Valley Childhood Poverty Collective Impact Initiative
Moving from Poverty to Opportunity

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With Initiative Tri-Chairs: Valerie Knight-Di Gangi, VCF, David Morgan, TEAM, and Monica Oris, Griffin Hospital

Poverty in the Valley

- Higher than the national average

- Based on initial data research from the Valley Community Index

- DataHaven's Analysis of 2019 US census data included in the 2019 Index -- a deeper dive showed four census track areas where at least 68% of children 0-5 live at or below federal poverty guidelines
  - Ansonia Census Tracts: 1252 - *68%* and 1254 – 73%
  - Derby Census Tract 1202 – 80%
  - Naugatuck – 68%
  - *Over 1,300 children ages 0-5 live in these areas:*

Town	Census	Number of Children
Ansonia	1252	353
Ansonia	1254	135
Derby	1202	484
Naugatuck	3545	357
Total		1,333

What are the risks for children 0-5 living at or below the federal poverty level.

Adverse childhood experiences (ACEs)

- Physical Abuse
- Emotional Abuse
- Sexual Abuse
- Domestic Violence
- Paternal Substance Abuse
- Mental Illness
- Suicide or Death
- Crime or Incarcerated Family Member

Social determinants of health

- Income and social status
- Employment and working conditions
- Education and literacy
- Physical environments
- Social supports and coping skill
- Healthy behaviors
- Access to health services
- Biology and genetic endowment
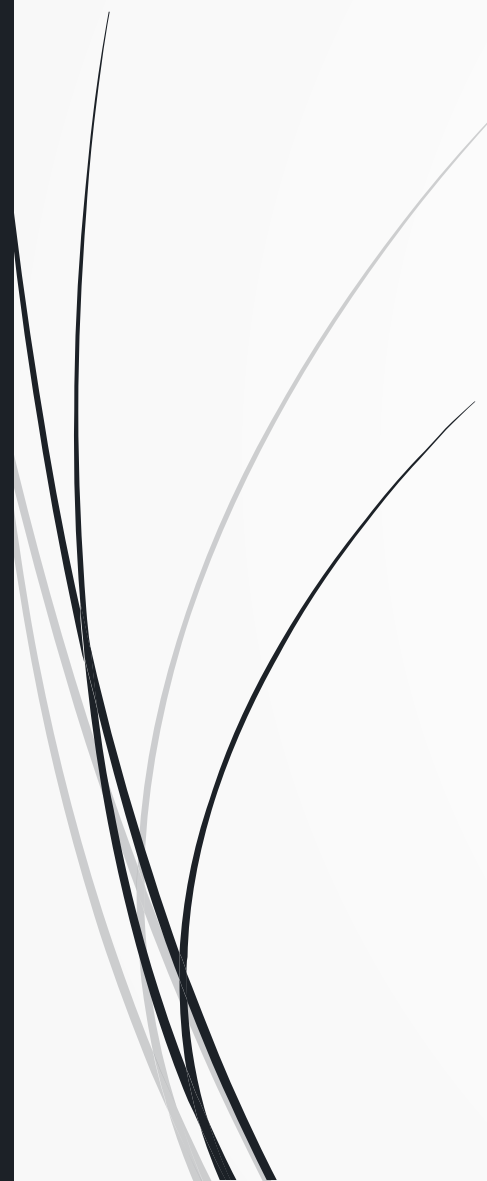- Gender, Culture, Race/Racism

Background: Why A Systems Change Approach Is Needed

- History of working collectively – Valley Council of Health & Human Services

- Convening of partners to address 2017 VCI: Griffin Hospital, TEAM, the Valley United Ways and others

- Decision to explore possibility of systems change

- Sought out consulting group FSG
  - 2011 breakthrough article in Stanford Social Innovation Review
  - Two-day Trainings in Boston

- Valley is a microcosm with a track record of addressing complex problems

- 25-30 entities from private, public and nonprofit sector convened

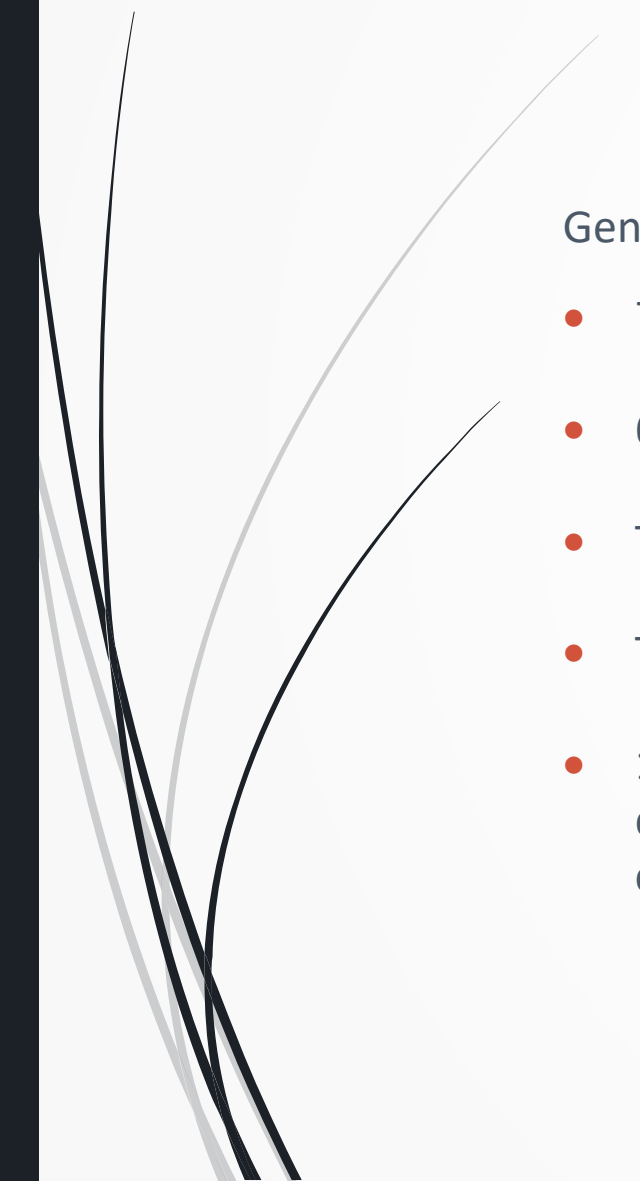- 2019 VCI showed poverty rates had actually increased

How Systems Change Approach Can Make A Difference: Four Tenets

- Both Community and Leaders Contribute to Shared Vision

- Both Formal Data and Community Voices will Drive Decisions and Outcomes

- Vision and Plans Address Inequity

- Real Change Requires Long-term Commitment

Results and Findings: 71 people interviewed

General Findings:

- 79% of respondents said they had enough food or the money to buy food

- 66% of households receive some type of service, such as food, housing or fuel assistance

- The majority said their health was either good or excellent; only 2% said it was poor

- The majority did not lose their job or have their hours cut during COVID-19

- 17% have completed high school or GED; while 45% have some college or an Associate's degree, 17% have at least partially completed post-graduate degree and 10% have completed a Bachelor's degree

Common Aspirations

- For children to be healthy, happy, have a good education and have good employment

- Support systems for parents and families in their own neighborhood

- Greater engagement within the community and within the faith community

- Better schools and education

- Stronger family support and more time to spend with children

- Improving their own well-being, mental health, physical health and education

Results of Focus Groups:
validates survey findings

- When asked what would make life easier for you and your children, the following answers:
  - ⇒ Financial Stability
  - ⇒ Parental Support Groups
  - ⇒ Childcare

- Is there a way that any of these things can happen in your community?
  - ⇒ Parent support groups can definitely happen in our neighborhoods
  - ⇒ Just letting our children be children again and play outside with each other
  - ⇒ Reaching out to a neighbor and helping with food, extra cleaning supplies, check on our elderly neighbors, offer to give a ride to a neighbor, babysit for a neighbor, being there for someone that feels isolated and just needs a friend
  - ⇒ Creating a neighborhood garden
  - ⇒ Neighborhood app to let everyone know what is happening in the neighborhood

- Finally, participants were asked to explain how they would like to see the following work:
  - ⇒ Childcare: know your neighbors well enough to help with childcare
  - ⇒ Access to health care: If a neighbor needs a ride to doctor, they can ask on the neighborhood app
  - ⇒ Access to healthy food: Neighborhoods garden would give us access to a healthier society; sharing resources, more affordable for people, bring awareness to local farms
  - ⇒ Transportation: Neighborhood app would help with bringing kids to school, elderly to store, soccer practices
  - ⇒ Remote learning: Kids could help each other, group with other families so they can have the interaction and education they need.
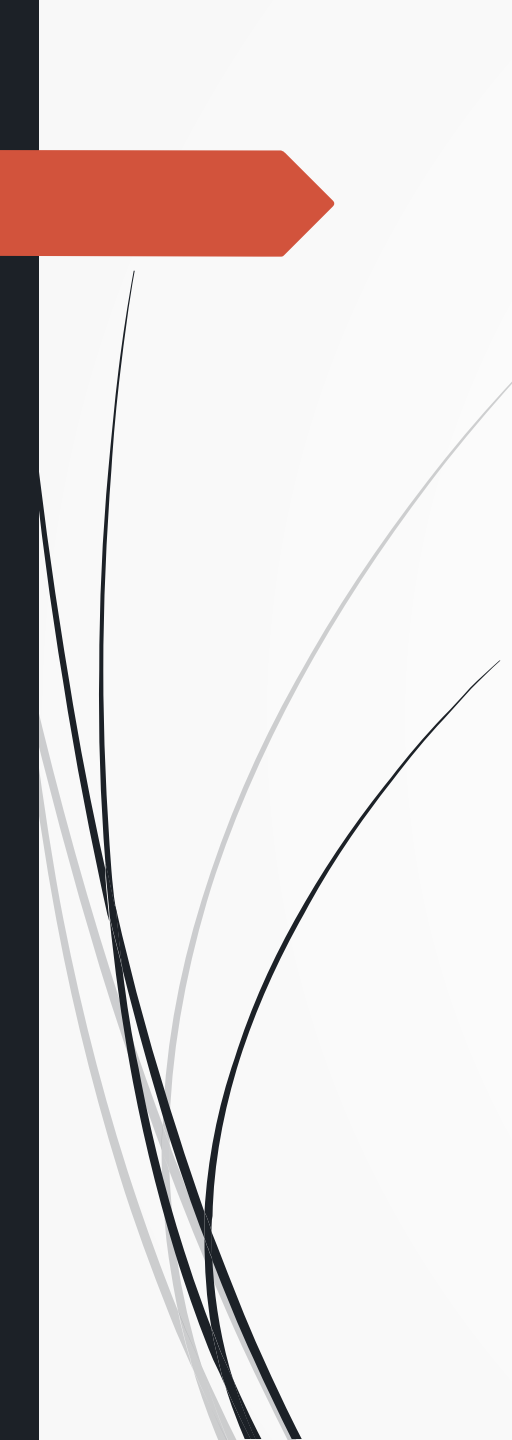
Areas of Shared Concern

⇒ **Childcare:** Many respondents do not have access to childcare. For those parents working from home, it means many interruptions and loss of productivity in their own work. In several cases, parents have had to stop working or lose hours, not because of job loss, but to ensure adequate childcare. Others noted limited or minimal time spent with their children due to work schedules, multiple jobs and/or working away from the home.

⇒ **Lack of Knowledge of Community Resource within their community:** In spite of the strong presence of nonprofits in the area and other resources such as municipalities or 211, participants frequently noted how they didn't know where to go to find what resources might be available. *They didn't know what they didn't know.*

⇒ **Ability to Create Community Supports within the Community:** Some way to create or organize parent and neighborhood support groups so that neighbors could connect with each other.

Findings

1) **Providing basic needs does not alleviate or diminish poverty or childhood poverty.** The pandemic only amplified the feeling of stress and isolation.

2) **The nonprofit sector has done outstanding work in providing basic needs,** but it is isolated impact. Collective impact initiative needs to works concurrently on a larger, systems-level scale.

3) **Parents know and understand what they want for their children**, but don't have time, resources or network to achieve it. What they want is *beyond* basic needs: a sense of community, time with their children and assurances that children are well cared for.

4) **Not having resources in their community – provided by the people who live in their community** – is a significant impediment to creating a more secure quality of life.

5) **Lack of affordable, accessible childcare, provided by people in their own neighborhood**, is a barrier to reducing childhood poverty.

6) **Parents and community residents want resources within their community that they can create, trust and sustain.**

7) **Some of the individuals participating in this survey and attending focus groups sat in the zoom rooms to help design such a network.**

Problem Statement: There are 1,333 + children ages 0-5 who live at or below federal poverty guidelines within specific census tracts in Ansonia, Derby and Naugatuck

Results Statement: **Within 10 years, the number of children ages 0-5 living at or below federal poverty guidelines within these census tracts will be reduced.**

Hypothesis: The barriers to reducing poverty are the root causes which prevent parents and single moms from accessing opportunities such as jobs or education. Before job training or education can change someone's circumstances, they must be in a position to take advantage of such opportunities.

The Root Causes that people with lived experience identified are based on capacity and infrastructure issues; not on any one isolated factor:

- Lack of affordable, accessible childcare within the community

- Lack of a community support infrastructure that can provide assistance within and for the community

- Lack of uniform, consistent awareness of all the resources available to make education, job training or transportation possible
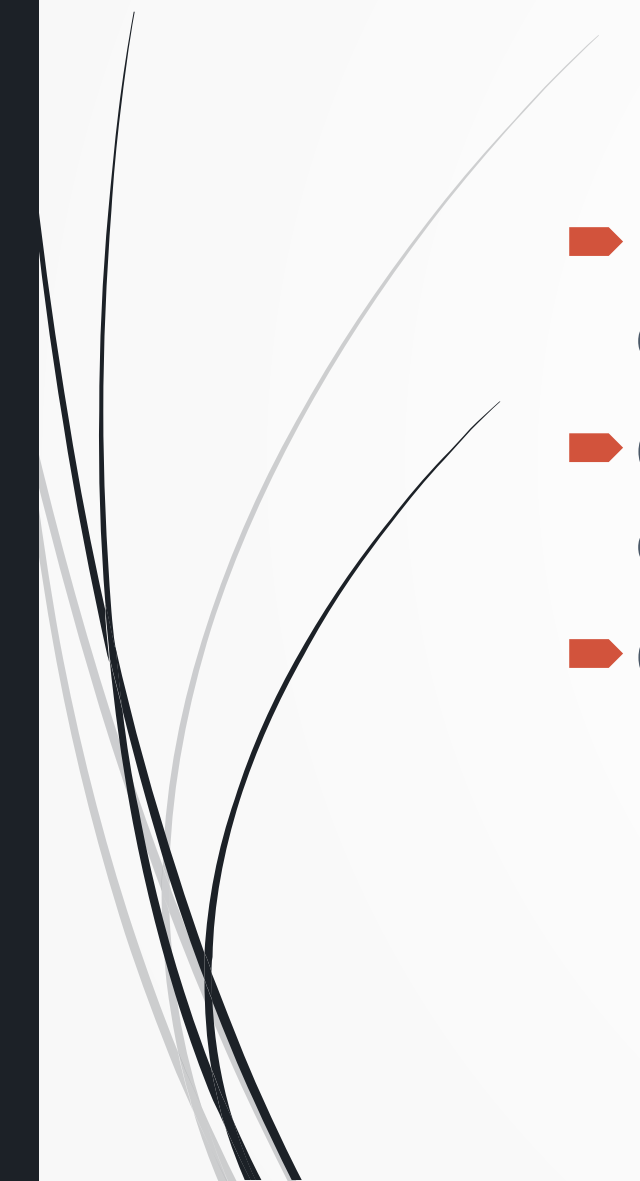
Affordable, Accessible Childcare

Recommendations

8 Members on the Task Force – both professionals and community residents

Problem Statement

- Primary area of concern is affordable, accessible childcare.

- Care unavailable for children 0-5 and care available during off-peak hours (3-11 pm or overnight shifts)

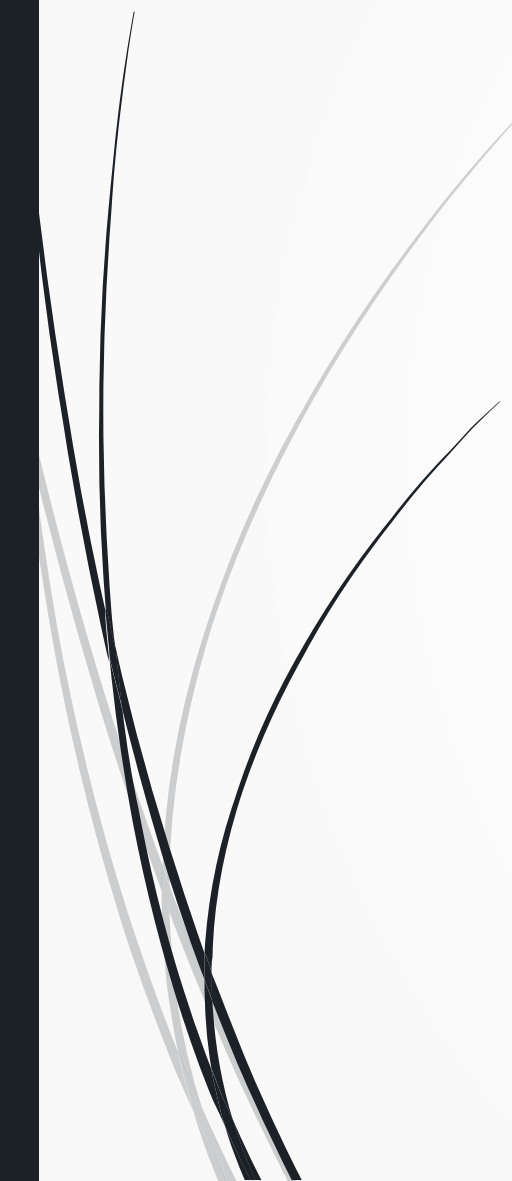- Childcare not readily available in the communities

Options explored

- Traditional models, including alternatives that had previously been available but have since closed down, considering if it might be viable to re-instate those options

- The number of childcare slots available and the waiting lists to access those slots

- Alternatives being researched in cooperation with the Ansonia Superintendent of Schools, who also recognizes the severe shortage

- Less restrictive models, including availability of "nanny" services for short periods of time

- Worker/owner models that might be established within the community.

Worker/Owner Model Potential

- It could be located within the community;

- It could be more affordable as there is no management hierarchy in these models;

- If an affordable site within the community could be located, it would reduce the cost;

- The model would provide not only childcare but a means to begin creating generational wealth in the community;

- It could be sustainable by transitioning the business to other community residents
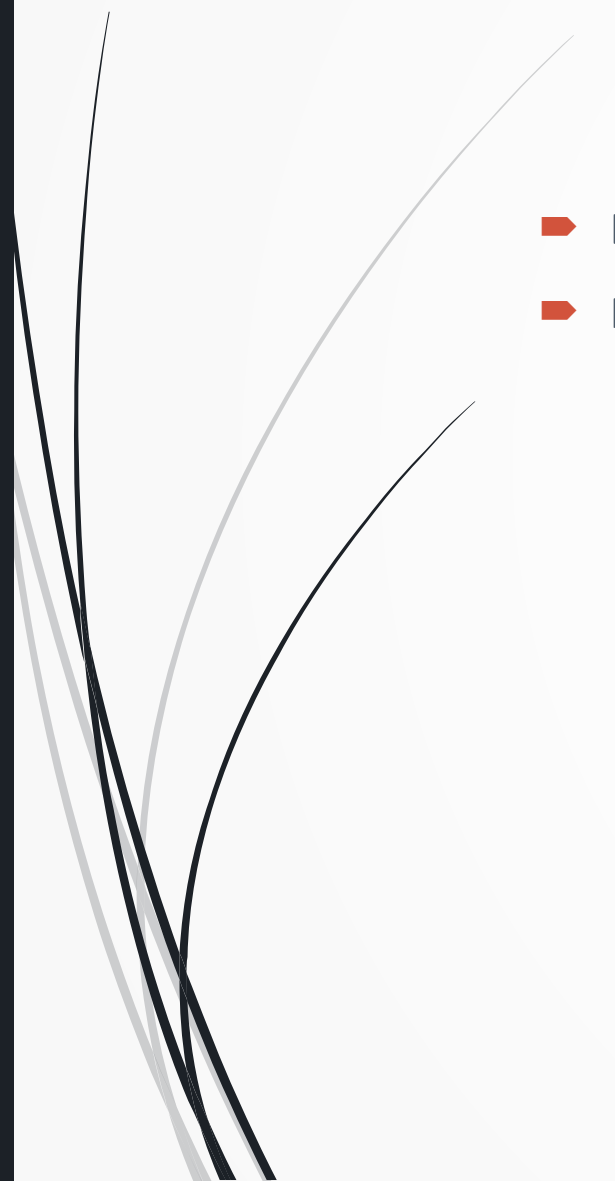
Recommendations

- **Create a worker/owner incubator model that will provide new childcare entrepreneurs** within the community a supportive place to learn the business skills necessary to launch and sustain a profitable business.

- **Engage a consultant knowledgeable in childcare licensing** to develop the plan and recommend training that includes the necessary credentials for childcare and the business skills to operate the business

- **Utilize the training models developed and utilized by SEED Common**, a cooperative which has done extensive work in this area and is offered at no charge).

- **The plan should include establishing a "franchise model"** where there will be the necessary required consultants (i.e., Education, health, etc. as required by law) engaged to oversee all the businesses. (This role may be filled by a nonprofit providing childcare services or another childcare agency).

- **Businesses should be operated out of a shared space/building** to better facilitate the work of the consultants and reduce expenses. Pursue a suitable site where 4-6 family day care businesses can be located, under one franchise overseen by an Education (and other necessary) Consultant(s). An existing childcare organization may serve this role.

- **The plan should also include a start-up budget and operating costs for the first three years** to ensure that there is a viable, sustainable model.

- **An RFP should be extended to engage a qualified consultant.**

Tri-Chair Input

- David Morgan

- Monica Oris

Next Steps

- Source community residents who may be interested in pursuing a worker/owner model for childcare
- Identify potential funding sources which could provide the start-up costs.
- Look at a site for housing the initial worker/owner childcare.
- Coordinate with State Representatives to see if The Valley can be added to the State Childcare Incubator Pilot and what benefits that may offer.

- Extend an RFP to qualified consultants to take on planning and initial execution of this initiative

Community Resources

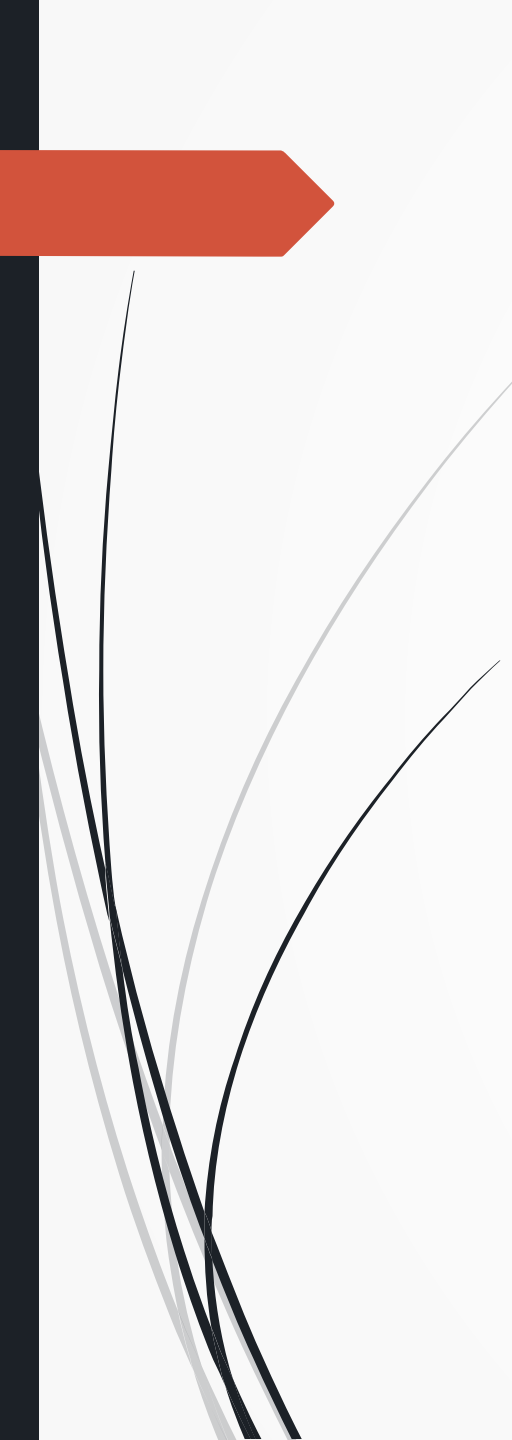Working group of 20 people including parent navigators

The Problem

- Lack of knowledge of what community supports or resources are available

- Knowledge and access to resources are not easily accessible in the 4 census tracts

- Existing resources that are available (parent liaisons, 211, nonprofit resources) aren't known and accessible to everyone

- There is no comprehensive list of existing resources

Community Resource Guide

- Committee members identified resources for the guide

- Griffin Hospital provided prior list gathered of comprehensive community resources

- D&A compiled resources from data sources above, updating information from organization websites

  - If resource was not available through website it was not included

  - Resources were categorized by town and by service type. Service providers who provided more than one service were represented multiple times

  - Resource is only current as of the day it was accumulated

Recommendation for Implementing Access to Community Resources and Supports

- **Designate a primary person/people who will be responsible for this information**. This individual(s) must be paid and not be a volunteer to ensure consistency. **The individual(s) must live in one of the 4 census tracts** and be available to all residents of the 4 census tracts.

- **As a member of the community, the individual will have knowledge of the community and can become a trusted resource.** This person/people will be responsible for continually updating and adding to the resources.

- **The resource person/people will also be the go-to person** to help establish neighborhood support groups

- **Each town is different and where and how this person/people should be located on a rotating basis within the town will vary by the town**. It may be in a town hall or a library or a nonprofit located within the community. It should be hyper-local and serve as a community hub.

- **It is critical that the position and location for the community resources not be dependent on a single source of funding or place so that it will be sustainable and not succumb to budget cuts.**

- **Create a governing body of nonprofits and the community** with a backbone organization to manage resource (and person)
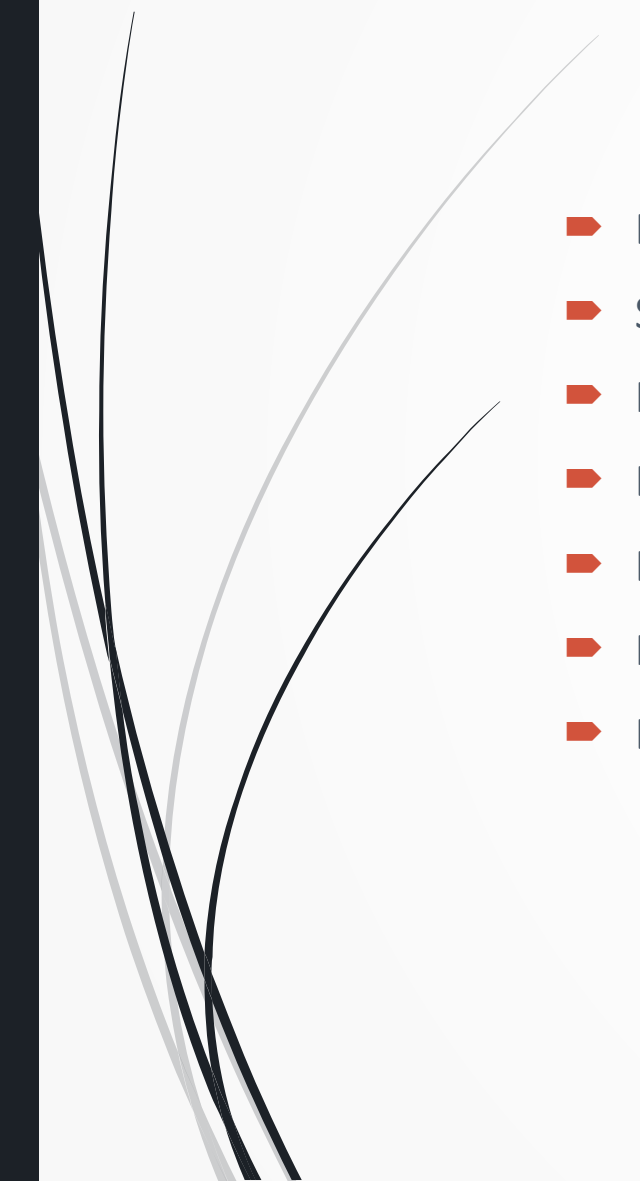
Tri-Chair Input

- Monica
  - Statewide Database
  - Community Champion Model
- David
  - Potential role for The Valley Council
  - Identify most likely backbone organization

Next steps

- Designate the backbone organization

- Secure funding

- Recruit and empower a governing body

- Develop budget

- Develop job description and expectations for Community Resource Person

- Recruit position

- Establish locations

Summary

- This work has been over two years in the making, with major emphasis on gathering community data – even during COVID-19

- We listened to the community through our survey and focus group process; they told us what would make a difference

- The recommendations have been carefully considered and include community input

- The next steps are to continue to recruit community members and act upon recommendations

- We are grateful to VCF and TCF's Stepping Forward Initiatives for their support

- We also wish to say a very special thank you to our Task Force Co-Chairs and all task force members for their incredible work on this project throughout this past summer.

- Together with all of our community partners, we will take the next steps toward reducing childhood poverty in the valley

"Funding an ecosystem approach, instead of jumping from issue to issue, guarantees maximum reach without siloes trying to claim credit that their issue was the one that carried us all over the finish line".

Nathaniel Smith, founder and Chief Equity Officer of the Partnership for Southern Equity.