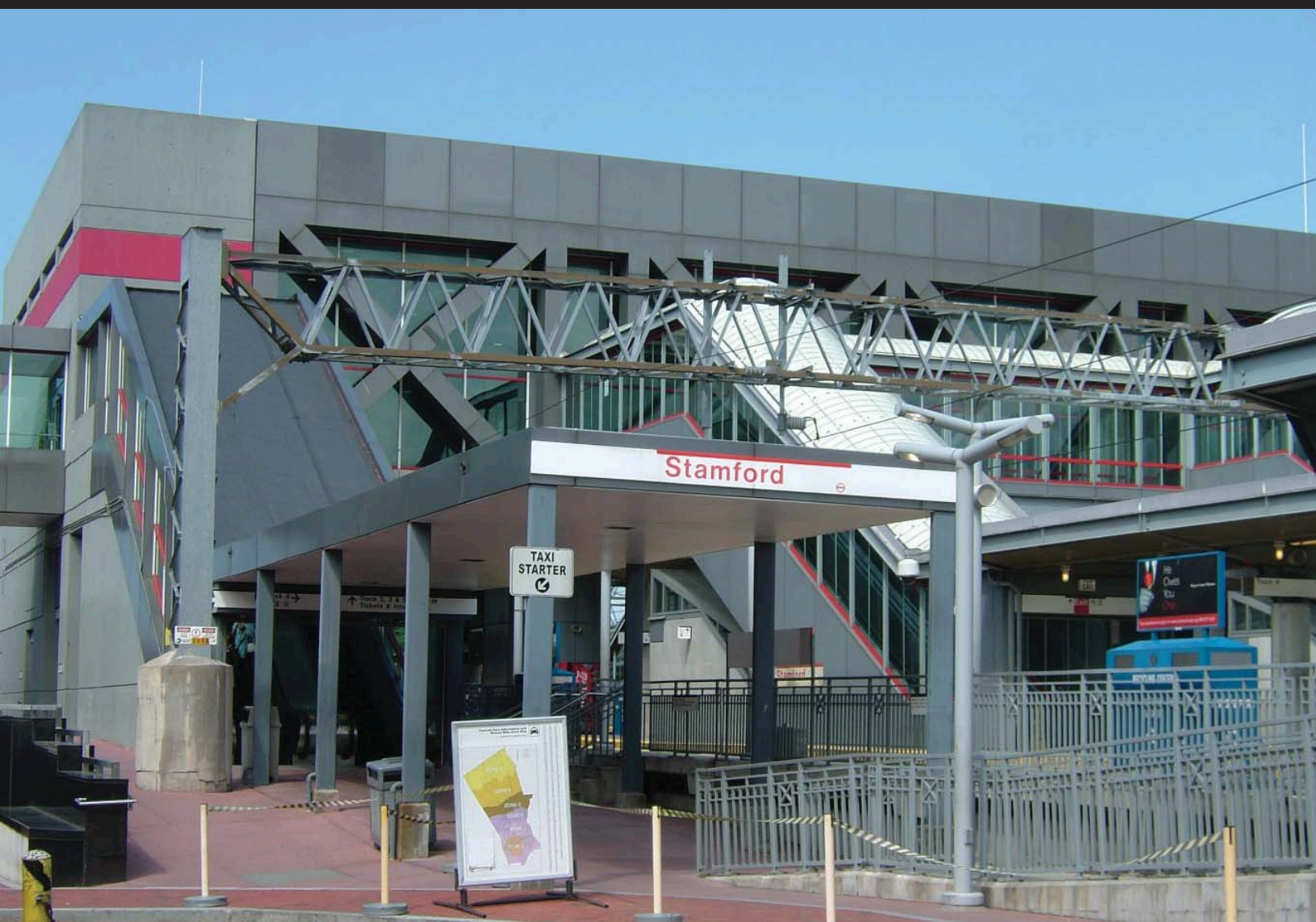




United Way of
Western Connecticut

Community Results Center
December 2008

2008 Stamford Community Needs Assessment



The Community Results Center (CRC) is a department of the United Way of Connecticut that seeks to improve community life by providing research and analysis that informs local planning, measures community change, and increases citizen decision-making capacity.

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EXECUTIVE SUMMARY

The Community Results Center (CRC) of the United Way of Connecticut conducted a needs assessment for the United Way of Western Connecticut – Stamford and the Stamford Human Services Planning Council to help determine the best use of its resources to impact the lives of the residents of Stamford. In order to ensure that the perceptions and opinions of many segments of the community were included in the research, data was gathered from residents, community leaders, publicly available data sources, and from the 2-1-1 information and referral service.

The report begins with a *Portrait of Stamford* which presents information about the demographics and economics of the City. The report then reviews the several major issue areas discussed during the focus groups and interviews and raised by the surveys. These issue areas are: basic needs, health, children and youth and older adults. Each of these areas is explored using information received from the survey, the focus groups and interviews and publically available data in order to shed some light on the issues currently facing Stamford. Commentary from focus group participants and those interviewed are presented throughout the report as *Comments from the Community*.

It should be noted that the information for this report was gathered prior to the dramatic downturns in the economy during September and October 2008. To the extent participant and respondent input would have been affected by this is uncertain.

PORTRAIT OF STAMFORD

Population

- Stamford is the State's 4th largest city with a population of 118,000. The City contains a mix of inner city, urban and rural areas. The daytime population of Stamford swells by around 60,000.
- In 2006, the median age in Stamford was 36 years, the same as in 2000. Twenty-two percent of the population was under age 18 in 2006 similar to 2000. The percent of the population age 65 and older has declined from 14 percent in 2000 to 11 percent in 2006.
- Stamford's racial and ethnic composition has shifted somewhat from 2000 to 2006. The percent of Hispanic and Asian residents increased, while the percent of those identifying as white or black decreased. Population projections suggest that the Hispanic population will experience the largest increases, while the white and black segments of the population will show slow declines between now and 2030.
- Stamford has the highest percent of foreign born residents when compared to Connecticut's other cities and to the State as a whole. Thirty-two percent of people living in Stamford in 2006 were foreign born compared to 13 percent statewide. Stamford is also experiencing an influx of undocumented immigrants, although estimates of the size of this population are not available.
- Within the Stamford public school system, 58 percent of students identified as non-white in 2007 compared with 55 percent in 2002. The percent of Hispanic students experienced the largest increase during this time frame.

Economics

- In 2006, Stamford's median family income was \$88,492, at least twice as high as the median family income in Connecticut's comparably sized cities. Ten percent of families in Stamford have incomes

EXECUTIVE SUMMARY

under \$15,000, similar to the State, however 67 percent of households in Stamford earn \$50,000 or more compared with 60 percent of households statewide.

- In 2006, 5.8 percent of families and 8.3 percent of individuals in Stamford were living below the federal poverty level (FPL), which is similar to statewide poverty levels. Stamford's poverty level is lower than Connecticut's other cities; however the cost of living in Stamford is among the highest in the state. The self-sufficiency standard (which includes expenses for housing, child care, food, transportation and healthcare) for two adults and two school age children in Stamford is \$57,174 annually.¹ This means that a family of four would need to earn over two and a half times the federal poverty level (\$21,200) to maintain self-sufficiency. A third of households earn less than \$50,000 annually.
- Stamford's unemployment rate was 5.0 percent in October 2008, lower than the State average of 6.1 percent but higher than last year's average of 3.7 percent. In October 2008, just over 3,400 were unemployed in Stamford.
- In 2007, the median home value in Stamford was \$637,900, compared with \$271,500 statewide.
- Monthly rental costs for a two-bedroom apartment are estimate to be between \$1,200 and \$1,600.² The median monthly housing costs for mortgaged owners is \$2,982 and \$920 for nonmortgaged owners.

Health and Human Services Requests

United Way 2-1-1 is the statewide information and referral service for health and human service issues. In the first three quarters of 2008, callers in Stamford made over 6,500 service requests. The top five requests for information concerned mental health, housing and shelter, utility assistance, general information and financial assistance.

ISSUE AREAS

The report reviews the major issue areas discussed during the focus groups and interviews and raised by the surveys. These areas include issues surrounding the availability of basic needs, the needs of children and youth, the accessibility of health care and the needs of older adults.

Basic Needs

The survey, interviews and focus groups identified a number of issues, which can be categorized as basic needs, as being of concern for Stamford. These issues include the need for affordable housing and job training programs, the challenge of meeting the rising demand for food, the impact of increasing fuel costs on residents, the maintenance of safe neighborhoods and the challenges faced by undocumented immigrants. Affordable housing was the number one need identified in the survey and was usually the first item mentioned in the focus groups. Three quarters of survey respondents rated the accessibility of affordable housing as fair or poor.

¹ Connecticut Voices for Children, *The State of Working Connecticut*, September 2006.

² Center for Economic and Policy Research and the National Low Income Housing Coalition, *Ownership, Rental Costs and the Prospects of Building Home Equity*, May 2008 and The National Low Income Housing Coalition, *Out of Reach*, retrieved September 2008 from <http://www.nlihc.org/or/or2008/data.cfm?getstate=on&getmsa=on&msa=1215&state=CT>

EXECUTIVE SUMMARY

Children and Youth

There are approximately 26,000 children and youth under the age of 18 in Stamford, comprising 22 percent of the City's population. Thirty percent of all households contain children and youth. Stamford's school system is becoming more racially and ethnically diverse. In 2002, the minority enrollment was close to 55 percent and increased to 58 percent by 2007. Close to a third of survey respondents with children rated childcare and quality programs for infant/toddler and preschool children as a top five need. Thirty-five percent of respondents say there is a need for after-school and recreation programs. Focus group discussions also centered on the need for more infant and toddler care, more after-school programs and more playgrounds and other recreational facilities.

Health

The needs assessment found that 40 percent of respondents positively rated access to health care services in Stamford. Focus group discussions centered on health care issues that are affecting communities around the country. The issues include the numbers of those uninsured or underinsured, the rising cost of healthcare and the reductions in reimbursement rates from insurance providers that continues to decrease the number of available health providers. Other issues discussed during the focus groups included the need for expanded capacity in the City's health clinics and health care for undocumented immigrants.

Older Adults

In 2006, there were over 13,300 residents of Stamford who were 65 and older, an 18 percent decrease from 2000. Older adults comprise 11 percent of the population in Stamford. When asked to consider the top needs of the City, the issues raised in the survey included the availability of affordable housing, job training and safe neighborhoods. Focus group discussions also included the need for more transportation options and the development of safer pedestrian walkways. Older adults also cited the lack of adult day care in Stamford, the need for support for grandparents raising grandchildren and more physicians who take patients covered by Medicare.

INTRODUCTION

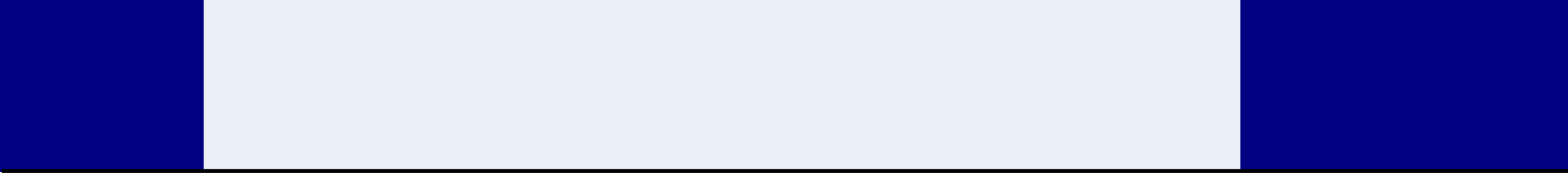
United Way of Western Connecticut – Stamford Office and the Stamford Human Services Planning Council conducted a community needs assessment in order to help determine the best use of its resources to impact the lives of the residents of Stamford. The needs assessment was completed by the Community Results Center (CRC) of the United Way of Connecticut using a multifaceted research approach. In order to ensure that the perceptions and opinions of many segments of the community were included in the research, data were gathered from residents, community leaders, publicly available data sources, published reports, and from the United Way 2-1-1 information and referral service.

The report begins with a Portrait of Stamford which presents information about the demographics, economics, and poverty rate of Stamford. The report continues with a review of the major issue areas discussed during the focus groups and interviews and raised by the surveys. These areas include:

- Issues surrounding the availability of basic needs such as housing, food, utilities and public safety.
- The needs of children and youth
- The accessibility of health care
- The needs of older adults

Each of these areas will be explored using information received from the survey, the focus groups and interviews and publically available data in order to shed some light on the issues currently facing Stamford. Commentary from focus group participants and those interviewed are presented throughout the report as *Comments from Focus Groups*.

It should be noted that the information gathering period of this project occurred prior to the dramatic downturns in the economy during September and October 2008. To the extent participant and respondent input would have been affected by this is uncertain.



PORTRAIT OF STAMFORD

Stamford is the fourth largest city in Connecticut with approximately 118,000 residents. The City contains a mix of inner city, urban and rural areas. Stamford's location, 45 minutes from New York City, has contributed to it becoming the second largest financial center in the United States behind New York City. The City contains both the largest and second largest equities trading floors in North America at Royal Bank of Scotland and UBS. Stamford's metro station is the largest between New York and Boston, and is the third busiest in the nation behind New York's Grand Central Station and Washington's Union Station. The daytime population of Stamford swells by around 60,000.

A comparison to the State of Connecticut shows that Stamford has a higher median family income (\$88,000 vs. \$78,154), a lower unemployment rate (5.0% vs. 6.1%) and the same rate of poverty (8.3%). When compared to the state's other cities of comparable size, Stamford has the highest median income, lowest unemployment rate and the lowest poverty rate. Regardless of its wealthy stature, Stamford is a city where wealth and poverty exist side by side. It was often heard during interviews and focus groups that Stamford is becoming a challenging city not just for those living at or below the federal poverty level (FPL), but also for those in the middle class due to the high cost of living. For the middle class, the challenges revolve around being able to afford housing costs. It was said that many middle income people who work in Stamford cannot afford to live there. For those with lower incomes, the challenges include both housing and finding lower skilled employment opportunities.

How much income is needed to live in Stamford? The self-sufficiency standard (which includes expenses for housing, child care, food, transportation and healthcare) for two adults and two school age children in Stamford is \$57,174 annually.³ This means that a family of four would need to earn over two and a half times the federal poverty level (\$21,200) to maintain self-sufficiency. Organizations in the industrial sector that had typically employed lower income, less skilled laborers continue to close or move out of the City.

This report will begin with a further review of population and economic data for Stamford. Additional data can be found in Appendix B for Stamford and the surrounding towns of Darien, Greenwich, New Canaan, Norwalk, and for Connecticut for comparison purposes. Throughout this report, maps are provided to present a visual representation of population density, income, age and various resources. These maps are also included in Appendix D.

³ Connecticut Voices for Children, *The State of Working Connecticut*, September 2006.

PORTRAIT OF STAMFORD

POPULATION

- In 2007, Stamford had an estimated population of 118,000⁴. This represents nearly a 1 percent increase from 2000. Stamford had a smaller population increase when compared to Fairfield County and Connecticut, which increased 2 percent and 3 percent respectively. Stamford and New Haven are the only large Connecticut cities that experienced population increases between 2000 and 2006 (Table 1).
- A review of Stamford's projected population growth from 2005 to 2030 suggests the City's population will grow at a larger rate than the State of Connecticut (Table 2). Stamford's population is expected to approach 140,000 by 2030.
- Map 1 shows the concentration of population across Stamford and surrounding towns. (See Appendix D for a larger version of this map.)

Map 1: Population Density of Stamford and Surrounding Towns

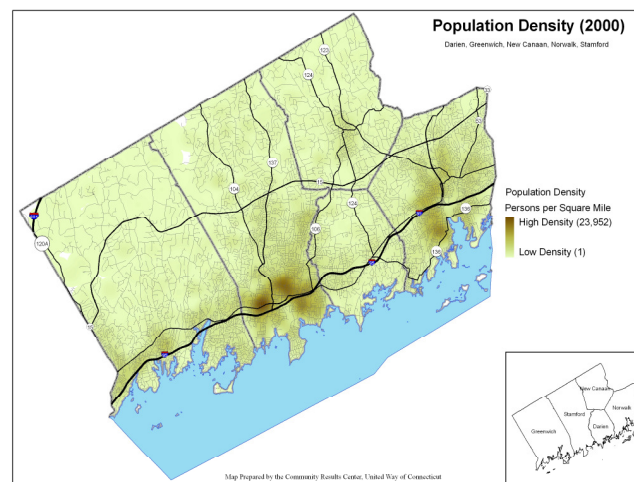


Table 1 – Population 2006, Population Growth 2000 to 2006

	Connecticut	Fairfield County	Stamford	Bridgeport	New Haven	Hartford	Waterbury
Population 2006	3,504,809	900,440	118,029	136,282	127,288	119,977	104,341
Population 2000	3,405,565	882,567	117,083	139,529	123,626	121,578	107,271
Population growth (2000 to 2006)	2.9%	2.0%	0.8%	-2.3%	3.0%	-1.3%	-2.7%

Sources: 2000 U.S. Census, 2006 American Community Survey

Table 2 – Projected Population Growth 2005 to 2030

	2005	2010	2015	2020	2025	2030
Connecticut	5.0%	2.2%	2.2%	2.7%	2.6%	1.8%
Stamford	6.0%	5.6%	5.6%	6.2%	6.2%	5.8%

Source: Connecticut State Data Center

⁴ 2007 American Community Survey.

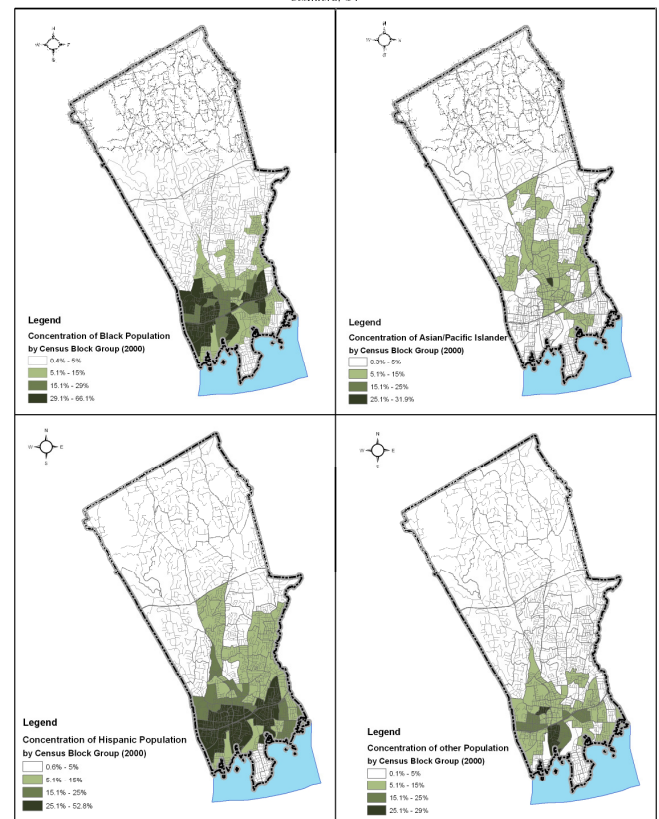
PORTRAIT OF STAMFORD

Race

Change in Proportion of Race/Ethnicity

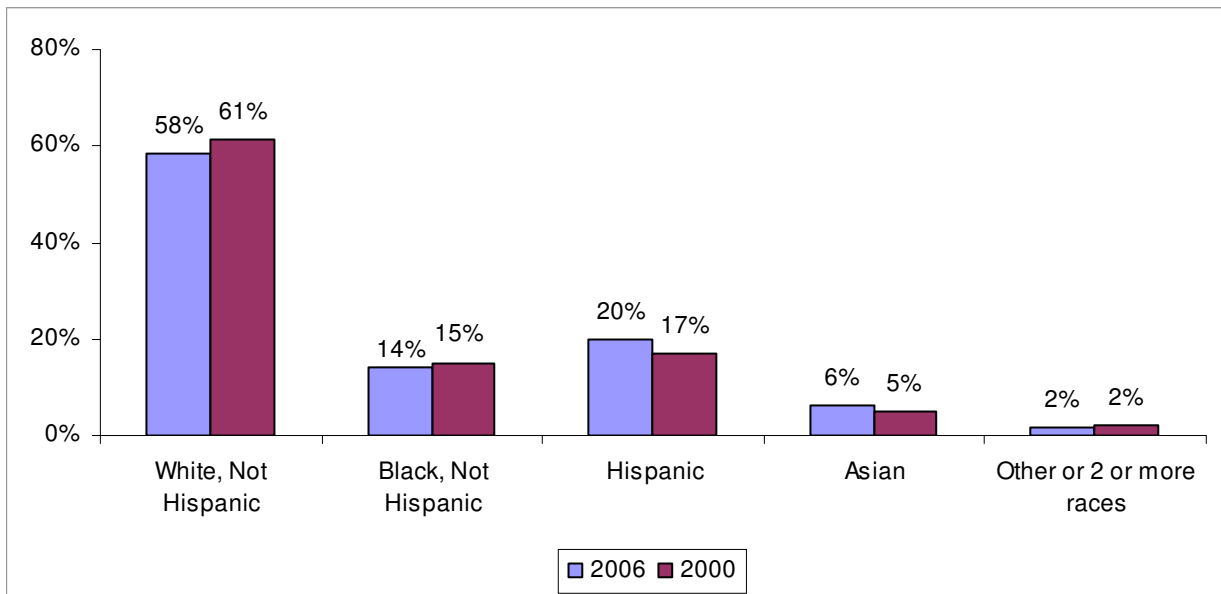
- In focus groups, Stamford is often described as a City whose great diversity is one of its strengths. Stamford's racial and ethnic composition has shifted somewhat from 2000 to 2006. The percent of residents who identify themselves as Hispanic, Asian, or of some other race increased, while the percent of those identifying as white or black decreased (Figure 1):
 - The Hispanic population increased from 17 percent to 20 percent.
 - The Asian population increased from 5 percent to 6 percent.
 - The white, non-Hispanic population decreased from 61 percent to 58 percent.
 - The black, on-Hispanic population decreased from 15 percent to 14 percent.
- Population projections suggest that the Hispanic population will show the largest increases, while the white and black segments of the population will show slow declines (Figure 2).
- Map 2 shows the population concentration by race in Stamford. (See Appendix D for a larger version of this map.)

Map 2: Population Concentration by Race



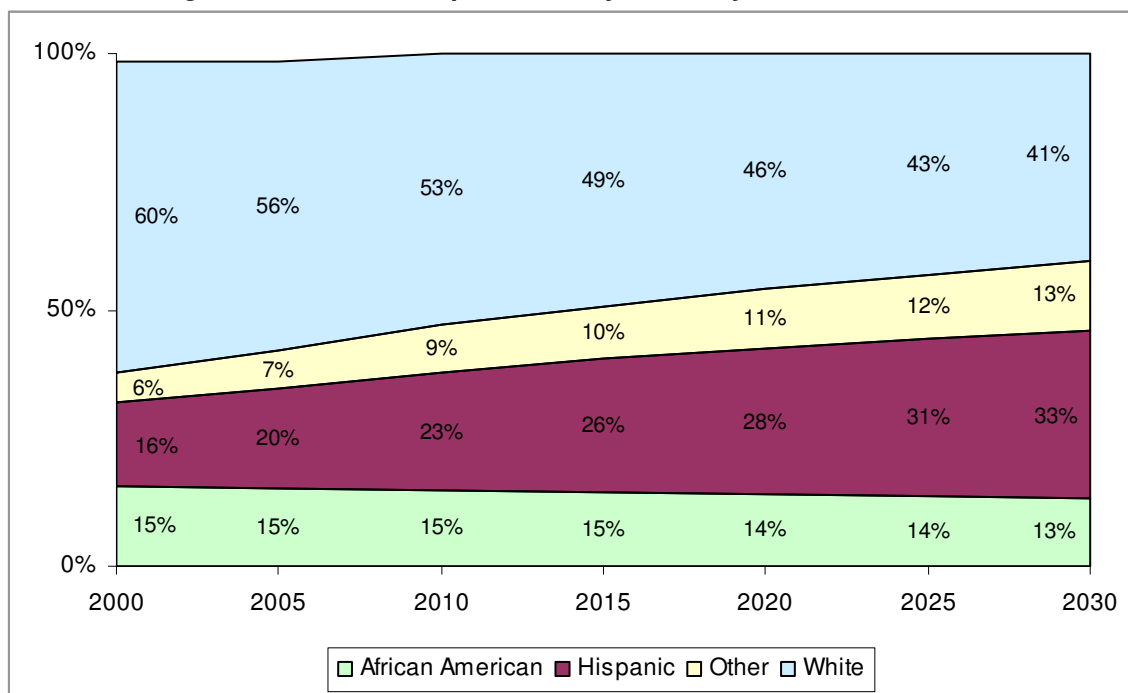
Map Prepared by the Community Results Center, United Way of Connecticut
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Figure 1 – Stamford Percent of Population by Race, 2000 to 2006



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Figure 2 – Stamford Population Projections by Race, 2000 to 2030



Source: Connecticut State Data Center

Foreign Born Residents

- Stamford has the highest percent of foreign born residents when compared to Connecticut's other cities or to the State as a whole. Thirty-two percent of people living in Stamford in 2006 were foreign born compared to 13 percent statewide. In Stamford, 68 percent of the population was native born including 37 percent who were born in Connecticut.
- Stamford is also experiencing an influx of undocumented immigrants, although estimates of the size of this population within the City are not available. Statewide estimates suggest that there are between 75,000 and 100,000 undocumented immigrants in Connecticut.⁵ Focus group discussions suggest that this population is increasingly vulnerable to crime and struggles to find health care, housing and employment.

Language Spoken at Home

- Among residents at least five years old living in Stamford in 2006, 39 percent spoke a language other than English at home, compared with 35 percent in 2000. Of those speaking a language other than English, 49 percent spoke Spanish and 51 percent spoke some other language; 50 percent of these reported that they did not speak English "very well."

Minority Population in Public Schools

- Within the Stamford public school system, 58 percent of students identified as non-white in 2007 compared with 55 percent in 2002. The percent of Hispanic students experienced the largest increase during this time frame, increasing from 23 percent to 30 percent. The percent of students

⁵ Urban Institute, Undocumented Immigrants Facts and Figures, January 2004, retrieved November 2008 from <http://www.urban.org/publications/1000587.html>.

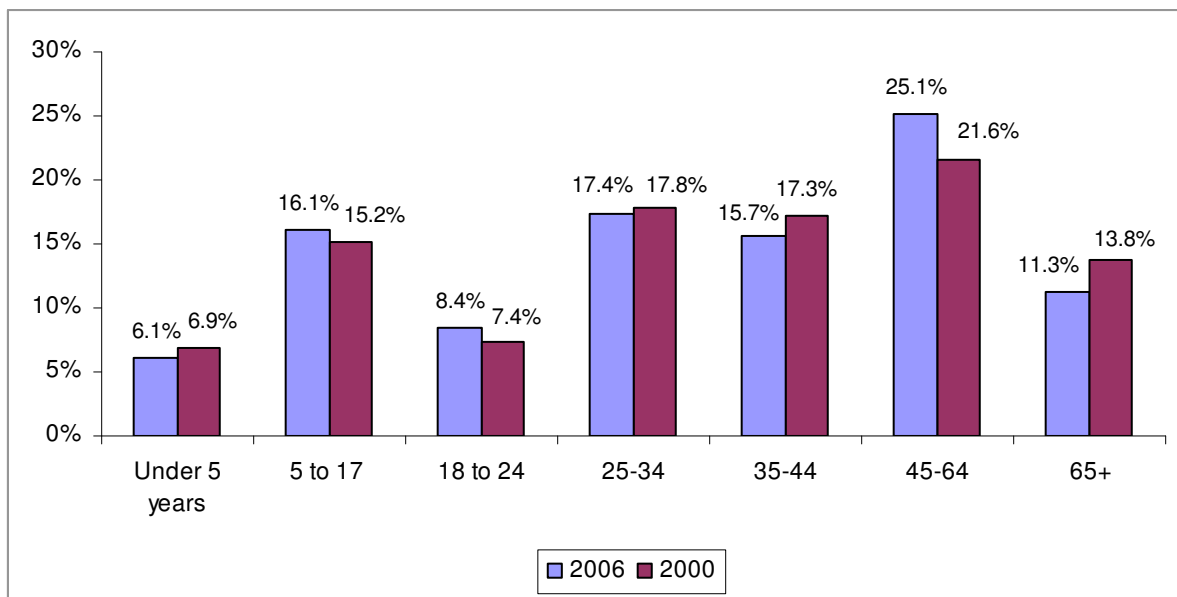
PORTRAIT OF STAMFORD

who are white declined from 45 percent to 42 percent, while the percent of students who are black declined from 27 percent to 22 percent.

Age

- The median age in Stamford is 36 years, the same as in 2000. The median age in both Connecticut and in Fairfield County is 39.
- There has been a decline in the percent of those ages 25 to 34 in Connecticut in recent years. However, in Stamford, the proportion was relatively flat at 17 percent between 2000 to 2006 (Figure 3). In Fairfield County, that age group declined from 13 percent to 10 percent, while in Connecticut the proportion of those ages 25 to 34 declined from 13 percent to 12 percent. (This age group has been watched since it is the age in which careers are begun.)
- The percent of those 65 and older has declined in Stamford, while it has remained fairly steady in Connecticut. In 2006, 11 percent of Stamford's population was 65 and older, compared to 14 percent in 2000. In Connecticut, this age group has remained at 13 percent.

Figure 3 – Stamford Population by Age, 2000 to 2006*



Source: 2000 U.S. Census, 2006 American Community Survey

PORTRAIT OF STAMFORD

ECONOMIC INDICATORS

Income

- In 2006, Connecticut had the highest median family income in the country at \$78,154 (Table 3). The median family income in Stamford was higher, at \$88,492. Stamford's median income was at least twice as high as the median family income in Connecticut's comparably sized cities. Map 3 shows median household income. (See Appendix D for a larger version of this map.)
- Ten percent of families in Stamford have incomes under \$15,000, similar to the State (Figure 4). Sixty-seven percent of households in Stamford earn \$50,000 or more compared with 60 percent of households statewide.
- The income needed to meet the self-sufficiency standard (which includes covering expenses for housing, child care, food, transportation, and healthcare) for one adult is \$23,037 annually, or \$10.91 per hour.⁶ The self-sufficiency standard for two adults and two children is \$57,174 annually or \$13.54 per hour per adult. Stamford has the highest self-sufficiency standard of Connecticut's major cities (Table 4).

Map 3: Median Household Income

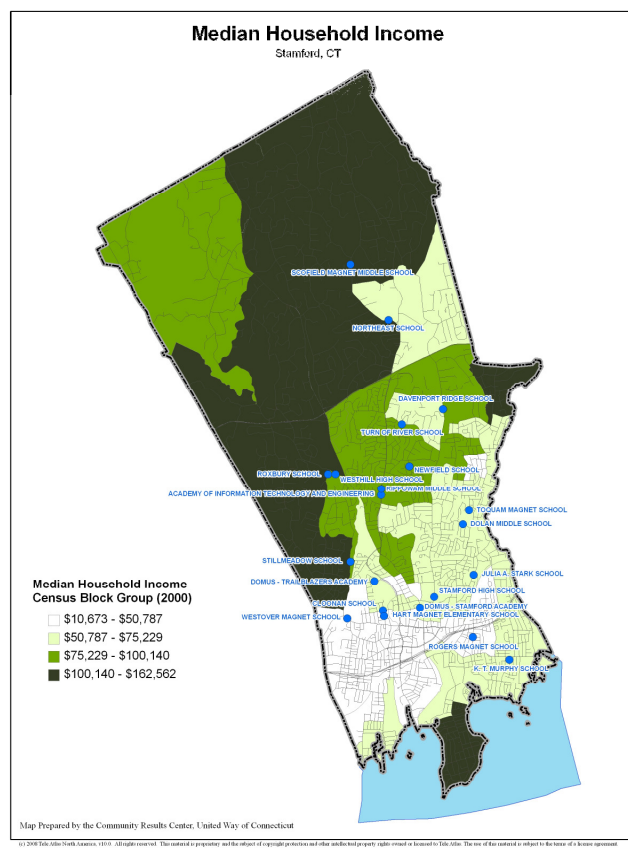


Table 3 – Household and Family Income - 2006

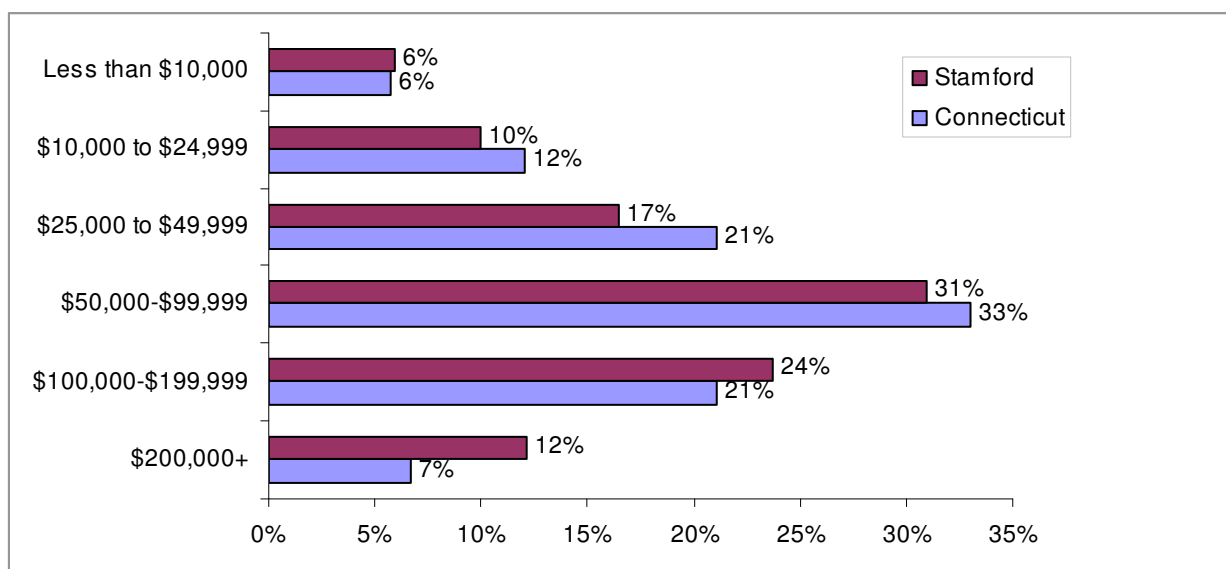
Income	Connecticut	Stamford	Fairfield County
Median Household Income	\$63,422	\$71,030	\$76,671
Median Family Income	\$78,154	88,492	\$92,894

Source: U.S. Census American Community Survey

⁶ Office of Workforce Competitiveness, *The Real Cost of Living in 2005: The Self-Sufficiency Standard for Connecticut*, December 2005.

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Figure 4 – Household Income by Range, Stamford and Connecticut - 2006



Source: U.S. Census American Community Survey

Table 4 – Annual Self-Sufficiency Standard for Connecticut Cities, 2005

	Stamford	Bridgeport	New Haven	Hartford	Waterbury
One Adult, 1 School Age Child	\$41,527	\$31,136	\$29,845	\$28,387	\$31,627
Two Adults and 2 School Age Children	\$57,174	\$46,602	\$43,447	\$42,690	\$49,263

Source: State of Connecticut Office of Workforce Competitiveness

Unemployment/Workforce

- Stamford's unemployment rate was 5.0 percent in October 2008, lower than the State average of 6.1 percent but higher than last year's average of 3.7 percent (Table 5). In October 2008, just over 3,400 were unemployed in Stamford. The City's unemployment rate was lower than the rate for the Bridgeport-Stamford Labor Market Area⁷ of 5.8 percent.
- Stamford's workforce decreased 9 percent from 2000 to 2007. In 2007, Stamford's workforce numbered 76,000 compared with 83,000 in 2000 (Table 6). Average wages in 2007 were just over \$117,000.
- In 2007, the leading industries in Stamford were Finance and Insurance (16%) and Professional, Scientific, and Management (12%) (Table 7). The sector that saw the largest increase was Finance and Insurance, and the sector that saw the largest decrease was Management of Companies and Enterprises.

⁷ Stamford is in the Bridgeport-Stamford Labor Market Area which also includes the towns of Ansonia, Darien, Derby, Easton, Fairfield, Greenwich, Milford, Monroe, New Canaan, Newtown, Norwalk, Oxford, Redding, Ridgefield, Seymour, Shelton, Southbury, Stratford, Trumbull, Weston, Westport, Wilton, Woodbridge

PORTRAIT OF STAMFORD

Table 5 – Unemployment Rate for Connecticut, Stamford and Surrounding Towns

Unemployment	Connecticut	Bridgeport-Stamford LMA	Stamford	Darien	Greenwich	New Canaan	Norwalk
Percent Unemployed (Oct. 2008)	6.1%	5.8	5.0%	4.5%	4.6%	4.6%	5.2%
Number Unemployed (Oct. 2008)	116,000	27,928	3,435	422	1,422	420	2,587
Percent Unemployed (2007)	4.6%	4.1%	3.7%	2.8%	3.0%	2.9%	3.8%

Source: Connecticut Department of Labor

Table 6 – Stamford Job Growth/Loss 2007, 2000

Annual average employment (2007)	Annual average employment (2000)	Job Growth/Loss 2000 to 2007	Annual average wage (2007)	Annual average wage (2000)
76,023	83,167	-7,144	\$117,373	\$89,894

Source: Connecticut Department of Labor

Table 7 – Employment by Industry in Stamford, 2007, 2000

	2007	2000	Change 2007-2000
Finance and Insurance	16.2%	12.9%	3.3
Professional, Scientific, and Technical Services	11.7%	13.1%	-1.4
Admin. and Support and Waste Management/Remediation	11.4%	11.1%	0.3
Health Care and Social Assistance	8.8%	6.9%	1.9
Government	8.1%	7.5%	0.6
Retail Trade	8.1%	9.4%	-1.3
Manufacturing	6.1%	6.5%	-0.4
Accommodation and Food Services	4.9%	4.5%	0.4
Management of Companies and Enterprises	3.7%	6.0%	-2.3
Wholesale Trade	3.6%	4.5%	-0.9
Construction	3.4%	2.9%	0.5
Information	3.3%	5.2%	-1.9
Other Services (except Public Administration)	2.7%	2.5%	0.2
Real Estate and Rental and Leasing	2.2%	2.1%	0.1
Transportation and Warehousing	2.2%	2.1%	0.1
Arts, Entertainment, and Recreation	1.9%	1.7%	0.2
Educational Services	1.2%	0.6%	0.6
Utilities	0.4%	0.3%	0.1

Source: Connecticut Department of Labor

PORTRAIT OF STAMFORD

Poverty

- In 2006, 5.8 percent of families and 8.3 percent of individuals in Stamford were living below the federal poverty level (FPL), which is similar to statewide poverty levels (Table 8). Stamford's poverty level is lower than Connecticut's other cities. The percent of those living below the poverty level in Stamford increased since 2000 when 5.4 percent of families and 6.9 percent of individuals were in poverty.
- Just over 9 percent of children under 18 were living below the poverty level in 2006, slightly more than in 2000 (Table 9).
- Nineteen percent of families with a female householder and no husband present had incomes below the poverty level in 2006 compared with just over 13 percent in 2000.
- There was a decrease in the percent of those 65 years of age and older living below the poverty level. In 2000, 9.7 percent of this age group was living below poverty, compared with 7.4 percent in 2006.
- For reference purposes, Table 10 shows federal poverty levels for various household sizes for 2008.

Table 8 – Percent of Individuals and Families Living in Poverty, Connecticut and Major Cities, 2006

	Connecticut	Stamford	Bridgeport	Hartford	New Haven	Waterbury
Individuals below poverty	8.3%	8.3%	20.6%	30.3%	21.0%	19.7%
Families below poverty	5.9%	5.8%	17.8%	25.1%	20.4%	18.1%

Source: 2006 American Community Survey

**Table 9 – Poverty Rates for Various Population Segments in Stamford, 2006
Number and Percent Below Poverty Level**

	2006		2000	
	Number	Percent	Number	Percent
Total Individuals	9,796	8.3%	9,194	7.9%
All families	1,702	5.8%	1,581	5.4%
Children under 18	2,407	9.2%	2,199	8.7%
Female householder families	1,128	19.0	731	13.6%
65 and older	986	7.4%	1,507	7.7%

Source: 2000 U.S Census and 2006 American Community Survey

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Table 10 – 2008 Poverty Level Guidelines – Annual Income

Family Size	100% of Poverty	200% of Poverty	300% of Poverty
1	\$10,400	\$20,800	\$31,200
2	\$14,000	\$28,000	\$42,000
3	\$17,600	\$35,200	\$52,800
4	\$21,200	\$42,400	\$63,600
<i>Each additional person add:</i>	\$3,600	\$7,200	\$10,800

Source: U.S. Dept. of Health and Human Services

Housing

- In 2007, the median home value in Stamford was \$637,900, compared with \$271,500 statewide.
- Various reports on housing costs in Stamford suggest that monthly rental costs for a two-bedroom apartment are between \$1,200 and \$1,600.⁸ The median monthly housing costs for mortgaged owners is \$2,982 and \$920 for nonmortgaged owners.
- In 2007, just over 19,000 homeowners and renters were experiencing housing problems in Stamford. Housing problems are defined as spending more than the recommended 30 percent of their income on housing costs, living in overcrowded conditions, and/or living in dwellings lacking a complete kitchen or bathroom. Over 11,000 owners and over 8,800 renters were experiencing housing problems.
- The country is in the midst of a housing foreclosure crisis due primarily to the practices of the sub prime mortgage industry. Overall, in Connecticut, there have been 17 foreclosure-related filings per 1,000 households. The rate of foreclosure-related filings is lower in Stamford. The City ranks 81st on the list of Connecticut towns with filings at 14.7 per 1,000 households, affecting 683 households from January 2007 to April of 2008.
- Affordable housing was cited as the number one need in Stamford in the needs assessment survey. Affordable housing will be discussed further in the Basic Needs section of this report.

HEALTH AND HUMAN SERVICES REQUESTS

- United Way 2-1-1 is the statewide phone-based information and referral service for health and human service issues operated by United Way of Connecticut. 2-1-1 tracks all calls received and the requests callers make. Since callers frequently have multiple needs during a call, 2-1-1 tracks the multiple requests for services that may be made. In the first 9 months of 2008, callers in Stamford made 6,599 service requests. Table 11 lists the top five service requests. A complete listing of service requests for Stamford and surrounding towns for 2006 through 2008 is listed in Appendix A.

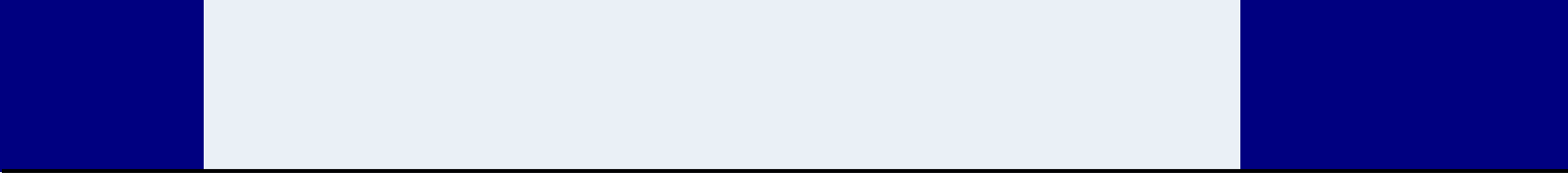
⁸ Center for Economic and Policy Research and the National Low Income Housing Coalition, *Ownership, Rental Costs and the Prospects of Building Home Equity*, May 2008 and The National Low Income Housing Coalition, *Out of Reach*, retrieved September 2008 from <http://www.nlihc.org/oor/oor2008/data.cfm?getstate=on&getmsa=on&msa=1215&state=CT>

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Table 11 – Top 2-1-1 Service Requests for Stamford January through September, 2008

	Number of Service Requests
Outpatient Mental Health	644
Housing/Shelter	552
Utilities/Heat	535
Information Services	463
Financial Assistance	451

Source: United Way 2-1-1



COMMUNITY PERSPECTIVE

This assessment was conducted in order to gain an understanding of the needs of Stamford and its residents. Information was gathered through focus group discussions with many segments of the community, interviews with community representatives, and a resident needs assessment survey. The results of this research bring to light a number of key issues which recurred during focus group and interview discussions. This report is therefore organized around the following areas:

- **Basic Needs – Housing, Food, Utilities, Transportation, Public Safety, Undocumented Immigrants, Accessibility of Social Services**

The availability of affordable housing was the top need identified in the needs assessment survey and was usually the first thing mentioned as a major need in the focus groups. Other issues involving basic needs included:

- the challenge for food pantries to meet the rising demand for food
- the impact of increasing fuel costs on residents, social service agencies and the City
- the limited transportation options
- the need to maintain safe, crime-free neighborhoods
- the challenges faced by undocumented immigrants

The survey also sought to understand if there are barriers to receiving social services in Stamford. The survey found the main barriers for those who receive social services to include the waiting period to receive services and high program fees. The main barriers identified by those who work for social service agencies were lack of child care and language.

- **Children and Youth – Early Education, After School Programs, Recreation Facilities**

There was concern for young children and teens related to:

- the need for more infant and toddler care
- the need for more after-school programs
- the need for more playgrounds and other recreational facilities

The report also reviews poverty data as it relates to children and recent test scores for public school students.

- **Access to Healthcare Services**

Providers discussed:

- concerns about access to affordable healthcare services

The report also reviews various health concerns raised during the focus groups and interviews. Relevant health statistics for Stamford can be found in Appendix A.

- **Older Adults – Housing, Transportation, and Support for Maintaining Independence**

Focus group participants and those interviewed discussed:

- the need for updated senior housing and support for helping seniors stay in their homes
- transportation options for older adults
- the need for a more pedestrian-friendly city
- assistance that would help older adults maintain independence

COMMUNITY PERSPECTIVE

The needs assessment survey asked respondents to identify the top five needs in Stamford. The top need identified was the need for the availability of affordable housing, followed by job training and workforce development (Table 12). An analysis by various demographic segments found housing to be the top need identified by all of the segments (Table 13). In fact, there is a great deal of similarity in the top five needs chosen by all of these demographic segments.

Table 12 – Top Five Needs

1	Affordable housing
2	Job training & workforce development
3	Safe, crime-free neighborhoods
4	Financial assistance / After-school & recreation programs*
5	Childcare / Fuel/utility assistance*

* Items had identical number of replies

Table 13 – Top Five Needs by Demographics

Age 65 +	Income < \$50,000	Income > \$50,000	Families with children under 18	White	Non-white
Affordable housing	Affordable housing	Affordable housing	Affordable housing	Affordable housing	Affordable housing
Job training & workforce development	Job training & workforce development	Job training & workforce development	Job training & workforce development	Safe, crime-free neighborhoods	Job training & workforce development
Safe, crime-free neighborhoods	Financial assistance	Safe, crime-free neighborhoods	Safe, crime-free neighborhoods	Job training & workforce development	Financial assistance
Access to health services/ Support for senior independence*	Safe, crime-free neighborhoods	After-school & recreation programs	After-school & recreation programs/ Financial assistance*	After-school & recreation programs/ Fuel utility assistance*	Safe, crime-free neighborhoods
Fuel/utility assistance	Shelters for the homeless/ Child care*	Fuel/utility assistance	Child Care	Access to health services	After-school & recreation programs/ Child Care*

* Items had identical number of replies

Housing

Affordable housing was the number one need identified in the survey and was usually the first item mentioned in the focus groups. Three quarters of survey respondents rated the accessibility of affordable housing as fair or poor. Participants in the focus groups suggested that Stamford is a city undergoing gentrification, and that it is becoming increasingly difficult for those in the lower and middle income classes to afford housing. It was cited that many who work in Stamford cannot afford to live in the City and that this is the case despite recent efforts to build mixed-income housing complexes that include a percent of “affordable” units that are made available to those earning below 80 percent of the State’s median income.

Survey Results at a Glance

% *Rating excellent or good:*

➡ Affordable housing 15%

% *Rating as a top 5 need:*

➡ Affordable housing 68%

Affordable housing has long been identified as a need in Stamford. In 2001, the Stamford Affordable Housing Task Force identified the need to create 8,000 affordable housing units for Stamford.⁹ Among many recommendations made by the task force, two strategies were identified for achieving this increase in housing units:

- Creating affordable housing through mixed-income development
- Preserving the existing affordable housing stock

While the City has focused on building mixed income housing units and there is a strong collaboration focused on housing, discussions in the focus groups indicated continued challenges with finding affordable housing:

Comments from Focus Groups

- *“The level of ‘affordable’ is too high for most of the working poor and the waiting list for public housing and Section 8 vouchers is very long.”*
- *“Even the hospital is often challenged to find housing in the City for employees.”*
- *“Public housing projects were rebuilt with fewer units, so there is less housing for the very poor. We are being pushed out of the City.”*
- *“I can only live in Stamford because I bought a home here a long time ago. I could never buy that house today.”*
- *“Finding affordable housing in Stamford is like finding a needle in a haystack.”*
- *“Redevelopment is destroying the fabric of neighborhoods. We need to see neighborhoods retained, no more high rises. There has been a net loss of affordable housing.”*

⁹ Stamford Affordable Housing Task Force, An Affordable Housing Strategy for Stamford, CT, September, 2001.

BASIC NEEDS

Various reports on housing costs in Stamford suggest that the monthly rental cost for a two-bedroom apartment is between \$1,200 and \$1,600.¹⁰ A standard rule of thumb for housing affordability is that housing should cost no more than 30 percent of household income. Therefore, to afford this amount of rent, household income needs to be in the \$50,000 to \$65,000 annual range, meaning an hourly range of roughly \$20 to \$30. Based on the 30 percent rule, those earning the minimum wage of \$7.65 can afford to pay around \$400 per month for rent. In 2007, 40 percent of owners with mortgages and 45 percent of renters spent 30 percent or more of household income on housing, an increase from 2000 (Table 14).¹¹

Table 14 – Stamford Residents Paying 30% or More on Housing

	2007		2000	
	Percent	Number	Percent	Number
Owners (with mortgage)	40%	11,097	35%	6,494
Renters	45%	8,109	36%	7,645

Source: 2000 U.S. Census, 2007 American Community Survey

The Area Median Income (AMI) calculated by HUD for Stamford in 2008 is \$117,800. Percentages of AMI are typically used to determine eligibility for affordable housing programs. These percentages and their corresponding incomes shed some light on what is needed to afford housing in Stamford (Table 15).

Table 15 – Income Levels and Affordable Monthly Rent, Stamford, 2007

Area Median Income	Income Category	1 person	2 persons	4 persons
\$117,800	Low Income (80% AMI)	\$53,600	\$61,250	\$76,550
	<i>Affordable Monthly Rent</i>	<i>\$1,340</i>	<i>\$1,531</i>	<i>\$1,914</i>
	Very Low Income (50% AMI)	\$41,250	\$47,100	\$58,900
	<i>Affordable Monthly Rent</i>	<i>\$1,031</i>	<i>\$1,178</i>	<i>\$1,473</i>
	Very Low Income (30% AMI)	\$24,750	\$28,300	\$35,350
	<i>Affordable Monthly Rent</i>	<i>\$619</i>	<i>\$708</i>	<i>\$884</i>

Source: U.S. Department of Housing and Urban Development

¹⁰ Center for Economic and Policy Research and the National Low Income Housing Coalition, *Ownership, Rental Costs and the Prospects of Building Home Equity*, May 2008 and The National Low Income Housing Coalition, *Out of Reach*, retrieved September 2008 from <http://www.nlihc.org/oor/oor2008/data.cfm?getstate=on&getmsa=on&msa=1215&state=CT>

¹¹ HUD, *State of the Cities Data Systems: Comprehensive Housing Affordability Strategy (CHAS) Data*, 2000.

BASIC NEEDS

Homelessness

One in five survey respondents say that services and shelters for the homeless are among the most important needs of Stamford. According to the most recent Connecticut Homeless Management Information System (HMIS) Report, in 2008, there were 8,337 homeless persons in Connecticut, an increase from 7,857 in 2007.¹² The 2008 Point-in-Time count of homeless persons included a count of the homeless on one night in January in Stamford and Greenwich (Table 16). The count found 267 homeless adults; an increase from 2007. Sixteen of those included in this count had served in the military. There is an expectation that the number of homeless who are veterans may increase as military personnel continue to be discharged from the wars in Iraq and Afghanistan. It is estimated that there were at least 5,000 homeless veterans in Connecticut in 2006.¹³

Survey Results at a Glance

% Rating as a top 5 need:

➔ Services and shelters for the homeless 19%

Table 16 – Stamford and Greenwich – Number of Sheltered and Unsheltered Homeless, 2007 and 2008

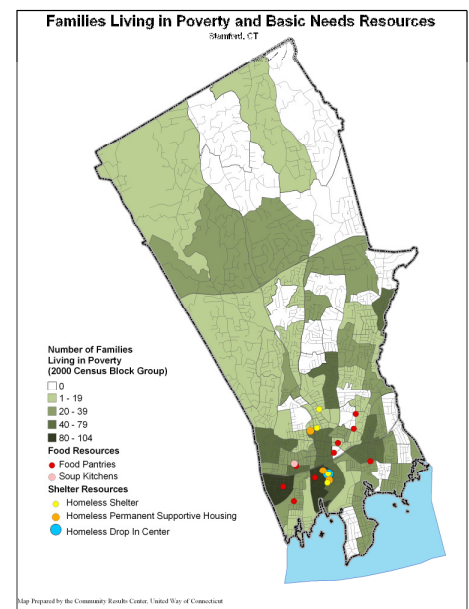
	Sheltered				Unsheltered			
	Single adults		Adults in families		Single adults		Adults in families	
	2008	2007	2008	2007	2008	2007	2008	2007
Male	146	124	3	7	38	40	0	0
Female	29	31	37	28	11	5	1	1
Transgender	1	1	0	0	0	1	0	0
Unknown	1	2	0	0	0	0	0	0
Total	177	158	40	35	49	46	1	1

Source: Connecticut Coalition to End Homelessness, Corporation for Supportive Housing, Reaching Home Campaign, Connecticut Counts 2007 and 2008, Point in Time Homeless Count, 2007 and 2008.

Stamford currently has two shelters for the homeless: St. Luke's LifeWorks and Shelter for the Homeless that serve both the City and surrounding towns. The shelters serve approximately 1,000 persons each year. There is a charge for staying at the shelters. Interviews with administrators at both shelters found that the shelters are often full and there are few places to send those who are homeless once they leave the shelter. Both shelters have programs that focus on education and job training. These shelters are also developing permanent supportive housing units where the homeless can transition to once they leave the shelter. Permanent supportive housing provides housing with supportive services.

Map 4 shows the location of the shelters and other basic needs resources in Stamford. (See Appendix D for a larger version of this map.)

Map 4: Families in Poverty and Basic Needs Resources



¹² Reaching Home, *Homelessness in Connecticut*. Retrieved March, 2007 from http://www.ctreachinghome.org/index.php?option=com_content&task=view&id=37&Itemid=57

¹³ National Alliance to End Homelessness, *Homeless Veterans in America*, Retrieved October, 2008 from http://naeh.org/section/data/homelessnessinst/_naeh_page.

BASIC NEEDS

St. Luke's LifeWorks (SLLW)

- SLLW serves families, single adults, people living with HIV/AIDS and people recovering from mental illness. The agency provides emergency, transitional and permanent supportive housing. SLLW serves approximately 450 unduplicated people (primarily women) per year. Those who stay at the shelter are required to work 20 hours per week or be enrolled in school.
- SLLW provides educational skill development based on various competencies including self-sufficiency, employment, housing, and daily living skills. Their education program consists of classes and workshops and one-on-one tutoring.
- The shelter has 66 units of supportive housing in 3 locations for single adults. There are 4 units for families affected by HIV/AIDS and 3 apartments for families. As of August 2008, there were 100 people on the waiting list for supportive housing.

Administrators of SLLW indicate that there has been a change in the population they serve. The shelter reports an increase in intact families and that they are seeing an older population. Previously, they had primarily served single mothers. The shelter has also established relationships with various educational entities in the area to provide training and to help people work toward developing career goals. SLLW staff suggest that they are now seeing the most growth in educational programs, and they are currently focused on building more of these educational programs. The shelter has recently opened a computer lab and is expanding its number of computer classes.

Shelter for the Homeless

- Shelter for the Homeless serves single men 18 and older. They have 67 beds year round and 90 beds during the winter. On average, the shelter serves 600 unduplicated people a year.
- The shelter has mandatory case management for residents that seeks to create a plan that leads to self-sufficiency.
- Shelter for the Homeless has 7 single-room-occupancy units of permanent supportive housing and 5, single-room-occupancy permanent housing units.

Administrators at the shelter indicate that the City has an adequate supply of shelter beds, but an inadequate supply of low income and permanent supportive housing units. Because of this, the shelter is seeing people stay for a longer period of time.

A focus group was conducted with residents of SLLW and the Shelter for the Homeless. These residents say that Stamford has good shelters with effective programs, but there are few options for permanent housing. They indicate what they need most to become self-sufficient:

Comments from the Community

- *"I am 23 years old, working full time and paying for health insurance for myself and my son, but I cannot afford housing and cannot get into public housing, so for now I need to stay at the shelter."*
- *"Employers in Stamford need to consider hiring ex-offenders."*
- *"Stamford has large employers, but they do not offer job training to residents."*
- *"Stamford needs more people to work as adult mentors to help the homeless."*

BASIC NEEDS

Food

Discussions around basic needs often focused on the current economy and on the rising prices of food and fuel. In 2007, Connecticut was listed as one of the top ten states in terms of cost of living.¹⁴ It was found that, among the 48 contiguous states, Connecticut was the most expensive state for both the price of groceries and utilities. Agencies that provide emergency food are bracing for the winter months when some residents may be unable to afford both heating oil and food. The fear also exists that donations to food pantries will decline as food and heating costs rise.

Survey Results at a Glance

% Rating excellent or good:

- Crisis assistance for those in need of food, shelter or financial aid 31%

% Rating as a top 5 need:

- Assistance for those in need of food 19%

One in five survey respondents say that assistance for those in need of food is a top five need of Stamford. Less than a third indicate that Stamford does a good or excellent job of providing crisis assistance to residents in terms of food, shelter, or financial assistance. Focus groups and interviews with social service providers indicate an increased demand for food at the food pantries. Person-to-Person, a Darien agency that provides food, clothing and furniture to residents of Norwalk and Stamford has seen requests for food increase 41 percent in 2008 from the previous year. The agency reports serving roughly 10 families every half hour. Families are permitted to come to the agency for food once every 30 days. In the past, they have served just over 17,000 people per year, but in 2008 that has increased to just over 20,000.

The number of Stamford residents receiving SNAP benefits (Supplemental Nutrition Assistance Program, formerly known as the Food Stamp Program) has risen in past years. In January 2008, there were over 3,800 adults participating in SNAP; a 4 percent increase over January 2007 (Table 17). Given that there are over 9,000 residents of Stamford living below the federal poverty level and that SNAP eligibility levels are higher than poverty level incomes, it is estimated that close to 40 percent of those who are eligible for SNAP are currently accessing that benefit. Table 18 shows monthly income eligibility requirements and monthly benefits for SNAP. Requests to 2-1-1 for information on food pantries and SNAP have also increased in 2008 from 2007 (Table 19).

Table 17 – Number of SNAP (Food Stamp) Participants

Town	Participating January 2008	Participating January 2007
Stamford	3,817	3,672
Darien	45	34
Greenwich	463	425
New Canaan	67	58
Norwalk	2,599	2,459

Source: Connecticut Department of Social Services

¹⁴ Connecticut Voices for Children, *The State of Working Connecticut, 2008: Wage Trends*, August 2008.

BASIC NEEDS

Table 18 – SNAP (Food Stamp) Eligibility and Benefit

	SNAP Eligibility Monthly Income Limits*	SNAP Eligibility Monthly Benefit	Federal Poverty Levels Monthly Income Guidelines
Household of one	\$1,107	\$162	\$866
Household of two	\$1,484	\$298	\$1,166
Household of three	\$1,861	\$426	\$1,466
Household of four	\$2,238	\$542	\$1,766

* Assets must be less than \$3,000 for households over 60, or disabled and \$2,000 for all others.

Source: Connecticut Department of Social Services

Table 19 – 2-1-1 Requests for Information for Food Resources

	Jan. to Nov. 2008	Jan. to Nov. 2007	Jan. to Nov. 2006
Food Pantries	295	151	146
SNAP/Food Stamps	128	99	96

Source: United Way 2-1-1

Fuel/Utilities

At the time of this information was being gathered, it was still expected that the cost of home heating oil could approach \$5.00 per gallon, and prices had not yet begun to drop. As such, a quarter of survey respondents indicated that fuel and utility assistance is a top five need.

Both social service providers and residents discussed the rising cost of gasoline and home heating fuel as a major concern for this coming heating season. Last year, on average, a gallon of heating oil cost \$3.30. The expected rise in heating oil caused many state residents to lock in rates during the summer. However, in the fall, prices began to decline, so even though heating oil costs may be more comparable to the 2008 heating season than expected, residents and agencies that locked in oil rates may still face steep energy costs.

Calls to United Way 2-1-1 for information on utility assistance have increased 39 percent in Stamford in the first 11 months of this year when compared to the same period last year (Table 20). One City official suggested that Stamford may need to establish emergency shelters this winter to help those unable to heat their homes, but that the City has not budgeted for this possibility. Residents spoke of their concern of not being able to keep up with price increases. Representatives from several social service agencies suggested that the cost of both gas and heat may force them to shift their spending away from service initiatives. Other agencies say the cost of gasoline is making it difficult for staff to make home visits to clients.

Residents have several options for paying for heat and utilities. The main assistance programs are the federally funded CEAP (Connecticut Energy Assistance Program) and CHAP (Contingency Heating Assistance Program) These programs are for households at or below 150 percent of the Federal Poverty Level (FPL) with limited assets. Several programs also offer assistance to those at 200 percent of the FPL (150% of FPL for a family of 4 is \$31,800 while 200% of FPL is \$42,400).

Survey Results at a Glance

% Rating as a top 5 need:

➡ Fuel/utility Assistance 26%

BASIC NEEDS

Table 20 – 2-1-1 Requests for Information for Utility Assistance

Jan. to Nov. 2008	Jan. to Nov. 2007	Jan. to Nov. 2006
775	558	639

Source: United Way 2-1-1

Comments from Focus Groups

- *“The cost of heating oil is going to be the major issue – there is the possibility of people freezing. The City may have to set up emergency shelters if there is a crisis situation.”*
- *“How will we service clients given the increase in gas prices?”*
- *What underpins any planning is the issue of rising energy costs and the impact on institutions and individuals. Rising energy costs will have a serious impact on agencies.”*

Transportation

The needs assessment survey found that a majority of respondents rated accessibility to public transportation positively. Fifty-six percent rated the accessibility to public transportation as excellent or good. Only 15 percent of respondents selected the need for improvements to public transportation as a top five need. However, a quarter of older adults, those ages 65 and above, identified accessibility to public transportation as a top five need, and 44 percent of these respondents rated transportation as excellent or good (Table 21). Discussions in the focus groups also included comments on the efficiency of getting around Stamford for older adults and other residents.

Survey Results at a Glance

% Rating excellent or good:

➡ Accessibility of public transportation 31%

% Rating as a top 5 need:

➡ Accessibility of public transportation 15%

**Table 21 – Accessibility to Public Transportation
Percent Rating Excellent or Good, by Demographics**

	Total	Income <\$50,000	Income \$50,000+	Age 65+	With children	White	Minority
Accessibility to public transportation	56%	63%	52%	44%	58%	47%	65%

Comments from Focus Groups

General

- *“Westside has the lowest amount of buses. Need to make bus routes more receptive to the needs of riders.”*
- *“Too few marked bus stops and schedules are erratic. As more people move downtown, bus service there will improve but the outlying areas will suffer.”*

Older Adults

- *“The City gives seniors ½ price taxi vouchers but you have to go to City hall to get them and it’s hard for some seniors to get there.”*

Undocumented Immigrants

Roughly 20 percent of survey respondents identified the need for the economic and social integration of immigrants as a top five need. Discussions during interviews and focus groups revolved around the perception that there has been an increase in the population of undocumented immigrants. There was a general feeling that Stamford is not hostile to its undocumented population; however, it was felt that the population is reluctant to come forward to seek services that it may need.

Focus group discussions with recent immigrants, including those who are undocumented, found that Stamford is an attractive city because of the job opportunities, proximity to New York and a low crime rate. These immigrants also say that while Stamford is an expensive city in which to live, it is difficult to go elsewhere because moving without identification is risky. They say it is difficult to find affordable housing in Stamford, and it is not uncommon for apartments to be overcrowded.

Most of the undocumented immigrants present at the focus group said it is very difficult to find a doctor who will see them. Social service providers say there is a need to ensure that all people can get access to health care when needed. They say that often undocumented immigrants are reluctant to seek health care until they are very sick and need emergency room care.

There has also been a concerted effort by Connecticut Legal Services and the International Institute to ensure that day laborers, who are most often undocumented immigrants, are not taken advantage of by employers. Often undocumented workers have not received wages for their work.

Comments from Focus Groups

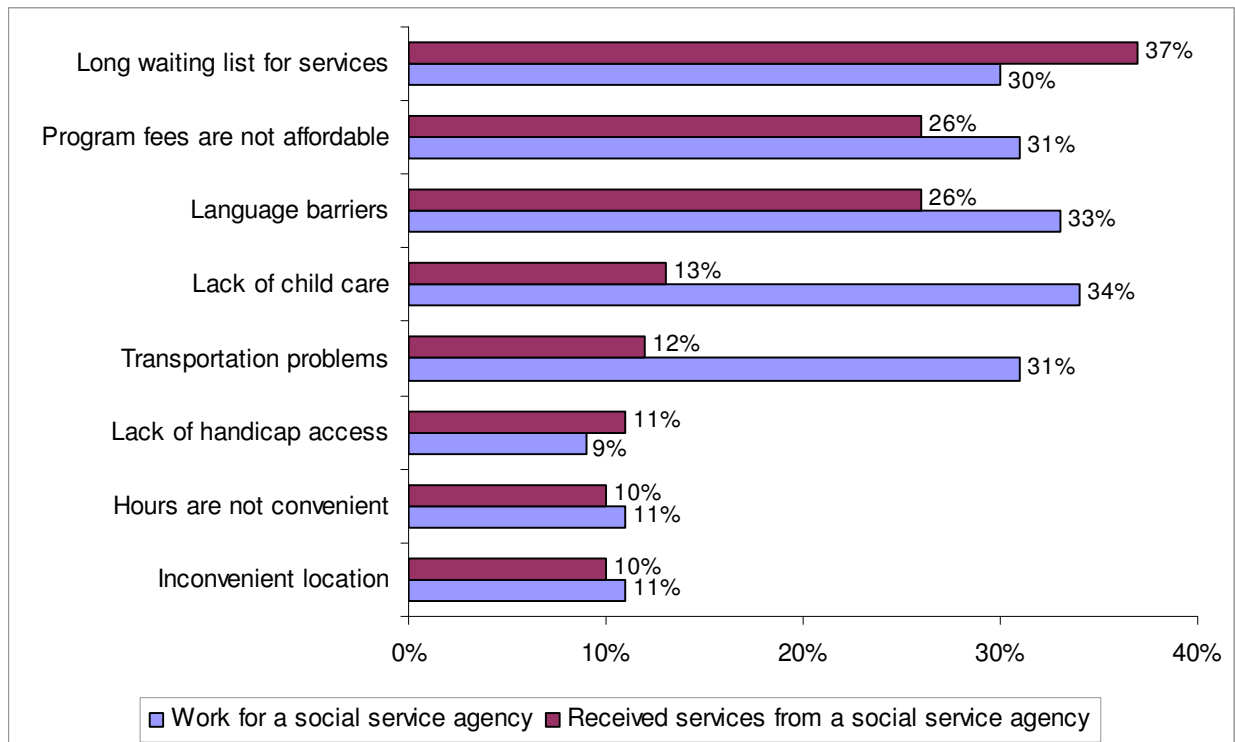
- *“Stamford has not come together to look at the needs of the immigrant population in a comprehensive way.”*
- *“The undocumented are often treated like walking ATM machines by criminals, because they get paid in cash and do not have IDs that would enable them to open bank accounts.”*
- *“We need to deal with the literacy of immigrants or they end up as day laborers.”*
- *“This population needs other services. We need to set up a worker center that is a no hassle zone where they can find resources.”*

BASIC NEEDS

Social Service Support

Those who work for social service agencies or have received social services in Stamford in the past year were asked about barriers they may have encountered in dealing with various agencies. Respondents were asked whether the potential barriers posed a major or minor concern or were not a concern. There is a difference between what social service providers and those who receive services deem to be barriers. For those who have received services, the biggest barriers were long waiting lists for services, program fees, and language barriers (Figure 5). Those who work for a social service agency cited the lack of child care, language barriers, transportation and affordability as major concerns. The difference may be due to the various social service agencies both groups are referencing, or, in some cases, to a possible disconnect between the perceptions of service providers and clients.

Figure 5 – Barriers to Social Service Support
Percent Major Concern



BASIC NEEDS

Public Safety

Safe, crime-free neighborhoods were one of the top five needs identified in the needs assessment survey. The Stamford Police Department recently released its strategic plan for the next five years. The plan reports that Stamford has a fairly low crime rate relative to other comparable American cities.¹⁵ It says that Stamford has been consistently rated as one of the ten safest cities in the country. In the report, the Police Chief also says that maintaining a low crime rate will be a challenge as the City becomes more culturally and economically diverse. The report finds that the diversity of Stamford's population is found among a wide range of residents, including both undocumented workers and affluent residents. Recent crime statistics show that incidence of property crime in Stamford decreased 21 percent between 2005 and 2007 and total crime decreased 14 percent during this same time period (Table 22).

Survey Results at a Glance

% *Rating excellent or good:*

➡ Safe, crime-free neighborhoods 53%

% *Rating as a top 5 need:*

➡ Safe, crime-free neighborhoods 36%

Table 22 – 2007, 2004 Crime Statistics

Offenses	2007	2005	Percent change 2007/2005
Violent Crime	336	355	-5.3%
Murder	3	1	300%
Rape	33	18	83.3%
Robbery	129	157	-17.8%
Aggravated Assault	171	179	-4.5%
Property Crime	1,882	2,390	-21.3%
Burglary	332	427	-22.2%
Larceny	1,316	1,740	-24.4%
Motor Vehicle Theft	234	223	4.9%
Arson	11	4	175%
Total	6,454	7,499	-13.9%

Source: FBI Unified Crime Statistics

¹⁵ Stamford Police Department, *Policing Stamford 2008-2012, The Strategic Plan for Improvement*, January 2008.

CHILDREN AND YOUTH

There are approximately 26,000 children and youth under the age of 18 in Stamford, comprising 22 percent of the City's population. Thirty percent of all households contain children and youth.

Stamford's school system is becoming more racially and ethnically diverse. In 2002, the minority enrollment which was close to 55 percent, increased to 58 percent by 2007.

Close to a third of survey respondents with children rated childcare and quality programs for infant/toddler and preschool children as a top five need. Thirty-five percent of respondents say there is a need for more after-school and recreation programs.

Supporting the healthy growth and development of this segment of the population was a key issue among focus group participants and survey respondents. Focus group discussions concerning children and youth revolved around the need for more affordable childcare, especially for infants and toddlers, and around the need for more recreation facilities and after-school programs.

This section will review childhood poverty data, early education initiatives, and education data in Stamford.

Survey Results at a Glance

% Rating as a Top Need – Respondents with Children

➔ Quality after-school and recreation programs for children and youth	35%
➔ Quality programs for infants, toddlers & preschool children	31%
➔ Childcare	31%

% Rating Excellent or Good– Respondents with Children

➔ Recreation facilities (parks, playgrounds, beaches)	65%
➔ Quality childcare programs for infants, toddlers and preschool children	44%
➔ Quality after-school and recreation programs for children and youth	44%
➔ Opportunities for success in school for children and youth	44%

Childhood Poverty

The academic achievement of children has been correlated with family income and issues of poverty.¹⁶ Research has found that children who grow up poor tend to have lower levels of academic achievement throughout their school years. In Stamford, 5.8 percent of families live below the federal poverty level (FPL) (Table 23). However, many more families may experience economic insecurity because the FPL is low considering that the self-sufficiency standard for Stamford. In Stamford the self-sufficiency standard for a family of 4 is \$57,200 while the FPL is \$21,200.¹⁷ This standard means that a family needs to earn over three times the poverty rate to maintain self-sufficiency. Female headed families with children have even higher levels of poverty. Additional information on the economic status of children and of families with children finds that:

¹⁶ Connecticut Association for Human Services, *Seeds of Prosperity: Children of Low-Income Working Families*, 2006.

¹⁷ Office of Workforce Competitiveness, *The Real Cost of Living in 2005: The Self-Sufficiency Standard for Connecticut*, December 2005.

CHILDREN AND YOUTH

- There were 773 child recipients of Temporary Family Assistance in Stamford in 2005, a decrease from 884 in 2003.¹⁸
- In 2005, there were 1,995 child recipients of food stamps/SNAP, an increase from 1,626 over 2003.¹⁹
- In the 2006-2007 school year, 38 percent of students were eligible for free or reduced meals, a decrease from 44 percent in 2005-2006 (Table 24).²⁰ It was commented in the focus groups that there may be more children in the school system who could qualify for free or reduced meals, however, they may not apply because their families are undocumented immigrants.

While many factors impact the health and emotional, social, physical, and academic development of a child, the identification and support for children who live in families experiencing economic insecurity is key to helping children succeed academically. Map 5 shows education resources and concentrations of poverty in Stamford. (See Appendix D for a larger version of this map.)

Table 23 – Percent Living Under Federal Poverty Level in Stamford

	2006	2000
All families	5.8%	5.4%
Families with children < 5	5.9%	8.1%
Families with children < 18	10.3%	7.0%
Female headed families with children < 5	18.8%	26.8%
Female headed families with children < 18	27.7%	19.0%

Source: 200 U.S Census, 2006 American Community Survey

Map 5 – Families in Poverty and Education Resources

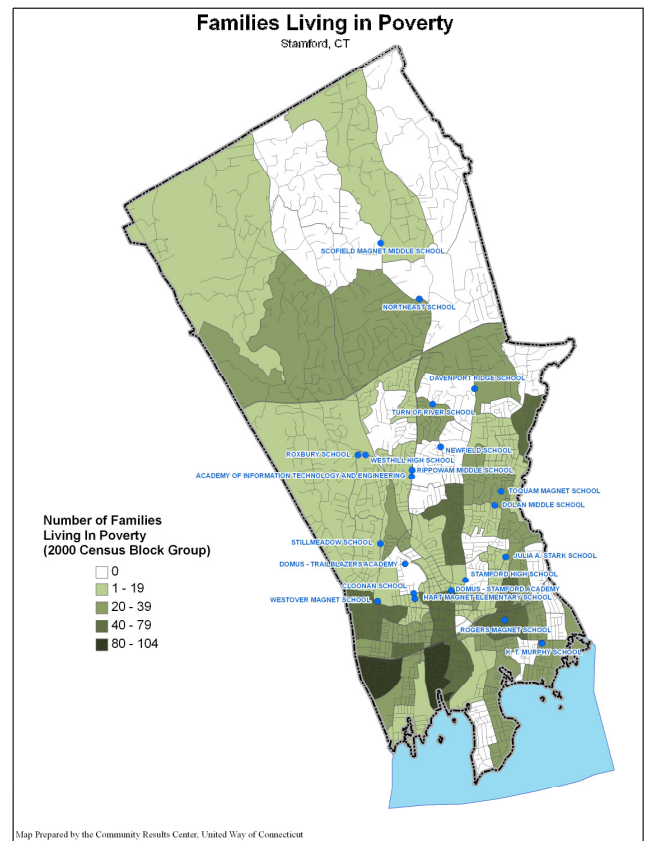


Table 24 – School Age Children Eligible for Free/Reduced Meals

School Year	Percent Eligible for Free/Reduced Meals	Number Eligible for Free/Reduced Meals
2006-2007	38%	5,773
2005-2006	44%	6,672
2004-2005	43%	6,473
2003-2004	40%	6,120
2002-2003	32%	4,902

Source: CT State Department of Education

¹⁸ Connecticut Association for Human Services, *Seeds of Prosperity: Children of Low-Income Working Families*, 2006.

¹⁹ Ibid.

²⁰ Connecticut Department of Education, *Strategic School Profiles*, 2005-2006.

School Readiness

Stamford has embarked on a comprehensive community planning process aimed at producing a plan focused on improving services for young children ages birth to 8. There are approximately 15,000 children in Stamford in this age category. One of the goals of the initiative is to ensure that all children enter kindergarten ready to succeed. Access to quality preschool programs can help ensure a child's academic success. Attendance in preschool varies widely in cities and towns throughout Connecticut. It is important to note that the definition of preschool experience and the data collection method for measuring the number of children with preschool experience is not standardized. Nonetheless, it is the number most widely used in Connecticut as a measure of school readiness. In the State as a whole, 79 percent of kindergartners have preschool experience.

Data concerning preschool experience for Stamford indicates the following:

- In 2007, 82 percent of Stamford kindergartners had preschool experience (Table 25). Experience levels for the City's public elementary schools range from 66 percent to 100 percent (Table 26).
- The 18 percent of children without preschool experience translates into an estimated 270 children.
- In Stamford, the average cost of a preschool center is \$245 per week, much more than the state average of \$188 per week (Table 27). The cost for an infant/toddler center averages \$355 per week in Stamford and \$233 statewide.²¹ Therefore, on an annual basis, the cost of a preschool or infant/toddler center in Stamford ranges from between \$12,700 to \$18,400.

Table 25 – Percent of Kindergartners with Preschool, Nursery School, or Head Start Experience

	2006-2007	2001-2002	Change
Connecticut	79.3%	75.1%	4.2
Stamford	81.6%	79.5%	2.1
Darien	97.6%	98.7%	-1.1
Greenwich	94.9%	94.1%	0.8
New Canaan	99.3%	100.0%	-0.7
Norwalk	85.1%	86.4%	-1.3

Source: CT State Department of Education

²¹ 2-1-1 ChildCare

Table 26 – Percent of Kindergartners with Preschool, Nursery School, or Head Start Experience - Stamford Elementary Schools

	2006-2007	2001-2002	Change
Davenport	69.9%	92.6%	-22.7
Hart	86.8%	75.6%	11.2
Julia A. Stark	95.6%	92.1%	3.5
K.T. Murphy	74.7%	54.4%	20.3
Newfield	90.4%	72.2%	18.2
Northeast	83.3%	100.0%	-16.7
Rogers	71.0%	62.7%	8.3
Roxbury	65.6%	88.2%	-22.6
Springdale	79.6%	82.9%	-3.3
Stillmeadow	86.7%	87.6%	-0.9
Toquam Magnet	100.0%	83.5%	16.5
Westover	79.5%	56.9%	22.6

Source: CT State Department of Education

Table 27 – Average Child Care Costs, 2008

	Infant/Toddler Centers	Preschool Centers
Connecticut	\$233	\$188
Stamford	\$355	\$245
Darien	\$285*	\$200
Greenwich	\$353	\$306
New Canaan	\$200*	\$226
Norwalk	\$282	\$224

*Cost for Infant/Toddler Homes only

Source: 2-1-1 Child Care

According to the Mayor's School Readiness liaison, Stamford needs approximately over 300 additional day care slots. It was said that the biggest need is for the infant/toddler care based on the daily inquiries received by the liaison office from families looking for infant care. Infant/toddler care is more expensive than care for older children due to higher staffing ratio requirements. Table 28 lists the number of infant/toddler and preschool day care slots in Stamford.

Other concerns facing Stamford include:

- Approximately half of the school readiness population is Hispanic. It was suggested that attention needs to be paid to prepare children for school who grow up in non-English speaking households. There is a lack of resources available to train teachers on early learning strategies for those children.

CHILDREN AND YOUTH

- Middle income families often have the hardest time affording care because their earnings disqualify them from receiving child care assistance. The Mayor unsuccessfully lobbied the legislature to raise income guidelines for Stamford to enable more families to receive assistance for child care.
- Not all corporations in Stamford offer child care.

Table 28 – Number of Slots, Infant/Toddler and Preschool

	Stamford	Darien	Greenwich	New Canaan	Norwalk
Infant/Toddler Centers	578	0	352	30	461
Infant/Toddler Homes	110	13	5	6	82
Preschool Centers	3,007	873	2,228	712	1,745
Preschool Homes	219	23	19	12	200

Source: 2-1-1 Child Care

Education

Eighty-five percent of the school-age population is enrolled in Stamford's public schools, which totals just over 15,000 students. Fifty-eight percent of the school population is described as minority in the 2006-2007 school year, compared to 55 percent in the 2002-2003 school year (Table 29). In terms of academic performance, the Strategic School Profile for the 2006-2007 school year indicates the following:

- Forty-nine percent of fourth grade students in Stamford scored at or above the State's reading goal level, compared with 56 percent statewide (Table 30).
- Thirty-five percent of tenth grade students scored at or above the state goal on the Connecticut Academic Performance Test for Reading Across the Disciplines, compared with 46 percent statewide.
- There is a wide disparity in test scores when reviewing 4th grade reading scores by race and ethnicity. Students who are white or Asian far surpass state averages, while black and Hispanic students fall below average scores for the state (Table 31).
- Stamford has a cumulative drop out rate of 7 percent which is identical to the statewide level.

Table 29– Stamford Student Enrollment by Race – 2007, 2002

Race/Ethnicity	Number of Students 2007	Percent of Student Enrollment 2007	Number of Students 2002	Percent of Student Enrollment 2002
White	6,280	41.8%	6,803	45.2%
Hispanic	4,467	29.7%	3,483	23.1%
Black	3,329	22.1%	4,030	26.8%
Asian American	953	6.3%	719	4.8%
American Indian	7	*	18	0.1%
Total	15,036	100%	15,053	100%

* Less than ½ of 1 percent

Source: Connecticut Department of Education

**Table 30 – Stamford Region Standardized Test Scores 2008
Percent at or Above Goal**

	Connecticut	Stamford
CT Mastery Test (CMT) Grade 4 Reading Scores	56%	49%
CT Academic Performance Test (CAPT) Grade 10 Reading Across the Disciplines	46%	35%
Four year drop out rate class of 2006	7%	7%

Source: Connecticut Department of Education

**Table 31 – Connecticut Mastery Test (CMT) Grade 4 Reading Scores, 2008
Percent At or Above Goal**

	Total	White	Black	Hispanic	Asian	Free/ Reduced Meals	English Language Learners
Connecticut	56%	68%	29%	28%	72%	28%	8%
Stamford	49%	68%	27%	35%	77%	29%	11%

Source: Connecticut Department of Education

Recreation/After School Programs

Recreation facilities and after-school programs are essential for enriching the lives of school-age children. Participation in after-school programs can help young people stay out of trouble, improve interpersonal and academic skills, and broaden skills in general. The need for more after-school programs was discussed during the focus groups and interviews and was cited in the resident survey.

Thirty-five percent of survey respondents cited the need for after-school programs as a top five need. Parents in the focus groups said that more after-school programs that are free are essential to keeping children off the streets. They said there are not enough programs nor are their adequate playground facilities for children. It was said that there is especially a need for after-school programs that offer support for children with mental health and emotional issues.

While it was implied that programs were needed for all age groups, it was thought that programs were most needed for older teens who many thought were more at risk for adopting bad behaviors. Parents said that in the past, many older teens were able to find work, but in the current economic climate, jobs that were traditionally held by teens are now being filled by adults.

While 66 percent of respondents said that recreation facilities in Stamford were excellent or good, discussions in the focus groups included suggestions for improvement for those facilities. During focus groups with residents, many commented that some parks need better maintenance. They also offered these suggestions:

CHILDREN AND YOUTH

Comments from the Community

- *“Children need safe places to play, the schools need to be kept open after hours*
- *“The city needs a skating rink.”*
- *“Kids need to do more than hang around on the street; they need playgrounds.”*

At-Risk Youth

The number of Stamford youth involved in the juvenile justice system decreased to 244 in fiscal year 2008 from 264 in the previous fiscal year (Table 32). Juvenile justice involved youth include those who have committed “delinquency” offenses, such as burglary, larceny, and assault, those who have committed “status” offenses such as truancy and running away from home, and Youth In Crisis who are status offenders age 16 and 17.

**Table 32 – Juvenile Justice Involved Youth
Fiscal Year 2007 and 2008+**

Year	Total Youth in Juvenile Justice System (Unduplicated)	Delinquency*	Status Offenders**	Youth in Crisis***	Truancy
2008	244	190	57	13	42
2007	264	193	81	15	53

Fiscal year runs from July 1 to June 30

* Delinquency – offenses that are codified in the general statutes (burglary, larceny, assault, etc.)

**Status offenses include truancy, runaway, and beyond parental control.

*** Youth in Crisis – status offenders age 16 or 17

Source: Connecticut Court Support Services

Access to Health Care

Overall, the needs assessment found that 40 percent of respondents rated access to health services, both medical and dental, as excellent or good. Discussions within the focus groups centered on the same health care issues that are affecting communities around the country. The issues include the numbers of those uninsured or underinsured, the rising cost of delivering healthcare and the reductions in reimbursement rates from insurance providers that continues to decrease the number of available health providers.

Survey Results at a Glance % Rating excellent or good

Support for those in need of:

➡ Medical and dental services	40%
➡ Support for victims of abuse	37%
➡ Substance abuse services	35%
➡ HIV/AIDS services	34%
➡ Mental health services	31%
➡ People with disabilities can maintain independence	28%

In 2006, there were close to 78,000 residents of Fairfield County who were uninsured (Table 33).²² Young adults (ages 19 to 29) have the highest risk of being uninsured. Twenty-two percent of this age group statewide is uninsured. Nearly three-quarters of these are employed full-time.²³ The State's new Charter Oak Health Plan was designed to make health insurance affordable for those currently uninsured; or underinsured, however, the State has found it challenging to sign up a sufficient number of physicians who will accept Charter Oak due to the level of reimbursement the plan offers, so its impact on the uninsured is low at this point.

Table 33 – County Uninsured Rates and Estimated Number of Uninsured 2006

County	Percent Uninsured	Estimated Number of Uninsured
Fairfield	8.6%	77,900
Hartford	4.3%	37,600
Litchfield	1.8%	3,500
Middlesex	2.9%	4,800
New Haven	7.3%	62,100
New London	8.1%	21,600
Tolland	5.6%	8,200
Windham	8.5%	9,900

Source: Office of Healthcare Access

HUSKY (Health Insurance for Uninsured Children and Youth)

In 2007, the U.S. Census Bureau estimates that there were 43,000 children under the age of 18 who are uninsured in Connecticut.²⁴ This represents just over five percent of all Connecticut children. This represents a decline from 2005 when 62,000 children under 18 were uninsured representing 7.4 percent of this population.

²² Office of Healthcare Access, *Databook: Health Insurance Coverage in Connecticut*, January 2007.

²³ Office of Healthcare Access, *Overview of OHCA's 2006 Young Adults Survey*, March 2007.

²⁴ Connecticut Voices for Children, *Uninsured Children in Connecticut 2007*, September 2008.

Children through age 18 qualify for the State's HUSKY A coverage if their families have incomes at or below 185 percent of the federal poverty level (\$39,220 for a family of 4). HUSKY Part B extends this coverage to children in families with incomes between 185 and 300 percent of the federal poverty level (300 percent of FPL is \$63,600 for a family of 4), with premiums and co-payments based on income. Statewide, there are an estimated 29,000 children under age 18 who live in families with income at or below 200 percent of the federal poverty level who are uninsured. Most of these children are eligible for the HUSKY program.²⁵

In Stamford, enrollments in the State's programs have increased from 2004 to 2007 for both HUSKY A and B (Table 34). While enrollment in HUSKY is increasing, statistics show that this insurance coverage is not leading to preventive care visits. Approximately two-thirds percent of children ages 2 through 19 who are enrolled in HUSKY received well child care in 2006 and just over half did not receive preventive dental care.²⁶ The challenge is often finding providers who accept HUSKY coverage, particularly dentists.

Table 34 – HUSKY Enrollments

	2007		2004	
	HUSKY A	HUSKY B	HUSKY A	HUSKY B
Stamford	8,403	654	8,297	537
Darien	136	17	139	20
Greenwich	1,190	139	1,133	96
New Canaan	106	22	137	13
Norwalk	6,067	407	6,023	361

Source: CT Department of Social Services

Stamford Health Concerns

A number of issues arose during focus groups with social service providers and interviews with community representatives concerning health care. The main issues concerned the need for expanded capacity in the City's health clinics and health care for undocumented immigrants.

Health Services

Comments heard during focus groups and interviews suggested that the City needs to expand its health care capacity, especially for those who are uninsured or underinsured. Stamford's federally qualified health centers, operated by Optimus Health Care, provide health care services to those who are insured, underinsured and uninsured. During the period of data collection for this needs assessment, Optimus was in the process of consolidating two of its offices to a larger facility on Atlantic Street, and expanding its services. Recent changes at Optimus involve the expansion of evening and weekend hours, a change

²⁵ Connecticut Voices for Children, *Uninsured Children in Connecticut 2007*, September, 2008.

²⁶ Connecticut Voices for Children, *Keeping Children and Families Health and Insured through HUSKY*, September 2008/

from scheduled appointments to walk-in access at its Atlantic Street facility, and the addition of a podiatrist and a psychiatrist at that site. Optimus also operates a Health Center in conjunction with Stamford Hospital where patients are seen by appointment. That facility includes a dental clinic. It is uncertain how these changes in services at Optimus might affect comments heard in the focus groups.

Focus group participants also suggested that it is increasingly challenging to find health care practitioners that accept Medicare and Medicaid. They also said that this is especially true when seeking health care from a specialist. Interviews and focus groups provided the following suggestions for expanding health care access:

- Hire more community health nurses to provide direct patient health services including outreach to seniors, new mothers, and vulnerable populations, such as undocumented immigrants.
- Open more satellite clinics that focus on preventive approaches.
- Address the problems that cause poor control of hypertension in seniors. (This is said to sometime occur due to medication cost.)
- Hire a public health educator to develop public health education programs.
- Hire more health inspectors that can be dedicated to a particular activity such as housing.
- Improve data management for the school nurses to track health-related matters in schools.
- Increase walking and bike paths.

Comments from Focus Groups

- *“The Stamford Hospital Emergency Room is flooded; more people need to know about the Optimus clinics.*

Undocumented Immigrants

One City official commented that a challenge with the undocumented population is that since no one knows how big that population is, it is not possible to understand the scope of its health care needs. It was suggested that the City needs to get a sense of the level of health literacy among both legal and undocumented immigrants. It was thought this could alleviate some of the burden placed on hospital emergency rooms that tend to treat those who are undocumented and are often seen as their only health care option. One suggestion was to create a health literacy program that could be included in ESL (English as a Second Language) curricula to help determine the level of understanding people have about health issues and health care options and can help to educate them about healthy living.

Both undocumented immigrants and social service providers suggested that it is difficult for undocumented immigrants to get health care. Many put off seeing a doctor until they are very sick and then need considerably more care. While there are health clinics located in Stamford, there was little knowledge of them by the undocumented and documented immigrants in the focus group. The City has a mobile medical health care unit that provides screening and care for vulnerable populations, but few people in the focus groups knew of this service.

Comments from the Undocumented Community

- *“There is a lot of paperwork when you go to a clinic or to a doctor. That keeps people away.”*
- *“You can get health care if you are very very sick, otherwise you have to wait months for an appointment.”*
- *“The City could establish a health literacy program in ESL classes to help immigrants, both legal and undocumented, understand health issues and the health care system.”*

Domestic Violence

There has been an effort statewide to call attention to the lack of 24 hour staffing at domestic violence shelters. This need was echoed in Stamford. In fiscal year 2007, over 53,000 victims of domestic violence were served by Connecticut's 18 shelter programs.²⁷ Stamford's Domestic Violence Crisis Center (DVCC) serves Stamford and surrounding towns. The shelter has 15 beds for women and children. There are currently no shelter beds for male victims of domestic violence in Stamford.

DVCC reports having served 186 women in its shelter, and 700 adults through its counseling services in fiscal year 2008. DVCC statistics show that shelter clients tend to stay an average of 21 days and are allowed to stay up to 60 days. DVCC reports that upon leaving the shelter, 30 percent of shelter residents are placed in local housing, 30 percent need to leave the state for safety reasons and 30 percent return home when alternate housing cannot be found. The shelter reports that typically, 30 percent of police calls are related to domestic violence. DVCC also offers services in the hospital emergency room since it is estimated that close to 30 percent of all women in ERs present with domestic violence.

²⁷ Connecticut Coalition Against Domestic Violence. Domestic Violence Fact Sheet; A Connecticut Perspective, 2007.

OLDER ADULTS

There are few differences in what older adults in Stamford identify as the top needs for the City when compared with all survey respondents. Older adults identified accessibility of affordable housing, job training, and safe neighborhoods as the top three needs in the City. Older adults also identified the need for support to help seniors maintain independence and the need for access to medical services.

Interviews with providers of senior services, and focus groups with seniors found consensus on the needs of older adults. The issues identified during these discussions surrounded housing, food and transportation. It was said that in the current economy, there is more of a strain on older adults on fixed incomes to make ends meet. Map 6 shows population density for older adults, housing and services. (See Appendix D for a larger version of this map.)

Housing

In interviews with providers of senior services it was commented that there is a need for more senior housing in Stamford. It was said that there is at least a 6 month wait for senior housing. Several seniors said that current senior housing needs to be equipped with social service support to provide assistance for older adults who may not have family support available.

In terms of housing affordability, half of renters and 43 percent of those who own their home and are age 65 and older are paying more than 30 percent of their income on housing (Table 35). For older renters, white non-Hispanic residents have the highest incidence of housing cost burden, while for owners, close to two-thirds of Hispanics experience a housing cost burden.

Survey Results at a Glance

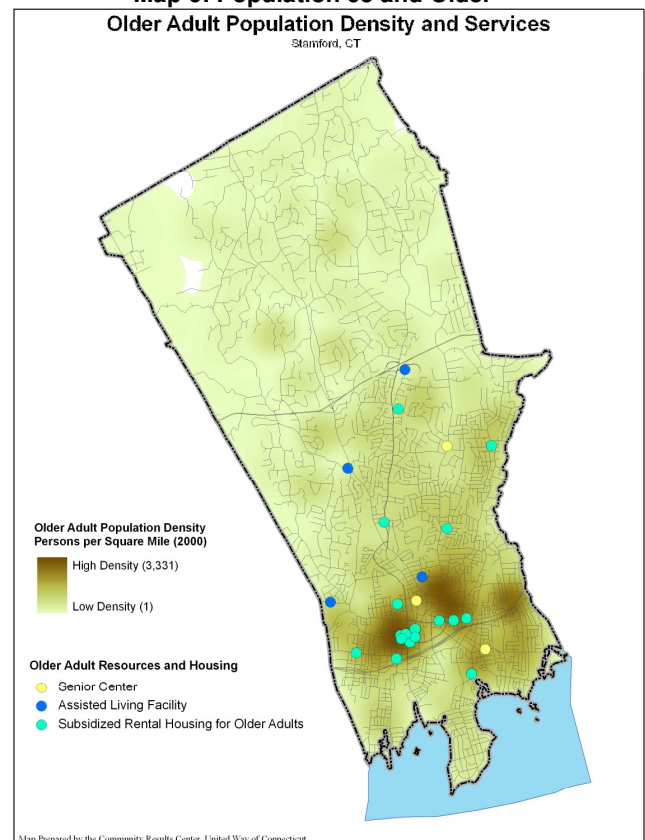
Top 5 Needs of Older Adults

- Availability of affordable housing 64%
- Job training and workforce development 42%
- Safe, crime-free neighborhoods 41%
- Support for seniors to maintain independence 30%
- Access to medical and dental health services 30%

% of Older Adults Rating Excellent or Good

- Support for seniors to maintain independence 39%

Map 6: Population 65 and Older
Older Adult Population Density and Services
Stamford, CT



Map Prepared by the Community Results Center, United Way of Connecticut

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Table 35 – Housing Cost Burden 65+ Households – 2000

	Renters			Owners		
	Total Households	Percent with Housing Problems	Number with Housing Problems	Total Households	Percent with Housing Problems	Number with Housing Problems
All Households	3,240	50.3%	1,629	6,863	43.3%	2,971
White non-Hispanic	2,230	54.5%	1,215	6,260	42.6%	2,666
Hispanic	220	47.7%	104	114	65.8%	75
Black non-Hispanic	690	38.4%	264	379	48.5%	183

Source: U.S. Department of Housing and Urban Development

Comments from the Community

- *“There has been no new senior housing. There is a long waiting list for seniors and affordable housing is relative – even Stamford’s affordable housing is too expensive.*
- *“Social service support is needed in senior housing. The City needs an outreach person to visit each senior housing building weekly and find out what people need.”*

Transportation

Older adults in focus groups commented on the changes they have seen in Stamford. Many were life-long residents of the City, and they said one of the biggest changes was the challenge in getting around. They said that increased traffic is making Stamford a harder City to traverse on foot. They would like to see more attention paid to making the City pedestrian friendly. For older adults, this includes supplying benches at frequent intervals in the downtown area.

Social service providers said that another challenge for seniors who no longer drive is finding transportation service to medical appointments. One issue is that the Red Cross no longer provides medical transportation. They mentioned several options that are currently available:

- Stamford is served by F.I.S.H., a volunteer service, but it was commented that the organization is challenged to find volunteers. Throughout the state, volunteer driving organizations are finding the increase in the cost of gasoline to be a deterrent in recruiting volunteer drivers.
- Stamford seniors are served by the Norwalk Transit District Easy Access program which provides curb-to-curb service to Stamford, Greenwich, Norwalk and Darien. The Stamford Senior Center subsidizes the cost of the fare, reducing the cost to \$1.00 each way for seniors and those who are disabled.
- Stamford offers Share the Fare, a subsidized taxi program for those 62 and older and for those who are disabled. The program offers discounts for taxi service. Vouchers are available in the

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Stamford Government Center building. One senior service provider said that having to go to the Government Center to pick up the taxi vouchers is a deterrent for many older adults who are having trouble getting around.

- Senior Services of Stamford recently secured a grant that enabled them to buy a car and pay for a driver. They provide rides for their senior clients 2 days a week.
- Senior Services of Stamford offers a friendly shopper program in which volunteers go to the store for seniors.

Comments from the Community

- *“Stamford needs more benches for seniors who walk downtown.”*
- *“There need to be better walk signs; car traffic is dangerous at crossings.”*
- *“The senior center needs to provide transportation.”*
- *“The senior center needs more parking; seniors leave because they can’t find a place to park.”*

General Support for Older Adults

While the needs assessment survey found that close to 40 percent of older respondents say their town offers support for older adults seeking to maintain their independence, focus group discussions offered insight into other issues that some older adults in Stamford also face:

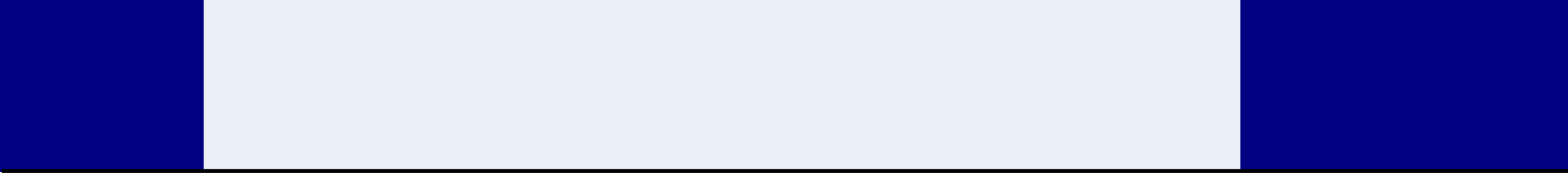
- **Adult day care** – There are currently no adult day care centers in Stamford. Those looking for adult day care have to travel to Norwalk or Greenwich. It was thought that adult day facilities are needed to help limit the need for institutional care. While home care is available for those who can afford it, that type of care can often lack the social stimulation that can be experienced in a day care setting.
- **Support for Grandparents** – Connecticut has more than 113,000 children living in households headed by grandparents or other relatives.²⁸ In Stamford, in 2000, close to 30 percent (approximately 700) of grandparents were caring for grandchildren (kinship care).²⁹ In many cases, grandparents serve as the primary caregivers for children whose parents cannot care for them. Senior service providers said that grandparents often need assistance finding the support they need to care for their grandchildren.
- **Linkages Between Agencies** – One provider said that it would be helpful to have a data link between agencies that service older adults, such as the Area Agency on Aging, the State Department of Social Services and Senior Services of Stamford. This link would allow all of these agencies to fully assist clients by understanding all of their needs.
- **Food/Utility Assistance** – Similar to the needs cited for the general population during the focus groups, older adults also expressed concern over the recent rise in the cost of food, gas and heating oil. Social service providers said they expected to see an increase in the number of older adults seeking food and utility services this winter.

²⁸ GrandsPlace, *State Fact Sheet*, Retrieved on October 15, 2008 from <http://www.grandsplace.org/gp8/ct.html>.

²⁹ U.S. Census, 2000.

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- ***Access to Medical Services*** – Social service providers suggested that the number of doctors who take Medicare is decreasing and this is causing more older adults to use clinics which provide services to both the insured and uninsured and are sometimes overburdened.
- ***Continued City Support for the Senior Center*** – The Stamford Senior Center, located in the Government Center, is open to all seniors and serves between 150 to 200 each day through exercise, nutrition, art and other recreation programs. The center also houses Hispanic Outreach Services for Hispanic Seniors. Older adults commented on the need to maintain the services and programs offered by the senior center.
- ***Comprehensive List of Senior Services*** – Several seniors indicated that it is hard to know what services are available to seniors unless you have access to the Internet. They suggested that Stamford publish a list of available senior services.



Appendix A: Administrative Data Population

Table A-1: Population 2006, Population Growth 2000 to 2006

	Connecticut	Stamford	Norwalk
Population 2006	3,504,809	118,029	78,141
Population growth (2000 to 2006)	2.9%	0.8%	-5.8%

Source: 2000 U.S. Census, 2006 American Community Survey

Table A-2: Population 2000, Population Growth 1990 to 2000

	Connecticut	Stamford	Darien	Greenwich	New Canaan	Norwalk
Population 2000	3,405,565	117,083	19,607	61,101	19,395	82,951
Population growth (1990 to 2000)	3.6%	8.3%	7.7%	4.5%	8.6%	5.9%

Source: 1990, 2000 U.S. Census

Table A-3: Population and Percent of Population by Age, 2006*

	Connecticut	Stamford	Darien	Greenwich	New Canaan	Norwalk
Ages 0-4	202,071 5.8%	7,145 6.1%	2,028 10.3%	4,294 7.0%	1,552 8.0%	5,430 6.9%
Ages 5-17	615,795 17.6%	19,023 16.1%	4,336 22.1%	11,250 18.4%	4,498 23.2%	10,130 13.0%
Ages 18-24	319,432 9.1%	9,951 8.4%	581 2.9%	2,525 4.1%	639 3.3%	5,510 7.1%
Ages 25-49	1,248,358 35.6%	48,514 41.1%	7,081 36.1%	22,430 36.7%	6,594 34.0%	30,993 39.7%
Ages 50-64	648,688 18.5%	20,065 17.0%	3,145 16.0%	10,886 17.8%	3,492 18.0%	14,657 18.8%
Ages 65 -74	225,872 6.4%	6,025 5.1%	1,231 6.3%	4,935 8.1%	1,406 7.2%	5,870 7.5%
Ages 75-84	169,048 4.8%	5,373 4.6%	914 4.7%	3,407 5.6%	901 4.6%	4,060 5.2%
Ages 85+	75,545 2.2%	1,933 1.6%	291 1.5%	1,374 2.2%	313 1.6%	1,491 1.9%

* Data for Connecticut, Stamford and Norwalk is from the 2006 American Community Survey, Data for Darien, Greenwich and New Canaan is from the 2000 U.S. Census.

Source: 2006 American Community Survey, 2000 U.S. Census

Appendix A: Administrative Data Population

Table A-4: Percent of Population by Race, 2006*

Race/Ethnicity	Connecticut	Stamford	Darien	Greenwich	New Canaan	Norwalk
White alone	74.5%	58.3%	94.1%	85.5%	93.9%	58.8%
Black alone	9.2%	14.2%	0.4%	1.6%	1.0%	11.9%
Hispanic (any race)	11.2%	19.7%	2.2%	6.3%	1.7%	24.3%
Asian alone	3.3%	6.2%	2.4%	5.2%	2.3%	4.3%
American Indian/Alaskan Native alone	0.2%	+	+	0.1%	+	+
Native Hawaiian/Other Pacific Islander alone	+	+	+	+	+	0.1%
Some other race/Two or more races	1.6%	1.7%	0.8%	1.3%	1.0%	0.7%

* Data for Connecticut, Stamford and Norwalk is from the 2006 American Community Survey, Data for Darien, Greenwich and New Canaan is from the 2000 U.S. Census.

+Less than ½ of 1 percent

Source: 2006 American Community Survey, 2000 U.S. Census

Appendix A: Administrative Data

Economic

Table A-5: Unemployment, Home Value, Income, Poverty

	Connecticut	Stamford	Darien*	Greenwich*	New Canaan*	Norwalk
Unemployment						
Percent Unemployed 2007	4.6%	3.7%	2.8%	3.0%	2.9%	3.8%
Percent Unemployed Oct. 2008	6.1%	5.0%	4.5%	4.6%	4.6%	5.2%
<i>Number Unemployed Oct. 2008</i>	<i>116,000</i>	3,435	<i>422</i>	<i>1,422</i>	<i>420</i>	<i>2,587</i>
Home Value						
Median Price of a Home 2006	\$275,000	\$693,250	\$1,095,000	\$1,767,500	\$1,475,292	\$545,000
Income						
Median Household Income 2006	\$63,422	\$71,030	\$146,755	\$99,086	\$141,788	\$64,895
Poverty Data						
Percent of families below poverty level 2006	5.9%	5.8%	0.6%	2.5%	1.4%	3.8%
<i>Number of families below poverty level 2006</i>	<i>52,766</i>	1,702	<i>35</i>	<i>405</i>	<i>74</i>	<i>729</i>
Percent of individuals below poverty level 2006	8.3%	8.3%	2.0%	4.0%	2.5%	6.4%
<i>Number of individuals below poverty level 2006</i>	<i>290,899</i>	9,796	<i>391</i>	<i>2,436</i>	<i>484</i>	<i>4,098</i>
Percent of those 65+ in poverty	8.3%	7.4%	2.6%	3.2%	2.2%	6.8%
Number of those 65+ in poverty	28,698	986	61	298	55	721
Percent of students receiving free/reduced meals (2006-2007)	na	38.4%	1.9%	7.8%	0	22.8%

* Poverty Information is 1999 data

na not available

Source: Connecticut Department of Education, U.S. Census, CERC

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Table A-6: Poverty Estimates for Connecticut School Districts, 2005

School District	Total population	Population ages 5-17	Population Ages 5-17 in Families in Poverty
Stamford	119,529	18,635	1,699
Darien	20,018	4,543	80
Greenwich	62,394	11,791	551
New Canaan	19,802	4,713	108
Norwalk	84,692	13,224	1,290

Source: Connecticut Department of Education

Table A-7: Percent Under 18 at or below 100% and 200% of Federal Poverty, 2000

	≤100% FPL		≤200% FPL	
Connecticut	86,130	10.4%	199,589	24.1%
Stamford	2,272	8.9%	6,636	26.0%
Darien	114	1.8%	292	4.6%
Greenwich	648	4.2%	1,588	10.3%
New Canaan	133	2.2%	331	5.5%
Norwalk	1,785	9.9%	4,706	26.1%

Source: U.S. Census

Table A-8: Number of Percent of School-Age Children Eligible for Free/Reduced Lunch, 2006/2007

District Name	Total Students	Number Free/Reduced Lunch	Percent Free/Reduced Lunch
Stamford School District	15,036	5773	38.4%
Darien School District	4,614	87	1.9%
Greenwich School District	8,961	701	7.8%
New Canaan School District	4,130	--	--
Norwalk School District	10,729	2471	23.0%

-- No cases

Source: CT State Department of Education

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Children and Youth

Table A-9: Stamford Region Standardized Test Scores, Graduation Rate, 4 Year Drop Out Rate, Physical Fitness Test Results

	Connecticut	Stamford	Darien	Greenwich	New Canaan	Norwalk
Connecticut Mastery Test (CMT) Grade 4 Reading Scores (at or above Goal) 2008	56.0%	48.7%	82.7%	79.0%	88.3%	44.7%
Connecticut Academic Performance Test (CAPT) Grade 10 Reading Across the Disciplines (at or above Goal) 2008	45.5%	35.3%	75.9%	60.8%	82.4%	31.0%
Graduation rate class of 2006	92.2%	91.3%	98.8%	97.2%	100.0%	95.7%
Four year drop out rate class of 2006	7.3%	6.6%	1.2%	2.8%	0.0%	3.1%
Passing physical fitness tests 2007	36.1%	27.1%	48.8%	50.7%	66.0%	33.3%

Source: Connecticut Department of Education

**Table A-10: Connecticut Mastery Test (CMT) Grade 4 Reading Scores by Town
Percent At or Above Goal, 2008**

	Total	White	Black	Hispanic	Asian	Free/ Reduced Meals	English Language Learners
Connecticut	56.0%	67.9%	29.4%	27.9%	71.5%	27.9%	7.8%
Stamford	48.7%	67.9%	26.6%	34.8%	76.9%	28.8%	10.7%
Darien	82.7%	83.6%	--	--	--	--	--
Greenwich	79.0%	84.0%	54.5%	47.4%	83.9%	42.4%	25.8%
New Canaan	88.3%	89.7%	--	--	--	--	--
Norwalk	44.7%	60.7%	25.3%	35.5%	70.0%	26.9%	1.9%

-- Results are not presented for groups fewer than 20

Source: Connecticut Department of Education

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Table A-11: Connecticut Mastery Test (CMT) Grade 4 Reading Scores by Stamford Elementary School, Percent At or Above Goal

	Total	White	Black	Hispanic	Asian	Free/ Reduced Meals	English Language Learners
Davenport Ridge	46.8%	60.5%	--	--	--	32.1%	--
Hart	46.5%	--	12.5%	46.4%	--	29.3%	--
Julia A. Stark	29.9%	43.5%	17.1%	29.7%	--	19.0%	--
K. T. Murphy	24.4%	25.0%	15.0%	31.4%	--	20.8%	--
Newfield	51.5%	70.8%	--	16.7%	--	21.9%	--
Northeast	53.0%	67.2%	--	20.0%	--	27.5%	--
Rogers	56.0%	85.2%	45.5%	41.3%	--	40.0%	--
Roxbury	54.8%	62.2%	--	54.5%	--	28.6%	--
Springdale	45.8%	74.4%	--	21.6%	--	16.7%	--
Stillmeadow	37.9%	46.7%	--	22.2%	--	28.9%	--
Toquam Magnet	56.1%	91.7%	--	42.9%	--	24.0%	--
Westover	83.5%	87.0%	--	--	--	75.0%	--

Source: Connecticut Department of Education

-- Results are not presented for groups fewer than 20.

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Children and Youth

Table A-12: Juvenile Justice Involved Youth, Fiscal Year (FY) 2007 and 2008

	Year	Total Youth in Juvenile Justice System (Unduplicated)	Delinquency*	Status Offenders**	Youth in Crisis***
Stamford	FY 2008	244	190	57	13
	FY 2007	264	193	81	15
Darien	FY 2008	6	4	0	2
	FY 2007	15	13	2	0
Greenwich	FY 2008	86	63	16	12
	FY 2007	103	70	28	9
New Canaan	FY 2008	9	9	0	0
	FY 2007	7	6	0	0
Norwalk	FY 2008	194	140	52	17
	FY 2007	285	219	64	24

* Delinquency – offenses that are codified in the general statutes (burglary, larceny, assault, etc.)

**Status offenses include truancy, runaway, and beyond parental control.

*** Youth in Crisis – status offenders age 16 or 17

Source: Connecticut Court Support Services

Table A-13: Truancy, FY 2007 and 2008

	Year	Truancy
Stamford	FY 2008	42
	FY 2007	53
Darien	FY 2008	0
	FY 2007	1
Greenwich	FY 2008	9
	FY 2007	21
New Canaan	FY 2008	0
	FY 2007	0
Norwalk	FY 2008	28
	FY 2007	44

Source: Connecticut Court Support Services

Appendix A: Administrative Data Health

Various health statistics provide a picture of the health of a community and can suggest areas of focus for consideration. Below is a review of infant mortality, births to teen mothers, the increase in the rate of asthma, childhood obesity and childhood dental care.

Infant Mortality

Public Health Departments often cite infant mortality as a measure of a region's health. The rate reflects the health status of the mother as well as their access to health care. In Connecticut, there is a goal to reduce the infant mortality rate to 4.5 deaths per 1,000 births by 2010. The rate for Connecticut is currently 6.1, while Stamford's rate is 2.7 (Table A-14). Pregnant women are eligible for the State's HUSKY insurance program if they meet income eligibility. In 2008, income eligibility for pregnant women was raised from 185 percent to 250 percent of federal poverty level. This will ensure that more women are eligible for coverage during pregnancy and that their babies will receive coverage soon after their birth.³⁰

Table A-14: Infant Deaths, Low Birthweight Babies, 2000, 2005, 2006

	Connecticut	Stamford	Darien	Greenwich	New Canaan	Norwalk
Number of low birthweight babies+ 2006	3389	133	25	39	6	93
Number of low birthweight babies+ 2005	3,312	138	16	47	7	94
Number of low birthweight babies+ 2000	3,185	143	19	21	11	90
<i>Percent of low birthweight babies 2006</i>	8.2%	7.3%	9.6%	6.3%	3.4%	7.2%
<i>Percent of low birthweight babies 2005</i>	8.0%	7.9%	5.8%	7.6%	3.5%	7.2%
<i>Percent of low birthweight babies 2000</i>	7.5%	8.0%	6.0%	3.3%	5.1%	7.0%
Number of infant deaths 2006	257	5	--	1	1	2
Number of infant deaths 2005	237	4	--	2	--	4
Number of infant deaths 2000	283	1	2	--	--	6
<i>Infant death rate* 2006</i>	6.1	2.7	--	**	**	**
<i>Infant death rate* 2005</i>	5.4	**	--	**	--	**
<i>Infant death rate* 2000</i>	6.6	**	**	--	--	4.6

-- No cases

*Infant death rate is per 1,000 live births

** percentages not calculated for less than 5 cases

+ Low birth weight is defined as less than 2,500 grams

Source: Connecticut Department of Public Health

Births to Teen Mothers

Statewide, births to teenagers account for 7.0 percent of all births, while in Stamford, that figure is lower at 4.1 percent (Table A-15).³¹ Stamford's percent of births to teen mothers increased in 2006 from 3.8 percent in 2005. An analysis by race and ethnicity shows a higher rate of births to black and Hispanic teen mothers. At 11.2 percent, the proportion of births to black teen mothers has increased from

³⁰ Connecticut Voices for Children, *Uninsured Children in Connecticut 2007*, September, 2008.

³¹ Connecticut Department of Public Health, *Vital Statistics, 2004, 2005, 2006*.

Appendix A: Administrative Data Health

10.5 percent in 2006. The percent of births to Hispanic teen mothers increased slightly in 2006 to 7.4 percent from 7.2 percent in 2005.

Table A-15: Number and Percent of Births to Mothers Under Age 20, 2006 & 2005

	Connecticut 2006	Connecticut 2005	Stamford 2006	Stamford 2005	Norwalk 2006	Norwalk 2005
Number of births to mothers <20 – all races	2905	2,842	77	69	73	70
<i>Percent of births to mothers <20 – all races</i>	<i>7.0%</i>	<i>6.8%</i>	<i>4.1%</i>	<i>3.8%</i>	<i>5.6%</i>	<i>5.3%</i>
Number of births to mothers <20 – white non-Hispanic	805	902	9	4	9	9
<i>Percent of births to mothers <20 – white non-Hispanic</i>	<i>3.2%</i>	<i>3.5%</i>	<i>1.1%</i>	<i>**</i>	<i>1.5%</i>	<i>1.4%</i>
Number of births to mothers <20 – Black non-Hispanic	706	615	24	23	26	19
<i>Percent of births to mothers <20 – Black non-Hispanic</i>	<i>14.0%</i>	<i>12.9%</i>	<i>11.2%</i>	<i>10.5%</i>	<i>16.7%</i>	<i>13.7%</i>
Number of births to mothers <20 – Other non-Hispanic	68	89	--	1	--	5
<i>Percent of births to mothers <20 – Other non-Hispanic</i>	<i>2.5%</i>	<i>3.3%</i>	<i>--</i>	<i>**</i>	<i>--</i>	<i>4.6%</i>
Number of births to mothers <20 – Hispanic	1313	1,227	43	41	37	37
<i>Percent of births to mothers <20 – Hispanic</i>	<i>15.5%</i>	<i>15.4%</i>	<i>7.4%</i>	<i>7.2%</i>	<i>8.9%</i>	<i>9.3%</i>

-- No cases

** percentages not calculated for less than 5 cases

+ Low birthweight is defined as less than 2,500 grams

Source: Connecticut Department of Public Health

Asthma

Asthma is a chronic respiratory disease that affects 8.5 percent of adults in the United States and 9.3 percent of adults in Connecticut.³² Nationally, it is one of the most common chronic diseases and a leading cause of disability in children. A recent Connecticut report found that:

- The prevalence of asthma appears to be on the rise in Connecticut, where the prevalence among adults increased to 9.3% in 2006 from 7.8% in 2000. Approximately 248,000 adults and 86,000 (10.5%) children in Connecticut reported that they currently have asthma.
- In 2005, close to 15 percent of Connecticut children reported ever having been diagnosed with asthma while 10 percent reported that they currently have asthma.
- The prevalence of asthma among children was highest among Hispanics at 17 percent and lowest for whites at 9 percent.
- On an annual basis, Connecticut spends a total of \$47.3 million on hospitalization charges and \$13.4 million on ED visit charges due to asthma as a primary diagnosis.³³
- In this five town area Norwalk has the highest rate of asthma admissions, followed by Stamford (Table A-16).

³² Connecticut Department of Public Health, *Asthma in Connecticut 2008, A Surveillance Report*, 2008.

³³ Ibid.

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Table A-16: Asthma Hospitalization Rates by Town, 2001-2005

	Stamford	Darien	Greenwich	New Canaan	Norwalk
Age 0-17 Number Hospital Admissions	226	23	79	47	173
Age 0-17 Rate per 10,000 persons	17.5	7.2	10.2	15.5	18.9
Age 18+ Number Hospital Admissions	347	15	129	8	283
Age 18+ Rate per 10,000 person	7.6	2.3	5.7	1.2	8.8
Total Number Hospital Admissions	573	38	208	55	456
Total Rate per 10,000 person	9.8	3.9	6.8	5.7	11.0

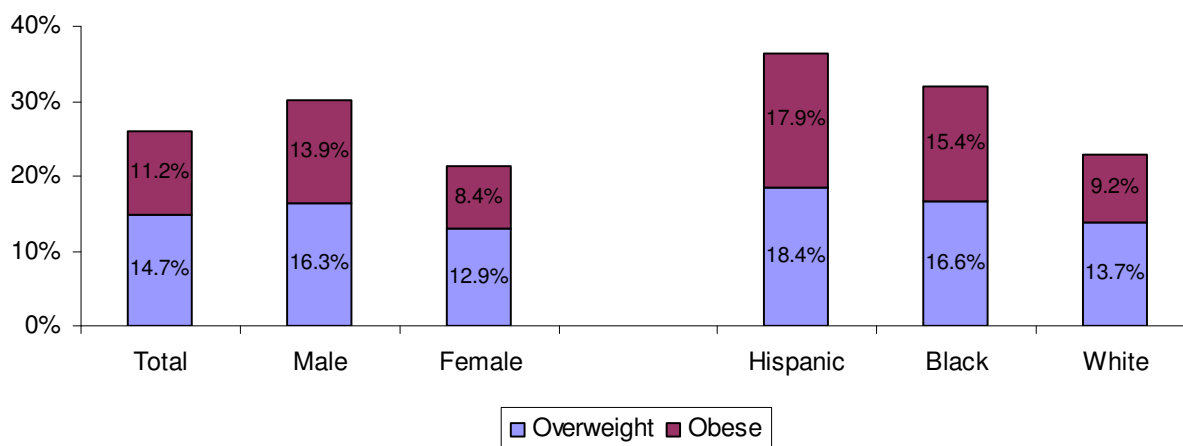
Source: Connecticut Department of Public Health

Childhood Obesity

The National Institutes of Health reports that childhood obesity is now an epidemic in the United States. NIH data suggests that the number of overweight children has doubled in the last two to three decades and that currently about 17 percent of children and adolescents are overweight.³⁴ Focus group discussions revolved around the need for continued attention to programs that promote physical activity and healthy diets for children and teens.

In Connecticut, overall, one-quarter of high school students are either overweight (14.7 percent) or obese (11.2 percent).³⁵ The State's Youth Risk Behavior Survey shows that obesity rates are higher for students who are male, Hispanic, and non-Hispanic Black (Figure A-1). In Connecticut, around a third of students are able to pass a standard physical fitness test (Table A-17). The percent of those passing in Stamford has fluctuated in recent years but is below the state average.

Figure A-1: Overweight and Obese by Sex and Race/Ethnicity, Connecticut High School Students, 2005



Source: Connecticut Department of Health

³⁴ Weight Control Information Network, *Statistics Related to Overweight and Obesity*, May 2007, Retrieved on September 30, 2008 from <http://win.niddk.nih.gov/statistics/index.htm#preval>

³⁵ Connecticut Department of Public Health, *Childhood Obesity in Connecticut*, Fall 2007.

Appendix A: Administrative Data Health

Table A-17: Percent of Students Passing Physical Fitness Test

	Connecticut	Stamford
2006/2007	36.1%	27.1%
2004/2005	35.2%	25.1%
2001/2002	34.4%	29.3%

Source: Connecticut Department of Education

Childhood Dental Care

Recent research by the Connecticut Department of Public Health on the oral health of children found that dental decay is a significant problem for Connecticut's children, and that many children do not get the dental care they need.³⁶ Discussions in interviews and focus groups revolved around the challenge of finding dental care for children who receive HUSKY health care, since few providers accept HUSKY.

Good oral health care for children is important because tooth decay and other dental problems can have serious consequences. Painful teeth can compromise a child's nutrition, cause delays in speech which can slow intellectual and social development and cause lost days at school.³⁷

The Department of Public Health report screened low income preschool children enrolled in Head Start and kindergarten and third grade children enrolled in public elementary schools. The study found:

- Eighteen percent of the Head Start children and 12 percent of the elementary school children screened had a need for dental care.
- Black and Hispanic children are more likely to have dental decay compared to white children.
- More than 60 percent of third grade children in Connecticut do not have dental sealants, a well-accepted clinical intervention to prevent tooth decay in molar teeth.
- Minority children are also less likely to have dental sealants.

³⁶ Connecticut Department of Public Health, *Every Smile Counts: The Oral Health of Connecticut's Children*, December 2007.

³⁷ Ibid.

Appendix A: Administrative Data

2-1-1 Service Requests

United Way 2-1-1 is the statewide phone-based information and referral service for health and human service issues operated by United Way of Connecticut. 2-1-1 tracks all calls received and the requests callers make. Since callers frequently have multiple needs during a call, 2-1-1 tracks the multiple requests for service that may be made. Through September 2008, callers in Stamford made 6,599 service requests. The top five requests are listed below for Stamford and surrounding towns for 2006, 2007 and January through September 2008.

Table A-18: Top Five 2-1-1 Service Requests January- September 2008

Town	Service Requests	Top 5 Service Requests				
Connecticut	343,645	Utilities/Heat (36,287)	Housing/Shelter (29,524)	Information Services (27,604)	Outpatient Mental Health (24,047)	Financial Assistance (21,744)
Stamford	6,599	Outpatient Mental Health (644)	Housing/Shelter (552)	Utilities/Heat (535)	Information Services (463)	Financial Assistance (451)
Darien	160	Utilities/Heat (18)	Information Services (15)	Outpatient Mental Health & Substance Abuse (14 each)	Public Assistance Programs (9)	Health Supportive Services (8)
Greenwich	1,407	Outpatient Mental Health (307)	Substance Abuse Services (111)	Information Services (103)	Housing/Shelter (78)	Utilities/Heat (74)
New Canaan	213	Substance Abuse Services (25)	Legal Services (21)	Utilities/Heat (20)	Housing/Shelter & Outpatient Mental Health (17 each)	Financial Assistance (15)
Norwalk	5,270	Utilities/Heat (478)	Housing/Shelter (440)	Outpatient Mental Health (395)	Financial Assistance (356)	Information Services (320)

Source: United Way 2-1-1

Table A-19: Top Five 2-1-1 Service Requests 2007

Town	Service Requests	Top 5 Service Requests				
Connecticut	453,760	Housing/Shelter (39,090)	Utilities/Heat (37,998)	Information Services (35,608)	Outpatient Mental Health (33,454)	Substance Abuse Services (29,561)
Stamford	8,676	Outpatient Mental Health (894)	Housing/Shelter (788)	Information Services (662)	Utilities/Heat (632)	Legal Services (519)
Darien	248	Housing/Shelter (21)	Financial Assistance (19)	Information Services & Outpatient Mental Health (18)	Legal Services (16)	Family Support Services & Substance Abuse Services (15 each)
Greenwich	1,439	Outpatient Mental Health (205)	Information Services (117)	Substance Abuse Services (116)	Housing/Shelter (80)	Utilities/Heat (72)
New Canaan	264	Substance Abuse Services (26)	Housing/Shelter (24)	Outpatient Mental Health (23)	Information Services (22)	Utilities/Heat (19)
Norwalk	6,655	Outpatient Mental Health (579)	Housing/Shelter (526)	Information Services (451)	Substance Abuse Services (419)	Utilities/Heat (418)

Source: United Way 2-1-1

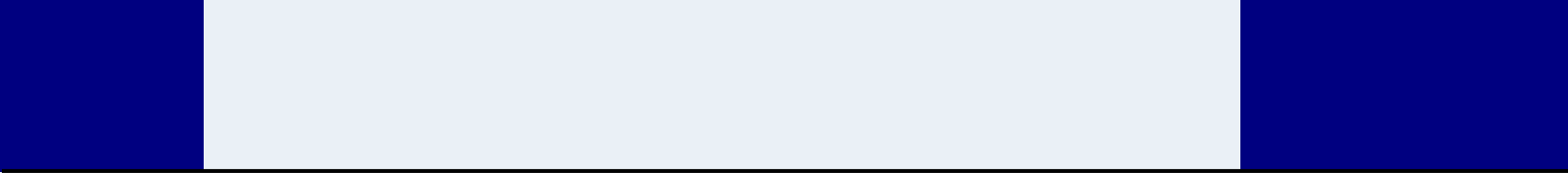
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2-1-1 Service Requests

Table A-20: Top Five 2-1-1 Service Requests 2006

Town	Service Requests	Top 5 Service Requests				
Connecticut	453,804	Information Services (39,403)	Housing/Shelter (39,211)	Utilities/Heat (38,747)	Outpatient Mental Health (36,424)	Substance Abuse Services (54,313)
Stamford	9,055	Outpatient Mental Health (1,083)	Housing/Shelter (725)	Utilities/Heat (700)	Information Services (678)	Substance Abuse Services (626)
Darien	286	Information Services (35)	Housing/Shelter (23)	Legal Services (22)	Substance Abuse Services (19)	Health Support Services & Outpatient Mental Health (18 each)
Greenwich	1,256	Substance Abuse Services (112)	Outpatient Mental Health (110)	Housing/Shelter (95)	Information Services (94)	Legal Services (69)
New Canaan	320	Substance Abuse Services (41)	Outpatient Mental Health (27)	Information Services (25)	Family ((Support Services Legal Services (24 each)	Housing/Shelter (22)
Norwalk	7,756	Outpatient Mental Health (596)	Substance Abuse Services (578)	Housing/Shelter (547)	Information Services (496)	Utilities/Heat (461)

Source: United Way 2-1-1



APPENDIX B – STAMFORD COMMUNITY NEEDS ASSESSMENT SURVEY

The United Way of Western Connecticut – Stamford Office is conducting research to better understand the needs of our community. The survey is an important part of a multi-phase needs assessment. The results will be shared with the community and will begin conversations to determine how services should be improved or expanded and how the community can respond to emerging needs. You have received this survey because you live or work in Stamford. Your response is important to us! All answers and comments will be confidential. Please respond to this survey by August 8, 2008. Please respond to this survey only once.

1. Please check the box that best applies. (Please check one only)
- ☐ I live in Stamford
- ☐ I live and work in Stamford
- ☐ I work in Stamford but live elsewhere
- ☐ I do not live or work in Stamford (stop and return survey)

2. Here is a list of quality of life issues. Please rate how well you think these issues are addressed in the Stamford community.

	Excellent	Good	Fair	Poor	Don't know
a. Safe, crime-free neighborhoods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Accessibility to public transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Availability of affordable housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Crisis assistance for those in need of food, shelter or financial aid	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Opportunities to help people maintain financial stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Racial harmony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Quality child care programs for infants, toddlers and preschool children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Quality after-school and recreation programs for children and youth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Opportunities for success in school for children and youth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Education opportunities for adults (literacy programs, adult education)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Recreation facilities (parks, playgrounds, beaches)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Cultural opportunities (music, theater, entertainment)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Support for seniors to help them maintain their independence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Disaster preparedness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. Support for those in need of substance abuse services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. Support for those in need of HIV/AIDS services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q. Access to health services (medical & dental)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r. Support for those in need of mental health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s. People with disabilities can maintain their independence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
t. Support for victims of abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. From the following list, please choose **five** items that you feel are the most pressing needs of Stamford. PLEASE CHECK 5 ONLY.

	Please check 5 only
a. Availability of affordable housing	<input type="checkbox"/>
b. Safe, crime-free neighborhoods	<input type="checkbox"/>
c. Assistance for those in need of food	<input type="checkbox"/>
d. Services and shelters for the homeless	<input type="checkbox"/>
e. Accessibility to public transportation	<input type="checkbox"/>
f. Economic & social integration of immigrants	<input type="checkbox"/>
g. Support for victims of abuse	<input type="checkbox"/>
h. Job training and workforce development programs	<input type="checkbox"/>
i. Childcare	<input type="checkbox"/>
j. Quality programs for infants, toddlers and preschool children	<input type="checkbox"/>
k. Quality after-school and recreation programs for children and youth	<input type="checkbox"/>
l. Support for those in need of mental health services	<input type="checkbox"/>
m. Support for those in need of substance abuse services	<input type="checkbox"/>
n. Access to health services (medical & dental)	<input type="checkbox"/>
o. Health screening clinics	<input type="checkbox"/>
p. Support for seniors to help them maintain their independence	<input type="checkbox"/>
q. Parenting education programs	<input type="checkbox"/>
r. Literacy programs	<input type="checkbox"/>
s. Fuel/utility assistance	<input type="checkbox"/>
t. Financial assistance for individuals/families	<input type="checkbox"/>
u. Other (please specify) _____	<input type="checkbox"/>
v. Other (please specify) _____	<input type="checkbox"/>

PLEASE TURN THE PAGE OVER

4. Do you work for a social service agency or have you sought services from a social service agency in Stamford over the past 12 months? (Please check the appropriate box)

- ☐ I work for a social service agency in Stamford. (go to question 5)
- ☐ I have received services from a social service agency in Stamford. (go to question 5)
- ☐ I do not work for a social service agency in Stamford and I have not received services from a social service agency in Stamford. (skip to question 6)

5. Please check whether the following items are a major concern, a minor concern or are not a concern for you or for the people served by your agency.

	Major concern	Minor concern	Not a concern	Don't know
Program fees are not affordable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inconvenient location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of child care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Language barriers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hours are not convenient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Long waiting list for services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of handicap access	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

To help us better understand the results, please respond to the following questions:

6. What is your home zip code? _____
7. What is your age?
- ☐ Under 18 ☐ 45-54
- ☐ 18-24 ☐ 55-64
- ☐ 25-34 ☐ 65 and older
- ☐ 35-44

8. How many children under the age of 18 live in your household? (If no children in household, please enter "0") _____

9. What is your race/ethnicity? (Please check all that apply)
- ☐ White ☐ Black/African American
- ☐ Hispanic ☐ Asian
- ☐ Pacific Islander ☐ Other

10. What is the language you speak at home most often? _____

11. Which of the following best describes your current employment situation?
- ☐ Retired ☐ Employed by a business (includes utilities)
- ☐ Student ☐ Not currently employed
- ☐ Employed by government ☐ Other _____
- ☐ Self-employed
- ☐ Employed by a non-profit (includes healthcare agencies/hospital)

12. Which of the following best describes your total household income during this past year?
- ☐ Less than \$25,000 ☐ \$100,000 to \$199,000
- ☐ \$25,000 to \$49,000 ☐ \$200,000 and over
- ☐ \$50,000 to \$99,999 ☐ No income

13. If you have additional comments about the needs of Stamford, please feel free to add them here.

Please return this survey to the agency where you received it by August 8. Thank you for your participation!

Appendix C: Survey Results

Table C-1: Do You Live or Work in Stamford?

I live in Stamford	36%
I live and work in Stamford	19%
I work in Stamford but live elsewhere	45%

Table C-2: Quality of Life Attributes

	Excellent	Good	Fair	Poor	Don't know
a. Safe, crime-free neighborhoods	8%	45%	33%	10%	4%
b. Accessibility to public transportation	12%	44%	30%	10%	4%
c. Availability of affordable housing	2%	13%	26%	51%	8%
d. Crisis assistance for those in need of food, shelter or financial aid	7%	24%	35%	17%	17%
e. Opportunities to help people maintain financial stability	1%	14%	37%	28%	20%
f. Racial harmony	4%	31%	42%	17%	6%
g. Quality child care programs for infants, toddlers and preschool children	8%	32%	26%	12%	22%
h. Quality after-school and recreation programs for children and youth	9%	31%	25%	15%	20%
i. Opportunities for success in school for children and youth	7%	35%	28%	13%	17%
j. Education opportunities for adults (literacy programs, adult education)	8%	41%	27%	9%	15%
k. Recreation facilities (parks, playgrounds, beaches)	18%	52%	21%	6%	3%
l. Cultural opportunities (music, theater, entertainment)	23%	43%	20%	10%	4%
m. Support for seniors to help them maintain their independence	9%	29%	27%	9%	26%
n. Disaster preparedness	3%	20%	25%	14%	38%
o. Support for those in need of substance abuse services	5%	30%	27%	8%	30%
p. Support for those in need of HIV/AIDS services	5%	29%	23%	5%	38%
q. Access to health services (medical & dental)	8%	32%	34%	14%	12%
r. Support for those in need of mental health services	5%	26%	29%	14%	26%
s. People with disabilities can maintain their independence	4%	24%	30%	9%	33%
t. Support for victims of abuse	6%	31%	26%	6%	31%

Appendix C: Survey Results

Table C-3: Most Pressing Needs of Stamford

	Total	65+	<\$50,000	>\$50,000	With children	White	Minority
a. Availability of affordable housing	68%	64%	79%	72%	72%	69%	81%
b. Job training and workforce development programs	40%	42%	44%	42%	43%	40%	46%
q. Financial assistance for individuals/families	26%	16%	41%	22%	35%	24%	38%
c. Safe, crime-free neighborhoods	36%	41%	38%	38%	41%	41%	37%
d. Quality after-school and recreation programs for children and youth	26%	20%	22%	35%	35%	29%	27%
e. Childcare	23%	13%	26%	25%	31%	22%	27%
f. Economic & social integration of immigrants	21%	17%	23%	24%	25%	21%	26%
g. Assistance for those in need of food	19%	21%	21%	19%	18%	15%	24%
h. Access to health services (medical & dental)	22%	30%	24%	25%	22%	28%	23%
r. Fuel/utility assistance	23%	28%	24%	27%	25%	29%	22%
i. Services and shelters for the homeless	19%	26%	26%	15%	17%	18%	22%
s. Parenting education programs	15%	8%	17%	16%	21%	14%	18%
j. Support for those in need of mental health services	16%	17%	17%	17%	15%	19%	16%
k. Quality programs for infants, toddlers and preschool children	16%	14%	13%	23%	23%	21%	15%
l. Health screening clinics	9%	11%	10%	9%	7%	8%	13%
p. Support for seniors to help them maintain their independence	14%	30%	15%	15%	9%	18%	12%
t. Literacy programs	11%	12%	13%	10%	15%	12%	12%
m. Accessibility to public transportation	15%	26%	11%	21%	14%	23%	11%
n. Support for victims of abuse	9%	6%	12%	8%	14%	9%	11%
o. Support for those in need of substance abuse services	10%	16%	15%	6%	8%	9%	11%
Other	11%	13%	9%	16%	12%	17%	7%

Appendix C: Survey Results

Table C-4: Experience with Social Services in Stamford

I work for a social service agency in Stamford.	21%
I have received services from a social service agency in Stamford in the past 12 months.	20%
I do not work for nor have I received services from a social service agency in Stamford.	59%

Table C-5: Barriers to Social Services in Stamford*

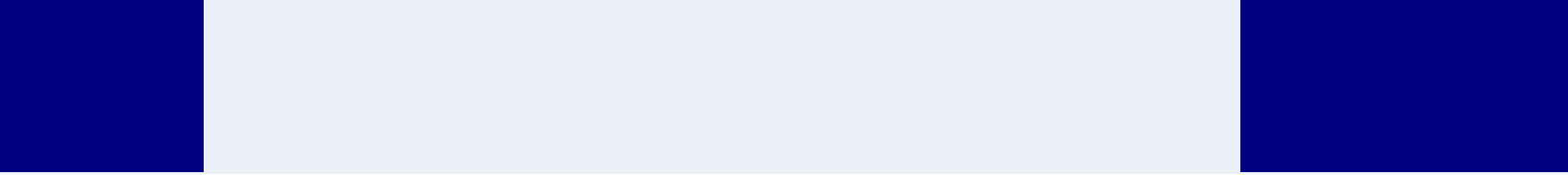
	Major concern	Minor concern	Not a concern	Don't know
Long waiting list for services	33%	25%	37%	5%
Program fees are not affordable	29%	28%	33%	10%
Language barriers	29%	33%	33%	5%
Lack of child care	24%	24%	41%	11%
Transportation problems	22%	39%	35%	4%
Hours are not convenient	10%	28%	56%	6%
Lack of handicap access	10%	23%	50%	17%
Inconvenient location	10%	32%	51%	7%

*Asked of those who work for a social service agency or have received services from an agency in the past 12 months.

**Table C-6: Barriers to Social Services in Stamford
Percent Citing Item as a Major Concern***

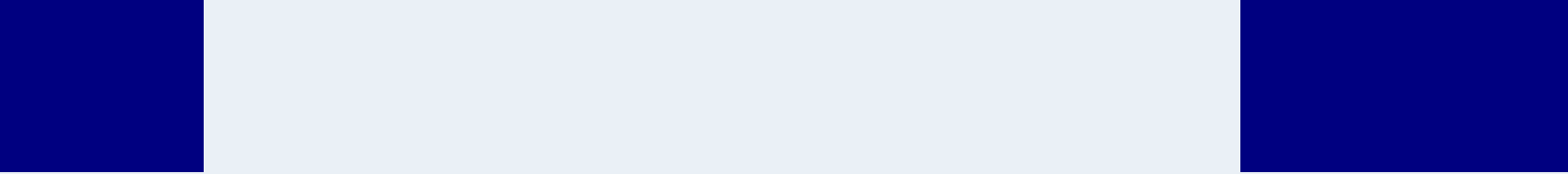
	All respondents	Work for a social service agency	Received services from a social service agency in the past 12 months
Long waiting list for services	33%	30%	37%
Program fees are not affordable	29%	31%	26%
Language barriers	29%	33%	26%
Lack of child care	24%	34%	13%
Transportation problems	22%	31%	12%
Inconvenient location	10%	11%	10%
Hours are not convenient	10%	11%	10%
Lack of handicap access	10%	9%	11%

*Asked of those who work for a social service agency or have received services from an agency in the past 12 months.



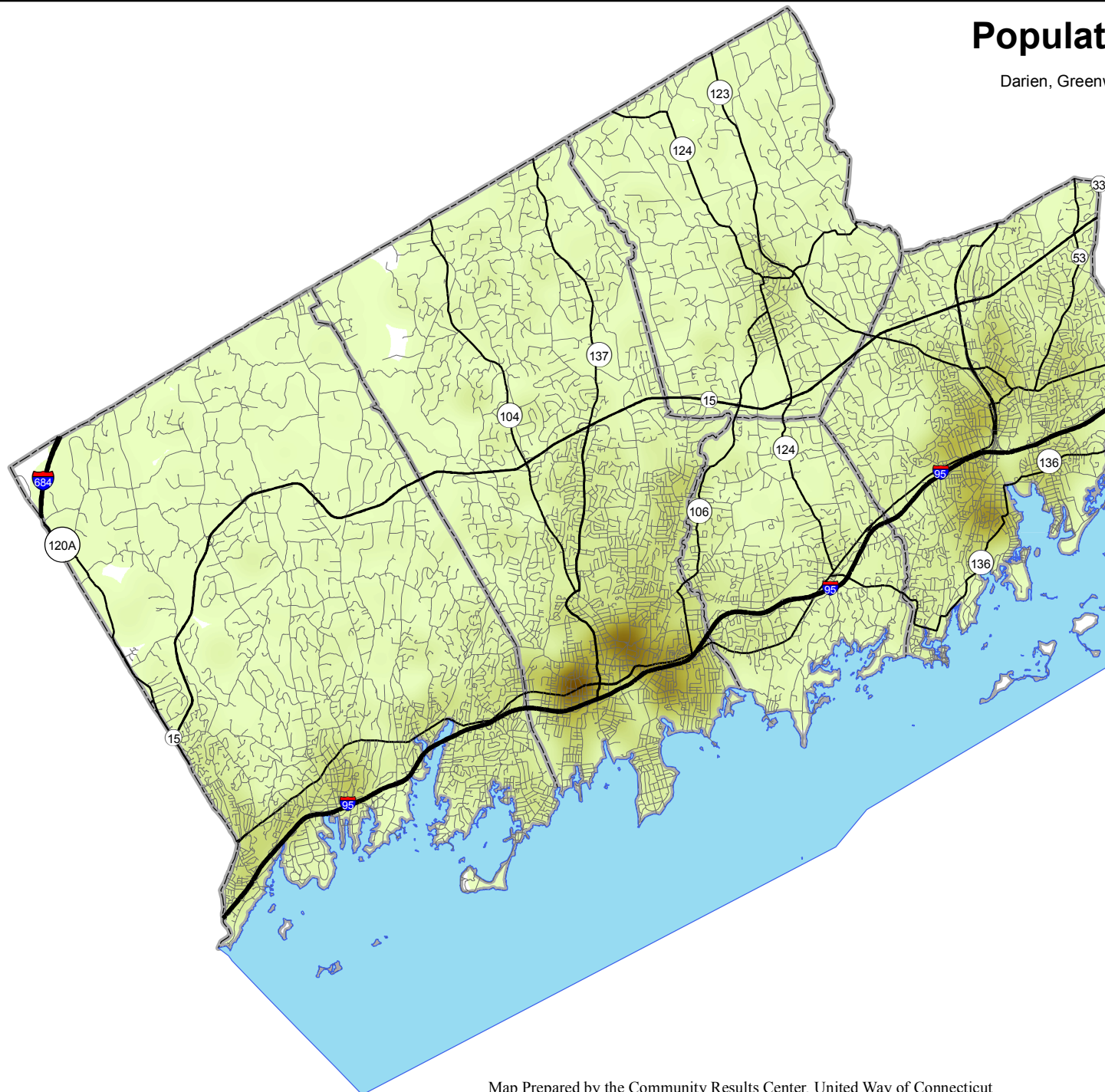
Appendix D: Maps

Map 1:	Population Density, Stamford and surrounding towns
Map 2:	Population Concentration by Race, Stamford
Map 3:	Median Household Income, Stamford
Map 4:	Families Living in Poverty & Basic Needs Resources, Stamford
Map 5:	Families in Poverty and Public Schools, Stamford
Map 6:	Population of Older Adults, Stamford
Map 7	Transportation Network, Stamford



Population Density (2000)

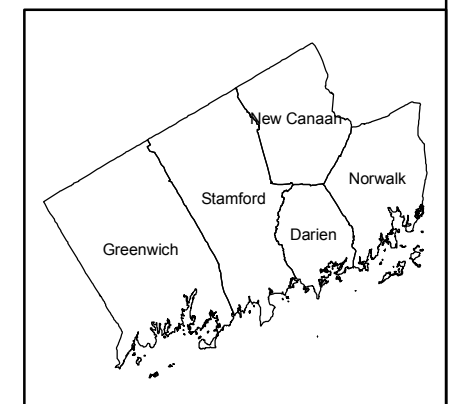
Darien, Greenwich, New Canaan, Norwalk, Stamford



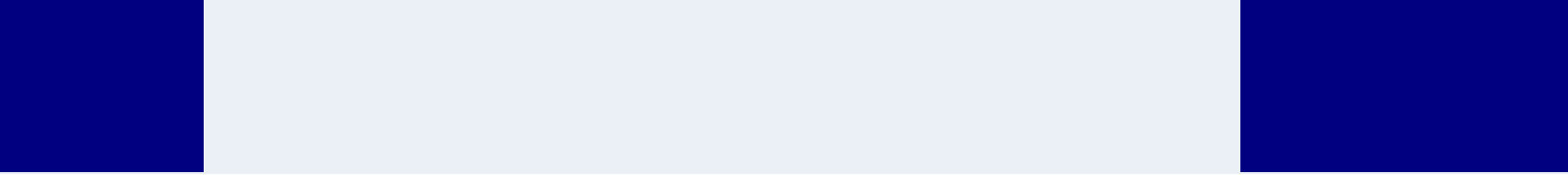
Population Density
Persons per Square Mile

High Density (23,952)

Low Density (1)

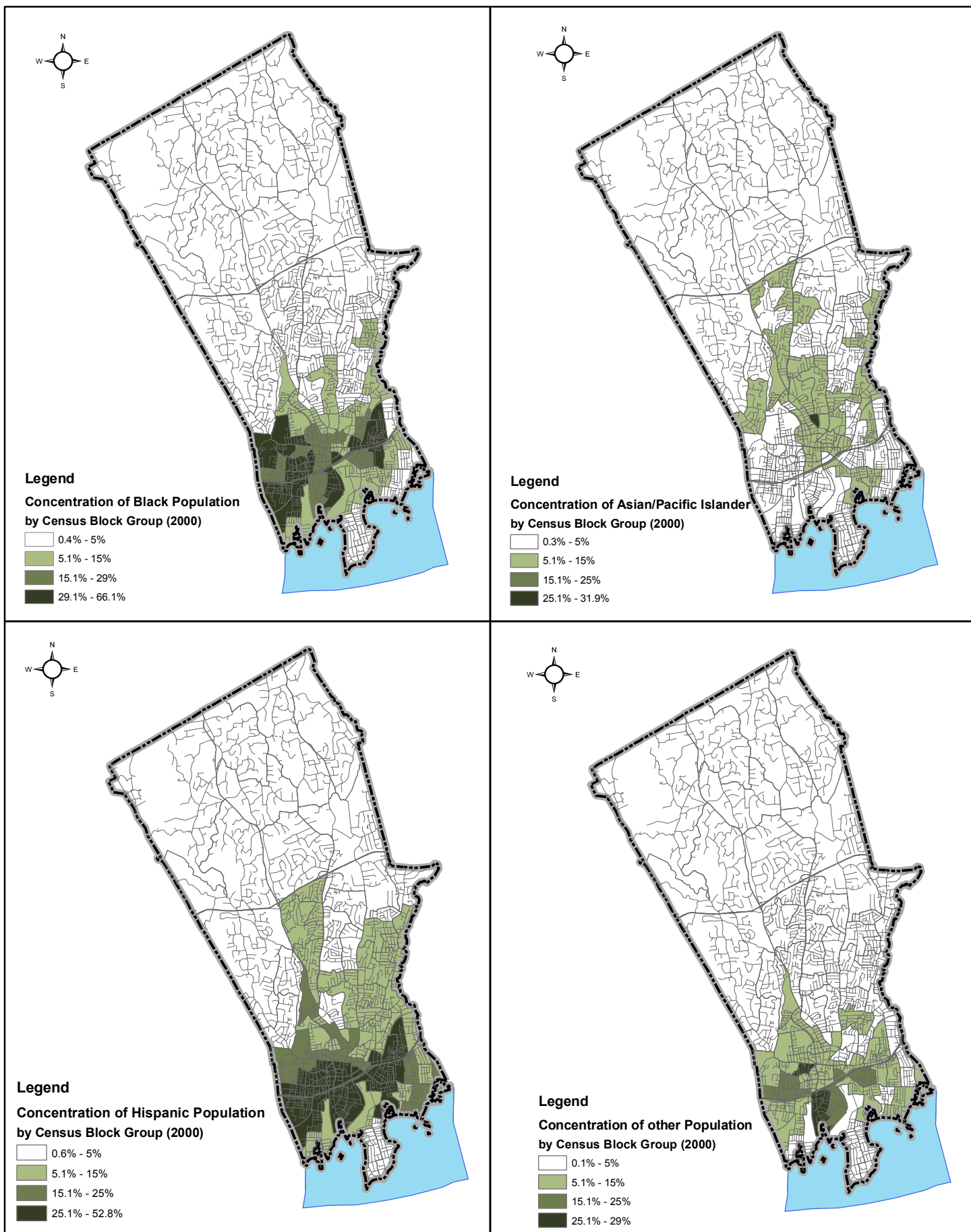


Map Prepared by the Community Results Center, United Way of Connecticut



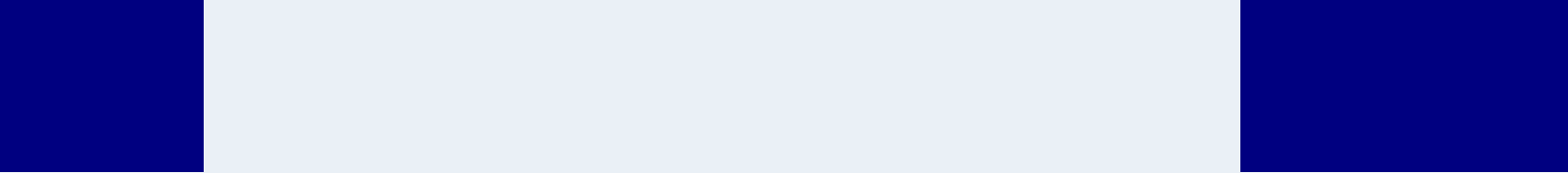
Population Concentration by Race

Stamford, CT



Map Prepared by the Community Results Center, United Way of Connecticut

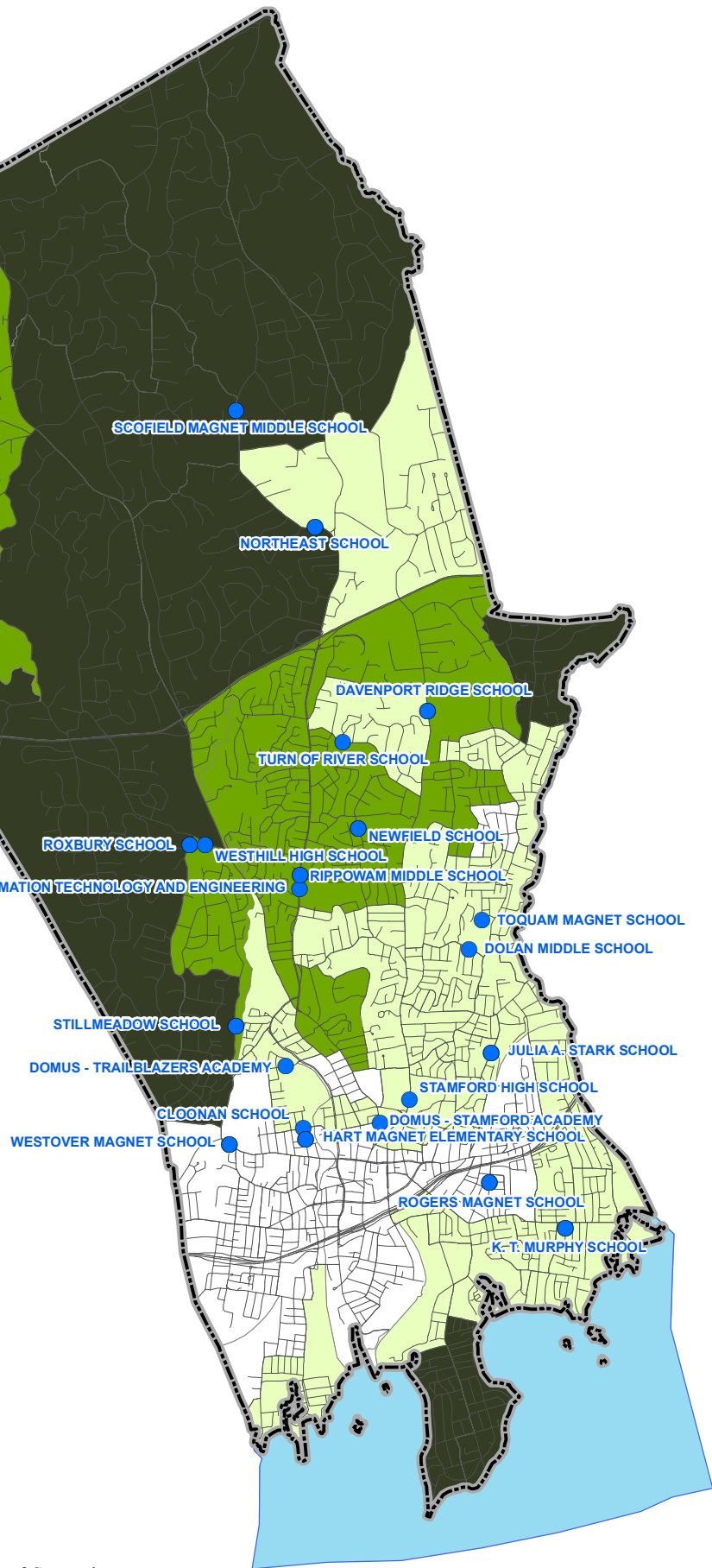
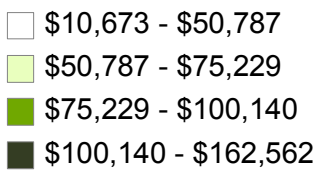
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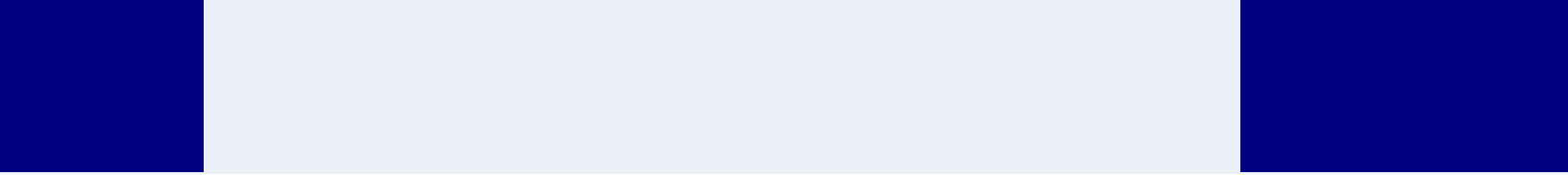
Median Household Income

Stamford, CT

Median Household Income Census Block Group (2000)



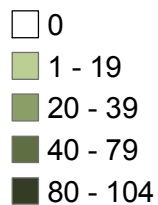
Map Prepared by the Community Results Center, United Way of Connecticut



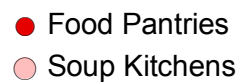
Families Living in Poverty and Basic Needs Resources

Stamford, CT

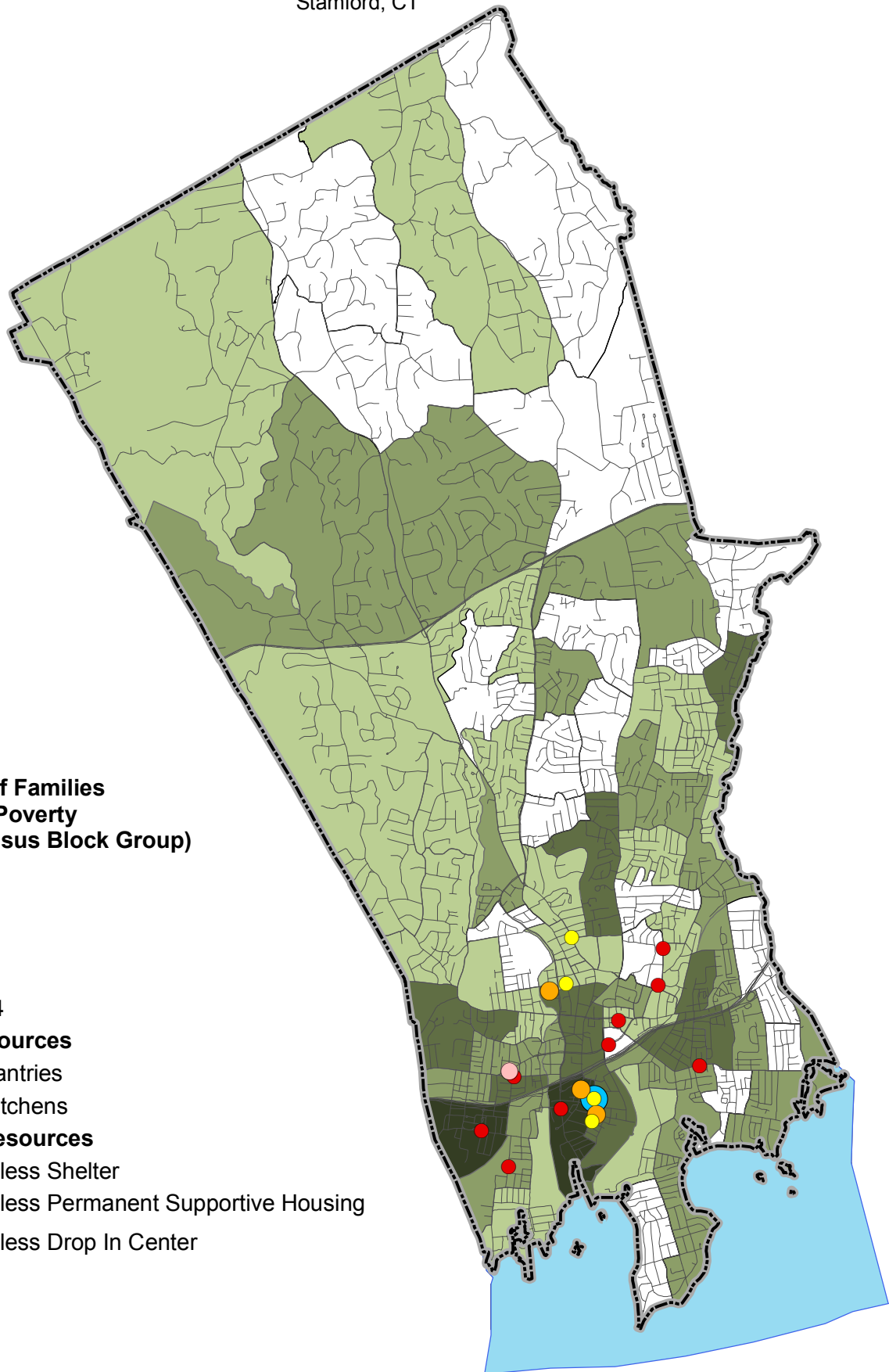
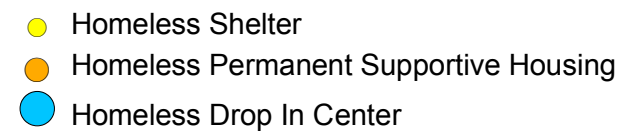
Number of Families Living in Poverty (2000 Census Block Group)



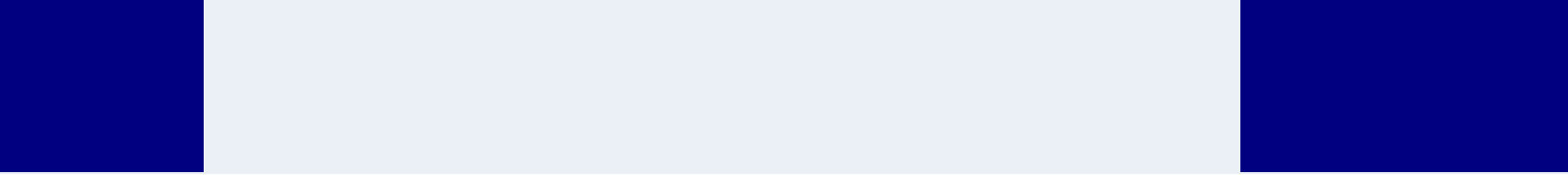
Food Resources



Shelter Resources



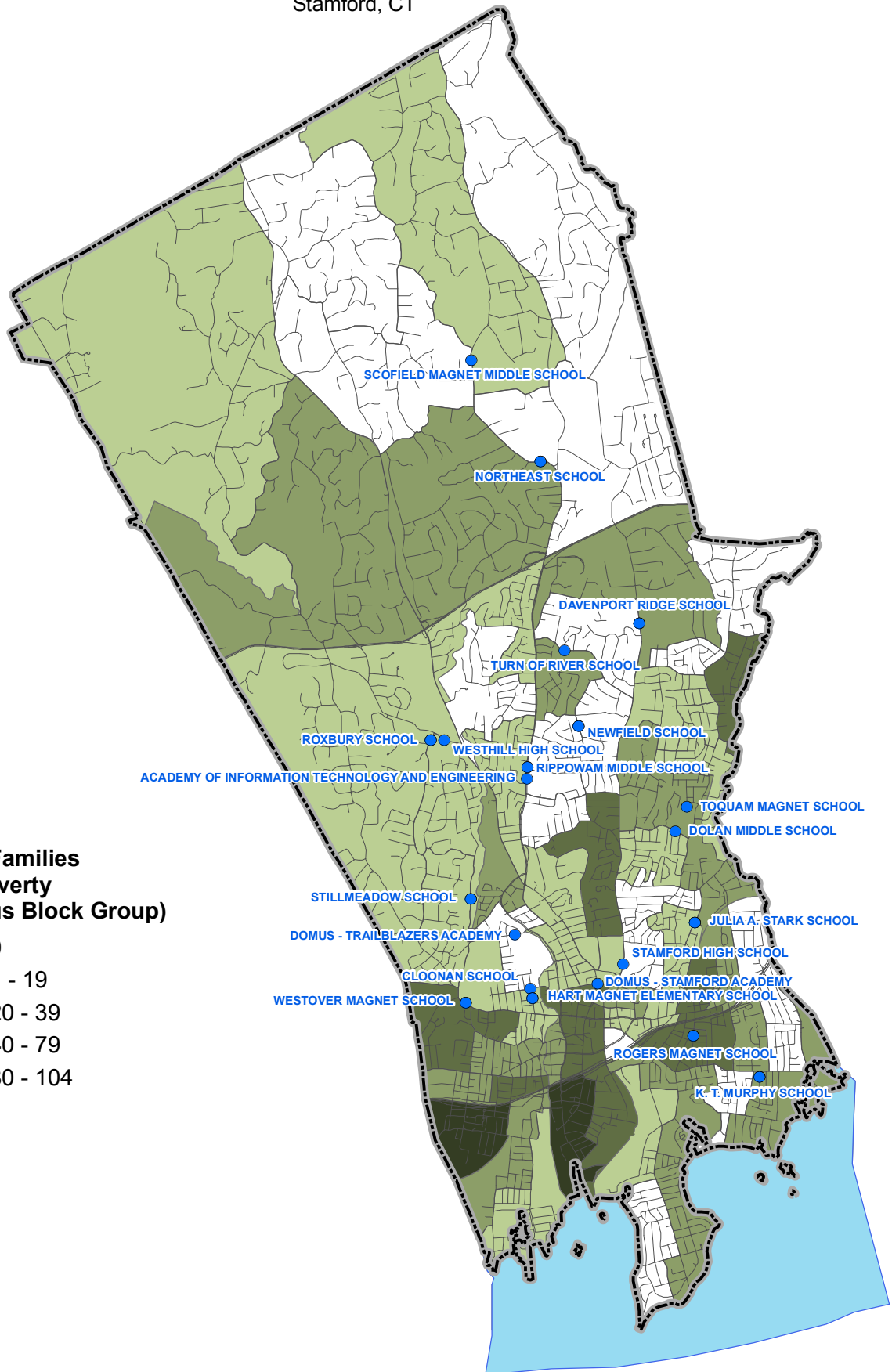
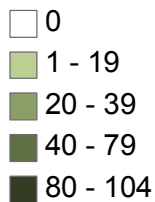
Map Prepared by the Community Results Center, United Way of Connecticut



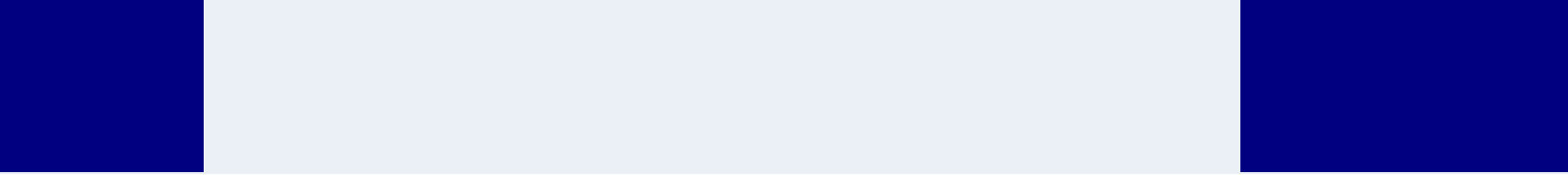
Families Living in Poverty

Stamford, CT

**Number of Families
Living In Poverty
(2000 Census Block Group)**

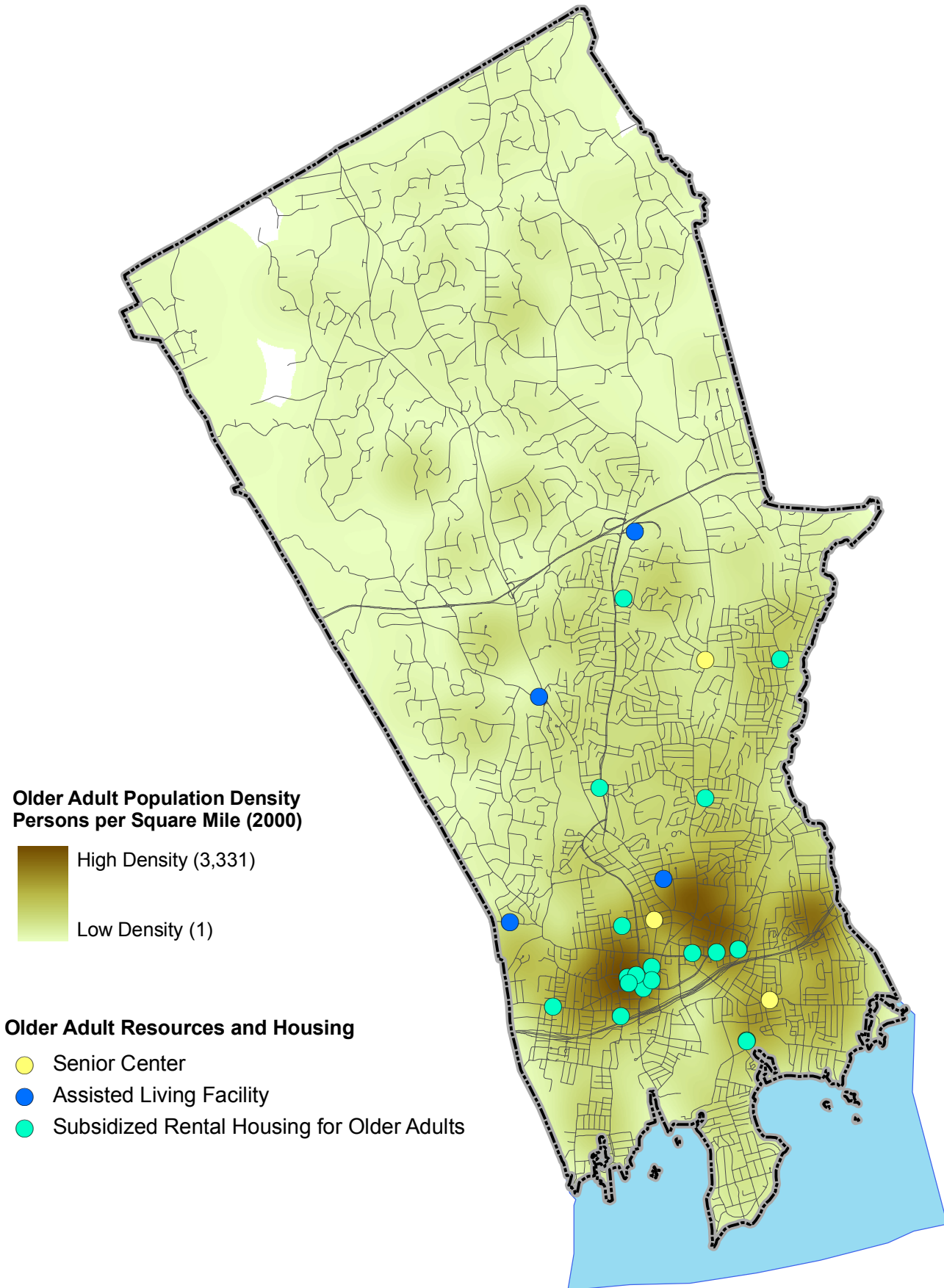


Map Prepared by the Community Results Center, United Way of Connecticut

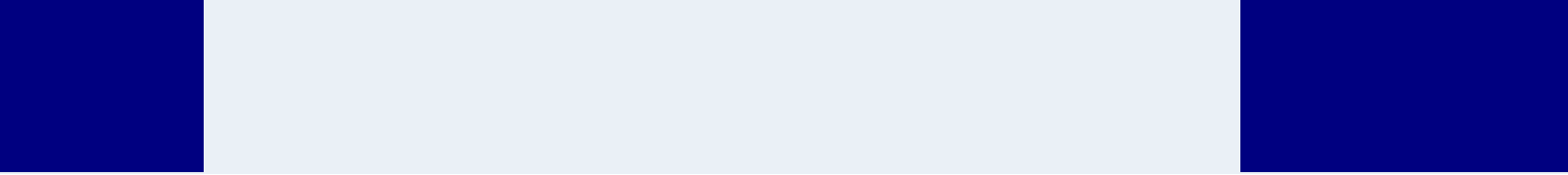


Older Adult Population Density and Services

Stamford, CT

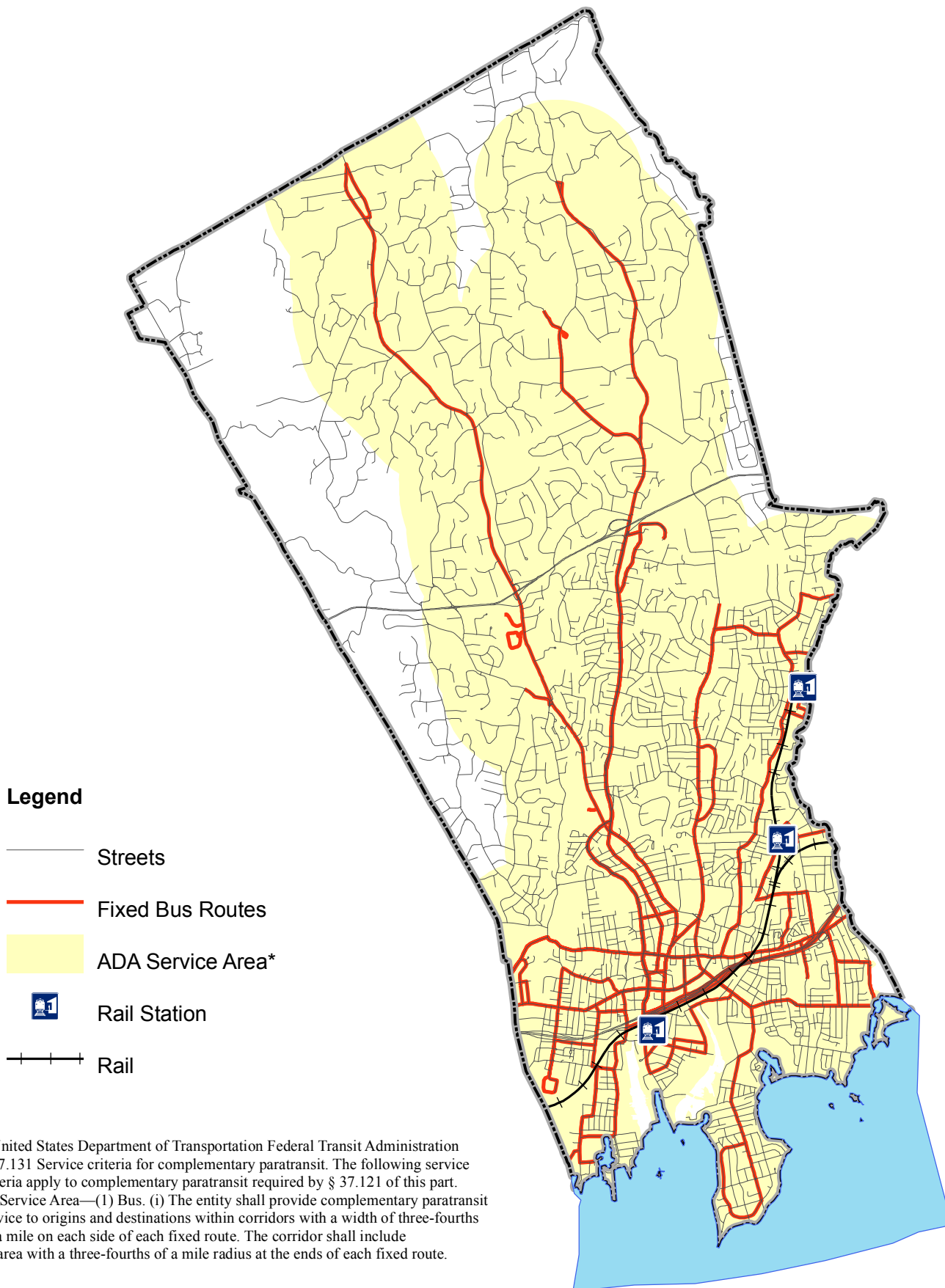


Map Prepared by the Community Results Center, United Way of Connecticut

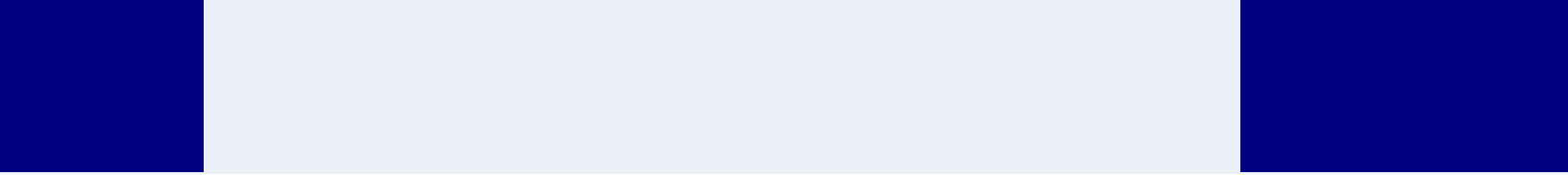


Transportation System

Stamford, CT



Map Prepared by the Community Results Center, United Way of Connecticut



Appendix E: Methodology

Several data collection methods were used for this needs assessment to ensure that the perceptions and opinions of many segments of the community are included in the research. Focus groups and interviews sought to provide an understanding of the main issues faced by Stamford residents. The needs assessment survey sought to further understand resident perceptions of the major areas of need in Stamford. Specifically, the data collection methods included:

- **Focus groups** – In all, 71 people participated in seven focus groups that were held with residents and various community representatives. The seven groups included:
 - 2 groups with social service providers and other community representatives that focused on general issues facing Stamford.
 - 1 group with residents of St. Luke's LifeWorks and the Shelter for the Homeless that focused on the needs and experiences of the homeless population.
 - 1 group with students of Literacy Volunteers in Stamford that focused on the needs and experiences of immigrants.
 - 2 groups with Stamford residents from various neighborhoods were held at the Chester Addison Community Center and at St. Francis Episcopal Church that focused on the general perceptions and needs of residents from various communities around the City.
 - 1 focus group with older adults held at the Senior Center that focused on the needs and experiences of seniors.
- **Interviews** – Fifteen interviews were conducted with community leaders that focused on basic needs, children and youth, health and older adults.
- **A web-based survey** – This needs assessment survey was completed by those who live or work in Stamford. A link to this survey was advertised in the local newspaper. Postcards were also mailed to residents on the United Way of Western Connecticut's mailing list. The survey was offered in both English and Spanish (377 responses).
- **A paper survey** – An identical version of the web-based needs assessment survey was distributed to various social service agencies in Stamford for completion by staff and clients (339 responses).
- **Additional data from publicly available sources and published reports** – Data from these sources are included to provide perspective on various issues. The sources provide data on population trends, economic conditions, education, health, and healthcare. Data listing service requests made to United Way 2-1-1 information and referral service are also included.