Comprehensive Community Needs Assessment Report Handbook

Created for the use by Connecticut Community Action Agencies
Updated November 21, 2024



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About this Document and How to Use It

This handbook is a resource for Community Action Agencies (CAAs) in Connecticut to use hand-in-hand with the <u>Connecticut Comprehensive Community Needs Assessment (CNA)</u>

<u>Template</u> (referred to as the Template). The training sessions on how to utilize the Template and Handbook may be useful to watch before you dive in (<u>session 1</u>, <u>session 2</u>)

The content in this handbook provides the "how" of creating a CNA, while the <u>CAP Form</u> <u>Guidance Updated 4-23-2023</u> (the "old" CAP form guidance, which included guidance on the CNA), explains why certain parts of this template are required. Sections of CAP Form Guidance 2023 are linked throughout the Template and this Handbook to help you understand why the template includes that information.

This Template and Handbook were developed by reviewing multiple sources of information:

- Workshops and Technical Assistance sessions with CAA staff members and conversations with the DSS CSBG Team, who continue to help us better understand this report/process.
- CAP Form Guidance Updated 4-23-2020 Section 2 specific to CNA
- Report on Findings from Research on Supporting Community Action Agencies in
 Developing Comprehensive Needs Assessments (August 24, 2021) compiled by
 CTData and includes primary data collection regarding CAA needs through focus
 groups, interviews, and a review of existing documents (meeting notes and 2020
 CNAs).
- Review of many documents provided to CAAs, including, but not limited to:
 - <u>Building Effective Community Action Plans</u>, presented by Shawna Pena, Anna Sainsbury, and Maribeth Schneber-Rhemrev at the NASCSP 2021 Winter Training Conference.
 - <u>Needs Assessment: Beyond Requirements</u> presented by Tammy Fahey,
 Courtney Kohler, and Katy Kujawski at the NASCSP 2021 Winter Training
 Conference.
 - Tools and resources provided by the Early Childhood Learning & Knowledge Center (US Dept of HHS) <u>Community Assessment resources</u>.

- Robert Haveman's presentation on <u>Causes of Poverty</u> at the Institute for Research on Poverty (University of Wisconsin-Madison).
- Writing Your Community Needs Assessment webinar by <u>Community Action</u> <u>Partnership.</u>
- Comprehensive Community Needs Assessment Toolkit by Maryland Community Action Partnership.
- Organizational Standards Technical Assistance Guide Category 3 Community
 Assessment, National Community Action Partnership.

Orientation to Template Sections

This Orientation section provides brief descriptions of the template sections so you can understand the conceptual ideas behind the sections included. This is just an overview, and more detailed instructions about what information to compile are included in the blue boxes in each section of the Template. There are also examples in this Handbook (starting on page 35), which are listed in any section where they are available. The training sessions on how to utilize the Template walk through these sections as well (session 1, session 2)

Overall, the Template seeks first to help you organize the information you share in a way that can help your agency develop strategies and plans to address poverty in your region.

A. Contact Information

Basic information required in CAN and Board Acceptance (Standard 3.5).

B. Executive Summary

This section is where people can learn about the high-level information from your agency's CNA at a glance. You will write much of this section last, as it will summarize your data and information exploration. In this section, you might consider providing compelling visuals that will grab people's attention and make them want to read more. This section will be useful for people in your agency, among your stakeholders, and in your community. It also includes the table of Key Findings on the Causes & Conditions of Poverty (Standard 3.4) and the Table of Prioritized Issues & Service Gaps (Standard 3.4). See example here.

C. Introduction

This section is the introduction to the full report. It is meant to orient people to the "whys" of the report: why this geographic region, why these data categories (and not others), and why your agency developed this document. See example here.

D. Community Profile

This section introduces readers to the data about you're agency's geographic catchment area. This section includes the basic demographics of your catchment area, such as the age and race breakdown across the region and the poverty statistics across the region (prevalence overall, by gender, age, and race and ethnicity, Standard 3.2). If there is other information that you, your board, your CNA workgroup, etc., thinks is important, you can add more sections here. *However, this is not where you begin to explore the data about the causes & conditions of poverty or your needs* (see the section below titled *Priority Issues*). This helps people understand the geographic region you'll be talking about in your report. <u>See example here.</u>

E. Priority Issues

This section is a chance for you to summarize the prioritized issues you have identified through your collaboration with stakeholders. In this section, you will make a case for the priority need by showing the data about the conditions of poverty and their causes, the assets that exist to address those causes and/or conditions, the gaps around addressing them, and the needs that still exist (Standards 3.4, 3.3, 1.2, 6.4 and possibly 1.2). See example here.

F. How This Report Was Created

A key part of data work is demonstrating trustworthiness and credibility of the project. This section is in academic papers as the "methodology" section. This information is often not included in reports from private organizations, resulting in readers being unsure of the reliability of the information contained. *Every report has limitations*. To increase stakeholders' and communities' trust in your report, document who made decisions about what to include in the report, who analyzed the data (and did not), and be transparent about the limitations of your process. <u>See example here.</u>

G. Next Steps

A quick overview of what you'll be doing next with what you learned from this report process. <u>See example here.</u>

H. Appendices

This section includes the tables where you document the quantitative and qualitative data sources used in the report. These tables enable you to quickly demonstrate information for Standards 1.2, 1.1, 2.2, 3.3, and 6.4. This section also includes meeting minutes from the acceptance of your CNA (Standard 3.5). It is advisable to include copies of the data collection tools (not necessarily the data itself – you will have used that in your report). This is part of trust-building and transparency. See example here.

I. Works Cited

Another important section of any report is the Works Cited list. You will cite different kinds of sources in your report, as you will see in the example sections in this Handbook. Some kinds of information will be, of course, the data you include from the Census Bureau, the data from the Data Spreadsheet created for your use by CTData, information from your website or reports, and information from reports or news articles that other people write. A Works Cited list ensures transparency in our reports and that other people can review our sources in case they'd like to explore the same source further. See example here.

Report Rubric

The purpose of this checklist is to ensure that Community Action Agency (CAA) staff members charged with organizing and assembling the CNA know the expectations for each section of the CNA. This checklist will also be used by the Department of Social Services Office of Community Services (OCS) staff members who review the CNA. If you need clarification on what any of these areas mean, please e-mail your contract liaison.

This document is saved as a Word Template (.docx). To ensure you can fill out a clean rubric each time, save this document as a template in your agency files, and then choose "New from Template" to start a new document. To save this as a template, go to "File" then "Save as Template." The template will be automatically saved, so you might save it in another folder in your agency drive where you keep documents about the CNA. Next time you create a CNA, choose "File," "New from Template," and choose the location where the template is saved.

How to use this:

- 2. CAA staff members responsible for organizing and assembling the CNA: Use the template to guide the information you will include in the CNA template.
- 3. **CAA reviewer of Draft CNA:** Use the template as you review the draft of the CNA. Make note of what needs to be improved or completed before submitting the full report.
- 4. **CAA reviewer of Final CNA:** Before submitting the report, review the final report and note the page numbers where the information can be found. Submit this with the report to OCS via email.
- 5. **OCS staff:** Use the completed form to review the final CNA submitted to you. The form will ensure a systematic review of each agency's CNA. This allows you to provide specific feedback, enables the CAAs to improve their CNAs, and reduces the time to review each report.

Agency:
Reviewer Name:
Date:

CNA Scoring Rubric

In the **notes** section, include comments on what is high quality and what could use improvement.

	Standard	Report	Yes	No	Page	Notes:
		Section			#	
Needs Assessment Emailed	Stand 3.1					
Contact Information & Board Ac	ceptance (S	ection A)				
Name of Organization		А				
Principle Contact Name		А				
Principle contact e-mail		А				
Principle contact phone #		А				
Federal Fiscal Year		А				
Board Acceptance	3.5	А				
Meeting minutes from board	3.5	Hl				
meeting						
Community Profile (Section D)						
Data specific to poverty and its	Stand 3.2	Dl				
prevalence overall						
Data specific to poverty and its	Stand 3.2	Dl				
prevalence by gender						
Data specific to poverty and its	Stand 3.2	Dl				
prevalence by age						
Data specific to poverty and its	Stand 3.2	DI				
prevalence by race & ethnicity						
Priority Issues (Section E)		ı			Ī	
Causes and conditions table	Stand 3.4	ВЗа				
The causes and conditions table		ВЗа				
is supported by data analysis.						
Prioritized Issues Table	Stand 3.4	B3b				
Domain 1 (Section E.1)						
Domain 1 includes quantitative or	Stand 3.3	El				
qualitative data analysis.	Stand 1.2					
Domain 1 includes analysis of	Stand 1.2	El				
data your agency collected.	Stand 6.4 Stand 3.3					
Domain 1 includes information	Stand 3.4	El				
about the cause of poverty it						
relates to.						

	Standard	Report	Yes	No	Page	Notes:
		Section			#	
Domain 1 cause includes	Stand 1.2	El				
quantitative or qualitative data	Stand 6.4					
analysis.	Stand 3.3					
Domain 1 includes information	Stand 3.4	El				
about the condition of poverty						
related to the causes.						
Domain I condition includes	Stand 1.2	E1				
quantitative or qualitative data	Stand 6.4					
analysis.	Stand 3.3					
Domain 1 includes information		E1		Ш		
about existing assets related to						
the conditions & causes in the						
section.						
Domain 1 assets includes	Stand 1.2	E1		Ш		
quantitative or qualitative data	Stand 6.4 Stand 3.3					
analysis.						
Domain 1 includes information	Stand 3.4	E1				
about the service gaps/needs						
related to the conditions &						
causes in the section.	01 110					
Domain I gaps/needs includes	Stand 1.2 Stand 6.4	El				
quantitative or qualitative data	Stand 3.3					
analysis.	Staria 6.6					
Domain 2 (Section E.2)						
Domain 2 includes quantitative or	Stand 3.3	E2		Ш		
qualitative data analysis.	Stand 1.2					
Domain 2 includes analysis of	Stand 1.2	E2				
data your agency collected.	Stand 6.4					
Domain 2 includes information	Stand 3.3 Stand 3.4	E2				
	3tana 3.4	EZ				
about the cause of poverty it relates to.						
Domain 2 cause includes	Stand 1.2	E2				
quantitative or qualitative data	Stand 6.4					
analysis.	Stand 3.3					
Domain 2 includes information	Stand 3.4	E2				
about the condition of poverty	Jtana 5.4					
related to the causes.						
ופוטנפט נט נוופ טטטטפט.						

	Standard	Report	Yes	No	Page	Notes:
		Section			#	
Domain 3 assets includes	Stand 1.2	E3				
quantitative or qualitative data	Stand 6.4					
analysis.	Stand 3.3					
Domain 3 includes information	Stand 3.4	E3				
about the service gaps/needs						
related to the conditions &						
causes in the section.						
Domain 3 gaps/needs includes	Stand 1.2	E3				
quantitative or qualitative data	Stand 6.4					
analysis.	Stand 3.3					
Domain 4 (Section E.4)						
Domain 4 includes quantitative or	Stand 3.3	E4				
qualitative data analysis.	Stand 1.2					
Domain 4 includes analysis of	Stand 1.2	E4				
data your agency collected.	Stand 6.4					
Demonia 4 in aludes information	Stand 3.3 Stand 3.4	E4				
Domain 4 includes information	310110 3.4	C 4				
about the cause of poverty. Domain 4 cause includes	Stand 1.2	E4				
quantitative or qualitative data	Stand 6.4	L				
analysis.	Stand 3.3					
Domain 4 includes information	Stand 3.4	E4				
about the condition of poverty						
related to the causes.						
Domain 4 condition includes	Stand 1.2	E4				
quantitative or qualitative data	Stand 6.4					
analysis.	Stand 3.3					
Domain 4 includes information		E4				
about existing assets related to						
the conditions & causes in the						
section.						
Domain 4 assets includes	Stand 1.2	E4				
quantitative or qualitative data	Stand 6.4					
analysis.	Stand 3.3					
Domain 4 includes information	Stand 3.4	E4				
about the service gaps/needs						
related to the conditions &						
causes in the section.						

	Standard	Report	Yes	No	Page	Notes:
		Section			#	
Domain 4 gaps/needs includes quantitative or qualitative data analysis.	Stand 1.2 Stand 6.4 Stand 3.3	E4				
Domain 5 (Section E.5)						
Domain 5 includes quantitative or qualitative data analysis.	Stand 3.3 Stand 1.2	E5				
Domain 5 includes analysis of data your agency collected.	Stand 1.2 Stand 6.4 Stand 3.3	E5				
Domain 5 includes information about the cause of poverty.	Stand 3.4	E5				
Domain 5 cause includes quantitative or qualitative data analysis.	Stand 1.2 Stand 6.4 Stand 3.3	E5				
Domain 5 includes information about the condition of poverty related to the causes.	Stand 3.4	E5				
Domain 5 condition includes quantitative or qualitative data analysis.	Stand 1.2 Stand 6.4 Stand 3.3	E5				
Domain 5 includes information about existing assets related to the conditions & causes in the section.		E5				
Domain 5 assets includes quantitative or qualitative data analysis.	Stand 1.2 Stand 6.4 Stand 3.3	E5				
Domain 5 includes information about the service gaps/needs related to the conditions & causes in the section.	Stand 3.4	E5				
Domain 5 gaps/needs includes quantitative or qualitative data analysis.	Stand 1.2 Stand 6.4 Stand 3.3	E5				
Domain 6 (Section E.6)						
Domain 6 includes a quantitative or qualitative data analysis.	Stand 3.3 Stand 1.2	E6				
Domain 6 includes analysis of data your agency collected.	Stand 1.2 Stand 6.4 Stand 3.3	E6				

	Standard	Report Section	Yes	No	Page #	Notes:
Domain 6 includes information	Stand 3.4	E6			TT	
about the cause of poverty.	Staria 6.4	LO				
Domain 6 cause includes	Stand 1.2	E6				
quantitative or qualitative data	Stand 6.4	20				
analysis.	Stand 3.3					
Domain 6 includes information	Stand 3.4	E6				
about the condition of poverty						
related to the causes.						
Domain 6 condition includes	Stand 1.2	E6				
quantitative or qualitative data	Stand 6.4					
analysis.	Stand 3.3					
Domain 6 includes information		E6				
about existing assets related to						
the conditions & causes in the						
section.						
Domain 6 assets includes	Stand 1.2	E6				
quantitative or qualitative data	Stand 6.4					
analysis.	Stand 3.3					
Domain 6 includes information	Stand 3.4	E6				
about the service gaps/needs						
related to the conditions &						
causes in the section.						
Domain 6 gaps/needs includes a	Stand 1.2	E6				
quantitative or qualitative data	Stand 6.4					
analysis.	Stand 3.3					
Section 2: Comprehensive Com	nmunity Need	ds Assessr	ment			
Sources for quantitative data are	Stand. 3.3	Hllb				
listed.						
For each QUANTITATIVE data	Stand. 3.3	Hìb				
source, include a brief description						
of analysis methods (see page 63						
in this Handbook for examples of						
what this should look like.)						
Sources for qualitative data are	Stand. 3.3	Hla				
listed (see page 62 in this						
Handbook for an example of what						
this should look like).						
For each QUALITATIVE data	Stand. 3.3	Hla				
source, include a brief description						
of analysis methods (see page 62				1		

	Standard	Report Section	Yes	No	Page #	Notes:
in this Handbook for examples of what this should look like).						
Sources of information from required sector: Community-based organizations.	Stand. 2.2	H2				
Sources of information from required sector: Faith-based organizations.	Stand. 2.2	H2				
Sources of information from required sector: Private Sector institutions.	Stand. 2.2	H2				
Sources of information from required sector: Educational Institutions.	Stand. 2.2	H2				
Sources of information from people living in poverty.	Stand 1.2	H3				

Potential CNA Domains

What are area domains?

Area domains are the buckets you will use to explore your data. They are the categories of data you will be exploring (such as income and assets, employment, housing, etc.). These help you create boundaries around your exploration and help you identify new and helpful datasets.

Choosing domains for your CNA

Before you start finding, pulling, and analyzing data, it is essential to create boundaries around your exploration. The following are the big questions that can guide you:

- 1. What are the needs in our geographic service area?
- 2. What are the conditions of poverty in our geographic service area? How has that changed over time? How does that compare to the state?
- 3. What are the causes of poverty conditions in our geographic service area? How has that changed over time? How does that compare to the state?
- 4. What are the assets related to the causes & conditions of poverty in our geographic service area? What are the gaps in support related to those causes and conditions of poverty?

You will be exploring these questions related to where people experience the effects of poverty (conditions) and the reasons for those effects (causes). There are endless ways to explore the data; boundaries will help you decide where you direct your focus.

The domains you choose will provide your boundaries. There are several options to choose from. This information is based on guidance from the National Association for State Community Services Programs (*A Community Action Guide to Comprehensive Community Needs Assessments*, where these are called Frameworks), in case you'd like to read more. The guide recommends that your agency board determines the domains to use.

Domain Group Option 1: CSBG Annual Report Performance Management Categories

These categories come from modules 3 and 4 the CSBG Annual Report. See more on the National Association for State Community Services Programs Module 3 (community level) and Module 4 (individual and family level).

- Employment
- Education & Cognitive Development
- Income & Asset Building
- Housing
- Health & Social/Behavioral Development
- Civic Engagement & Community Involvement

Domain Group Option 2: Self-Sufficiency Scale Outcome Matrix Dimensions

The Self-Sufficiency Scale is the scale your agency uses to determine where clients or potential clients are "self-sufficient" and doing well or where they may need additional support. Some of these areas have more publicly available data than others. For example, there is no public data for household budgeting, so that would not be a domain you could easily explore with public data. However, if you explore "employment," this domain has a lot of data to explore. You might still explore your organization's internal data, but this would not be the focus of an entire section (see the sample section D below).

- Employment (required)
- Income
- Job Retention
- Education
- English Language Proficiency
- Household Budgeting
- Behavioral Health
- Food Security
- Community Involvement
- School

- Job Skills/Training
- Housing
- Health Insurance Adult & Child
- Transportation
- Childcare
- Child Behavior
- Juvenile Justice
- (Optional: Physical Health)
- (Optional: Legal)

How to Use the CTData Data Spreadsheet

What is it?

CTData compiled a spreadsheet of some of the common American Community Survey 5-year datasets that CAAs use in the CNA. The data is organized by town and includes as many years as the data is available (2007-2011 sometimes, 2012-2016, 2017-2021).

<u>The link to the spreadsheet can be found here.</u> <u>Here is a link to a video walk-through</u> of the spreadsheet. And here is the suggested citation format:

• Connecticut Data Collaborative (2024). Data file compiled for Connecticut's Community Action Agencies from the U.S. Census Bureau's American Community Survey 5-Year Estimates.

Here is a list of the data tables that are included. Please note that you will need to add the Table numbers to the list of data you used in the appendix (section H1b).

Topic	Table ID
Poverty by age	S1701
Poverty by gender	S1701
Poverty by race and ethnicity	S1701
Poverty status	S1701
Population by age	DP05
Population by gender	DP05
Population by race and ethnicity	DP05
Median household income by age	S1903
Median household income by race and ethnicity	S1903
Population living at different levels of FPL	S1701
Families living in poverty	S1702
Language spoken at home	S1601
Employment rate	DP03
Self-employment	DP03
Employment by Educational Attainment	
Residential mobility by poverty level (pop that has moved in the last 12 months)	
Residential mobility by race/ethnicity	
Cost-burdened households (spend 30% or more of incomes on housing costs)	

Potential Data Sources by Domain

How to use this table

The purpose of this table is to make it easier for you to find datasets you can use to examine each domain (see more about Domains on page 15). Links are provided when available. There are also suggestions for data you could explore based on the data your agency collects, especially administrative data (information about the people your agency serves that is collected through the provision of services). To pull Town data from data.census.gov, choose County Subdivision as the Geography (then State, County, Towns).

Start with a few data sources you think will be insightful, analyze them, and let that guide other data you look at. Please note: ACS refers to the US Census Bureau American Community Survey. CTData Data Sheet is the spreadsheet we created and is linked in this table.

Data categories	Information Source	Include?
Overvie	ew of Catchment Area	
Size of Population	ACS, Table DP05 (<u>CTData data sheet 2024</u>)	
Population by Age	ACS, Table DP05 (<u>CTData data sheet 2024</u>)	
Population by Race	ACS, Table DP05 (CTData data sheet 2024)	
Population by Sex	ACS, Table DP05 (<u>CTData data sheet 2024</u>)	
Poverty	ACS, Table S1701 (CTData data sheet 2024)	
Poverty by Age	ACS, Table S1701 (CTData data sheet 2024)	
Poverty by Race & Ethnicity	ACS, Table S1701 (CTData data sheet 2024)	
Poverty by Gender	ACS, Table S1701 (CTData data sheet 2024)	
Average household size	ACS <u>Table S2501</u>	
Average family size	ACS <u>Table S1101</u>	
English proficiency by age	ACS <u>Table B16004</u>	
Languages spoken at home	ACS, <u>Table C16001</u>	
Single parent families	ACS, <u>Table B11003</u>	
Grandchildren under 18 living with	ACS, <u>Table S1001</u>	
grandparents		
Demographics of the population we serve	Database from intake forms	
[Your data]	[Your database]	
[Your data]	[Your database]	
	Employment	
Employment/Unemployment	ACS (CTData data sheet 2024)	
Opportunity youth ("disengaged" youth)	ACS <u>Table B14005</u>	
Self-employment	ACS Table DP03 (<u>CTData data sheet 2024</u>)	

Data categories	Information Source	Include?
Employment by educational attainment	ACS <u>Table S2301</u>	
Employment rate	ACS Table DP03 (<u>CTData data sheet 2024</u>)	
Size of commuting population	LODES data (OnTheMap)	
Number of people who started a new job	Quarterly Workforce Indicators (QWI), LEHD	
Number of job separations	QWI, LEHD	
Number of new jobs within firms	QWI, LEHD	
Average monthly earnings of employees	QWI, LEHD	
Employment challenges facing our population	Our needs assessment survey	
Number of people served by our program over time	[Your employment program intake numbers]	
Changes in the demographics of people we serve in our employment program over time.	[Your employment program intake data]	
[Your data]	[Your database]	
[Your data]	[Your database]	
Education &	Cognitive Development	
Educational attainment	ACS <u>Table S1501</u>	
Educational attainment by sex	ACS <u>Table B15002</u>	
Educational attainment by race or Hispanic Origin	ACS Table S1501	
Enrollment in preschool, college, etc.	ACS <u>Table B14001</u>	
Chronic Absenteeism: K-12	EdSight, CT State Dept of Ed	
Smarter Balanced Assessment	EdSight, CT State Dept of Ed	
High School Graduation Rates	EdSight, CT State Dept of Ed	
Kindergarten Entrance Inventory	KEI Results Spreadsheet, c <u>urrently bottom of</u> K-3 page, EdSight, CT State Dept of Ed	
Your data		
Your data		
	structure, & Asset Building	
Median household income	ACS Table S1903 (CTData data sheet 2024)	
GINI coefficient (how inequitable)	ACS Table B19083	
Cost-burdened households	ACS, calculated (CTData data sheet 2024)	
Housing units using gas for fuel	ACS Table DP04	
Business Formations Over Time	CT SOTS (via CTData)	
Households spending 35% or more on rent	ACS Table DP04	

Data categories	Information Source	Include?	
Median earnings by education, race and	ACS Table S2002		
ethnicity, occupation, industry, class of worker			
Receipt of SNAP in the past 12 months	ACS Table <u>B22001</u> and <u>B22002</u>		
Receiving social security benefits	ACS <u>Table DP03</u>		
Means of transportation to work	ACS <u>Table B08122</u>		
Calls to 2-1-1 for childcare services	<u>2-1-1 Counts</u>		
Number of people receiving food over time			
[Your data]	[Your database]		
[Your data]	[Your database]		
	Housing		
Renter and owner-occupied housing	ACS (CTData data sheet 2024)		
Housing Tenure	ACS (CTData data sheet 2024)		
Residential mobility by poverty level	ACS (CTData data sheet 2024)		
Residential mobility by race and ethnicity	ACS (CTData data sheet 2024)		
Total number of housing units, occupied v. vacant	Decennial Census via CTData		
Median rent	ACS (CTData data sheet 2024)		
Median home value	ACS (CTData data sheet 2024)		
Calls to 2-1-1 for landlord issues	<u>2-1-1 Counts</u>		
[Your data]	[Your database]		
[Your data]	[Your database]		
Health/Socia	al Behavioral Development		
Health insurance coverage	ACS <u>Table DP03</u>		
Medicaid enrollment	DSS via data.ct.gov		
Prevalence of high blood pressure	CDC <u>Places Data</u>		
Prevalence of diabetes	CDC <u>Places Data</u>		
Visits to the doctor for a routine checkup within the past year	CDC <u>Places Data</u>		
Binge drinking among adults	CDC <u>Places Data</u>		
Current smoking among adults	CDC <u>Places Data</u>		
Mental health is not good for more than 14 days	CDC <u>Places Data</u>		
Calls to 2-1-1 for mental health & addiction services	<u>2-1-1 Counts</u>		
Children with Asthma	DPH via data.ct.gov		
Mental Health and Substance Use Treatment Program Admissions	CTData SEOW Prevention Data Portal		

Data categories	Information Source	Include?			
[Your data]	[Your database]				
[Your data]	[Your database]				
Civic Engagement & Community Involvement					
Voting Age Population	ACS <u>Table B29002</u>				
Registered voters	CT SOTS Election data				
Number of voters who voted	CT SOTS Election data				
Percent of registered voters who voted	CT SOTS Election data				
How often volunteer	CPS Volunteering & Civic Life Supplement				
Belong to any group or association	CPS Volunteering & Civic Life Supplement				
Do something positive in the neighborhood.	CPS Volunteering & Civic Life Supplement				
Volunteer status	CPS Volunteering & Civic Life Supplement				
Did favors for/with neighbors	CPS Volunteering & Civic Life Supplement				
[Your data]	[Your database]				
[Your data]	[Your database]				

Data Analysis: Choosing Statistical Options

For the purpose of a Comprehensive Community Needs Assessment, data analysis involves asking questions about the data you have compiled and using simple statistical methods to explore your data. The words you use in your questions provide insight into the kind of analysis that could be helpful.

Analysis Options

Based on: Few, S. (2012.) Show me the numbers: Designing tables and graphs to enlighten. El Dorado Hills, CA: Analytics Press

What words do you use when asking questions about your data? What are you curious to know about?	These words mean you may be trying to explore	What are your analytical options?		
 Change Rise Increase Fluctuate Grow/Decline Decrease Trend 	How something changes over time (Requires data over time or multiple points in time).	 Calculate the difference (relative or absolute). Chart your data in a line chart to see how the data changes. 		
Larger/smaller thanEqual toGreater/less than	Comparing the size of something.	 Place in rank order in a table or a bar chart. Calculate the percentage difference (relative or absolute). 		
 Percent or percentage of total Share Accounts for X percent Rate or rate of total 	Comparing something to others as part of a whole.	 Calculate the percentage of the whole. Create stacked bar charts and compare them to each other. 		
Increases withDecreases withChanges withVaries withCaused/affected by	How something relates to something else.	 Calculate the correlation coefficient. Create a scatterplot with a trend line. 		

What words do you use when asking questions about your data? What are you curious to know about?	These words mean you may be trying to explore	What are your analytical options?		
 Frequency Distribution Range Concentration Normal curve, normal distribution, bell curve 	How something is spread out.	 Calculate the distribution (descriptive statistics). Calculate the range (the difference between the maximum and the minimum). 		
Number ofTotal	How many of something.	Counts (descriptive statistics).Bar charts.		
Plus or minusVarianceDifferenceRelative to	How something is different compared to something else.	 Maximum and minimum (descriptive statistics). Range (descriptive statistics). 		

Data Visualization Choices

Category	Definition	What words did you use to describe what you want to show?	Visualization Options	
Magnitude	Compare the size or amount of something. Typically totals or counts.	 Size Scale Quantity Amount Volume Comparison of amounts Difference 	Icon Array/ PictogramBar/Column (Single, Grouped)Lollipop	
Ranking/ Hierarchy	Focuses on the order of items in a list, where the position is more important than the actual number.	 Order Hierarchy Most Frequent Priority Importance Comparison Top 10 Rank 	Ordered Bar/ColumnOrdered LollipopDot PlotSlope	
Distribution	Highlights how data points are spread across a range, showing how often values appear within the dataset.	Spread/RangeFrequencyClustersDistribution	HistogramScatterBox Plot	
Change Over Time	Tracks how something changes over time, such as trends or shifts from one time point to another.	 Progression Growth/Decline Rise/Increase Decline/Decrease Change Fluctuation Over Time Patterns 	 Line Bar Slope Calendar Heat Map Gantt Timeline 	
Part-to- Whole	Breaks down a whole into its components to show the proportion of each.	 Composition Percentage Proportion Share Segment Breakdown Comparison of Parts 	 Stacked Bar/Column Pie/Donut Arc Tree Map 	
Spatial	Used when location matters	GeographicLocationProximityMapTown, City,Neighborhood	Choropleth MapSymbol MapDensity Map	
Flow	Displays the movement or transfer of something between places or states.	 Movement Steps Direction/Path Connection Process Sequence/Steps 	SankeyWaterfallsChord	

Data Visualization: Displaying Data in Your CNA

This section provides an overview of the kinds of charts you may consider when creating data visualization for your CNA. These examples also demonstrate good practices discussed during CTData workshop training sessions provided to the CT CAA Network. Please note: All of the following example charts were made in the free tool, <u>Datawrapper</u>.

Bar Charts

Bar charts can be used to show almost any kind of data. Some bar charts are simple, and others are more complex. Bar charts can be used to compare the sizes of something, how something changes over time, or how many of something. Here are a few options you can try.

Vertical or Horizontal Bar Charts

When using a vertical (bars go up and down) or horizontal (bars go across) bar chart, remember the number of bars should be limited. If there are 40 towns in your region, you should either show counties, a sampling of towns, or groupings of towns into the 5 CTs.*

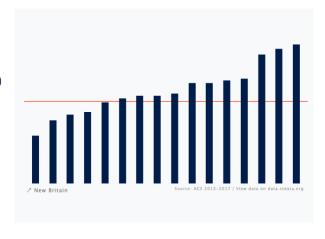
You also can compare <u>categorical variables</u>. This horizontal chart compares the percentage of people having a high school diploma or equivalent across race and ethnicity.

Always start your bar chart axis at "0."

*Note: The 5 CT's is a way to group Connecticut towns into 5 different types:

- Rural
- Suburban
- Urban Core
- Urban Periphery
- Wealthy

These categories are included in the <u>CTData Data Spreadsheet</u>.



Percentage Having a High School Diploma or Equivalent

2016-2020 ACS 5-Year Estimates for Residents Aged 25 Years and Older

White, Not Hispanic or Latino

Asian

90%

Black or African American

Two or More Races

American Indian or Alaska
Native

Hispanic or Latino

73%

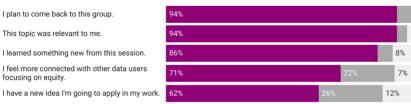
Chart: CTData Collaborative • Source: U.S. Census Bureau • Created with Datawrapper

Stacked Bar Chart

This chart shows a lot of data in a small space. In this example, survey data was analyzed, and a few items related to satisfaction are displayed. You can explore several survey items and draw helpful conclusions from one small chart. Use stacked bar charts when there are only 2-3 categories to stack. Be sure to normalize the data so the lines can

Feedback from the Equity in Data Community of Practice survey shows satisfaction as well as opportunities for improvement

Of those who filled out surveys, a majority of people responded "yes" to all of the items. The most challenging aspects of the group are creating a virtual space where people feel connected to others and to provide tangible ideas to apply, with around a quarter saying "not sure" to these.



There were 98 total responses, some sessions had 0 responses.

Chart: CTData (ctdata.org) • Source: CTData Equity in Data Community of Practice Feedback Survey • Created with Datawrapper

be compared. These are easily made in Excel or Datawrapper.

Bullet Chart

A bullet chart allows you to compare one dataset to another. In this case, Connecticut data is compared to one neighborhood's data. Your eye easily sees where the data is higher or lower in the neighborhood than in the State. Because this chart is less common, it may require an explanation about how to read it with annotations or notes in the visualization. This chart was made in Datawrapper, which easily makes bullet charts.

Adults in our neighborhood generally have more health conditions that put them at higher risk of poor outcomes from Covid-19 compared to Connecticut as a whole.

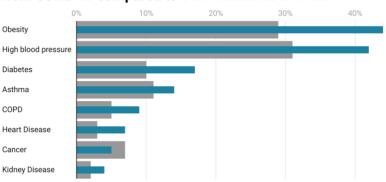


Chart: CTData Collaborative, ctdata.org • Source: CDC • Created with Datawrapper

Line Charts

Line charts are used to **show changes over time**. Here are a few examples.

Standard line chart

Line charts can easily show a few or many data points in one visualization. This chart shows the number of business registrations in Connecticut by month. You can conduct different calculations with your data to show annual registration numbers, change in registration year over year, and more.

New Connecticut Business Registrations have been increasing among women and people of color, but not among veterans.

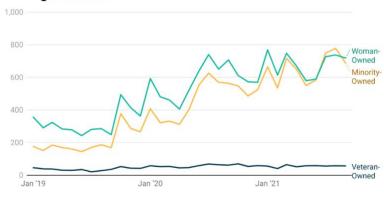


Chart: CTData · Created with Datawrappe

Slope graph

A slope graph effectively shows a change between two points in time. There may be variations that occur month to month in the percentage of residents who work from home, but when looking at the big picture of 2019 to 2021, the overall number matters more than the granular detail. If variations matter, a standard line chart is a better option. But this can still be a good option!

The percent of residents in Connecticut who worked from home tripled from 2019 to 2021

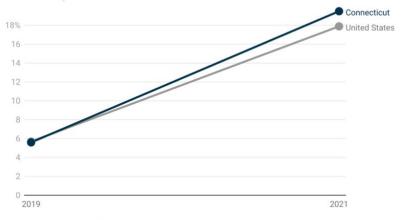


Chart: Connecticut Data Collaborative • Source: U.S. Census Bureau (Table S0801, 1-year estimates) • Created with Datawrapper

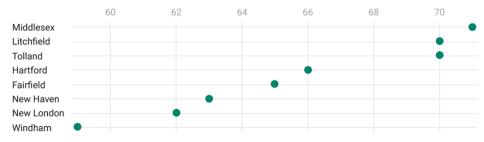
Points

Points or dots can show a lot of data in a small area. You can use them to show how things change over time, explore the difference between numbers, and more. Here are a few examples that can all be made easily in Datawrapper.

Dot plot

A dot plot is fairly similar to a bar chart. The patterns of the point allow you to compare numbers to one another. Unlike bars, the dot's position shows you the number instead of the size of the bar. You don't have to use a zero baseline for points, so

Middlesex County has the highest percent of registered voters that voted in 2016; Windham County has the lowest.



 $\textbf{Chart: CTData Collaborative, ctdata.org} \cdot \textbf{Source: CTData analysis of Connecticut Secretary of State Voter File} \cdot \textbf{Created with Datawrapper}$

you can zoom in on the data without accidentally misleading readers. People don't often encounter dot plots, so explaining how to read the chart can be helpful.

Connected dot plot

If you are trying to compare the difference between two sets of numbers, connected dot plots can be a helpful data visualization to use. People also may not be used to reading this kind of chart, so you should use your annotations, notes, and titles to help people understand what to make of the data.

People living with a disability were unemployed at a higher rate than people without a disability.

New London had one of the lowest rates of unemployment among those with a disability. The gap among those employed with a disability and without adisability was similar to those in the nearby counties.



 ${\it Chart: CTData, ctdata.org \cdot Source: US \ Census \ Bureau \ ACS \ 5-Year \ Estimates \ (Table \ C18120), 2021 \cdot Created \ with \ Datawrapper}$

Strip plot

These charts represent individual data points along the same line so you can quickly see the minimum, maximum, range, and where the median or mean may lie (in this chart, somewhere around 11). This can be helpful if you want to show the individual numbers of something (in this case, scores).

While Community Action Agency planners are expected to create the Community Needs Assessment, a data-heavy report, their comfort ranges significantly on data literacy skills.

How comfortable are participants with tasks and activities related to data literacy? Out of a possible high score of 28 on CTData's Data Literacy pre-workshop survey, scores ranged from a high of 26 to a low of -18. Respondents were asked about their comfort related to skills in the "buckets" of CTData's definition of data literacy.



Responses provided via the pre-Data Academy survey. There were 17 total responses. Chart: CTData, ctdata.org • Source: CTData • Created with Datawrapper

Scatterplot

A scatterplot can help you explore whether there may be some relationship between two sets of numbers. In this case, the CTData team wondered, "is there a relationship between the change in housing and the population change? If an increase in housing was related to an increase in population, we would see very few dots in the bottom right quadrant of this chart. Scatterplots should be used with caution and with clear notes and explanations.

Change in Population and Housing (Town)

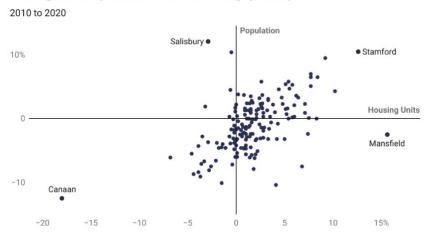


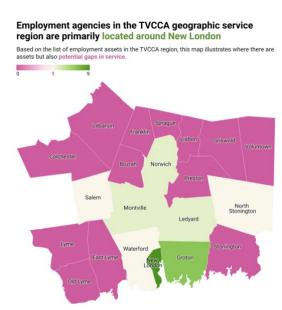
Chart: Connecticut Data Collaborative • Source: U.S. Census Bureau • Created with Datawrapper

Maps

Maps are a great way to visualize data when the location matters or when important observations can be made in geographic areas. In Datawrapper, you can easily choose to show only the data for your geographic service area so you can hone in on what is most important for your agency. Or, you can show a map of the entire state and draw attention to your region if you want to compare your geographic service area to the rest of the state.

Choropleth map

A choropleth map allows people to see patterns represented in data quickly using color. In this map, you can quickly see, based on the shading, that there's one town with a lot of something, and then the pink towns have the opposite of something. In this case, a pattern is shown fairly quickly: New London has a lot of employment agencies (dark green), while surrounding towns have zero employment agencies. If you use maps, be sure to think through colors and get feedback from readers about what they see. You want to communicate the insights you have gleaned without misleading readers.

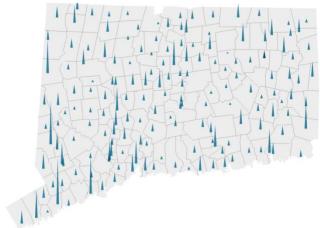


Symbol map

A symbol map uses the size of a shape instead of color to show the size of something. In this case, you can quickly see that there are towns where a lot of people do not have health insurance, and there are some towns where the triangle is almost invisible. If you try this kind of map, take care that the shapes don't overlap for towns that are important for your analysis. If they overlap too much, you may want to switch to a choropleth map.

While health insurance coverage has increased (see chart Y), the highest rates of people without insurance are in the southwestern part of Connecticut.

Data are from date to date, etc.



Map: CTData Collaborative, ctdata.org • Source: CTData (ACS 2014-2018) • Created with Datawrappe

Tables

Tables are an excellent way to visualize data when you want your audience to be able to look up individual values or when there is too much information to fit into one graph. Here are just a couple of examples, though the options are endless.

Simple table formatted for readability

Well-designed tables can be very useful to convey a lot of data in a small space. Notice in this table that the rows are "banded" or alternating in color. This allows you to easily find the number you are looking for. However, do not overuse tables! If you show a table, be sure to refer to it in your analysis. Do not simply copy the information in the narrative, but draw conclusions. For example: Fairfield County's population has increased the most since 2010, and their housing units

Table of Changes (County)

2010 to 2020

County A	Population	Housing Units	
Fairfield County	+4.4%	+4.8%	
Hartford County	+0.6%	+3.0%	
Litchfield County	-2.5%	+0.1%	
Middlesex County	-0.9%	+1.9%	
New Haven County	+0.3%	+2.0%	
New London County	-2.0%	+1.5%	
Tolland County	-1.9%	+5.0%	
Windham County	-1.7%	+1.1%	

Table: Connecticut Data Collaborative • Source: U.S. Census Bureau • Created with Datawrapper

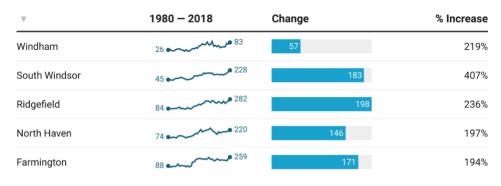
did, too. However, while Tolland County had the second-highest population decrease, they also saw the greatest increase in housing units. This might be related to ... (potential explanation).

Table with sparklines (small line charts) and bar charts

This table combines multiple data visualizations into one. With the bar chart, you can quickly see that Ridgefield increased the number of small businesses more than any other similar-sized town. You also see that South Windsor had the highest change, increasing new businesses by 407%. The visuals in this chart, which is full of information, can support the insights you wish to discuss.

The actual number of new businesses in the town of Windham increased by a smaller number than those in similar-sized towns. However, the percentage of new businesses was higher than two of them.

While Ridgefield leads the way in the absolute number of new businesses, South Windsor increased the most among similar-sized towns.



 $Table: CTData\ Collaborative,\ ctdata.org \cdot Source:\ SOTS\ Business\ Registration\ Data \cdot Created\ with\ Datawrapper to the control of the$

Table heat map (color shows highs and lows of the numbers)

Change in Race/Ethnicity

2010 to 2020, by Five CTs

Region	American Indian and Alaska Native	Asian	Black or African American	Hispanic or Latino	Native Hawaiian and Other Pacific Islander	Two or More Races	White	Other
Rural	0%	+25%	+3%	+50%	+32%	+163%	-9%	+289%
Suburban	-13%	+46%	+19%	+58%	+10%		-8%	+218%
Urban Core	-12%	+21%	+1%	+14%	+4%	+70%	-20%	+63%
Urban Periphery	-6%	+17%	+14%	+39%	-10%	+112%		+122%
Wealthy	-9%	+47%	+14%	+53%	-10%	+237%	-7%	+195%
Grand Total	-7%	+27%	+8%	+30%	+2%	+131%	-10%	+122%

Table: CTData Collaborative • Source: U.S. Census Bureau • Created with Datawrapper

This table has analyzed the change in race and ethnicity across the state from 2010 to 2020 by grouping each town into the 5 CT's Categories (see explanation on page 24). The heat map uses color to draw our eyes to the biggest changes – both increases and decreases. We quickly see that people who identify as an "other" racial identity increased the most of any category, and they increased the most in rural areas of the state. That is followed by people who identify as two or more races in the "wealthy" areas of the state. Conversely, we see that the white population decreased the most in the "urban core" areas.

Citing Information Sources in CNA

What should you cite?

It is good practice to cite any information that is not your own. For example, quotes should always be cited. In addition, any *idea* that is not yours should be cited. For example, if you read an article about X and Y contributing to underemployment, you must cite that article. **But** if you discover in your analysis that X and Y contribute to unemployment, you do not need to cite that. However, including sources that support your conclusion will strengthen your finding.

You are using a lot of data in this report, and while you will need to include data tables in the Appendix, that is different from a citation. You also should include these data sources in your citation list. Creating citations is easy if you use the built-in Word References ribbon. Including thorough citations will enhance the trustworthiness of your report. Reports without thorough citations are viewed skeptically by readers.

By citing your sources, people will be able to review the information you provide for further exploration, to analyze themselves, or to check whether you presented an idea or number accurately. Citations make this process easy and are simply part of report writing.

You can cite the CTData Data Spreadsheet this way:

Connecticut Data Collaborative (2024). Data file compiled for Connecticut's Community Action Agencies from the U.S. Census Bureau's American Community Survey 5-Year Estimates.

Recommended citation form: APA

Human services typically use American Psychological Association (APA) format. You can either enter the citations manually (which, for the amount of data in this report, is a lot of work) or enter them with the built-in tool in Word (the References ribbon).

See the Works Cited at the end of this document to see examples. Also, in the sample content, notice the format of the citations, which were added using the built-in citation tool.

Utilizing the built-in citation tool in Word

Create a Works Cited List at the click of a button and preserve the links for use in other documents. To use:

Insert

Layout

References

als Next Footnote >

Show Notes

- Go to the "References" ribbon at the top (near Layout and Mailings)
- Click "APA from the dropdown
- For a new citation, choose "Insert Citation."
- To add the same citation again, choose "Citations." A box will appear on the right-hand side. Double-click the citation in the spot you want it to go. If you are adding a quote and there are page numbers, right-click on the arrow once you have added the citation, choose "Edit this citation," and add the page number(s).

Mailings

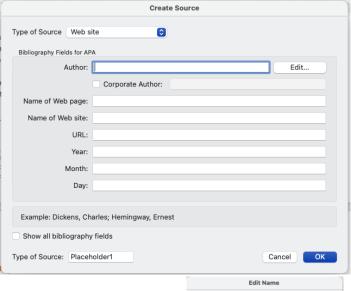
Smart

Review

Researcher

New citation

- From the drop-down, choose the Type of Source (you will typically select "document from website" or "website")
- If there is an individual name, write the last name and first initial (Smith, S.). If there are multiple authors, choose "Edit" and add each name, then choose the "plus" button. Hit OK
- If the author is an organization, click
 "Corporate Author" and type the name.
- Hover over the website tab and type the website's name. For Example: Mission, vision, and values. Only capitalize the very first word unless it is a proper name
- Add the name of the website. For example: Team, Inc
- Look around for a date. Scroll to the bottom of the website to see if there is a copyright with the date (which is common). If there is no date, in the year type: n.d.
- Click "Show all bibliography fields." For websites that have content that may change (such as an "About" page), add the date you retrieved the information (type in the year, then the word of the month) because website content changes.



Grammarly

Insert Citations

Citation

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Bibliography v

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Manual APA Citations

The general format for online resources is:

Author (date). *Title*. Retrieved from (website not underlined)

If you aren't sure how to cite something, refer to the APA online Style and Grammar Guidelines.

Online data

U.S. Census Bureau (2011). Selected housing characteristics, 2007-2011 American Community Survey 5-year estimates. Retrieved from http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml? Pid=ACS 11 5YR DP04

Primary data collected

For Primary data, you will generally only cite in-text. You are including information about your primary data collection in your methodology section (Template Section F3) as well as the table(s) in the Appendices (H1a, H2, H3).

Here are some examples of how you can cite in the text:

- Analysis of <organization>'s January 2023 customer satisfaction surveys showed that...
- <organization>'s January 2023 customer satisfaction surveys showed that respondents...
- customer satisfaction surveys conducted by <organization> between November 2022 and January 2023...
- organization>'s administrative records demonstrate an increased need in...

Articles, research, etc., from online

TEAM Inc. (n.d.). *Basic needs & other help*. Retrieved January 2023, from Team Inc.: https://teaminc.org/basic-needs-other-help/

Treuhaft, S., & Karpyn, A. (2010). The grocery gap: Who has access to healthy food and why it matters. Retrieved from The Food Trust: http://thefoodtrust.org/wp-content/uploads/2022/06/grocerygap.original.pdf

CNA Examples

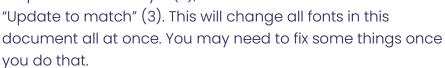
This section provides examples of selected parts of the CNA Template using information about Connecticut's Community Action Agencies.

Please note that in terms of design, we tried to use "good practices" for this example. Some of the content we provide would be longer if this were a full report (especially once we get into Section C and beyond).

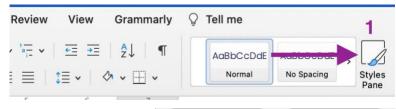
Please refrain from changing the section numbers and letters (such as B3a, which is Key Findings on the Causes and Conditions). These numbers align with the Rubric. You can change the headers (which we did below, you can see if you compare our sample headers to the Template, some are different).

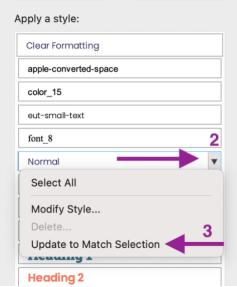
We have used a hierarchy of headers to help clearly define sections of this report. If you would like to change them, you can adjust them. Our hierarchy is listed on page 2 of the template, where you can change the styles across the entire report.

If you choose to change styles, simply adjust the fonts listed on page 2 of the template, open the Styles Pane (1) (in the Home ribbon), click on the right-hand drop-down of the Style (2), and choose



A Note on Fonts and Formatting: To adjust the template headers to your organization's fonts and brand colors, use the "Style pane" in the "Home Ribbon." If you'd like to use the fonts we have used, you can install the Poppins font here and the Roboto Slab font here. You can see how to do this in the Template Training video (session 1, session 2).





B. Executive Summary

B.2. About TEAM, Inc.

TEAM, Inc., one of Connecticut's nine Community Action Agencies, is a 501(c)3 based in the south-central **region** of Connecticut. We seek to "strengthen our community by educating, supporting, and empowering individuals and families" (TEAM, Inc., n.d.). We believe that as we provide support to individuals and families living in poverty, not only will they thrive, but our communities and region will, too.

The categories of services we provide include:

<u>Children & Families</u>: TEAM serves children (Prenatal – Age 5) of all abilities and their families, and services include childcare, preschool, and a Diaper Bank. (TEAM, Inc., n.d.).



<u>Elderly Services:</u> TEAM provides services to assist the elderly to live more independently within their home and community, including Meals on Wheels, volunteer caregivers, medical transportation, and more (TEAM Inc., n.d.).

<u>Energy Assistance:</u> Energy assistance is a program that helps people having difficulty paying the cost of heating their homes (TEAM, Inc., n.d.).

<u>Support Services:</u> TEAM provides financial assistance for families to "address individual or family needs, basic needs, and areas of economic or social need," which includes "the full array of eligible human services programs... throughout TEAM's service region" (TEAM Inc., n.d.).

B.3. Needs Assessment Summary

We sought to explore data with these questions:

- What are the conditions and causes of poverty in our catchment area, and how have they changed over time?
- Which conditions and causes of poverty are most impactful to people living in our region?
- What assets and service gaps exist around the prioritized needs (conditions and causes of poverty) in our region?

Based on these questions, we identified 5 priority needs that we believe are crucial to addressing poverty and the effects of poverty in our region.

Priority Issue 1: Employment that does not pay enough to meet basic needs among certain demographic groups.

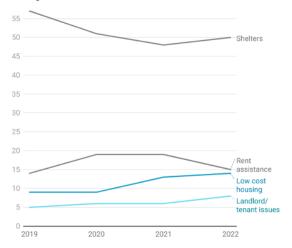
[Please note: in this section, we have fabricated some data points. These are called out with brackets and an asterisk.]

Some of the challenges that we found through our exploration include the following:

- Food insecurity: In our Needs Assessment survey, 61% of respondents said their household ran out of food, an increase from [55% in our survey in 2017*].
- Unable to pay for housing: Housing-related requests have increased in our region in the area of low-cost housing (2-1-1 Counts).
 Additionally, 48% of people who rent in New London are cost-burdened, meaning they pay 30% or more of their income on rent (US Census Bureau ACS 5-Year Estimates, Table DP04).

2-1-1 requests in New London County related to housing.





Top Request Categories for New London County by year
Chart: CTData (ctdata.org) • Source: 2-1-1 Counts • Created with Datawrapper

In general, people who live under the poverty line are working. According to the American Community Survey, of those living under the poverty level in New London County in 2021, 74% were employed, while only 26% were unemployed (U.S. Census Bureau American Community Survey 2021 5-Year Estimates, Table B23024). In our 2020 survey, 47% of respondent households include employment income as at least one source of household income. In addition, we found that 62% of our respondents had incomes below \$25,000. Through our exploration, we found that some groups seem to be faring worse, including people living with disabilities, people who are in the middle of life, and people without high school degrees.

These findings suggest a need to both ensure that jobs in our region provide wages that meet their basic needs, as well as for targeted job training supports to these groups. See our full exploration on page X.

Priority Issu	ie 2:
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(Continue in a similar format for all the issues, with 1-2 paragraphs for each.)

B.3.a. Key Findings on the Causes and Conditions

Here are our high-level findings about the causes & conditions of poverty in our geographic catchment area. We explore the data underlying these causes and conditions in section E (see pages X-Y).

Conditions	Causes
X percentage of community residents are considered "working poor" (employed yet not able to adequately support themselves or their families)	 Long-term unemployment leading to acceptance of low-wage part-time work. (See Section E.X.) Cost of living in the catchment area is high (\$XXX) compared to the average wage earned (\$X). Growth of specific industries in the service area and their intensive use of part-time work (retail, leisure/hospitality, educational and health services, and professional and business services). Hours working at multiple part-time jobs leaves few opportunities to obtain the skills and education required to compete in higher-paying jobs. (See Section E.X.)
Continuing high rate of students (X%) in our catchment area leave high school before graduation, reducing their annual earning potential by \$xx,xxx compared to high school graduates and by \$xx,xxx compared to those with a college degree.	 Working youth – students are economically involved in the family's financial stability. Schools in the catchment area are underfunded, overcrowded, and lack supportive programs, such as tutoring, mentoring, vocational/tech training options, flexible schedules for working students, etc. X% of children in the catchment area reside in poverty. They encounter more challenges at school and home, limiting the chance of educational success: instability and stress, poor nutrition and health, and brain development and cognition. Negative school culture/environment: lack of safety and orderliness, irrelevant curriculum, staff lack cultural sensitivity, parent involvement isn't encouraged, etc. Teen pregnancy and parenthood. Frustration and loss of hope as access to higher education is blocked due to affordability and potential debt burden.
X% of service area residents lack reliable transportation	Inadequate or unreliable public transit system: state bus fleet is old and subject to breakdowns, shelters are in

Conditions	Causes
limiting access to jobs, quality groceries, healthcare, affordable goods, and schooling.	 disrepair, unpredictable arrival/departure times, lack of routes to suburban centers where basic amenities are located, transit deserts in poor communities. Purchase and maintenance costs of personal vehicles are high/not affordable. Cost of living in the same area as the workplace is not affordable. Outdated public policy and lack of advocacy for change/improvement.
Increasing number of homeless teenagers in our catchment area.	 Lack of follow-up services for those aging out of foster care. Lack of affordable housing developments. Fewer shelter beds open because X shelter closed down.
High percentage (X%) of low-income renters in the catchment area experience severe housing cost burden (50% or more of income dedicated to housing costs)	 Significant increase in the cost of rent over the past 3 years (average increase of \$X median gross rent) Housing assistance for low-income renters has decreased (X number of programs reduced/eliminated in the last 10 years). Supply of affordable housing has not kept pace with the population increase.
X percentage of residents in XYZ neighborhood face health equity problems, including high rates of childhood obesity, diabetes, and asthma.	 Socioeconomic barriers – high poverty rate, low educational attainment rate, lack of health insurance, lack of quality medical and health services in the community, or language barriers. Lack of timely preventative care for children. Families do not practice wellness checks or regularly visit a pediatrician (visit ER when children are sick). Food deserts, healthy meals (protein- and nutrition-dense) less affordable than high fat, nutrition bereft options. Less access to physical activity facilities. Poor air quality.
Increase in senior citizens experiencing hunger/food insecurity	 Seniors lack mobility and food deserts within the catchment area (unable to access affordable and nutritious food). Rising food prices. Limited/fixed incomes and lack of retirement savings combined with the need for increased health care (high cost of health care)

Conditions	Causes	
	Low senior participation rate in SNAP (due to mobility	
	barriers, the complicated application process, and	
	perceived stigma associated with assistance).	
	Additional expense of grandparents raising grandchildren.	

B.3.b. Table of Prioritized Issues & Service Gaps

Based on our data exploration in section E (see pages X-Y), we have identified the following service gaps as priorities for our agency.

Example 1:

#	Prioritized Issue	Service Gap
1	Early Childhood Education	Preschool programs in our catchment area have long waiting lists, and many programs are expensive, creating a need for affordable, accessible, and high-quality preschool opportunities for low-income families.
2	Education	Lack of support/intervention strategies for low-income students at risk of dropping out of high school
3	Food Security	Access to nutritious, affordable, and high-quality food is a challenge in our catchment area's low-income neighborhoods, communities of color, and rural sections (Treuhaft & Karpyn, 2010)
4	Health/Social Behavioral (Seniors & Disabled)	The low-income senior and disabled population in our community is growing, and current homemaker services are not sufficient for the support needed by these residents to maintain independence and self-sufficiency.
5	Housing- Homelessness	Homeless youth cannot meet their basic needs due to a lack of economic assets and safe, affordable permanent housing.
6	Employment	Our community lacks substantial programs to provide employment support for people with criminal histories.

Example 2:

#	Prioritized Issue	Service Gap
1	Job Skills and	Lack of affordable vocational trade training opportunities
'_	Training	
		Individuals and families in catchment area experience severe
	Affordable Housing	housing cost burdens due to the shortage of affordable housing
2	Allorauble housing	coupled with a long wait list for Section 8 and other housing
		subsidies.

	English Language	Insufficient ESL classes in the community ¹
3	Proficiency	
		Access to resources such as medical, retail, social services, etc., is a
4	Transportation	challenge to our catchment area's low-income population due to
		transportation barriers.
5	Physical and	Affordable specialty health care, including behavioral health care, is
5	Behavioral Health	limited across the catchment area.

C. Introduction to Alliance for Community Empowerment

C.1. History & Background

"Alliance for Community Empowerment...was designed as the anti-poverty agency for the Greater Bridgeport Area in September of 1964 by the Office of Economic Opportunity. Today, the Alliance aims to work with people toward the eradication of the 'paradox of poverty in the midst of plenty in this nation.' Alliance for Community Empowerment serves more than 35,000 individuals annually through its broad range of services in an eight-town area, covering Bridgeport, Easton, Fairfield, Monroe, Norwalk, Stratford, Trumbull, and Westport, Connecticut" (Alliance for Community Empowerment, n.d.).

"Alliance for Community Empowerment's sole mandate is to assist the underserved" (Alliance for Community Empowerment, n.d.). We focus



our "efforts and resources on identifying and eliminating the causes of poverty rather than only dealing with its effects" (Alliance for Community Empowerment, n.d.). As such, our "actions are directed towards promoting appropriate institutional change and enabling the underserved to become self-sufficient contributors to society" (Alliance for Community Empowerment, n.d.).

C.1.b. Programs & Services

Alliance for Community Empowerment offers a range of programs and services designed to meet immediate needs and support individuals and families so those who can are able to be self-sufficient.

EARLY LEARNING DIVISION

By "providing high-quality services to pregnant women and children ages 0-5, we focus on ensuring children are nurtured in a learning environment that develops cognitive, social-emotional, and physical skills" so they can thrive (Alliance for Community Empowerment, 2022). In our 2020-2021 program year, we provided services to a total of 589 children (Alliance for Community Empowerment, 2022).

YOUTH SERVICES: LIGHTHOUSE IN THE COMMUNITY

Alliance serves as a "provider for the City of Bridgeport's Lighthouse before school (seven sites), after school, and summer programs located at ten (sic) schools throughout the city of Bridgeport..." (Alliance for Community Empowerment, 2022). In 2020-2021, we served over 1,600 students over the course of the year (Alliance for Community Empowerment, 2022).

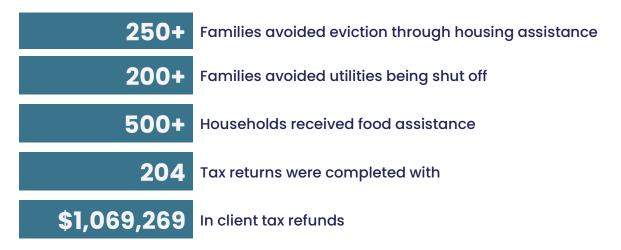
ENERGY ASSISTANCE

Our "Energy Assistance program is designed to assist households with their heating costs for their gas, electric, and deliverable fuel heating sources. This program also assists with heating system repairs or replacements and yearly maintenance costs" (Alliance for Community Empowerment, 2022). In 2021, we supported 10,000 households to obtain heating assistance (Alliance for Community Empowerment, 2022).

SELF-SUFFICIENT SUPPORTIVE SERVICES

The "Alliance Supportive Services Department provides help for eligible households and individuals" (Alliance for Community Empowerment, 2022) in our geographic service area to obtain resources and services to meet their needs and become self-sufficient" (Alliance for Community Empowerment, 2022).

Important to this work are our partnerships. We partner "with over 200 organizations in Connecticut to provide clients with support in the areas of housing, transportation, employment services, education (GED), child support, and much more" (Alliance for Community Empowerment, 2022). Through these partnerships:



(Alliance for Community Empowerment, 2022)

C.2. Assessment Process Background

[These two paragraphs have been fabricated for example purposes.] has been For this CNA, CRT engaged in multiple primary data collection activities and utilized available public data to deepen our understanding of the conditions and causes of poverty, the assets that exist to address those, and the gaps or needs that need to be addressed in our geographic region.

We created a Community Needs Assessment Workgroup (see Section C2a below), which met every other week from October 2019 to June 2020. We also were able to engage with an existing Community Advisory Board (CAB) for input into the design and also in collaborative analysis sessions. Finally, we organized several Data Walks to explore the data and prioritize the issues that we found in the data.

PRIMARY DATA COLLECTION

We collected data from our clients, stakeholders, and partners about the needs and assets they have and observe. Our collection included surveys, focus groups, interviews, and a compilation of our administrative data. [Note: This is based on information in CRT's 2020 CNA. Numbers that are X's mean that the information was not included in the original report.]

- **Board and Staff Surveys:** CRT engaged Wipfli to conduct surveys with the board and staff. A total of 80 surveys were filled out, representing X% of board members and X% of staff. (Additional information about this data can be found in section G.3. and Table H.1.a.)
- Stakeholder Interviews: Wipfli interviewed several different "levels" of stakeholders. These interviews asked stakeholders to identify the assets and gaps in services they are seeing. A total of 11 people were interviewed. (Additional information about these stakeholders can be found in section G.3. and Table H.2.)
- Community Needs Assessment Survey: From January to April 2020, we collected paper (mailed) and online surveys from people with low incomes within the 40-town CRT geographic service area. A total of 3,000 surveys were sent to clients, with a total of 443 surveys completed. (Additional information about this data can be found in section G.3. and Tables H.1.a. and H.3.)
- Customer Satisfaction Survey: This paper survey was collected in person from our Congregate Meal Sites, housing and homeless services, case management services, and veterans and their families. A total of X surveys were completed between February and March 2020. (Additional information about this data can be found in section G.3. Tables H.1.a. and H.3.)
- Focus Groups (this section is fabricated for example purposes): In March and April 2020, we held focus groups on health, education, employment, childcare, transportation, and food access. Participants were invited who were former clients of CRT from 2019. (Additional information about this data can be found in section G.3. Tables H.1.a. and H.3.)

- Service enrollment and waitlist data (this section is fabricated for example purposes): Data were analyzed for each program to identify how service enrollment has changed over the past 6 years. (Additional information about this data can be found in section G.3. Tables H.1.a. and H.3.)
- Data Walks (this section is made up): The data we compiled (both primary and secondary) was shared in 6 Data Walks across our region. These sessions were advertised in our agency locations and many of our partner's service locations. We sought to engage community members who may be facing some of the conditions and causes of poverty, even if they did not qualify for services at this time. Over 45 people engaged in these sessions.

SECONDARY DATA

In addition to the wealth of primary data collected, we utilized a wide array of secondary data sources. (See more in Section H.I.b.) Some of the key data sources we looked to include:

- U.S. Census Bureau, American Community Survey (ACS). This ongoing survey (conducted online, by paper, and via phone) collects from individuals within Connecticut each month on demographics, housing, income and employment, health insurance coverage, and other topics. (Learn more <u>about this survey here</u>.)
- Centers for Disease Control, Behavioral Risk Factor Surveillance System survey (BRFSS).
 This survey (conducted over the phone) collects data about "health-related risk behaviors, chronic health conditions, and use of preventative services" (Centers for Disease Control, n.d.).
- 2-1-1 Connecticut, <u>2-1-1 Counts</u> service request data. This data displays the categories of care requested from 2-1-1 by zip code, county, school district, etc.
- CTData, <u>Connecticut SEOW Prevention Data Portal</u>. This data portal compiles over 200 indicators relevant to substance use/misuse, mental health, suicide, gambling, and social determinants of health.

C.2.a. Community Needs Assessment Workgroup

"Pierce County Human Services Department (PCHS) Community Action Programs (CAP) formed a workgroup to complete this CNA. The workgroup members are current CAP staff, including our Results Oriented Management and Accountability (ROMA) certified implementer, to ensure compliance with ROMA principles. Members of our Citizen's Advisory Board (CAB) also participated in reviewing survey documents and received updates throughout the CNA process" (Pierce County Human Services, 2021, p. 10).

"The workgroup developed a timeline, goals, and overall approach. This included a review of the previous two CNAs completed in 2015 and 2018. The 2015 CNA was done in partnership with Metropolitan Development Council (MDC) and was a comprehensive community data

collection, review, and survey effort. The 2018 CNA surveyed current clients and took a self-assessment approach. Here is a link to the <u>Community Needs Assessment</u> completed in 2018" (Pierce County Human Services, 2021, p. 10).

[This is completely made up and not included in the Pierce County report.] The workgroup met with the CAB on an as-needed basis and ultimately convened 6 times during the process. The workgroup recommended data collection strategies be brought to the CAB, who made suggestions for ensuring the collection would be viewed positively by the individuals who engaged in that process. In particular, they made significant suggestions for changes in our approach to engaging people who had lived in poverty or were currently living in poverty, identifying questions and wording questions that would feel most respectful.

"CAP staff sought input from and shared progress during monthly meetings with the Human Services Department Leadership and the Department Director and written progress reports to the Pierce County Executive and his Cabinet members. Staff also sought input and participation from the Citizens Advisory Board membership. All feedback and input was shared with the CNA Workgroup, and some ideas are incorporated herein" (Pierce County Human Services, 2021, p. 26).

Participants in the CAB were members of or received services from community-based organizations, faith-based organizations, the private sector, the public sector, and educational institutions, with greater representation from participants from community-based organizations.

D. Community Profile

Population

A total of 443,974 people live in Alliance's service area. A third of this service area lives in Bridgeport.

Race and Ethnicity

The racial and ethnic makeup of the towns in Alliance's service area vary. Bridgeport is the most racially and ethnically diverse, with 32% of residents identifying as Black and 42% identifying as Hispanic or Latino. In contrast, Easton has the most homogenous population, with 87% of residents identifying as white alone.

Populations of Towns in Alliance Geographic Service Region

Town	Total Population
Bridgeport	148,529
Easton	7,602
Fairfield	61,737
Monroe	18,927
Norwalk	90,821
Stratford	52,360
Trumbull	36,830
Westport	27,168
Total Service Area	443,974

Created with Datawrapper

Share of population by Race and Ethnicity of Towns in Alliance Geographic Service Region

Town	Asian alone	Black alone	Hispanic or Latino	Some other race alone	Two or more races	White alone
Bridgeport	4%	32%	42%	1%	2%	18%
Easton	1%	3%	3%	2%	4%	87%
Fairfield	4%	2%	7%	1%	2%	84%
Monroe	5%	3%	9%	0%	4%	79%
Norwalk	5%	12%	29%	1%	2%	51%
Stratford	1%	20%	20%	0%	2%	56%
Trumbull	7%	4%	9%	1%	3%	76%
Westport	6%	1%	7%	1%	2%	84%
Total Service Area	4%	10%	16%	1%	3%	67%

Source: Connecticut Data Collaborative (2022). Data file compiled for Connecticut's Community Action Agencies from the U.S. Census Bureau's American Community Survey 5-Year Estimates. • Created with Datawrapper

Please note: "Alone" means that people chose only one race for their racial identity. "Two or more races" are when people choose multiple racial identities. This also means that regardless of the race(s) chosen, people who choose "Hispanic or Latino" ethnicity are only counted in that category.

Over the last 10 years, Alliance's service area has steadily become more diverse. Between 2011 and 2021, there has been a decline in the white population in all towns. This decrease ranges from 4% to 14%, with the average decrease at 9%. Monroe had the most significant decrease at 14%, with 10% of that change occurring between 2016 and 2021.

People living in poverty

The share of the population living under the poverty line varies greatly in the Alliance geographic service region. The share of those living in poverty decreased in Stratford, Westport, and Monroe but increased in all other towns.

Percentage living in poverty by town in 2021 compared to 2016

The arrow indicates whether the percentage living in poverty increased or decreased from 2016 to 2021.

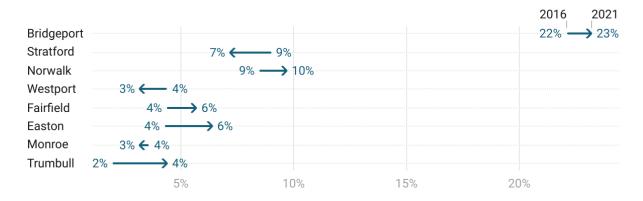


Chart: CTData (ctdata.org) • Source: Connecticut Data Collaborative (2022). Data file compiled for Connecticut's Community Action Agencies from the U.S. Census Bureau's American Community Survey 5-Year Estimates. • Created with Datawrapper

Of those living in poverty, most are female, as indicated in the chart below. However, the share of people who are living in poverty by race varies widely across the region. While much of this is due to the variation in racial diversity in these towns, understanding the variation across the region can help organizations that serve these individuals to adapt our services based on cultural differences between and among these groups.

Share of those in poverty by gender

Females in the Alliance geographic catchment region make up a greater share of those in poverty than males, with the exception of Easton.

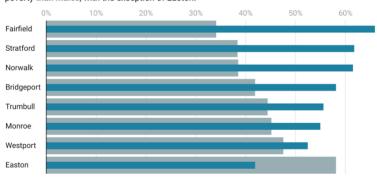
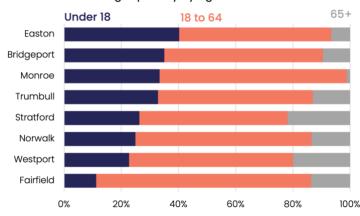


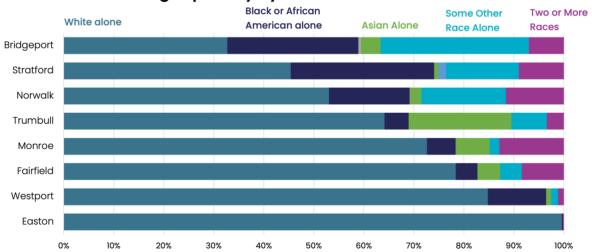
Chart: CTData (ctdata.org) • Source: Connecticut Data Collaborative (2022). Data file compiled for Connecticut's Community Action Agencies from the U.S. Census Bureau's American Community Survey 5-Year Estimates. • Created with Datawrapper

Share of those living in poverty by age



Source: Connecticut Data Collaborative (2022). Data file compiled for Connecticut's Community Action Agencies from the U.S. Census Bureau's American Community Survey 5-Year Estimates.

Share of those living in poverty by race in 2021



Source: Connecticut Data Collaborative (2022). Data file compiled for Connecticut's Community Action Agencies from the U.S. Census Bureau's American Community Survey 5-Year Estimates.

E. Priority Issues

E.1. Domain 1: Employment that does not pay enough to meet basic needs among certain demographic groups.

Exploration of TVCCA data, including data from their 2020 CNA submission. Please note that since this is a sample and not based on a real exploration, there is less information or data than you would typically want to put when you are making your case about these priority issues. Also, in this section, we have fabricated some primary data (data that "we" collected). These are called out with brackets and an asterisk.

What are the conditions related to this finding?

Food insecurity: Unable to feed families

Respondents to the TVCCA Needs
Assessment survey in February 2020
highlighted access to healthy food as one of
their biggest challenges. In open-ended
responses, four people indicated that the
cost of food was an issue for them. One
person noted, "\$16 a month for SNAP doesn't
go far." Additionally, 61% of survey
respondents said that their household runs
out of food before the end of the month, up
from Y% in our survey in 2017 (Needs
Assessment survey). While there are benefits
that cover some food costs, many families do
not have the food they need to be healthy.

Among TVCCA survey respondents, the conditions of poverty that were most troublesome were credit card debt, access to healthy foods, and finding decent, affordable housing.

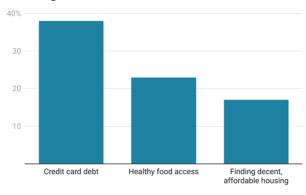


Chart: CTData (ctdata.org) • Source: TVCCA Needs Assessment Survey • Created with Datawrapper

Our Needs Assessment survey also asked whether people were enrolled in SNAP, and only 46% said they were. Since 62% of the survey respondents indicated their incomes were below \$25,000, we estimate that even among people who utilize our services, there are people who have become eligible for SNAP but may not be aware of their eligibility.

Unable to pay for housing

People who do not earn enough income struggle to pay for housing. We found through our Needs Assessment survey that almost 20% of respondents had trouble finding decent housing, and an additional 8 people indicated similar challenges through the "other" option, such as

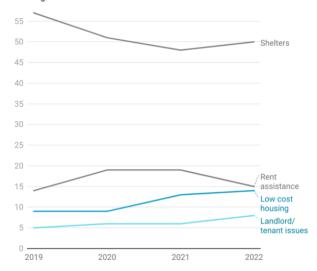
"finding handicap housing," "eviction," and "money to pay rent." This is (up/down) from the 2017 survey at X%.

According to Connecticut 2-1-1 data, requests related to housing have been increasing since 2020, with 25% requesting information about housing and shelter in 2020 and 32% requesting in 2022 (2-1-1 Counts).

Additionally, in New London County, 48% of people who rent pay are cost-burdened, paying 30% or more of their income on rent (US Census Bureau ACS 5-Year Estimates, Table DP04). This number has decreased slightly from 2016, when that number was 50%.

2-1-1 requests in New London County related to housing.

Requests for low cost housing increased the most, followed by requests relating to landlord or tenant issues.



Top Request Categories for New London County by year
Chart: CTData (ctdata.org) • Source: 2-1-1 Counts • Created with Datawrapper

Other challenges

In the chart noted above, credit card debt was the challenge faced by the largest number of respondents, at 38%. Various research studies find that debt, specifically credit card debt and payday loans, cause more stress and trouble than paying other bills (<u>The Journalist's Resource</u>, December 8, 2020).

What are the causes related to this finding?

Overall, the unemployment rate increased over the last few years, according to the Connecticut Department of Labor. There was a spike in 2020 in unemployment, but the rate in towns in TVCCA's geographic service region has returned almost to pre-pandemic levels. This suggests that unemployment on its own is not primarily responsible for the conditions of food insecurity, housing instability, etc.

In general, people who live under the poverty line are working. According to the American Community Survey, of those living under the poverty level in New London County in 2021, 74% were employed, while only 26% were unemployed (U.S. Census Bureau American Community Survey 2021 5-Year Estimates, Table B23024). In our 2020 survey, 47% of respondent households include employment income as at least one source of household income. In addition, we found that 62% of our respondents had incomes below \$25,000.

This leads us to explore the possibility that the jobs available in our region do not provide enough income to ensure people do not experience the conditions listed above.

Additionally, it is possible that there needs to be improved matching of employment program job skill training to skills needed among the region's employers.

The unemployment rate increased in every town in the region in 2020 and has been decreasing since.

The unemployment rate is close to pre-pandemic levels in every town in the TVCCA Geographic Catchment Region.

Date	2019 — 2022	Change in Unemployment
Lisbon	3.8% 5.6%	1.80%
Lyme	2.6% 3.9%	1.30%
New London	5.0% 6.3%	1.30%
Salem	3.3% 4.5%	1.20%
Sprague	4.1% 5.3%	1.20%
Preston	3.7% 4.8%	1.10%
Ledyard	3.0% 4.1%	1.10%
Griswold	4.2% 5.3%	1.10%
Norwich	4.1% 5.1%	1.00%
Montville	3.7% 4.7%	1.00%
Old Lyme	3.2% 4.2%	1.00%
Waterford	3.5% 4.4%	0.90%
North Stonington	3.2% 4.0%	0.80%
Groton	3.2% 3.9%	0.70%
Voluntown	4.0% 4.7%	0.70%
East Lyme	3.5% 4.2%	0.70%
Stonington	3.0% 3.6%	0.60%
Lebanon	3.5% 3.9%	0.40%
Colchester	3.1% 3.3%	0.20%
Franklin	3.8% 4.0%	0.20%
Bozrah	3.3% 3.4%	0.10%

Labor Force Data. Labor Force reports the size of the civilian noninstitutionalized labor force, by category. Data can be viewed by annual or monthly rate.

Table: CTData (ctdata.org) Source: Connecticut Department of Labor via CTData Created with Datawrapper

Jobs that don't pay living wages for people with disabilities

Our Needs Assessment Survey found that one of the biggest reasons people could not get or keep a job was physical or mental disability.

In New London County, 48% of those living with a disability were in the labor force in 2016 and 2021 (US Census Bureau ACS 5-Year Estimates, Table C18120). However, even if a person with a disability is employed, their incomes are below the poverty line at a higher rate than those who are unemployed.

In 2021, among those with a disability with income below the poverty level, 58% were employed, while 42% were unemployed (U.S. Census Bureau American Community Survey 5-Year Estimates, Table B23024).

In addition, there is a higher unemployment rate among those living with a disability than those without a disability. While in 2021, people with a disability were unemployed at 12% in the county, and unemployment was at 5% among those without a disability (US Census Bureau ACS 5-Year Estimates, Table C18120).

Among TVCCA survey respondents, the most common reason people had problems getting or keeping a job was physical or mental disability.

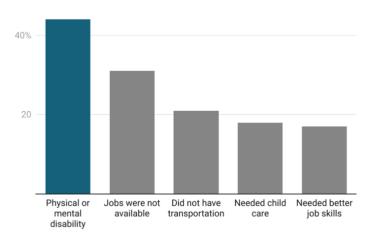


Chart: CTData (ctdata.org) • Source: TVCCA Needs Assessment Survey • Created with Datawrapper

People living with a disability were unemployed at a higher rate than people without a disability.

New London had one of the lowest rates of unemployment among those with a disability. The gap among those employed with a disability and without adisability was similar to those in the nearby counties.

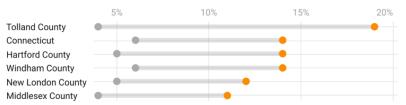


Chart: CTData, ctdata.org \cdot Source: US Census Bureau ACS 5-Year Estimates (Table C18120), 2021 \cdot Created with Datawrapper

Jobs that don't pay living wages for people without a high school diploma or a bachelor's degree.

According to the US Census Bureau, in 2021, people with less than a high school graduation have a poverty rate of 22%, while only 3% of those with a bachelor's degree are in poverty (US Census Bureau ACS 5-Year Estimates, Table S1701). High school equivalency helps – 9% are in

poverty compared to 22%. This suggests that increasing the number of people with a GED would result in less poverty in our region.

Potential discrimination against middle-age workers

In the survey TVCCA conducted in 2020, we found that in the last 12 months, 22% of survey respondents had trouble getting or keeping a job. Among the open-ended responses were several that suggested that they felt their age was a factor, one saying, "I believe age discrimination," another saying, "aged worker with an advanced degree."

After the Great Recession, there have been some changes to the workforce in New London County. People ages 45-54 left the workforce, while people aged 55 and above increased in the workforce. While this information is not definitive as to whether people are experiencing age discrimination, it is an area that warrants further exploration with our partners in the region who provide employment support and resources.

After the Great Recession, the number of those employed increased the most among those ages 55-64 and 65+. The number of those employed decreased the most among those ages 45-54.

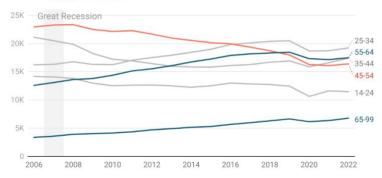


Chart: CTData (ctdata.org) • Source: US Census Bureau, Quarterly Workforce Indicators, 2022 • Created with Datawrapper

What are the assets?

Unemployment is decreasing more here than the rest of the state

The good news regarding employment in the TVCCA geographic catchment area is that the employment rate is increasing and is slightly higher than the rest of the state (conversely, the unemployment rate is decreasing and somewhat lower than the rest of the state).

New London County has a higher unemployment rate than some nearby counties, but the rate of unemployment decreased more in New London than any other county from 2016 to 2021.



 $\textbf{Chart: CTData, ctdata.org \bullet Source: US Census Bureau ACS 5-Year Estimates (Table C18120) \bullet Created with Datawrapper}$

Unemployment among people with disabilities has decreased

There has been a decrease in unemployment among those with a disability, from 17% in 2016 to 12% in 2021. Connecticut has created several programs and services to address the unemployment of people with disabilities, from job training programs to efforts to educate employers about hiring people with disabilities (CT Public, March 8, 2022).

[We held focus groups with providers of employment services and interviewed members of the Connecticut Department of Aging and Disability Services. One common theme that emerged was ... *]

What are the gaps?

Need: Services need to be spread out throughout the region so more people can access them

According to the survey we conducted with employment service providers, a total of 24 agencies provide 38 employment services in the TVCCA geographic catchment area.

However, these services are primarily located in a ring around New London. Among our Needs Assessment survey respondents who indicated why they had trouble getting or keeping a job, 20% said that they did not have transportation. If individuals do not have transportation to reach employment, they may also have trouble gaining transportation to access employment services.

Employment agencies in the TVCCA geographic service region are primarily located around New London

Based on the list of employment assets in the TVCCA region, this map illustrates where there are assets but also potential gaps in service.



Map: CTData (ctdata.org) • Source: TVCCA List of Assets • Created with Datawrapper

Targeted services to people with disabilities

One of our survey's biggest areas related to employment was employment at a livable wage for people with disabilities. [Yet through our focus groups with employment services in the region, we found...*]

Targeted services to people in the middle of life

Another area of need is in services to people who are in the middle of life or mid-career. [Through our focus groups with employment services ...*]

Targeted services to people who are underemployed

Another area of need is in services to people who are in the middle of life or mid-career. [Through our focus groups with employment services ...*]

F. How This Report Was Created

F.1. Big Questions

The questions that were explored through this CNA were:

- What are the conditions and causes of poverty in our catchment area, and how have they changed over time? Areas of exploration included:
 - o Employment
 - Education & Cognitive Development
 - o Income & Asset Building
 - Housing
 - o Health & Social/Behavioral Development
 - Civic Engagement & Community Involvement
- Which conditions and causes of poverty are most impactful to people living in poverty in our region?
- What assets and gaps exist around the prioritized conditions and causes of poverty in our region?

F.2. Community Needs Assessment Workgroup

[This section is fabricated. None of these individuals are real people.] The workgroup was primarily current staff, including:

- Dorothea Maddox, Executive Director
- Carly Hester, Early Childhood Program Director
- Alfreda Vincent, Planner
- Dannie Garza, Assistant Planner
- Anton Downs, ROMA implementor
- Freddie Logan, Administrative Assistant

[This section is fabricated. None of these individuals are real people. The Citizen's Advisory Board (CAB) included:

- Coleen Flowers, Co-Chair (Windham)
- Bert Warner, Co-Chair (Stafford)
- Virgie Christensen, Coordinator (Thompson)
- Von Avila (Windham)
- Elisabeth Guerrero (Coventry)
- Demetrius Morales (Killingly)
- Jacquelyn Chase (Hebron)
- Rupert Shepard (Ellington)
- Roderick Barr (Vernon)
- Tania Holloway (Windham)
- Milford Johns (Canterbury)

F.3. Methodology

[Note: This paragraph is fabricated for the purpose of providing an example.] We used a mixed methods approach to identifying the conditions and causes of poverty, the assets that seek to address those, and the service gaps that need to be filled. We explored topics as they emerged by combining primary and secondary sources of qualitative and quantitative data. We began our exploration with some of the public data and the customer satisfaction survey. This led us to explore additional public data and to inform questions in our Community Needs survey. Finally, our interviews and focus groups provided greater context for the issues that arose through those explorations.

PRIMARY DATA COLLECTION

We collected data from our clients, stakeholders, and partners about the needs and assets they have and/or have observed. Our collection included surveys, focus groups, interviews, and compilation of the administrative data that we collect through the provision of services. [Note: This is based on information in CRT's 2020 CNA.]

Board and Staff Surveys: CRT engaged Wipfli to conduct surveys with board and staff. There were a total of 80 surveys filled out representing [X% of board members and X% of staff*]. These surveys were administered electronically between January and February, 2020. The focus of these surveys was to identify the assets and needs that staff and board observe that may go missed, and that should be integrated into our CNA and our Community Action Plan (CAP). (Additional information about these stakeholders can be found in Table J.1.a.) [*Note: Information was not provided in CNA.]

Stakeholder Interviews: Wipfli conducted interviews with several different "levels" of stakeholders in March, 2020. These interviews explored the needs that stakeholders are identifying in order to learn about the assets and the gaps in service that they are seeing. These interviews were analyzed by Wipfli staff with pre-determined codes decided by the workgroup with input from the CAB. A participatory analysis session with Wipfli, the workgroup, and the CAB was held to ensure the analysis was accurate. (Additional information about these stakeholders can be found in Table J.2.)

- Critical stakeholders: 7. These are stakeholders whose partnership is critical to our success. We could not do the work we do without their partnership. These interviewees were from:
 - o Balance of State CoC/DOH
 - o Community Health Resources
 - o Connecticut Department of Mental Health and Addiction Services
 - Eversource
 - Goodwin University
 - Senior Resources Area Agency on Aging
 - City of Middletown

- Important stakeholders: 2. These are partners who are champions for our work. These interviewees were from:
 - o ACT (AIDS CT)
 - o Charter Oak Health Center
- Desired stakeholders: 2. These are organizations that we are working to develop a stronger partnership with. These interviewees were from:
 - o Burgdorf Health Center
 - Judy Dworin Project

Community Needs Assessment Survey: From January to April 2020, we collected paper (mailed) and online surveys from people living in poverty within the 40-town CRT geographic service area. A total of 3,000 surveys were sent to clients, with a total of 443 surveys completed. This number is lower than our previous CNA (with a total of X surveys). The workgroup held a collaborative analysis session with the CAB on some of the more striking results, and data from this survey was included in one of the data walks. (Additional information about these stakeholders can be found in Table J.1.a. and J.3.)

Customer Satisfaction Survey: This paper survey was collected in-person from our Congregate Meal Sites, for housing and homeless services, for case management services, and for veterans and their families. The purpose of this survey was to identify how well our services are meeting the needs in these areas and what additional supports our clients need. A total of X surveys were completed between February and March 2020. The programs where we administered these paper surveys were:

- Congregate Meal Site Program, Shepard Park (March 2020)
- Housing and Homelessness programs (Feb 2020)
- Congregate Meal Site, Kosher food opportunities (March 2020)
- H-PASS RRH (housing and homelessness) (Feb 2020)
- Project Teach and Project Teach Permanent (housing, homeless, and case management) (Feb 2020)
- SSVF (veterans and their families) (Feb 2020)

(Additional information about these surveys can be found in Tables J.1.a. and J.3.)

Focus Groups (Section fabricated for example purposes): In March and April 2022 we held 6 focus groups on the topics of health, education, employment, childcare, transportation, and food access. Participants were invited who were clients of CRT in 2019 but who are no longer clients. Focus groups were held in Enfield, Windsor Locks, Hartford, Deep River, Middletown, and Branford. Participants ranged in age from 25 to 82. Participants were racially diverse in several groups, but less so in the other towns. (Additional information about these stakeholders can be found in section G.3. Tables J.1.a. and J.3.)

Service enrollment and waitlist data (Section fabricated for example purposes): Data were analyzed for each program to identify how service enrollment has changed over the past 6 years then integrated this information into our exploration of assets and needs. We analyzed the number of individuals/families that received services compared to the number actually served, as well as the number of individuals that attempted to enroll. We also analyzed the demographic information of those on waitlists and of those who received services. Through a collaborative analysis session with the CAB, we identified potential reasons for the decline in some of our services, as well as potential increases. This information will be integrated more fully into our CAP. (Additional information about these stakeholders can be found in section G.3. Tables J.1.a. and J.3.)

Data Walks (Section fabricated to serve as example): Crucially, the data we compiled (both primary and secondary) was shared in 6 Data Walks across our region. These sessions were advertised in our agency locations as well as many of our partners' service locations. In addition, visitors to our locations were invited to join these sessions, and we asked our partners to verbally invite their constituents as well. We sought to engage community members who may be facing some of the conditions and causes of poverty, even if they did not qualify for services at this time. The session included a meal and childcare. While some locations had more participants than others, overall we were able to engage over 45 people in these sessions.

F.4. Limitations

Based on the limited funds and staff capacity to engage in data collection and analysis, readers should be aware of these limitations when using this needs assessment.

- 1. Stakeholder Interviews. Because we did not have the internal capacity to conduct interviews and needed to pay an outside consultant, we were limited in the number of interviews we could conduct. We would have liked to have interviewed some of our former clients, but we could not add this to our timeline. Additionally, since qualitative analysis takes time, we were not able to engage in the analysis ourselves, and we are aware that though the consultant was excellent, they do not know our work as well as we do and that there may be helpful information that didn't get pulled to the forefront.
- 2. Community Needs Assessment Survey. While we are very pleased to have 433 responses, since we only sent the surveys to our customers, we realize that we may have missed needs that are experienced more broadly by people living in poverty, close to living in poverty, or having recently had income rise above the poverty line. There are an estimated 888,525 people living in our geographic catchment area (U.S. Census Bureau, n.d.) and so we are aware that our surveys only represent those who have received services and do not represent those in or near the poverty line more generally in our geographic service area.
- 3. **Customer Satisfaction Survey.** We only conducted our survey among a fraction of our services as we are concerned with over-surveying the population, who already is

- asked for a lot of information. The customer service data we provided shows only satisfaction in these areas and cannot be read to represent all of our programs.
- 4. **Focus Groups.** Budgetary constraints only allowed us to conduct six focus groups. Given the size of our region, there is a wide variety of experiences. We could only capture a fraction of these even as we attempted to get geographically representative groups. In addition, recruitment was challenging despite the childcare, food, and gift cards provided.
- 5. **Data Walks.** This was the first time we held data walks, so we struggled with explaining to people what these were and how they might be beneficial. We only had six and eight people attend the first two sessions. However, we learned lessons and adjusted as we went, which led to an increase in attendance in the last four sessions.

G. Next Steps

"Focus Groups: As we begin our plan to use this needs assessment in our decision making, the workgroup wants to be confident in our analysis and interpretation of the data. We also acknowledge we may not have reached those furthest from opportunity and whose voices may not often be heard. This gives us an opportunity to seek out a broader cross-section of Pierce County residents by holding focus groups. Some of these groups may meet multiple times and be part of the next CNA process. Once finalized, the focus group topics, dates, times, and format will be marketed via CAP webpage and social media outlets" (Pierce County Human Services, 2021, p. 39).

"Human Services All Staff Meeting and/or CAP All Staff Meeting: The workgroup is looking forward to sharing the data collected and analyzed with the full Human Services Department. Humans Services' staff do great work in their individual programs that benefits the residents of Pierce County. However, many of our own staff are unaware of everything we have to offer each other's' clients. If we want to improve our outreach, one of the best places to start is within our own department" (Pierce County Human Services, 2021, p. 39).

H. Appendices

H.2. Data Sources: Quantitative and Qualitative Data

There are two kinds of data you are working with: primary data (data you collected yourself) and secondary data (data someone else collected and you are using). Refer to this list to understand the kinds of data that you may be using that are primary data. For example, suppose you are compiling newspaper articles from your region and analyzing them systematically using coding (qualitative data analysis). In that case, your data source is "record review: newspaper articles" or something similar. If you are using one newspaper article to highlight a data point or a quote, this is simply a citation and is not a data source. Please note that all of this information has been fabricated for the purpose of example.

H.2.a. Primary Data Collected

Who provided the data	Location(s) of Respondents	Collection Tool	Type (Quant or Qual)	Method of Collection	Date/Date Range of Collection	Analysis Methods	Page(s) where Info is Found
Agency Clients in the Food Pantry program	XYZ Street pantry in Hartford and ABC Street pantry in Enfield	Survey: Customer Satisfaction	Quantitative Qualitative	Paper survey	September 2022 October 2022	Descriptive Statistics; Qual Analysis (codes)	3, 6, 10
Community Partners	Represented all of the towns in our service area	Partner Focus Group Protocol	Qualitative	Focus groups	October 2022 January 2023	Qual Analysis (codes)	2, 5, 6, 7
Former clients (served in 2020- 2021)	Represented all towns in our service area	Survey: Community Assets & Needs	Quantitative Qualitative	Phone survey	May – August 2022	Descriptive Statistics; Qual Analysis (codes); Basic spatial analysis	2, 3, 7, 10
Agency Clients in an Employment program	A, B, C, D towns	Case notes	Qualitative	Client exit interview	Jan - Dec 2022	Qual Analysis (codes)	8, 9

Who provided the data	Location(s) of Respondents	Collection Tool	Type (Quant or Qual)	Method of Collection	Date/Date Range of Collection	Analysis Methods	Page(s) where Info is Found
Document Review	N/A	N/A	Qualitative	Compiled newspaper articles about poverty in the region	Articles from Jan – Dec 2022	Qual Analysis (codes)	1, 2, 11, 14

H.1.b. Secondary Data Compiled

Data Source	Dataset	Geographies	Date/Date Range of Dataset	Analysis Methods	Who Analyzed the Data?	Page(s) Where Info is Found
US Census Bureau/CTData	ACS 2011, 2016, 2021 5-year	Town	2007-2011; 2012-2016; 2017-2021	Descriptive statistics Change over time Basic geospatial	 CNA Workgroup Community partner stakeholders (focus. Group) Residents in J, K, and L Towns (data walk) 	1, 2, 13
US Census Bureau	B18130	County	2017-2021	Calculated percentage (share of)	CNA workgroup	

H.2. Key Sector Community Information

Organization	Location(s) of Org	Method of Collection	Date of Collection	Page Where Info is Found			
Community-Based Organizations. Examples: United Way, Salvation Army or other multi-services non-profits							
CTData	Hartford, serve statewide	Focus Group	9/20/22				
CAFCA	Middletown, serve statewide	Survey	10/22				
United Way of Northeastern CT		Document review (explored website for their	10/22				
		services)					

H.3. Primary Data Collection: People with low incomes

Who provided the data	Determination that they had	Tool and Method of	Page Where Info is Found
	low incomes	Collection	
Agency Clients in the Food Pantry program	Program eligibility	Survey: Customer Satisfaction	3, 6, 10
Agency Clients in Employment program	Program eligibility	Case Notes: Client exit interview	8, 9
Former Clients	Demographic question included a question about zip code, which was then used to create a variable to identify respondents that live in zip codes with X% or more people living under the FPL	Phone Survey: Community Assets and Needs	2, 3, 7, 10

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