and family engagement in their children's learning.

Head Start enrolled children participate in learning experiences to promote social and emotional development and appropriate academic skills. Daily teacher observations of children inform assessments used to support classroom learning experiences and differentiate planning.

See [Appendix A](#) for a list of EASTCONN Head Start locations and contact information.



Head Start locations in **Tolland** and **Windham** counties indicated by an "E" for Early Head Start and an "H" for Head Start. The Stafford EHS program is one operated outside of EASTCONN.

**E** Early Head Start  
**H** Head Start



# Eligibility Guidelines

The U.S. Department of Health and Human Services Poverty Guidelines and Section 645 of the Head Start Act determine income eligibility for participation in Early Head Start and Head Start programs. Children from birth to age five who are from families with incomes below the poverty guidelines are eligible for Early Head Start and Head Start services. Children from families experiencing homelessness and families receiving public assistance such as Temporary Assistance for Needy Families (TANF) or Supplemental Security Income (SSI) are also eligible. Children in foster care are eligible regardless of their foster family's income. An additional 35% of children whose families do not meet a criterion described above can be enrolled. See [Appendix B](#) for EASTCONN Early Head Start and Head Start Eligibility, Recruitment, Selection, Enrollment, and Attendance (ERSEA) Procedures.

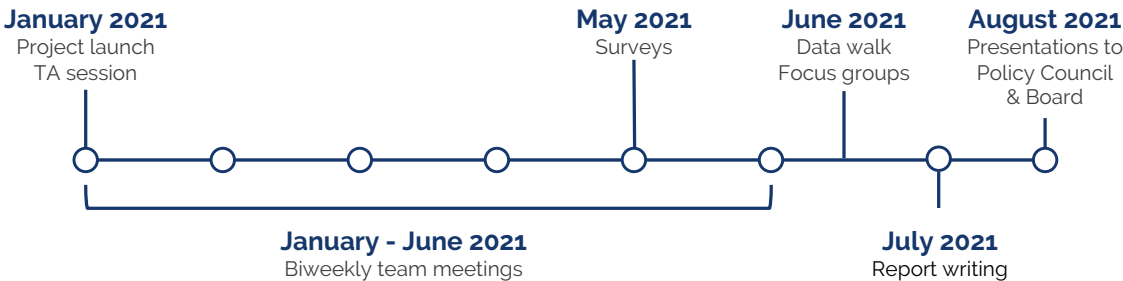
# Community Assessment

According to the Head Start Performance Standards, a Head Start program must use data to conduct a community assessment at least once over the five-year grant period to design a program that meets community needs, and builds on strengths and resources. In addition, Head Start programs must update the community assessment annually to reflect any significant changes, including increased availability of publicly-funded pre-kindergarten child care, rates of family and child homelessness, and significant shifts in community demographics and resources.

This community assessment was guided by the question, "how can EASTCONN Head Start ensure that the correct services are provided to the appropriate population?" Findings from the community assessment will guide strategic planning, programming, and outreach for EASTCONN Head Start from 2021 through 2026.

# Methodology

The community assessment process incorporated a variety of data collection techniques between January and August 2021.



# Impact of Covid-19

The community assessment process occurred during the second year of the Covid-19 pandemic. The Covid-19 pandemic had a significant impact on school attendance, population changes, unemployment rates, food insecurity, trauma, and data collection during 2020 and 2021. The impact meant that many meetings occurred virtually, consultants were often unable to travel, staff was frequently under quarantine, and programs closed.

Overall changes to the community during this time included empty Head Start slots, low attendance at schools, children and families who faced uncertainty, and the need to quickly respond to ever-changing public health guidelines. Given that context, data collection and analyses was viewed with a lens specific to needs and concerns that may be increasing as a result of increased social, health, and financial instability brought on by the pandemic.

# Data Collection Process

The EASTCONN Head Start community assessment includes both quantitative and qualitative data from administrative, public, survey, and focus group data. The assessment reflects the collection and review of data related to the current needs and characteristics of Head Start-eligible children and families in Windham and Tolland counties as of June 2021.

Data included in this report reflects the most recent year(s) available, ranging from 2018-2021, depending on the topic. Data from publicly available datasets is typically only available for previous years. The types of data described in this assessment include:

- Poverty rates
- Race and ethnicity
- Homelessness
- Disability status
- Child abuse and neglect
- Children living in foster care
- Program strengths
- Community resources

# Community Assessment Team

The community assessment team included a cross-representational group of Head Start staff and leadership to ensure input from all areas of the program (see [Appendix C](#)). Staff were chosen based on their role, location or town they support, longevity with Head Start, and depth of knowledge about the program. The full community assessment team met three times. Two of these meetings included the New England Head Start Training and Technical Assistance Network consultants.

The community assessment team was divided into six groups: demographics; education, health, nutrition, and social service needs; work, school, and training schedules; early childhood education programs; community resources; and community strengths.

Community assessment group leaders met every other week beginning in January 2020 through July 2021. Each group leader also met with their selected group, as needed, over the course of the seven months to:

- Review the community assessment guidance document,
- Determine the area of focus,
- Identify relevant data sources, and
- Consider needs for supplemental data collection.

## Online Surveys

Survey data was collected to supplement publicly available data and to incorporate the voices of Head Start families and community partners into the community assessment process. Surveys were administered online through Google Forms to four groups:

- Community partners (42 responses)
- Early Head Start Center Based families (17 responses)
- Head Start Center Based families (54 responses)
- Home Based families (36 responses)

Surveys were administered to families in both English and Spanish. See [Appendices D-G](#) for copies of the surveys.

## Focus Groups

In June 2021, two focus groups for families of current Early Head Start and Head Start participants were conducted to incorporate families' perspectives and to contextualize findings from the administrative, public, and survey data into the community assessment process. The Chairperson of the Policy Council participated in one of the family focus groups.

Family Advocates and Home Visitors reached out to all families to recruit focus group participants, who if interested, had the option of participating in either an in-person or a virtual focus group. Dinner and child care were provided for on-site focus group participants. Both focus groups were conducted in English.

To further identify key themes from the community assessment data, an in-person focus group was held with Head Start staff in June 2021. Twelve staff with Head Start employment ranging from 1 to 22 years participated. See [Appendices H-I](#) for the family and staff focus group protocols.

## Consultants

In addition to the community assessment team comprised of EASTCONN staff, EASTCONN also engaged three groups of external consultants who contributed to the process with the following responsibilities:

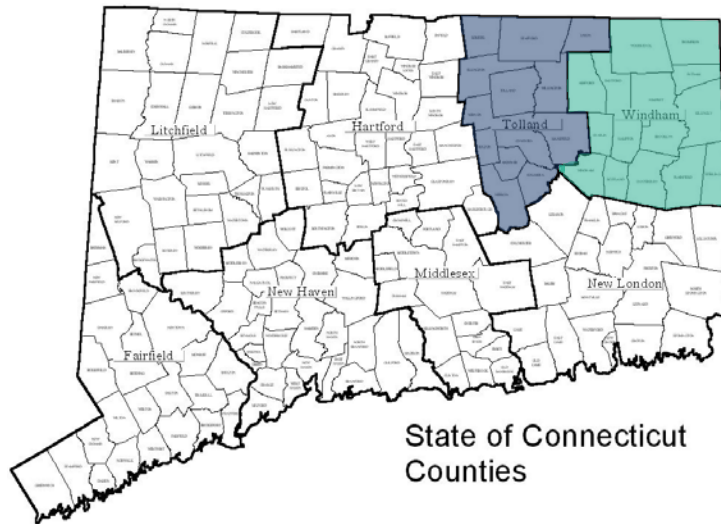
1. The New England Head Start Training and Technical Assistance Network consultants, Gladys Rivera and Andrea Urbano, facilitated the process and provided the overall framework.
2. Dr. Beth S. Russell and Eleanor Fisk from the UCONN Center for Applied Research in Human Development created, administered, and analyzed the survey and gathered and analyzed the public data.
3. Program evaluators Emily Melnick and Elizabeth Grim conducted the focus groups and developed the community assessment report, based on recommendations and data provided by the community assessment team.

# Demographics



# Demographics

EASTCONN Head Start programs serve Tolland and Windham counties in the northeast corner of Connecticut. **Tolland County** encompasses 13 towns: Andover, Bolton, Columbia, Coventry, Ellington, Hebron, Mansfield, Somers, Stafford, Tolland, Union, Vernon, and Willington. **Windham County** covers 15 towns: Ashford, Brookfield, Canterbury, Chaplin, Eastford, Hampton, Killingly, Plainfield, Pomfret, Putnam, Scotland, Sterling, Thompson, Windham, and Woodstock.



Windham and Tolland counties are primarily rural, with 2015-2019 town populations ranging from 894 in Union to 29,232 residents in Vernon. Vernon and Mansfield are the two largest towns in Tolland County, with 29,232 and 25,799 residents respectively. Windham and Killingly are the two largest towns in Windham County with 24,655 and 17,231 residents respectively.<sup>1</sup>



**11,883**

children between ages 0-5 live in Windham and Tolland counties, according to the 2015-2019 ACS.<sup>2</sup>



**5,015**

students experienced homelessness in Connecticut during the 2020-2021 school year.<sup>3</sup>



**4,902**

students under age 18 had a documented disability in Tolland and Windham County School Districts in 2020-2021.<sup>4</sup>



**305** children ages 0-5 are estimated to have been involved in a child abuse or neglect investigation in CT in 2019.<sup>5</sup>



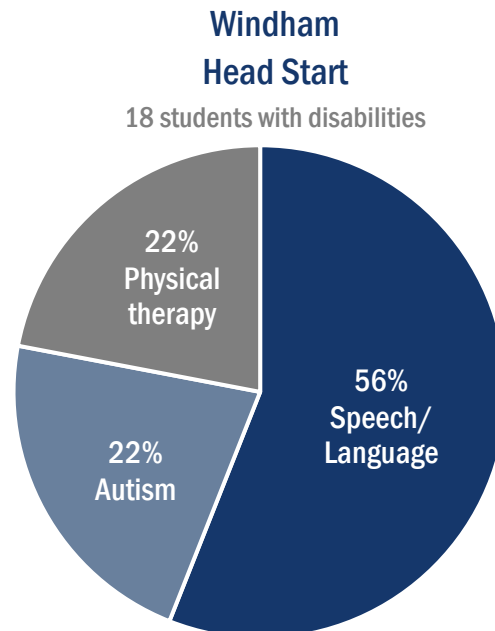
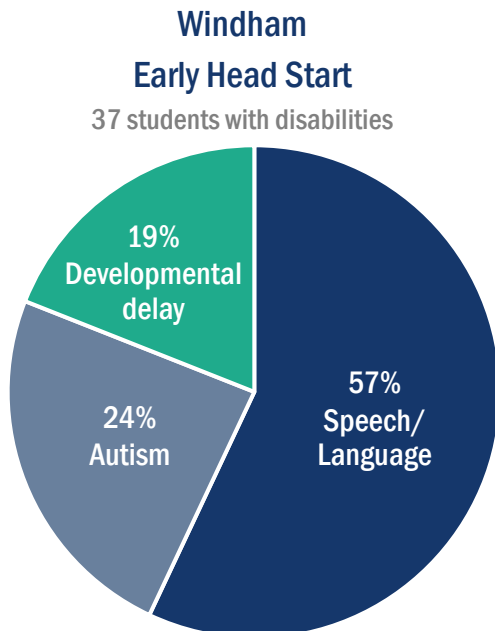
**229** children between ages 0-6 were in foster care in DCF Regions 3 and 4 in 2018, which include (but are broader than) Windham and Tolland counties.<sup>6</sup>



**29** Expectant mothers were enrolled in EASTCONN Head Start during 2019-2020.

## Students with Disabilities

Data on students with disabilities was only available for Windham Early Head Start and Head Start. In 2018-2019 (the most recent year for which this data is available), 55 children had a documented disability. Eighteen children enrolled in Early Head Start had a disability, with 12 diagnosed prior to program entry and six diagnosed during the school year. That same year, 37 Head Start children had a disability, with 34 diagnosed prior to program entry and three diagnosed during the school year. Windham Public Schools provides special education staff and EASTCONN Head Start works in partnership with Connecticut Birth to Three for referrals.



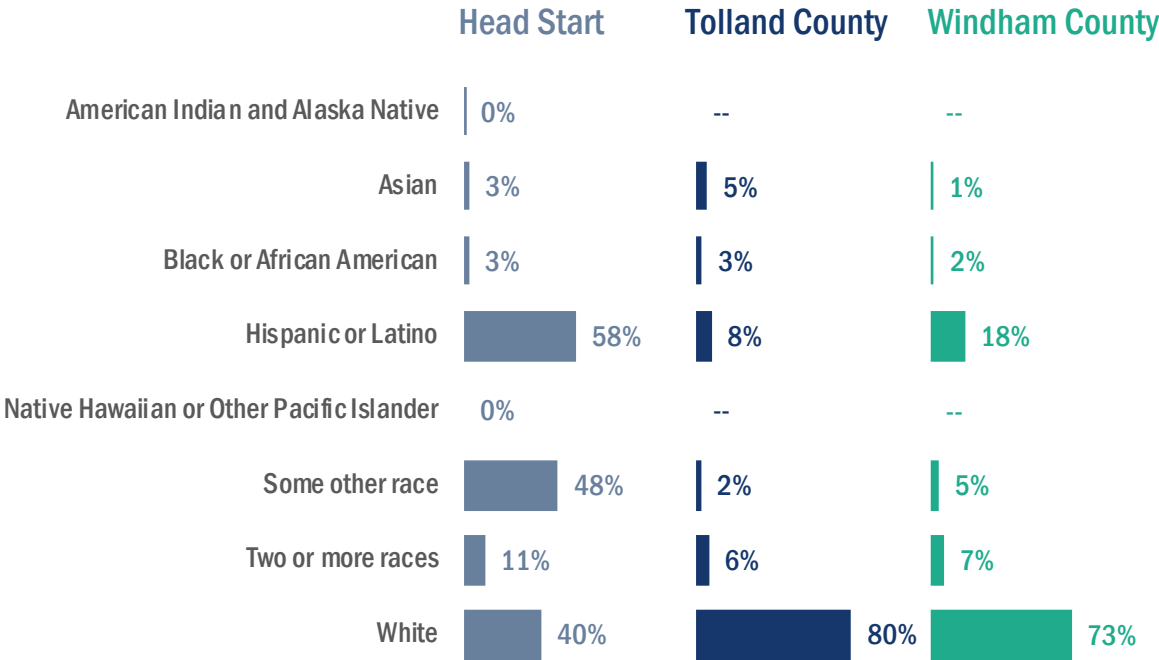
# Race and Ethnicity

Tolland and Windham counties are majority white. In Tolland County, 80% of children under age 18 identify their race as white and 8% identify their ethnicity as Hispanic or Latino. In Windham County, 73% of children identify their race as white and 18% identify their ethnicity as Hispanic or Latino.<sup>7</sup>

Children enrolled in EASTCONN Head Start programs are more diverse than the overall population in both counties. Approximately 40% of Head Start children identify their race as white and nearly half as "some other race." Over half (58%) of Head Start children identify their ethnicity as Hispanic or Latino. During the 2019-2020 program year, 178 (49%) participating families identified Spanish as the primary language spoken at home.

**A greater percentage of children in Head Start identify their ethnicity as Hispanic or Latino and their race as "some other race" than children in both Tolland and Windham counties.**

Source: EASTCONN 2019-2020 & Kids Count Data Center, 2015-2019



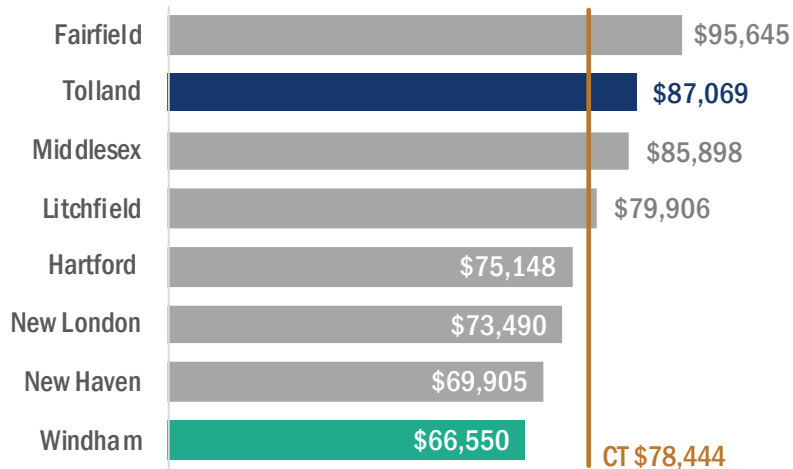
# Income

Windham and Tolland County vary in terms of economic indicators including median household income and poverty rates. For example, Tolland County has one of the highest annual median household incomes (\$87,069) in Connecticut, while Windham County has the lowest (\$66,550).<sup>8</sup>



**Tolland County** has one of the highest median household incomes in the state while **Windham County** has the lowest.

Source: American Community Survey, 2015-2019



**Tolland County** has one of the lower poverty rates in the state with 7% of all residents and 5% of children experiencing poverty.

**Windham County** has a higher poverty rate than the state average, with 11% of all residents and 15% of children under age 18 experiencing poverty. As shown below, children under age 5 are more likely to be living in poverty than ages 5-17.<sup>9</sup>

**Windham County** has a higher percentage of residents experiencing poverty than the state, while **Tolland County** has the lowest in Connecticut.

Source: American Community Survey, 2015-2019

	Overall	< 5 years	5-17 years	Under 18
<b>Windham County</b>	11%	15%	14%	15%
Connecticut	10%	15%	13%	13%
<b>Tolland County</b>	7%	6%	5%	5%

As shown on the next page, poverty rates vary within both Tolland and Windham counties. For example, Mansfield has the highest overall poverty rate in Tolland County (23%) while Union has the highest poverty rate for children under age 18 (15%). Windham has the highest overall (25%) and child (33%) poverty rate in Windham County. **These percentages are higher than the state rates of 10% overall poverty and 13% childhood poverty.**<sup>10,11,12</sup> The SNAP data on the next page represents households with children under the age of 18.

	Population Overall	Population Children <5	% Population Children <5	Poverty Rate Overall	Poverty Rate Children <18	SNAP
Connecticut	3,575,074	183,808	5%	10%	13%	38%

### Tolland

Overall	151,063	6,143	4%	7%	5%	32%
Union	894	27	3%	5%	15%	13%
Vernon	29,232	1,855	6%	9%	8%	36%
Mansfield	25,799	307	1%	23%	8%	39%
Stafford	11,881	436	4%	6%	7%	43%
Ellington	16,170	777	5%	5%	6%	30%
Coventry	12,433	521	4%	4%	4%	30%
Hebron	9,512	361	4%	3%	4%	14%
Willington	5,893	187	3%	15%	2%	10%
Tolland	14,713	714	5%	3%	2%	21%
Somers	11,005	441	4%	2%	1%	21%
Bolton	4,911	128	3%	5%	1%	8%
Andover	3,203	158	5%	2%	0%	0%
Columbia	5,417	231	4%	1%	0%	0%

### Windham

Overall	116,566	5,740	5%	11%	15%	37%
Windham	24,655	1,150	5%	25%	33%	39%
Putnam	9,361	205	2%	9%	20%	14%
Killingly	17,231	1,163	7%	13%	16%	44%
Brooklyn	8,238	339	4%	8%	9%	30%
Sterling	3,757	257	7%	8%	9%	45%
Plainfield	15,105	988	7%	9%	9%	49%
Ashford	4,236	293	7%	10%	8%	23%
Woodstock	7,836	340	4%	6%	8%	28%
Eastford	1,653	72	4%	6%	7%	28%
Scotland	1,569	52	3%	4%	7%	30%
Thompson	9,351	481	5%	6%	5%	48%
Chaplin	2,489	107	4%	7%	4%	42%
Hampton	1,830	79	4%	4%	3%	16%
Canterbury	5,069	191	4%	3%	1%	25%
Pomfret	4,186	23	1%	6%	1%	0%

# Program Strengths

Open  
process

Feedback

Community

with  
courses

Strong Design  
Skills

Diversity  
open

LA

# Program Strengths

EASTCONN Head Start has established itself as a capable and respected provider in the greater Tolland and Windham County community. Head Start staff, families, and community partners shared that **quality, comprehensiveness of services, and collaboration** are three program strengths.

## High Quality Services

Focus groups with family members and staff, as well as surveys of community partners, found that EASTCONN Head Start offering high quality services is of utmost importance. Families and community partners both expect and demand that their children be recipients of quality services to aid in their learning and development.

Staff qualifications remain a priority and professional development is offered on an on-going basis to keep staff apprised of current trends in early childhood education and family-centered practice. Great emphasis is placed on partnerships with families to ensure that strong relationships are formed and maintained in the interest of increasing outcomes for adults and children in the home. This includes offering families the opportunity to attend parent events and trainings. Training topics are selected with family input and cover topics like social emotional development, nutritional meals, how to read to your child, first aid, and dental health.

## Comprehensive Services

EASTCONN provides many services in addition to Early Head Start and Head Start. Eligible families readily and seamlessly access such opportunities as Adult Basic Education, GED classes, ESL/ESOL/ELL classes, family literacy services, parent trainings, workshops, and support groups. These free services are offered in addition to the already comprehensive services that Early Head Start and Head Start provide to enrolled families.

One notable example of the power of collaborative partnerships that EASTCONN manages is Windham Public School District administrators being able to offer GED, ESL/ESOL/ELL classes to families while their children are simultaneously enrolled in the early childhood classrooms.

EASTCONN also provides bi-lingual, qualified teachers, offers technical assistance, and seeks input on the design and management of the service model. In addition to the services that EASTCONN provides, staff at each of the program sites are well versed in available resources in individual communities, making facilitation of referrals to needy families convenient and timely.

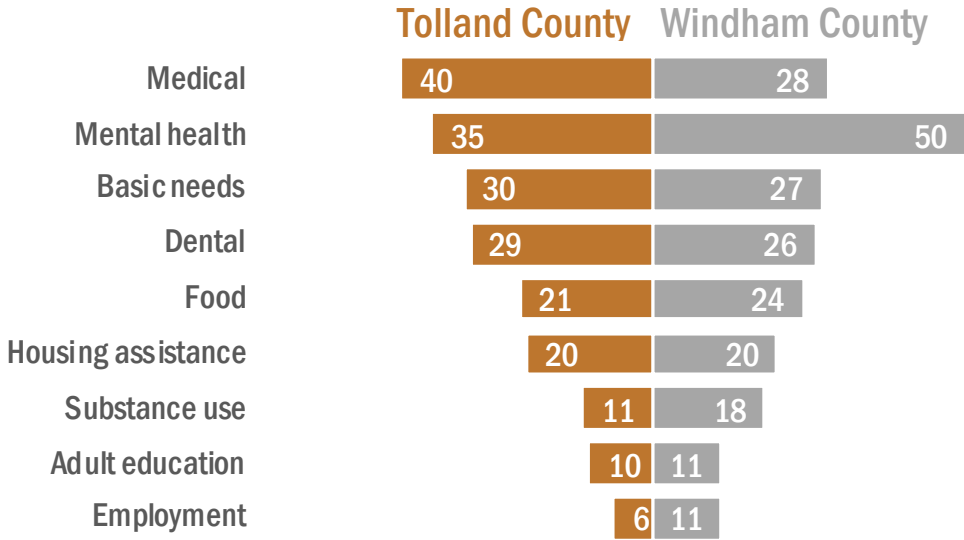
For example, families who responded to the survey reported that Head Start supported them in attending adult education programs or job training opportunities. **Forty-seven percent (47%, n=8) of Early Head Start-Center Based and 35% (n=11) of Home-Based Head Start respondents said Head Start supported them in adult education or job training.**

## Collaborations with Partners

Head Start staff pride themselves on their partnerships and responsiveness to ensuring that participating families' needs are met. As mentioned above, community partners in both Tolland and Windham counties were surveyed to determine their perception of the strengths of EASTCONN's Early Head Start and Head Start programs. The two most commonly cited strengths across both counties were meeting families' needs and community collaborations/referrals to resources.

As of June 2021, EASTCONN Head Start has Memorandums of Understanding (MOUs) with 44 partners, including child care partners, Local Education Agencies (LEAs), Part C agencies, child welfare agencies, facilities, and other community resources. EASTCONN staff also refer families to a number of agencies outside of these established MOUs. EASTCONN Head Start has particularly strong relationships with Windham and Stafford Public Schools and the University of Connecticut Center for Applied Research in Human Development. See [Appendix J](#) for the list of MOUs by type and expiration date.

A thorough assessment of available community resources found that **Tolland County** has more medical, basic needs, and dental providers, while **Windham County** has more mental health, food, substance use, adult education, and employment resources accessed by families through partnerships and referrals from EASTCONN.





**2194** referrals to services were made in 2018-2021.

**140** community resources were accessed by families in 2018-2021.



The top 3 referrals for 2018-2021 were:

**335** Generations

**308** Mansfield Pediatric

**156** Mansfield Pediatric Dentistry

Of the 816 referrals to service providers made by EASTCONN for Head Start families during the 2020-2021 program year, one third (33%, 267) were to the dentist, while nearly another third were to a physician or for medical services (30%, 241). The remaining referrals were to health centers (17%, 142), Local Education Agencies (6%, 50), mental health providers (5%, 43), Part C providers (7%, 58), and social services (2%, 15).

Head Start staff cited specific resources and partnerships as strengths, including:

- **Adult Education:** Having adult education, Early Head Start, and Head Start co-located on Westcott Road in Killingly provides a convenient child care option for families wanting to pursue GED or certificate programs.
- **Community Donors:** Local organizations such as Lowes and the Killingly Library have donated supplies for projects such as the Westcott gardening center, creating high-quality learning experiences accessible to enrolled children and families.
- **Food Resources:** Food resources were among the top community strengths identified in both counties.
- **Local Education Agencies (LEAs):** LEAs in Plainfield, Putnam, and Killingly provide optimal and timely supports needed for children in the Head Start programs.
- **Northeast Early Childhood Council (NECC):** participation with and connection to NECC allows Head Start to share information about the programs and make connections with community providers to better support participating families
- **Outreach:** Resource information is linked to the Head Start program by town and regional resource guides, Family Resource Centers, organizational and town websites, town hall staff, town social services coordinators, communications with and from community partners, participation in various internal EASTCONN meetings as well as meetings outside of EASTCONN, recruiting and community events, guest speakers, trainings, Facebook postings, newspaper articles, information in periodicals, flyers, emails, texts, word of mouth from colleagues or folks in the field.

## **Tolland County Strengths**

Head Start staff shared that health resources were the largest community strength in Tolland County followed by food resources. Other Tolland County resource strengths include having two WIC programs, numerous farmer's markets, and a new diaper bank in Vernon that opened in September 2020.

## **Windham County Strengths**

Windham County has two domestic violence shelters, two family shelters, and two residential programs for women in recovery for substance use, one of which allows children to stay with the parent while in recovery. Windham County is also home to two WIC Programs, a school based mental health counseling service that serves preschoolers (located in Putnam), four free clothing stores, two free furniture stores, multiple farmer's markets, four Family Resource Centers and a Community College with an additional branch. The Diaper Bank in Windham County is another unique community strength, being the only rural Diaper Bank in the state.



A photograph of a young child sitting on the floor, focused on drawing on a large sheet of paper with a pencil. An adult's hand is visible in the foreground, also holding a pencil, suggesting a collaborative or guided activity. The entire image is overlaid with a semi-transparent reddish-pink filter. The text 'Community Needs' is centered in white, bold font.

# Community Needs



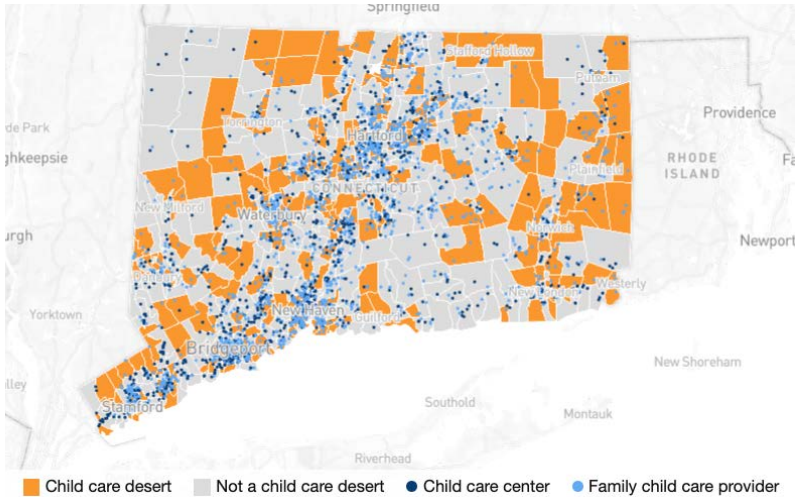
# Community Needs

To understand greater community needs in EASTCONN's service area, the community assessment teams reviewed internal, public, and survey data related to health insurance, dental care, prenatal care, asthma, immunization rates, teen pregnancy, weight, substance use, and transportation. Six topics were identified as priority areas: child care, behavioral health, affordable housing, transportation, caregiver and co-parenting supports, and continuing education and training.

## Affordable Child Care

In Connecticut, **44% of people live in a child care desert.** "A child care desert is any census tract with more than 50 children under age 5 that contains either no child care providers or so few options that there are more than three times as many children as licensed child care slots."<sup>13</sup>

This statistic is higher for families living in rural areas. On top of already insufficient access to child care, the Covid-19 pandemic is estimated to have resulted in the loss of almost half (48%) of Connecticut's child care supply, equivalent to 46,349 licensed slots.<sup>14</sup>



Prior to Covid-19, there were approximately 2.30 children per child care slot statewide and this need is estimated to double to 4.41 children per slot after Covid-19.<sup>15</sup> Demand for child care is even higher for infant and toddler care. The cost for care is also a concern with **8 in 10 families unable to afford the cost of high-quality infant and toddler care.**<sup>16</sup>

As can be seen in the map above, Tolland and Windham counties have multiple census tracts that meet the criteria for a child care desert (orange).<sup>17,18</sup> When asked what other services could better serve the community, five community partners from Tolland County (42%) and eight from Windham County (27%) listed some form of child care opportunities.

**“ Infant/toddler slots - while there are a good amount in the area, the low Head Start income guidelines prevent many families who are at high risk from accessing the services. If they are working even at minimum wage, they are often over income...and are not able to get in. Other infant toddler programs offer sliding fee scales but these families struggle with paying the fee. -- Community Partner**

## Tolland County Child Care Capacity

Based on population estimates from the American Community Survey and child care capacity from the CT Office of Early Childhood, no Tolland County towns have enough child care slots for children ages 0-5. The town of Tolland has the greatest need met with 18% of children able to be served by licensed child care providers. Union and Willington have no licensed child care providers.

	Home Day Care				Facility-Based				Total				% Need Met
	I/T Slots	I/T Vac	Pre-K Slots	Pre-K Vac	I/T Slots	Pre-K Slots	I/T Slots	Pre-K Slots	I/T Slots	Pre-K Slots	All Slots	Children <5 years	
Andover	6	0	11	2	3	3	9	14	23	158	<b>15%</b>		
Bolton	4	0	8	1	2	2	6	10	16	128	<b>13%</b>		
Columbia	6	1	12	2	3	3	9	15	24	231	<b>10%</b>		
Coventry	12	1	30	8	6	8	18	38	56	521	<b>11%</b>		
Ellington	17	0	37	12	9	9	26	46	72	777	<b>9%</b>		
Hebron	14	3	28	9	7	7	21	35	56	361	<b>16%</b>		
Mansfield	8	1	16	3	4	4	12	20	32	307	<b>10%</b>		
Somers	2	1	4	4	1	1	3	5	8	441	<b>2%</b>		
Stafford	14	0	28	2	7	7	21	35	56	436	<b>13%</b>		
Tolland	30	4	66	9	15	16	45	82	127	714	<b>18%</b>		
Union	0	0	0	0	0	0	0	0	0	27	<b>0%</b>		
Vernon	34	4	65	10	17	17	51	82	133	1,855	<b>7%</b>		
Willington	0	0	0	0	0	0	0	0	0	187	<b>0%</b>		

## Windham County Child Care Capacity

Based on population estimates from the American Community Survey and child care capacity from the CT Office of Early Childhood, only one Windham County town has enough child care slots for children ages 0-5. Pomfret has the greatest need met with 104% of children able to be served by licensed child care providers. Thompson has the largest gap with only 2% of children able to be served.

	Home Day Care				Facility-Based				Total				% Need Met
	I/T Slots	I/T Vac	Pre-K Slots	Pre-K Vac	I/T Slots	Pre-K Slots	I/T Slots	Pre-K Slots	I/T Slots	Pre-K Slots	All Slots	Children <5 years	
Brooklyn	14	4	28	8	7	7	21	35	56	339	17%		
Canterbury	2	0	4	0	1	1	3	5	8	191	4%		
Chaplin	2	2	4	4	1	1	3	5	8	107	7%		
Eastford	2	0	4	0	1	1	3	5	8	72	11%		
Hampton	2	1	4	1	1	1	3	5	8	79	10%		
Killingly	18	3	36	7	9	9	27	45	72	1,163	6%		
Plainfield	30	4	60	10	15	15	45	75	120	988	12%		
Pomfret	6	0	12	2	3	3	9	15	24	23	104%		
Putnam	8	1	16	4	4	4	12	20	32	205	16%		
Scotland	2	0	4	2	1	1	3	5	8	52	15%		
Sterling	2	--	4	--	1	1	3	5	8	257	3%		
Thompson	2	1	4	2	1	1	3	5	8	481	2%		
Windham	30	6	60	13	15	15	45	75	120	1,150	10%		
Woodstock	6	3	12	5	3	3	9	15	24	340	7%		

# Expanded Access to Behavioral Health

Behavioral health needs were cited as concerns by both community partners and Head Start families, including a need for additional mental health resources, support for sexual abuse survivors, and substance use treatment.

Community partners, staff, and families reported a shortage of available behavioral health providers, specifically those specializing in substance use. Head Start staff shared that families have concerns about the stigma with seeking day-treatment services in such a small rural area. Staff noted that the Women’s REACH program is available for home-based treatment for mothers but not fathers, and that there are few local in-patient opportunities.

Tolland and Windham counties fall under Regions 3 and 4 of the CT Department of Mental Health and Addiction Services (DMHAS). The substance use programs operated or funded by DMHAS in these counties are located elsewhere, requiring that families have access to reliable transportation to get to them.

**In 2021, Over 6 in 10 community partners reported that they have seen **substance misuse increase** during the last year.**

Source: Community Partner Survey, 2021.



**“** In the community, there is a lack of transportation, lack of understanding about the substance abuse population and outside services, and stigma around mental health. -- *Community Partner*

As a community, we lack mental health support or the ability for families to get mental health support and afford mental health support. -- *Community Partner*

Lack of mental health services that accept state insurance (or long waiting lists for the services that do exist). -- *Community Partner*

Similarly, across all programs, over 1 in 5 families who responded to the 2021 family survey reported that their family faced mental health challenges this year. This percentage increased to 1 in 3 for home-based Head Start families.



**1 in 3** home-based Head Start families experienced mental health challenges in 2020-2021.

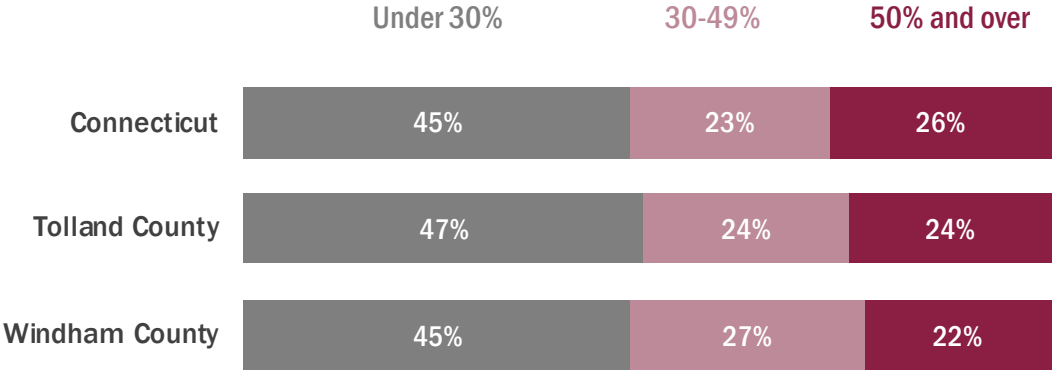
## Increased Affordable Housing

Nearly half of Connecticut renters are cost-burdened, meaning that they spend 30% or more of their income on rent and other housing-related costs. This trend is similar for both Tolland and Windham counties.<sup>19</sup>

Community partners identified housing as a critical concern, specifically the lack of available low-income and affordable housing. Partners also raised concerns about impending increases in homelessness as a result of the Covid-19 pandemic.

### Approximately half of renters in Tolland and Windham Counties are cost-burdened, spending 30% or more on housing.

Source: Housing Data Profiles, 2020



## Available and Accessible Public Transportation

Availability and accessibility of public transportation was a top concern cited by community partners, Head Start staff, and families. Tolland and Windham counties have public bus transit services (see map on page 26). However, these services are not in all towns.<sup>20</sup>

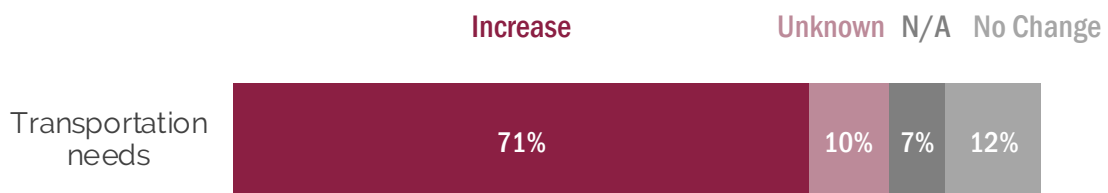
Families also reported that a major barrier to accessing medical care are the regulations surrounding who may be transported in Medicaid-funded taxis. If only one child has an appointment with their physician, only that child is allowed to ride in the taxi, forcing the

parent to find child care for their other children or to miss the appointment. This is concerning since 5% of Connecticut families live in a household without access to a car.<sup>21</sup> Head Start does not currently track the number of families without access to a car.

Additionally, public transportation fares may not be affordable for all families. While Connecticut offers reduced fare transportation passes for senior citizens (65 years and older) and persons with a qualifying disability, there is currently no state subsidizes for families experiencing poverty. EASTCONN offered bus passes to families in the past but this was not successful given the limited bus lines for the Northeast Bus.

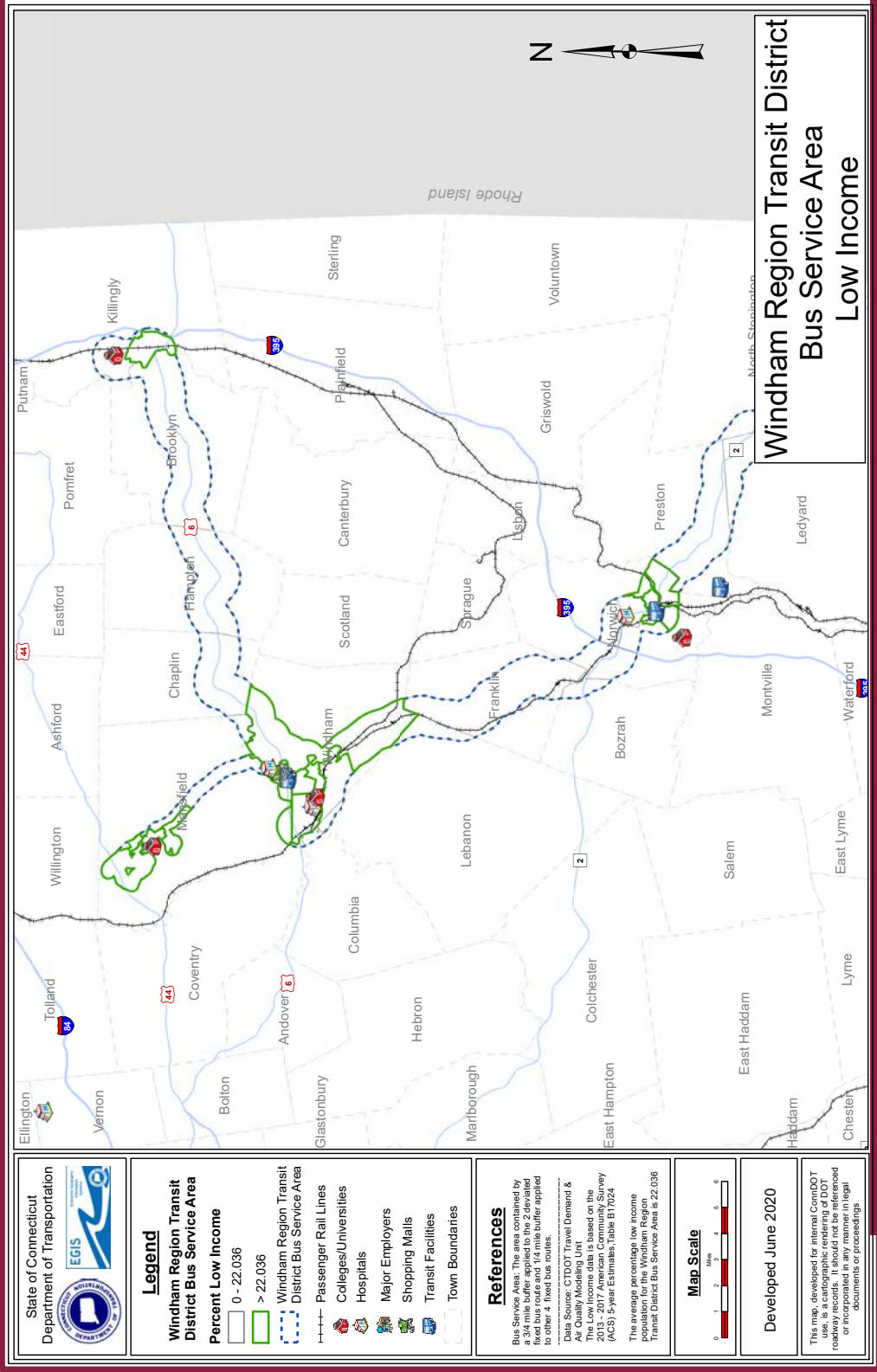
**Over 7 in 10 community partners reported that transportation needs increased during the last year.**

Source: Community Partner Survey, 2021



NE CT struggles are similar to other rural communities across our country...Public transportation is insufficient. Not all families can afford a vehicle. -- *Community Partner*

My biggest concern for my family at this time is finding a safe and reliable car. -- *Family Member*



State of Connecticut  
 Department of Transportation

- Legend**
- Windham Region Transit District Bus Service Area
  - Percent Low Income
    - 0 - 22.036
    - > 22.036
  - Windham Region Transit District Bus Service Area
  - Passenger Rail Lines
  - Coleges/Universities
  - Hospitals
  - Major Employers
  - Shopping Malls
  - Transit Facilities
  - Town Boundaries

**References**

Bus Service Area: The area contained by a 3/4 mile buffer applied to the 2 deviated bus routes. The area is also applied to other 4 fixed bus routes.

Data Source: CT DOT Travel Demand & Planning Division  
 The Low Income data is based on the 2013 - 2017 American Community Survey (ACS) 5-year Estimates, Table B17024

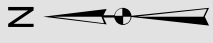
The average percentage low income population for the Windham Region Transit District Bus Service Area is 22.036



Developed June 2020

This map developed for internal Connecticut use, is a cartographic rendering of DOT roadway records. It should not be referenced or incorporated in any manner in legal documents or proceedings.

# Windham Region Transit District Bus Service Area Low Income



## Additional Supports for Non-Custodial Parents and Nontraditional Primary Caregivers

Approximately one-third (35%) of EASTCONN Early Head Start and Head Start families are headed by a mother only. Adult Services are typically geared towards this primary caregiver. Staff, families, and community partners expressed a desire for additional supports and programming for non-custodial and non-traditional caregivers. Head Start staff reported an increase in grandparents and great-grandparents raising children, especially those with Department of Children and Families foster care placements.

Community partners echoed this, with multiple providers suggesting a need for increased support for grandparents and kinship care. Staff and families also identified a need for supports for both parents, kinship and non-custodial caregivers, recognizing that families must identify a primary caregiver on the Head Start application who will receive services.



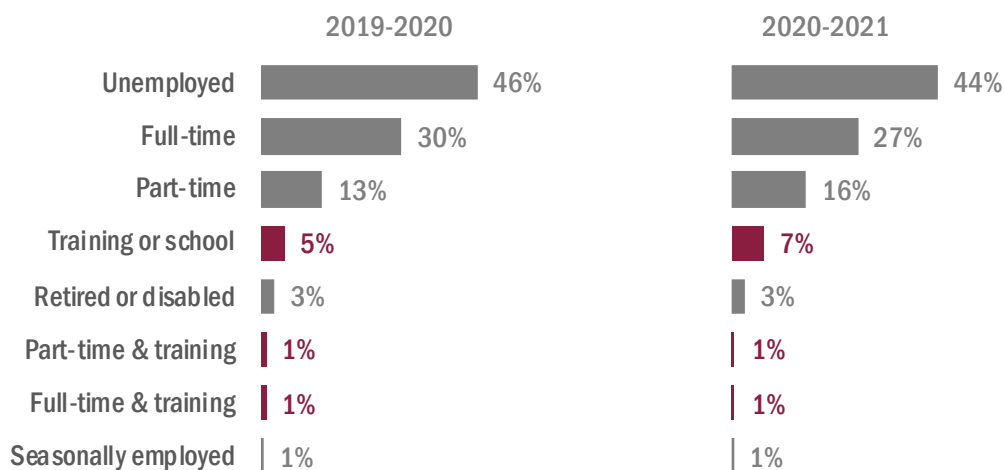
We are fostering our great grandson and sometimes worry about our age or health concerns. -- *Family Member*

Training for elderly caregivers and access to therapy to deal with their own issues related to why they have to be taking care of their grandchildren. -- *Community Partner*

## Increased Opportunities for Adult Education

A small percentage of Early Head Start and Head Start families (7-9% depending on program year) are currently pursuing part-time or full-time training or education.

About 7-9% of Head Start families are currently seeking **part-time or full-time training or education**.





Families shared conflicting views about Head Start schedules depending on how the data was collected. Nearly all (98%) of Head Start center-based families who responded to the survey said the program schedule and hours meets the needs of their family. All (100%) of the home-based families who responded to the survey said that their home visitor consistently tries to schedule visits at a convenient time for their family.

Contrastingly, during the focus groups, families reported recent challenges with employment and a desire to pursue continuing education and training. Home-based families shared that it is difficult balancing a work or education schedule with the home visiting schedule and were more likely to have experienced challenges with pursuing educational or job training opportunities than center-based families. A couple of families reported no longer working because the scheduling conflicts with Head Start home visiting and other program activities were too burdensome.

Quinebaug Valley Community College (QVCC) is the only community college available in Tolland or Windham County. QVCC offers a variety of certificate programs and a few advanced degree options. There are limited opportunities for advanced training and career paths. Families shared that having asynchronous and virtual training programs, as well as financial support for continuing education would be helpful. The other nearby community colleges (Manchester Community College, Asnunuck in Enfield, and Three Rivers in Norwich) all require transportation to access.

Many families enrolled in Head Start for the 2020-2021 school year did not live close to a community college. Coupled with a lack of transportation and child care options in the two counties, this makes pursuing continuing education extremely challenging for families. Staff members also shared that families experience additional challenges such as time to take the placement exam, lack of access to technology, and comfort and proficiency with technology to take exams.



**We could explore some connections with adult education that are beyond the students you currently work with but who may be parents, grandparents, or childcare providers (older siblings, aunts etc.) in our community. -- *Community Partner***

A young child is shown from the chest up, wearing a dark-colored long-sleeved shirt. The child is looking upwards and to the right, with their right hand raised towards their head. In the background, a stack of colorful blocks is visible. The entire image is covered with a semi-transparent green filter. The text "Recommendations & Resources" is overlaid in white, bold font on the left side of the image.

# Recommendations & Resources

# Recommendations & Resources

## Conduct a Transportation Assessment

Transportation is a primary challenge for EASTCONN families, creating barriers to attending Early Head Start play groups and socializations, pursuing adult education classes, accessing health and wellness appointments, and attending parent meetings.

To further understand the impact of transportation on families, EASTCONN plans to conduct a program-wide assessment of transportation needs. This assessment will include an investigation of families' ability to access a range of community providers and adult education in the broader EASTCONN service area. Data from the transportation assessment will inform programmatic offerings, including the decision to purchase a Head Start van, which staff and families have shared would be of value.

## Explore Expanded Child Care Options

There is a lack of high quality and affordable infant and toddler child care providers in the EASTCONN service area. To address these concerns, Head Start plans to:

- **Explore expanded services** such as opening a new Head Start classroom in high-need areas and/or extending Head Start hours to include before and after care. For example, in Tolland County, Union has no licensed child care slots for children age 0-5 and has the highest childhood poverty rate in the county (15%).
- **Develop a waitlist or referral process** that matches eligible children and families to child care vacancies in the community. This would include developing a central repository of local child care programs as well as establishing memorandums of understanding (MOUs) with child care centers. The new home-based referral system could be used as a model for the development of a center-based system. Head Start is waiting for additional guidance from the CT Office of Early Childhood from the spring 2020 RFP to coordinate home-based services across the state.

- **Advocate for Care4Kids expansion and eligibility** so that the program meets the needs of the community. Care4Kids provides wraparound services for hours outside of typical Head Start operations. Eligibility requirements for Care4Kids have changed over time and can be confusing for families to navigate. As of April 1, 2021, Connecticut has expanded Care4Kids and it is believed to cover enrollment in college courses. This

<b>Program Year</b>	<b>Care4Kids Enrollment</b>
2018-19	20
2019-20	16
2020-21	8

coverage has not always been accepted and is important for allowing families to pursue continuing education and training.

## Increase Community Collaborations

While existing collaborations are a program strength, EASTCONN outreach and engagement could be enhanced to better serve participating families. For example, both staff and families shared that more supports are needed around adult and continuing education while staff shared that more substance use services and partnerships would be beneficial. Families also shared that it can be difficult to navigate community resources and that it would be helpful to have a directory that listed what types of opportunities are available to them.

EASTCONN Head Start plans to increase community collaborations, including developing strategies for conducting outreach, fostering partnerships, and engaging in coordinated and supported referrals of families to current and future community partners.

Specifically, Head Start will develop partnerships and MOUs with Local Education Agencies (LEAs) and current community providers, as well as identify new opportunities for collaboration such as:

- **Creating an online repository of community resources** that identifies medical, dental, and mental health providers that accept Husky insurance so families understand what options are available to them.
- **Exploring substance use providers in the service area** to understand whether the resources meet the need, and where there might be additional opportunities for partnership. One potential resource to connect with is the [Tolland Mental Health and Substance Use Advisory Taskforce](#), which operates a multidisciplinary team to identify community resources and responses for mental health and substance use. This group meets the 1<sup>st</sup> and 3<sup>rd</sup> Mondays of each month at 7:00pm.
- **Increasing partnerships with local colleges** to collaborate around adult education, training, and staffing. Potential community resources to connect with related to this recommendation include: the [Connecticut State Colleges and Universities \(CSCU\)](#) system, the [Eastern Connecticut Workforce Investment Board](#), and [Quinebaug Valley Community College](#).
- **Continue partnerships with disability services.** At least 10% of enrolled Early Head Start and Head Start children have a diagnosed disability and receive services through Individual Family Service Plans (IFSPs) or Individual Education Programs (IEPs). EASTCONN partners with Local Education Agencies and Birth to Three agencies to support these children within the program. Staff attend Planning and Placement Team (PPT) meetings and IFSP review meetings to support in planning. EASTCONN also provides a dedicated staff member to facilitate supports for

children with disabilities. An internal response to intervention (RTI) team meets regularly to monitor the needs of children with disabilities and their teachers.

## Diversify Program Materials and Staffing

Head Start families and other eligible families in EASTCONN's service areas are more diverse than the counties overall, with 58% identifying their ethnicity as Hispanic or Latino and 178 families speaking Spanish at home in 2018-2019.

Further, the northeast corner of the service area is seeing a growing population of dual-language learners and immigrant families. Head Start staff shared a need for translations to non-Spanish languages such as the Guatemalan language of K'iche'. As such, additional resources are needed, including:

- **Recruit, hire, and retain diverse staff** that are representative of the community and families being served. This includes hiring bilingual staff who can communicate with families in their preferred language.
- **Translate materials and documents** into multiple languages so that all participants are able to fully engage with the program. Head Start staff shared that recently the program has been more intentional about translating documents but that additional resources are needed.

## Increase Awareness about Head Start Eligibility Requirements and Program Attributes

More outreach is needed to counter common misconceptions about Early Head Start and Head Start eligibility requirements that may prevent families from applying for services. For example, staff shared that Head Start is often perceived as a typical child care provider, rather than a key partner within the community's broader education and social service system.

Additionally, there is a perception that Head Start is only for families living at or below the poverty level. However, a certain number of spaces are available each year for those earning more, and other characteristics of families make them automatically eligible for services. For example, children living in DCF foster placements are automatically eligible.

Opportunities to raise awareness of Head Start include:

- **Rebrand and market Head Start as an education provider** and a quality alternative to public school rather than as a child care provider.
- **Develop clear communications materials about program eligibility** so that families understand what options are available to them.

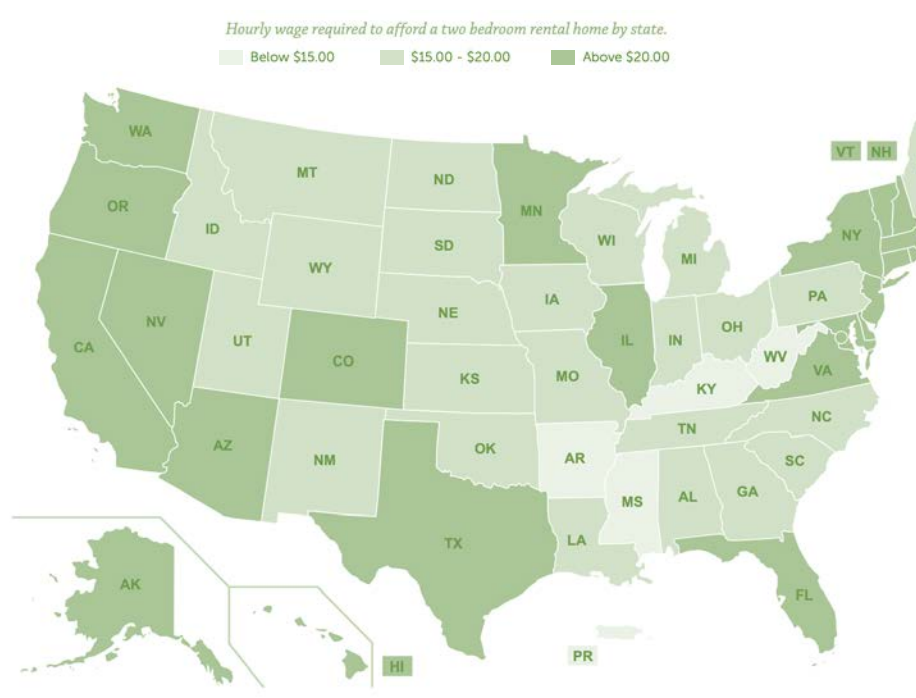
- Increase **community partnerships** to improve the quality of services offered and referrals made.
- **Continue to recruit in underserved towns and populations** such as children living in DCF foster placements.
- **Increase focus on home-based Early Head Start** as an opportunity for families so that families understand the scope of home-based services, including opportunities for one-on-one attention from a home visitor, weekly visits and socializations, as well as connections to community resources.

## Expand State and National Advocacy Efforts

The Federal Head Start program uses one poverty rate to determine eligibility for all states except Alaska and Hawaii. This method does not account for different costs of living throughout the country. Connecticut has one of the highest costs of living in the United States, ranking 8<sup>th</sup> overall and 10<sup>th</sup> in the nation for housing in 2021 (see map below).<sup>22</sup>

Families in Connecticut need to earn \$26.42 per hour to afford a 2-bedroom rental at market value or work 96 hours per week at minimum wage. This is approximately \$54,954 per year, whereas 30% of the area median income in Windham and Tolland counties is \$30,545.<sup>23</sup>

EASTCONN Head Start could collaborate with other Connecticut Head Start programs and the Connecticut Head Start Association to establish an advocacy agenda at the state and national levels, focused on revising eligibility requirements based on local data. In addition, Head Start regulations allow for individual programs to identify and change their eligibility requirements.





# References

A blue-tinted photograph of a white file folder filled with papers, serving as a background for the 'References' title. The folder is open, and the papers are neatly stacked, creating a sense of organized information. The lighting is soft, and the overall aesthetic is clean and professional.

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# Appendices

# Appendix A: EASTCONN Head Start Locations

## Killingly Head Start

562 Westcott Road  
Danielson, CT 06239

P: 860-779-0410  
F: 860-779-1377

## Killingly Head Start at Killingly High School

226 Putnam Pike  
Dayville, CT 06241

P: 860-779-6709  
F: 860-774-0846

## Plainfield Head Start - Early Childhood Center

482 Norwich Road  
Plainfield, CT 06374

P: 860-564-7787  
F: 860-564-6409

## Plainfield Head Start - Moosup Gardens

10B Gorman Street  
Moosup, CT 06354

P: 860-564-7199  
F: 860-564-2630

## Putnam Head Start

33 Wicker Street  
Putnam, CT 06260

P: 860-928-0004  
F: 860-963-5357

## Windham Early Head Start

355 High Street  
Willimantic, CT 06226

P: 860-465-2601

# Appendix B: EASTCONN ERSEA Procedures

## Eligibility

EASTCONN determines eligibility of children based on age and family income or categorical eligibility. EASTCONN Head Start services families living within the catchment area as outlined in the Head Start grant. Early Head Start serves children age's birth to three years of age, as well as pregnant women. Head Start services children who are at least three years of age or who turn three by January 1<sup>st</sup>. This is the date used by local school districts in the communities served by EASTCONN Head Start. In the event a child enrolls in Head Start before the age of 3, families must sign an *EASTCONN Head Start Enrollment Consent* form. Families enrolled in Early Head Start and interested in Head Start, will complete a new application for Head Start.

Income eligibility is based on a family's income. Families are required to submit documentation of income with their application. Families are determined to be income eligible if their income falls below 100% of the federal poverty guidelines. Income guidelines are organized by family size. Income guidelines are updated by the US Department of Health and Human Services every year. Families may be categorically eligible for Early Head Start or Head Start if the family is receiving TANF or SSI, is experiencing homelessness as defined by the McKinney Vento Act or if the child is in foster care. If a family is determined to be categorically eligible, income need not be calculated. The categorical eligibility of a family is documented and verified. EASTCONN Early Head Start and Head Start may enroll up to 10% of families whose income is over the income guidelines and up to 35% of families whose income is between 101% and 130% of the federal poverty guidelines, given all income eligible applications have been exhausted or for another valid reason. We serve at least 10% of children with disabilities.

Families interested in enrolling in EASTCONN Early Head Start or Head Start must complete an application for enrollment. There are two applications; one application for children and another for pregnant women. Applications are also available in Spanish. EASTCONN Head Start accepts applications throughout the year. If an application is being completed for a child who is not living with his/her parents, guardianship paperwork must be attached to the application. Every application is assigned points based on the application and the meeting and conversations with the family or referral sources, as long as permission has been obtained. Eligibility is determined by the ERSEA coordinator or family service staff during the application process.

All staff determining eligibility are required to sign the *EASTCONN Early Head Start & Head Start: Misrepresentation or Falsification of Program Eligibility Employee Statement*.

## Applications

When a family contacts a staff member about the program, whether it be by phone or in person, staff should speak with the family about the program and forward the call to a family service staff at the site. A face-to-face meeting, in order to complete the application and talk with the family about the program, is required. A meeting via telephone may occur if the family prefers or for another valid reason. If the family prefers to be mailed the application, the family service staff member will mail the application and follow up with the family within one week. The ERSEA coordinator will assign application inquiries or referrals for follow-up to family service staff, in a round robin order, throughout the year.

Family service staff make every effort to submit completed applications without missing documents to the ERSEA coordinator. If after two weeks and documented attempts to reach a family regarding their application or missing items from their application, family service staff will return all documents to the ERSEA coordinator for follow-up. If the application is complete, an application is assigned a number, is processed and entered into ChildPlus. If the application is missing documents, the ERSEA coordinator will send a letter to the family. The ERSEA coordinator will upload physical and immunization records to ChildPlus. A child may be considered for a spot even if missing an item on the physical and immunization record submitted with the application. An application is considered complete without the physical and immunization record. Children may not be enrolled in a center-based program without a current physical and immunizations (within 1 year), TB risk assessment and Doctor's signature, including whether or not the child can fully participate in the program. The ERSEA coordinator will send a letter to families regarding the status of their application.

A completed application for center-based programs include:

- Completed *Application Summary* sheet
- Application for enrollment
- Signed parent permission form
- Completed & signed *Eligibility Verification for Head Start* form
- Income verification, proof of TANF, SSI, homelessness or foster placement or *Head Start Verification Document*
- Complete & up to date Physical and Immunization record (if available)

A completed application for home based programs include:

- Completed *Application Summary* sheet
- Application for enrollment
- Signed parent permission form
- Completed & signed *Eligibility Verification for Head Start* form
- Income verification, proof of TANF, SSI, homelessness or foster placement or *Head Start Verification Document*

A completed application for home based programs for pregnant women include:

- Completed *Application Summary* sheet
- Application for enrollment
- Completed & signed *Eligibility Verification for Head Start* form
- Income verification, proof of TANF, SSI, homelessness or foster placement or *Head Start Verification Document*

## Eligibility Verification for Head Start

The *Eligibility Verification for Head Start* form is the eligibility determination record for enrolled participants. This form is completed by the family service staff member or ERSEA coordinator working with the family to complete their application. Staff will print and sign their name only if income verification is complete and attached. The date used is the date that the income verification is complete. The staff member verifying age and residency will initial and date each section, if applicable.

## Head Start Verification Document

The *Head Start Verification Document* is one way for families to document that they have no income or are receiving income from a friend or family member. This form is also used to verify when a family is experiencing homelessness. It allows families to give staff permission to contact someone to verify the information verification they are providing. If a family does not give permission to contact a verification source, despite best efforts, staff will continue to complete the application with the family and submit without such verification.

## Income Verification Document

Head Start serves all families, including those families that may have an undocumented status with immigration. Head Start does not ask about a family's status. Income verification is required when applying for Head Start. In the event that a family is uncomfortable providing income verification, for confidential reasons, families may complete the *Income Verification Document*.

## Application Summary

The *Application Summary* sheet is the cover page of the application and is completed by family service staff or the ERSEA coordinator. The application date on the *Application Summary* is the first date that the application may be considered for a spot. This application date is completed by the ERSEA Coordinator when all application documents have been received, verified and the application is processed. Enrollment selection criteria is completed and is based on the contents of the application, the conversations staff have with families and referral sources, provided a release of information is obtained. The enrollment selection criteria is a point system used during the selection process. The enrollment selection criteria is based on community needs. The *Application Summary* sheet is updated each year, in December/January and is approved by Policy Council. After December, there are times when a family may apply for the current year, as well as, the

following school year. In these cases, two *Application Summary* sheet's should be completed, each with the correct school year listed on the sheet.

## Recruitment

Recruitment is the way our program identifies families whose children are eligible for Early Head & Head Start. We inform families and community agencies of the services available. We encourage families to apply for enrollment in the program and accept referrals from community agencies. Recruitment occurs throughout the year and is the responsibility of all EASTCONN Head Start staff. Recruitment is monitored and documented on our recruitment plan, established each year, by the ERSEA Coordinator.

## Selection & Placement

EASTCONN Early Head Start and Head Start's selection process adheres to Head Start Performance Standard 1302.14. EASTCONN Early Head Start & Head Start will be fully enrolled at all times. Openings in the program are filled within 30 days. Selection and placement meetings occur in the spring, in order to select children and families for enrollment in the fall. Meetings will continue until all spots are filled. Selection & placement meetings also occur as openings happen throughout the year. The ERSEA coordinator will coordinate the selection and placement meetings. Selection and placement meetings are attended by the ERSEA Coordinator and other available staff. The ERSEA coordinator will anonymously present each application eligible for the open spot. This includes enrolled families interested in transferring to another program. If a currently enrolled child is interested in transferring, the family service staff will contact the ERSEA Coordinator to update ChildPlus. The family service staff will email notes to the ERSEA Coordinator indicating the reason for the transfer request and any other pertinent information so that the child may be considered for a transfer. The committee will review all applications presented and together will select a child for the open spot. Anonymity is crucial. If a committee member is able to identify a child from the selection listing and is unable to remain impartial during the selection process, they may not participate in selection. Applications are ranked from the highest points to the lowest points according to the selection criteria. Selection of children who are over income (between 101% - 130% or over) occurs only in the event applications that are income eligible or categorically eligible have been exhausted or for another valid reason. The ERSEA coordinator will not have input in the decision made during the selection process, however, will provide guidance, as needed. The committee will also select additional children, as a back-up, in the event the child first selected does not accept the spot. The ERSEA coordinator will document this during the meeting. Once a child is selected, the ERSEA coordinator will contact the family and offer the spot. If the spot is accepted, the ERSEA coordinator will mail an *acceptance letter* to the family and contact the family service staff assigned to the family. If the family declines the spot, the selected back-up family will be contacted. Applications are kept on a wait list on ChildPlus.

## Change of Status

The purpose of the *Change of Status* form is to communicate with key staff when child/family newly enrolls or transfers in Early Head Start or Head Start. A *Change of Status* form need not be completed when a child withdrawals from the program. When an opening or withdrawal occurs during the program year, family service staff will inform the ERSEA Coordinator/Project Specialist via email within 24 hours, so that a timely selection can occur. Family service staff will also inform the ERSEA Coordinator when a child enrolls in a spot within 24 hours. The ERSEA Coordinator/Project Specialist will make all enrollment changes to the ChildPlus record and complete a *change of status* form once the child/family enrolls or transfers into an open spot.

A *change of status* form is completed by the ERSEA Coordinator and forwarded via email to the following staff within 24 hours of notification:

- Education Manager
- Health Manager
- Family Services Manager
- Early Head Start Coordinator
- Nutrition Consultant
- Transition Coordinator
- Monitoring & Data Manager
- Family Service Staff & Classroom Teacher/Home Visitor
- Service Coordinator

## Enrollment

When a family accepts a spot, the ERSEA coordinator will notify the appropriate family service staff and will forward the application and other documents to the family advocate/home visitor. Within five business days, family service staff will contact the family to schedule an enrollment home visit. All contact is documented in ChildPlus. After the enrollment visit, family service staff will build the child's file according to the table of contents and enter the data in ChildPlus. Once all individual health, nutrition and transportation needs have been planned for, the child may start in the classroom. Family service staff should allow at least 3 business days after the enrollment visit, before the child starts, to allow education staff the opportunity to prepare for the child's enrollment. This gives education staff time to prepare the child's cubby and the classroom as well as complete an education home visit, if possible. Family service staff will communicate with education staff throughout this process, specifically regarding the child's file, start date and other important information. Families of children attending year round Early Head Start programs will complete enrollment paperwork at a child's initial enrollment and every year after that, for as long as they are in the program. The date of enrollment for children enrolled in center-based services is the first day the child starts in the classroom. The enrollment date for families enrolling in home based-services is the date of the first home visit. Within 24 hours, family service staff will inform the ERSEA coordinator once a family is enrolled. The ERSEA coordinator will update ChildPlus accordingly.



Enrollment paperwork is completed with all families as they enroll into Early Head Start and Head Start and every year after that as long as the child is enrolled. Paperwork is updated accordingly and families get up to date information from Early Head Start and Head Start. For children enrolling in Head Start for a second year, an enrollment home visit happens with the family prior to the child starting school again. For children enrolled in Early Head Start, year-round, the enrollment paperwork may be completed in July, when the new program year starts or around the child's enrollment anniversary date.

## **Early Head Start Prenatal Services**

When completing an enrollment with a prenatal Mom, the home visitor will complete an application for the unborn child, leaving the name and date of birth blank. The home visitor will send the application to the ERSEA Coordinator to file until the baby is born. Immediately once the child is born, the home visitor will inform the ERSEA Coordinator and the Health Manager of the child's name and date of birth. The ERSEA Coordinator will add a copy of the *Prenatal Application Summary* and *Eligibility Verification* form to the child's application and add the child to ChildPlus.

Within two weeks of the child's birth, or as soon as possible thereafter, a newborn home visit is scheduled and occurs with the family. The Home Visitor will work with the Health Manager to schedule the newborn home visit. The Home Visitor may conduct a newborn home visit without the Health Manager, if needed.

The enrollment date for the baby born to an enrolled prenatal Mom is the date of the 1<sup>st</sup> home visit after the newborn visit. The drop date in ChildPlus for the prenatal mom is the date of the newborn home visit. The Home Visitor will notify the Enrollment Coordinator of these dates immediately after the visits occur.

If a prenatal Mom gives birth prior to accepting the spot or prior to enrollment, the home visitor will complete an application for the baby during the enrollment visit and complete the enrollment for the child. On ChildPlus, the prenatal Mom's record will be abandoned with notes of explanation stating that the baby was born prior to prenatal Mom's enrollment.

## **Early Head Start Center-based Requirements**

Priority for selection and placement in EHS CB classrooms go to families working 25 hours or more per week or are enrolled in school or a job training program. Families need not meet these requirements in order to apply for the program. However, in order to enroll, families should be working 25 hours or more per week or be enrolled in school or a job training program. Enrollment decisions are made by the selection committee under the guidance of the ERSEA Coordinator.

If during a child's enrollment in the program, a family no longer meets the requirements due to job loss, for example, job search requirements are explained to the family. Families are given a specific amount of time in order to secure employment, schooling or job training.

### **1<sup>st</sup> step:**

Family Service Staff talks with the family and completes a *EASTCONN Early Head Start Center-Based 45 day Employment Search Agreement*. At this time, family service staff will make a referral is made to EASTCONN's American Job Center, if the family is interested. Family service staff will check in with the family regularly throughout the process. If space is available, the family may request that their child transfer to an EHS HB spot, if interested. Once verification that a family is participating in an approved activity, the employment search agreement will end.

### **2<sup>nd</sup> step:**

If after 45 days, the family has not secured employment, schooling or job training, family service staff talks with the family and completes a *EASTCONN Early Head Start Center-Based Employment Search Agreement – 2 Week Extension*.

### **3<sup>rd</sup> step:**

If after nearly 60 days, the family has not secured employment, schooling or job training, family service staff talks with the family and completes a *EASTCONN Early Head Start Center-Based Final 45-day Employment Search Agreement*. If at the end of the final 45 days the family has not secured employment, schooling or job training, the child will be transferred to an EHS HB program, if space is available, or withdrawn from Early Head Start, per the family's preference.

A child's hours in Early Head Start center-based classrooms are established during the enrollment process with family service staff. All children are expected to be present during core Early Head Start hours, 8:30am – 2:30pm. Additional hours are based on a family's work, school or job training schedule. When a child attends Early Head Start before or after the core hours, a sliding scale fee, based on income, will be assessed for the family.

## **Attendance**

EASTCONN Head Start closely monitors the attendance of all children in the program. We are committed to ensuring that all children and families enrolled in the program receive the full benefit of Early Head Start and Head Start services. Families are encouraged to maintain regular attendance and are educated about the benefits of regular attendance at Head Start activities.

When the monthly average daily attendance rate in center-based programs fall below 85%, the program will analyze the causes of absenteeism. The team will review data, including the reasons for absences, as well as the number of absences that occur on consecutive days. If a child's absences are a result from other factors, including, but not limited to family

crisis, the program will initiate family supports for children and families. For detailed information about attendance, see the *EASTCONN Early Head Start & Head Start Attendance Procedure*.

### **Center-based**

Center-based attendance is recorded daily by classroom teams on ChildPlus. Each day, classroom staff will document their contacts with families, as well as the reasons for the absence. For safety purposes, if a family does not contact the program within 1 hour of the child's start time, staff will initiate contact with families within 2 hours of a child's start time or sooner. When documenting contact outcomes with families in Child Plus, staff will add the time contact was attempted. Staff will keep all team members informed about attendance. All attendance documentation will be entered in ChildPlus by the 1<sup>st</sup> of the following month.

### **Home-based**

Attendance for families enrolled in Early Head Start and Head Start home-based services are tracked each month. The family's monthly participation is monitored by the Home Visitor. The number of missed home visits is documented, with reasons, on ChildPlus.

# Appendix C: Community Assessment Team

## Leadership

Kimberly Mansfield	Director of Head Start
Laura Lybarger	Data & Outcomes Manager

## Demographics

Jennifer Snyder	ERSEA Coordinator
Crystal Daigneau	Early Head Start Home Visitor, Stafford Public Schools
Jennie Kapszukiewicz	Transition Coordinator-ECE Disabilities
Suzanne Lynch	Head Start Home Visitor, Tolland County
Damaris Gonzalez	Early Head Start Coordinator

## Education, Health, Nutrition, and Social Service Needs

Shayla Ranmal-Suppies	Health Manager
Sue Starkey	Director of Health, Northeast Department of Public Health
Cori Bailey	Head Start Nurse Consultant

## Work, School, and Training Schedules

Suzanne Michaud	Family Service Manager
Michelle Giard	Family Advocate
Jamie Musa	Head Start Coordinator

## Other Early Childhood Programs

Tracy Popolizio	Education Manager
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## Community Resources

Louise Brodeur	Service Coordinator
Jennifer Lynch	Early Head Start Home Visitor, Tolland County
Kelly Ann Sorrow	Head Start Home Visitor, Tolland County
Jackie Patsun	Early Head Start Home Visitor, Stafford Public Schools
Kerumi Nunez	Family Advocate, Windham Public Schools
Marisely Ortiz-Torres	Family Advocate, Windham Public Schools

## Appendix D: Community Partner Survey

*The Head Start community partner survey was created by the UCONN Center for Applied Research in Human Development. The questions and response options below appear how they were listed on the survey.*

By completing this survey, you will be assisting us in program planning that will meet the needs of our current and past families over the next five years. Your input is invaluable in developing services for young children and their families in our communities. You have been sent this survey because your organization provides resources to families who are eligible for EASTCONN Head Start programs in our catchment area. This survey should take approximately 10-15 minutes of your time. All responses will be anonymous. Thank you for taking the time to support EASTCONN Head Start.

1. Agency Name:

2. County

- Tolland County
- Windham County

3. Tolland County

- |                                    |                                     |
|------------------------------------|-------------------------------------|
| <input type="checkbox"/> Andover   | <input type="checkbox"/> Somers     |
| <input type="checkbox"/> Bolton    | <input type="checkbox"/> Stafford   |
| <input type="checkbox"/> Columbia  | <input type="checkbox"/> Tolland    |
| <input type="checkbox"/> Coventry  | <input type="checkbox"/> Union      |
| <input type="checkbox"/> Ellington | <input type="checkbox"/> Vernon     |
| <input type="checkbox"/> Hebron    | <input type="checkbox"/> Willington |
| <input type="checkbox"/> Mansfield |                                     |

4. Windham County

- |                                     |                                     |
|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Ashford    | <input type="checkbox"/> Plainfield |
| <input type="checkbox"/> Brooklyn   | <input type="checkbox"/> Pomfret    |
| <input type="checkbox"/> Canterbury | <input type="checkbox"/> Putnam     |
| <input type="checkbox"/> Chaplin    | <input type="checkbox"/> Scotland   |
| <input type="checkbox"/> Danielson  | <input type="checkbox"/> Sterling   |
| <input type="checkbox"/> Eastford   | <input type="checkbox"/> Thompson   |
| <input type="checkbox"/> Hampton    | <input type="checkbox"/> Windham    |
| <input type="checkbox"/> Killingly  | <input type="checkbox"/> Woodstock  |

5. Contact Name:

6. What is your role in your organization?

7. Phone Number:

8. Email Address:

9. In the last year, has your agency seen changes in the following:

	Increase	Decrease	No Change	Unknown	N/A
Average household income					
Number of at-risk families contacting your agency					
Number of individuals or families slightly over your income guidelines					
Number of multigenerational families you serve					
Number of female heads of household					
Number of teen parents					
Number of licensed child care providers					
Number of families engaged in kinship care					
Number of foster families					
Number of English Language Learners					
Jobs availability in the community					
Substance misuse in the community					

	Increase	Decrease	No Change	Unknown	N/A
Low-income housing availability					
Homelessness					
Transportation needs					
Services you offer					

10. Are the services that your agency offers free?

- Yes
- No

9a. Do you provide assistance?

- Yes
- No

9b. Please check which types of assistance you provide.

- Sliding scale based on income
- Scholarship assistance
- Fee waivers

11. What do you believe are your agency's and community's strengths when working with families at risk?

12. What do you believe are your agency's and community's obstacles when working with families at risk?

13. Are there other concerns you think are issues for our community?

14. What other programs or services do you believe our Head Start and Early Head Start program could offer to better serve our community (eg. Mental health or elderly services)?

15. Do you have suggestions about how Head Start and Early Head Start could collaborate or partner with your agency and community in order to better meet the needs of at risk children and families?

16. Other comments?

# Appendix E: Early Head Start Center-Based Survey

The Early Head Start Center-Based survey was created by the UCONN Center for Applied Research in Human Development. The questions and response options below appear how they were listed on the survey.

By completing this survey, you will be assisting us in program planning that will meet the needs of our current and past families over the next five years. Your input is invaluable in developing services for young children and their families in our communities. You will be asked to answer questions about your specific experience with EASTCONN Early Head Start Center Based programming. This survey should take approximately 10-15 minutes of your time. All responses will remain anonymous, however if you would like to be entered into a drawing for a \$50 Walmart Y Gift Card, you may enter your email at the end of the survey. Thank you for taking the time to support EASTCONN Head Start.

1. The location of my Head Start center was convenient for my family's participation.
  - Yes
  - No

1a. Why was the location of your Early Head Start center not convenient? Please check all that apply.

- Too far from my home
- Not in the same school district as where I reside
- I work more than 30 minutes from my Early Head Start Center

2. Information provided by Early Head Start included materials for both fathers and mothers.
  - Yes
  - No

3. I am satisfied with the Early Head Start services my family receives from:

	Agree	Neutral	Disagree
Classroom staff			
Administration			
Family Advocates			
Health staff			



4. Early Head Start services have helped me better understand:

	Agree	Neutral	Disagree
My child's social and emotional development			
My child's language development			
How my child learns concepts (e.g. shapes, sizes, etc.)			
My child's motor development			

5. Early Head Start gives my child a:

	Agree	Neutral	Disagree
Safe place to learn			
Clean environment			

6. Early Head Start provides me with quality information through:

	Agree	Neutral	Disagree
Newsletters			
Parent handbook			
Monthly calendars			
Home visits with family service providers			
Website and electronic messaging			
Flyers and announcing upcoming events			
Online resources			

7. Early Head Start has told me about how to be involved with:

	Agree	Neutral	Disagree
Policy Council			
Program events and family gatherings			
Classroom volunteering			
Parent meetings			
Fatherhood events			

8. Early Head Start has provided me with helpful information regarding:

	Agree	Neutral	Disagree
Child development			
Community/online resources			
Personal relationships			
Mental health issues & services			

	Agree	Neutral	Disagree
Health and dental health			
Crisis assistance			

9. Early Head Start has enabled me to:

	Agree	Neutral	Disagree
Define my own life goals			
Accomplish and pursue my goals			
Understand and carry out my role as the primary educator for my child			

10. When I requested help for my child's social and emotional development, it was:

	Agree	Neutral	Disagree
Delivered in a timely manner			
Useful and successful			
Supportive of my family's values			

11. Early Head Start services have helped me:

	Agree	Neutral	Disagree
Feel more comfortable talking to my child's health care provider			
Better understand the importance of early dental care			
Be more aware of the relationship I have with my child			
Understand the importance of reading to my child as much as possible			

12. Early Head Start has provided me with information on my child's disabilities/developmental delays.

- Yes
- No
- N/A

12a. When I requested help for my child's disabilities/developmental delays, the services were:

	Agree	Neutral	Disagree
Delivered in a timely manner			
Useful and successful			
Supportive of my family's values			

13. Early Head Start staff/Family Advocates have assisted us/our child in staying current with well-child exams and finding a dentist.

- Yes
- No

13a. What are your barriers to obtaining medical/dental care? Please check all that apply.

- Lack of transportation
- Lack of access to dental/medical providers who accept your health insurance
- Local dental/medical providers do not treat children under the age of three
- Lack of dental providers for advanced care or follow-up
- Language or cultural barriers
- Other

14. Early Head Start has supported me in attending Adult Education programs or job training opportunities.

- Agree
- Neutral
- Disagree
- N/A

14a. What kind of program did you participate in?

- Teen parenting program
- Adult education programs
- Educational institutions (community college, trade school, and other higher education programs)
- Technical training programs
- State agencies

14b. Name of the program you attended:

15. Are you currently employed?

- Yes
- No

15a. What days and hours do you currently work?

- Monday – Friday – First Shift
- Monday – Friday – Second Shift
- Monday – Friday – Third Shift
- My schedule varies from week to week

15b. Did Head Start assist you with finding employment?

- Yes
- No

15c. Are you currently looking for employment?

- Yes
- No

15d. Is Head Start assisting you in your employment search?

- Yes
- No

16. This year my family faced challenges around:

- My child's disabilities
- Educational or job training
- Employment
- Financial
- Food
- Housing
- Marital or personal
- Medical and dental
- Mental health
- Transportation

17. Are there any resources or services provided in your community for any of the listed above:

	Agree	Neutral	Disagree
Educational and job training			
Employment			
Financial			
Food			
Housing			
Marital or relationships			
Medical and dental			
Mental health			
Transportation			
Other			

18. My biggest concern for my family at this time is:

19. What I liked most about the monthly family meetings is:

20. Other comments:

OPTIONAL: Please enter your email address if you would like to be entered into a drawing for a \$50 Walmart Gift Card. By submitting your email, you are agreeing to future contact from EASTCONN Head Start regarding Community assessment feedback.

## Appendix F: Head Start Center-Based Survey

*The Head Start center-based survey was created by the UCONN Center for Applied Research in Human Development. The questions and response options below appear how they were listed on the survey.*

By completing this survey, you will be assisting us in program planning that will meet the needs of our current and past families over the next five years. Your input is invaluable in developing services for young children and their families in our communities. You will be asked to answer questions about your specific experience with EASTCONN Early Head Start Center Based programming. This survey should take approximately 10-15 minutes of your time. All responses will remain anonymous, however if you would like to be entered into a drawing for a \$50 Walmart Y Gift Card, you may enter your email at the end of the survey. Thank you for taking the time to support EASTCONN Head Start.

1. The location of my Head Start center was convenient for my family's participation.
  - Yes
  - No
  
- 1a. Why was the location of your Head Start center not convenient? Please check all that apply.
  - Too far from my home
  - Transportation was not available to where I live
  - Not in the same school district as where I reside
  - I work more than 30 minutes from my Early Head Start Center
  
2. The Head Start program provided transportation for my child.
  - Yes
  - No
  
3. [there was no number 3 on the survey]
  
4. The current program schedule and hours met the needs of my family.
  - Yes
  - No
  
- 4a. Please explain changes you'd like to see to the program schedule and hours.
  
5. My family has attended/would attend a 5-6 week summer program.
  - Yes
  - No

6. My child attends childcare before or after Head Start (center, family care, etc.).
- Yes
  - No

6a. Where does your child attend childcare before or after Head Start?

7. Information provided by Head Start included materials for both fathers and mothers.
- Yes
  - No

8. I am satisfied with the Head Start services my family receives from:

	Agree	Neutral	Disagree
Classroom staff			
Administration			
Family Advocates			
Health staff			

9. Head Start has helped my child get ready for school by:

	Agree	Neutral	Disagree
Becoming more independent			
Learning basic concepts in language			
Learning basic concepts in math			
Learning to share and cooperate			

10. Head Start gives my child a:

	Agree	Neutral	Disagree
Safe place to learn			
Clean environment			

11. Head Start provides me with quality information through:

	Agree	Neutral	Disagree
Newsletters			
Parent handbook			
Monthly calendars			
Home visits with family service providers			
Website and electronic messaging			
Flyers and announcing upcoming events			
Online resources			



12. Head Start has told me about how to be involved with:

	Agree	Neutral	Disagree
Policy Council			
Program events and family gatherings			
Classroom volunteering			
Parent meetings			
Fatherhood events			

13. Head Start has provided me with helpful information regarding:

	Agree	Neutral	Disagree
Child development			
Community/online resources			
Personal relationships			
Disabilities			
Mental health			
Health and dental health			
Crisis assistance			

14. Head start has enabled me to:

	Agree	Neutral	Disagree
Define my own life goals			
Accomplish and pursue my goals			
Understand and carry out my role as the primary education for my child			
Participate in adult education or job training opportunities			

15. My child's teacher:

	Agree	Neutral	Disagree
Worked with me to plan my child's learning and development			
Planned activities around my child's individual needs			
Helped me have a better understanding of my child's social and emotional development			

16. When I requested help for my child's social and emotional development, it was:

	Agree	Neutral	Disagree
Delivered in a timely manner			
Useful and successful			
Supportive of my family's values			

17. Head Start Services have helped me:

	Agree	Neutral	Disagree
Feel more comfortable talking to my child's health care provider			
Better understand the importance of early dental care			
Be more aware of the relationship I have with my child			
Understand the importance of reading to my child as much as possible			

18. Head Start has provided me with information on disabilities.

- Yes
- No
- N/A

18a. When I requested help for my child's disabilities, the services were:

	Agree	Neutral	Disagree
Delivered in a timely manner			
Useful and successful			
Supportive of my family's values			

19. With assistance from Head Start staff/Family Advocates, we/our child have stayed current with well-child and dental exams.

- Yes
- No

19a. What are your barriers to obtaining medical/dental care? Please check all that apply.

- Lack of transportation
- Lack of access to dental/medical providers who accept your health insurance
- Local dental/medical providers do not treat children under the age of three
- Lack of dental providers for advanced care or follow-up
- Language or cultural barriers
- Other

20. Head Start has supported me in attending Adult Education programs or job training opportunities.

- Agree
- Neutral
- Disagree
- N/A

20a. What kind of program did you participate in?

- Teen parenting program
- Adult education programs
- Educational institutions (community college, trade school, and other higher education programs)
- Technical training programs
- State agencies

20b. Name of the program you attended:

21. Are you currently employed?

- Yes
- No

21a. What days and hours do you currently work?

- Monday – Friday – First Shift
- Monday – Friday – Second Shift
- Monday – Friday – Third Shift
- My schedule varies from week to week

21b. Did Head Start assist you with finding employment?

- Yes
- No

21c. Are you currently looking for employment?

- Yes
- No

21d. Is Head Start assisting you in your employment search?

- Yes
- No

22. This year my family faced challenges around:

- My child's disabilities
- Educational or job training
- Employment

- Financial
- Food
- Housing
- Marital or personal
- Medical and dental
- Mental health
- Transportation
- Other

23. Are there any resources or services provided in your community for any of the listed above:

	Agree	Neutral	Disagree
Educational and job training			
Employment			
Financial			
Food			
Housing			
Marital or relationships			
Medical and dental			
Mental health			
Transportation			
Other			

24. My biggest concern for my family at this time is:

25. What I liked most about the monthly family meetings is:

26. Other comments:

OPTIONAL: Please enter your email address if you would like to be entered into a drawing for a \$50 Walmart Gift Card. By submitting your email, you are agreeing to future contact from EASTCONN Head Start regarding Community assessment feedback.

## Appendix G: Home-Based Survey

*The Head Start home-based survey was created by the UCONN Center for Applied Research in Human Development. The questions and response options below appear how they were listed on the survey.*

By completing this survey, you will be assisting us in program planning that will meet the needs of our current and past families over the next five years. Your input is invaluable in developing services for young children and their families in our communities. You will be asked to answer questions about your specific experience with EASTCONN Head Start & Early Head Start Home Based programming. This survey should take approximately 10-15 minutes of your time. All responses will remain anonymous, however if you would like to be entered into a drawing for a \$50 Walmart Gift Card, you may enter your email at the end of the survey. Thank you for taking the time to support EASTCONN Head Start.

1. Our home visitor consistently tries to schedule visits at a convenient time for our family.
  - Yes
  - No
  
2. The current home-based services meet the needs of our family.
  - Yes
  - No
  
- 2a. If the home-based program isn't meeting the needs of your family, please explain why.
  
3. The current home-based program provides information and activities for both fathers and mothers.
  - Yes
  - No
  
4. Our family attends group socialization two times a month.
  - Yes
  - No
  
- 4a. What barriers prevent you from attending group socializations?
  - Lack of transportation
  - Time does not work with our schedules
  - Location is not convenient
  - I was unaware the group socializations occurred for my program
  - Other

5. Early Head Start staff/Family Advocates have assisted us/our child in staying current with well-child exams and finding a dentist.
- Yes
  - No

- 5a. What are your barriers to obtaining medical/dental care? Please check all that apply.
- Lack of transportation
  - Lack of access to dental/medical providers who accept your health insurance
  - Local dental/medical providers do not treat children under the age of three
  - Lack of dental providers for advanced care or follow-up
  - Language or cultural barriers
  - Other

6. I am satisfied with the Head Start services my family receives:

	Agree	Neutral	Disagree
In our home visits			
At socializations			
At parent meetings			
Overall services of our Home-Based program			

7. Home-Based services have helped me better understand:

8. My Home Visitor provides me with quality information through:

9. Our Home-Based program has told me about how to be involved with:

	Agree	Neutral	Disagree
Policy Council			
Program events and family gatherings			
Classroom volunteering			
Parent meetings			
Fatherhood events			

10. Our Home-Based program has provided me with helpful information regarding:

	Agree	Neutral	Disagree
Child development			
Community/online resources			
Health and dental health			
Mental health issues & services			
Crisis assistance			

	Agree	Neutral	Disagree
Services for our child who has developmental delays			
Adult education or job training			

11. Our Home-Based program has enabled me to:

	Agree	Neutral	Disagree
Define my own life goals			
Accomplish and pursue my goals			
Understand and carry out my role as the primary education for my child			

12. My child's home visitor:

	Agree	Neutral	Disagree
Consistently includes me in planning for the next home visit			
Plans activities around my child's individual needs			
Helped me have a better understanding of my child's social and emotional development.			

13. When I requested help for my child's social and emotional development, it was:

	Agree	Neutral	Disagree
Delivered in a timely manner			
Useful and successful			
Supportive of my family's values			

14. Home-Based services have helped me:

	Agree	Neutral	Disagree
Feel more comfortable talking to my child's health care provider			
Better understand the importance of early dental care			
Be more aware of the relationship I have with my child			
Understand the importance of reading to my child as much as possible			



15. Head Start has provided me with information on disabilities.
- Yes
  - No
  - N/A

15a. When I requested help for my child's disabilities, the services were:

	Agree	Neutral	Disagree
Delivered in a timely manner			
Useful and successful			
Supportive of my family's values			

16. Head Start has supported me in attending Adult Education programs or job training opportunities.
- Agree
  - Neutral
  - Disagree
  - N/A

16a. What kind of program did you participate in?

- Teen parenting program
- Adult education programs
- Educational institutions (community college, trade school, and other higher education programs)
- Technical training programs
- State agencies
- Other

16b. Name of the program you attended:

17. This year my family faced challenges around:

- My child's disabilities
- Educational or job training
- Employment
- Financial
- Food
- Housing
- Marital or personal
- Medical and dental
- Mental health
- Transportation
- Other

18. Are there any resources or services provided in your community for any of the listed above:

	Agree	Neutral	Disagree
Educational and job training			
Employment			
Financial			
Food			
Housing			
Marital or relationships			
Medical and dental			
Mental health			
Transportation			
Other			

19. My biggest concern for my family at this time is:

20. What I liked most about the group socializations is:

21. Other comments:

OPTIONAL: Please enter your email address if you would like to be entered into a drawing for a \$50 Walmart Gift Card. By submitting your email, you are agreeing to future contact from EASTCONN Head Start regarding Community assessment feedback.

# Appendix H: Staff Focus Group Questions

## Introduction

EASTCONN Head Start is interested in understanding how to best serve children and families in Windham and Tolland Counties. This process includes collecting data about who lives in these areas and what types of services Head Start-eligible families want and need. Information gathered during this process will inform Head Starts Community assessment, strategic planning, programming, and outreach.

We will be taking notes so that we can remember key themes to include in the community assessment report. However, the conversation will not be recorded and your comments will not be linked to your name. We hope that you will provide honest feedback to help inform the future direction of EASTCONN Head Start.

## Access

1. To what extent are eligible families able to access Early Head Start or Head Start services?
2. What factors make it challenging for eligible families to access Early Head Start or Head Start? (e.g. because of location, Immigrant status, language?)

## Community Resources

3. To what extent, during the last 2 years (both prior to and during COVID), were families able to access Head Start referred services?
  - Barriers by type (e.g. health needs)
  - Barriers by location
  - Other barriers
4. What types of services have families needed in the past 2 years, for which there are not sufficient resources?
  - Child care
  - Medical
  - Mental health
  - Other
5. What is your understanding of caregiver need and/or interest in adult education or job training opportunities?
6. To what extent are caregivers who are interested in furthering their education able to access adult education or job training?
  - What are the barriers/challenges to accessing these services?

## Priorities

7. What do you view as the top priorities for Early Head Start or Head Start programming for the next few years?

# Appendix I: Family Focus Group Questions

## Introduction

EASTCONN Head Start is interested in understanding how to best serve children and families in Windham and Tolland Counties. This process includes collecting data about who lives in these areas and what types of services Head Start-eligible families want and need. Information gathered during this process will guide Head Start's strategic planning, programming, and outreach.

Participation in today's conversation is voluntary and will not impact your ability to receive services in any way. We will be recording the conversation so that we can remember key themes to include in the community assessment report. However, your comments will not be linked to your name in the report.

Hearing from caregivers like yourselves is important to help us understand how we can improve the services offered. We hope that you will provide honest feedback to help inform the future direction of EASTCONN Head Start.

We will also be sending out an online survey after our conversation with the same exact questions we ask tonight. This is so that you can provide any comments that you might have forgotten or felt uncomfortable saying during our time together. Survey link:

<https://www.surveymonkey.com/r/ECHSPARENTS2021>

## Demographics to Collect

- First name
- Age(s) of Children
- Town of residence
- Town of employment
- Type or location of EHS/HS
- Year first enrolled in EHS/HS.

## Enrollment

First, we would like to understand your experience getting connected and enrolled in the Early or Basic Head Start program.

1. Tell me about your experience getting your child(ren) enrolled in Head Start.
  - How long did it take to you to become enrolled in HS [specify type and age of child at time]?
  - Were there any challenges that you experienced during enrollment?
    - Probe for feelings re: length of time waiting to be enrolled or on waitlist if applicable.

## Accessibility

We understand that many families are balancing work, parenting, school, and/or finding child care every day.

2. How would you describe the Head Start program in terms of being accessible to your home and work?
  - How long does it take you to get from your home and/or work to your child's HS?
  - Do you have a car or access to a car to get child to HS?
    - If no, do you rely on public transportation to get child to HS?
3. How does Head Start meet your child care needs?
  - Do the hours that your child is enrolled in HS cover all of your typical daily child care hour needs?
  - If no, do you have additional child care?
  - If no, do you currently have additional child care needs?

## Community Resources

Now we would like to hear more about the community resources or services that you are using or would like to use.

4. What types of community resources/services have you been referred to through HS in the last year?
5. What types of community resources/services have you actually accessed (gone to) through a HS referral in the last year?
6. Are there other community resources/services have you accessed in the last year?
7. Are there resources/service needs (e.g. medical, health) you currently need or have you been unable to access in the last year?
8. Are you employed?
  - If no, are you currently looking for a job?
9. Are you interested in further education or job training opportunities?
  - If yes, please describe
10. What else would you like to share with us today about your experience with the Head Start program?

## Appendix J: Head Start MOUs

<b>Organization</b>	<b>Expiration Date</b>
<b>Child Welfare Agencies</b>	
Vernon School Readiness	6/30/19
ECHN	6/30/19
United Services	6/30/19
Day Kimball - Nurturing Families Network	6/30/19
Generations - Willimantic	6/30/19
TEEG	6/30/19
Eastford School Readiness Council	6/30/19
Chaplin School Readiness	6/30/19
Stafford School Readiness/Head Start	6/30/20
Plainfield Family Resource Center	6/30/21
Manchester Child Guidance Clinic	6/30/21
DCF - Willimantic	6/30/21
DCF - Manchester	6/30/21
ACCESS/WIC - Willimantic	9/30/21
Putnam Family Resource Center	6/30/22
<b>Community Resources</b>	
Perception Programs - Willimantic	6/30/19
Rockville Public Library	6/30/19
Killingly Public Library	6/30/19
The Village at Killingly - Housing	6/30/19
Vernon Youth Services	6/30/19
Putnam Housing Authority	6/30/19
East Hartford Health Department - WIC	6/30/19
Northeast District Department of Health	6/30/19
EASTCONN Adult Education	6/30/19
Canterbury Public Library	6/30/21
Friends of Assisi Food Pantry - Danielson	6/30/21
<b>Local Education Agency</b>	
Killingly Public Schools - BOE	6/30/19

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**Organization****Expiration Date**

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Plainfield Public Schools - BOE	6/30/19
Pomfret Public Schools - BOE	6/30/19
Sterling BOE at Community School Preschool	6/30/21
Sterling BOE - IDEA	6/30/21
Brooklyn Elementary School/School Readiness	6/30/21
Canterbury Public Schools	6/30/21
Putnam Public Schools - BOE	6/30/21
Vernon Public Schools - BOE	6/30/21

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**Facilities**

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West Stafford School - Facilities	6/30/18
Killingly Public Schools - Facilities	6/30/19
Plainfield Public Schools - Facilities	6/30/19
Putnam Public Schools - Facilities	6/30/19

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**Child Care Partners**

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Sterling Community School	6/30/19
St. Joseph School - Grosvenordale	6/30/20

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**Part C Agencies**

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Goodyear Early Childhood Center	6/30/21
Beacon Services Birth to Three	6/30/21
EASTCONN Birth to Three	6/30/21



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<sup>1</sup> United States Census Bureau. (2020). Table DP05, 2015-2019 American Community Survey Data Releases.

[https://data.census.gov/cedsci/table?q=population&g=0400000US09.050000\\_0500000US09013.060000,09015.060000&tid=ACSDP5Y2019.DP05&hidePreview=true](https://data.census.gov/cedsci/table?q=population&g=0400000US09.050000_0500000US09013.060000,09015.060000&tid=ACSDP5Y2019.DP05&hidePreview=true)

<sup>2</sup> United States Census Bureau. (2020). Table DP05, 2015-2019 American Community Survey Data Releases.

[https://data.census.gov/cedsci/table?q=population&g=0400000US09.050000\\_0500000US09013.060000,09015.060000&tid=ACSDP5Y2019.DP05&hidePreview=true](https://data.census.gov/cedsci/table?q=population&g=0400000US09.050000_0500000US09013.060000,09015.060000&tid=ACSDP5Y2019.DP05&hidePreview=true)

<sup>3</sup> U.S. Interagency Council on Homelessness. (2021). Upcoming Events for Preventing and Ending Homelessness: Homelessness Statistics. <https://www.usich.gov/homelessness-statistics/ct>

<sup>4</sup> CT State Department of Education. (2021). Primary Disability.

<http://edsight.ct.gov/SASPortal/main.do>

<sup>5</sup> Based on estimates in Child Trends. (2019). Child Maltreatment: Connecticut.

<https://www.childtrends.org/publications/state-level-data-for-understanding-child-welfare-in-the-united-states>

<sup>6</sup> CT Department of Children and Families. (2018). Children Entering DCF Placement Annual

Trend by Age. <https://data.ct.gov/Health-and-Human-Services/Children-Entering-DCF-Placement-Annual-Trend-by-Ag/dwa8-rgn8/data>

<sup>7</sup> Kids Count Data Center. (2021). Child Race and Ethnicity: American Community Survey

(ACS), 2005-2019 in Connecticut. [https://datacenter.kidscount.org/data/tables/8708-child-race-and-ethnicity-american-community-survey-ac-2005-2019?loc=8&loct=5#detailed/5/1458-](https://datacenter.kidscount.org/data/tables/8708-child-race-and-ethnicity-american-community-survey-ac-2005-2019?loc=8&loct=5#detailed/5/1458-1465/false/1983,1572,1074/107,133,172,1521,185,12/17477)

[1465/false/1983,1572,1074/107,133,172,1521,185,12/17477](https://datacenter.kidscount.org/data/tables/8708-child-race-and-ethnicity-american-community-survey-ac-2005-2019?loc=8&loct=5#detailed/5/1458-1465/false/1983,1572,1074/107,133,172,1521,185,12/17477)

<sup>8</sup> United States Census Bureau. (2020). Table S1901, 2015-2019 American Community Survey Data Releases.

<https://data.census.gov/cedsci/table?q=income&g=0400000US09.050000&tid=ACSST5Y2019.S1901&hidePreview=true>

<sup>9</sup> United States Census Bureau. (2020). Table S1701, 2015-2019 American Community Survey Data Releases.

<https://data.census.gov/cedsci/table?q=poverty&g=0400000US09.050000&tid=ACSST5Y2019.S1701&hidePreview=true>

<sup>10</sup> United States Census Bureau. (2020). Table DP05, 2015-2019 American Community Survey Data Releases.

[https://data.census.gov/cedsci/table?q=population&g=0400000US09.050000\\_0500000US09013.060000,09015.060000&tid=ACSDP5Y2019.DP05&hidePreview=true](https://data.census.gov/cedsci/table?q=population&g=0400000US09.050000_0500000US09013.060000,09015.060000&tid=ACSDP5Y2019.DP05&hidePreview=true)

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<sup>11</sup> United States Census Bureau. (2020). Table S1701, 2015-2019 American Community Survey Data Releases.

<https://data.census.gov/cedsci/table?q=poverty&g=0400000US09.050000&tid=ACSST5Y2019.S1701&hidePreview=true>

<sup>12</sup> United States Census Bureau. (2020). Table S2201, 2015-2019 American Community Survey Data Releases.

<https://data.census.gov/cedsci/table?q=SNAP&g=0500000US09013.060000.09015.060000&tid=ACSST5Y2019.S2201&hidePreview=true>

<sup>13</sup> Center for American Progress. (2018). Child Care Access in Connecticut.

<https://childcaredeserts.org/2018/?state=CT&urbanicity=All&split=true>

<sup>14</sup> Jessen-Howard, S., Workman, S. (2020, April 24). Coronavirus pandemic could lead to permanent loss of nearly 4.5 million child care slots. Center for American Progress.

<https://www.americanprogress.org/issues/early-childhood/news/2020/04/24/483817/coronavirus-pandemic-lead-permanent-loss-nearly-4-5-million-child-care-slots/>

<sup>15</sup> Jessen-Howard, S., Workman, S. (2020, April 24). Coronavirus pandemic could lead to permanent loss of nearly 4.5 million child care slots. Center for American Progress.

<https://www.americanprogress.org/issues/early-childhood/news/2020/04/24/483817/coronavirus-pandemic-lead-permanent-loss-nearly-4-5-million-child-care-slots/>

<sup>16</sup> Bye, B. (2020, November 18). Interrupted: Women, work, and COVID-19 [Webinar]. The Community Foundation for Greater New Haven.

<https://www.youtube.com/watch?v=vvJDV7TEFP8&feature=youtu.be>

<sup>17</sup> Center for American Progress. (2019). Early learning fact sheet 2019: Connecticut. Center for American Progress.

[https://cdn.americanprogress.org/content/uploads/2019/09/12064838/Connecticut.pdf?\\_ga=2.210459925.1414952107.1605800706-245466949.1604509293](https://cdn.americanprogress.org/content/uploads/2019/09/12064838/Connecticut.pdf?_ga=2.210459925.1414952107.1605800706-245466949.1604509293)

<sup>18</sup> Center for American Progress. (2018). Child Care Access in Connecticut.

<https://childcaredeserts.org/2018/?state=CT&urbanicity=All&split=true>

<sup>19</sup> Partnership for Strong Communities. (2020). Housing Data Profiles.

<https://housingprofiles.psychousing.org/compare/#Connecticut,Tolland%20County,Windham%20County>

<sup>20</sup> CT Department of Transportation. (2020). Windham Region Transit District Bus Service Area Low Income.

<https://portal.ct.gov/-/media/DOT/documents/dcontractcompliance/2020-maps/Windham-Bus-Route-Service-Area-Low-Income.pdf>

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<sup>21</sup> Kids Count Data Center. (2019). Children without a vehicle at home in Connecticut. <https://datacenter.kidscount.org/data/tables/68-children-without-a-vehicle-at-home#detailed/2/8/false/1729.37.871.870.573.869.36.868.867.133/any/370.371>

<sup>22</sup> National Low Income Housing Coalition. (2021). Out of Reach 2021: Connecticut. <https://reports.nlihc.org/oor/connecticut>

<sup>23</sup> National Low Income Housing Coalition. (2021). Out of Reach 2021: Connecticut. <https://reports.nlihc.org/oor/connecticut>