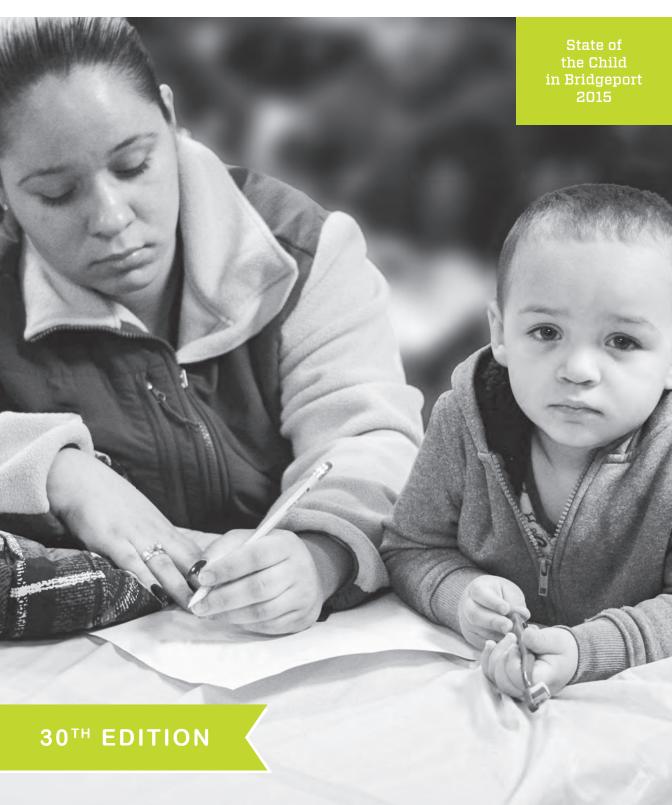
# Bridgeport Child Advocacy Coalition



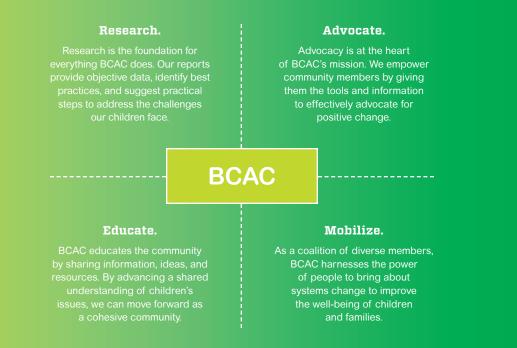


# **Our Mission**



The Bridgeport Child Advocacy Coalition is a coalition of organizations, parents, and other concerned individuals committed to improving the well-being of Bridgeport's children and families through research, education, advocacy, and mobilization.

BCAC provides the vehicle for the Greater Bridgeport community to take concerted action on issues that affect children's health, education, and safety. Our coalition is grassroots and independent, diverse and motivated. Together, we advocate for policy and systems change that will clear a path to a better future, particularly for Bridgeport's most vulnerable and disadvantaged children.



## **Executive Summary**

Back in the day, Bridgeport, Connecticut's largest city, was bustling with shops downtown, manufacturing jobs, restaurants, theaters, parks, beaches, museums, and educational institutions. It was a city thriving with culture, well-paying jobs, access to transportation, access to health care, and affordable housing. It had a richness in racial and ethnic diversity. It was, and is, a resilient city to be proud of and many of us remember just that. We are passionate about our Bridgeport – its past, its present and its future.

Yet today within Bridgeport, too many are struggling to make an honest living working multiple jobs and trying to keep a roof over their head and food on the table. Over 32% of our children are living under the federal poverty level. Living in poverty has a negative and suffocating impact on just about every aspect of a family's life – including education, health, and safety. At a time when Bridgeport's racial and economic achievement gaps rank among the worst in the nation, BCAC is a powerful voice that continues to advocate for this community.

Despite the difficulties, significant progress is being made within Bridgeport by thousands of individuals and organizations. Individually and collectively, we must approach this work by addressing the child, the parent, and the whole family. We need to address both physical and mental health comprehensively.

Just doing something, anything, isn't always enough. In order to achieve what we want, we have to take the right action. But with so many choices, how do we know which one is right? We ask people. We get help along the way. No one can operate in a void—no one. Here's the thing: that kindness, that small gesture, that moment of support or truth-telling - even when it is difficult to hear - makes all the difference. It sets us straight and guides us on our path. If together we consider the idea that we "become what we believe," then our beliefs and perceptions about our goal can have a significant influence in making it happen.

BCAC prides itself on presenting its 30th edition of a highly valued and comprehensive report on data about children and families in Bridgeport.

Our intention is to build a more informed, nurturing and supportive community so that all Bridgeport families can achieve their full potential. Join BCAC in the belief that we can make positive systemic change happen right here and right now.

Mary Pat C. Healy

Mary Pat Healy Executive Director



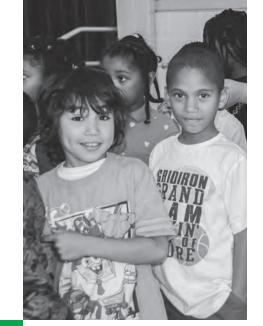


TOTAL CHILDREN BRIDGEPORT

# 36,799

POPULATION BRIDGEPORT

147,608



# even more threatening for children immersed in it. Poverty is the single greatest threat to a child's well-being and can impede a child's ability to learn, manage relationships in an emotionally and socially healthy way foster self-reliance, or grow up with good nutrition. For children and

**Poverty** 

to learn, manage relationships in an emotionally and socially healthy way, foster self-reliance, or grow up with good nutrition. For children and families in an urban setting like Bridgeport, the detrimental effects of poverty increase, fueled by the dense population, higher rates of crime, a shortage of affordable housing options, and un-or underemployment. Bridgeport is the most populated city in Connecticut, however it is also one of the poorest. The Bridgeport-Stamford-Norwalk, Connecticut metro area leads the nation with the worst income distribution.<sup>ii</sup>

As dangerous as poverty can be to a healthy and stable livelihood, it is

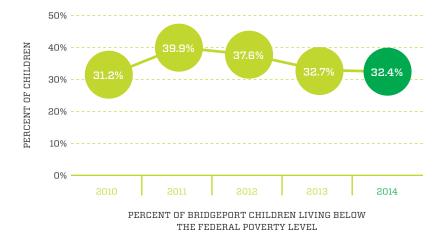
In 2014, 32.4% of Bridgeport children (12,000 persons) lived under the federal poverty level (FPL), a .3% decrease from 2013.<sup>III</sup> This percentage is more than double Connecticut's overall rate of 14.9% of children who live under the FPL. Collectively, 22.5% of Bridgeport's population lives under the FPL, compared to a statewide rate of 10.8%.

1 out of every 7 children in Connecticut live in poverty. The average rate of child poverty in 2012-2014 in Bridgeport was 34.7% of African American children, 38.3% of Latino children, and 14.9% of White children.

In order for a family's basic needs to be met, with extra money for emergencies, the living wage for Connecticut residents would need to start at \$40.89 per hour (for a family of three). Connecticut's minimum wage of \$9.15 in 2015 provided less than half of a living wage for a single adult and only 22% of the living wage for a single adult with two children.<sup>iv</sup> In Bridgeport, the estimated living wage for a family of three is \$32.36 per hour.<sup>v</sup>

As of January 1, 2016, Connecticut's minimum wage increased to \$9.60 an hour. This will increase to \$10.10 by January 2017.

#### Child Poverty Rate in Bridgeport Remains Stagnant



#### CHILDREN AS PERCENT OF TOTAL

24.9

# Bridgeport's Children



NUMBER OF STUDENTS IN BRIDGEPORT PUBLIC SCHOOLS

#### Age Composition

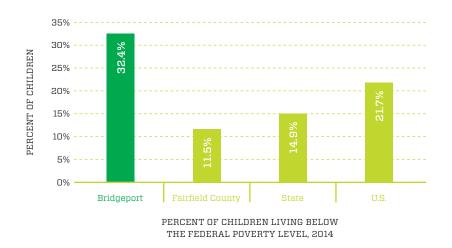
AGE	POPULATION
UNDER AGE 3	6,085
AGES 3-4	4,956
AGES 5-8	8,461
AGES 9-11	5,459
AGES 12-14	5,439
AGES 15-17	5,914
AGES 18-19	4,823
AGES 20-24	12,924

Source: U.S. Census Bureau, 2014 American Community Survey.<sup>i</sup>



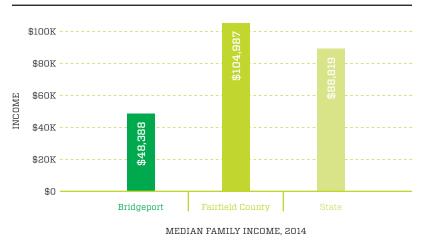
Racial and Ethnic Composition			
RACE	UNDER 18		
AFRICAN AMERICAN	39.5%	40.6%	
ASIAN	1.8%	5.8%	
LATINO	45.3%	28.5%	
WHITE	8.5%	21.6%	
MULTIRAC	IAL 4.8%	3.5%	

ource: U.S. Census Bureau, .merican Community Survey verage 2012-2<u>01</u>4. Bridgeport's Rate of Child Poverty is More Than Double That of Fairfield County and the State



Fairfield County has one of the lowest rates of child poverty in Connecticut, however the majority of its poverty is concentrated in Bridgeport.

#### Although Median Family Income Rises, Pay Disparities Remain



Although the median family income in Bridgeport increased in 2014, so did that of families in Fairfield County and Connecticut overall. The income disparity between Bridgeport and Fairfield County remains high.

#### CHILD HUNGER

As of December 2015, 15,744 Bridgeport children lived in families enrolled in the Supplemental Nutritional Assistance Program or SNAP (formerly known as food stamps). This is 543 less children than in 2014, a decrease of 3.5%. Statewide, there are 153,265 children enrolled in SNAP, a highly effective program in reducing food insecurity and critical for low-income families. Research shows that households who receive SNAP have a 30% lower chance of being food insecure than they otherwise would be.<sup>VI</sup> An estimated 36,710 (16.2%) Fairfield County children suffered from food insecurity (the inability to afford or access enough food for an active, healthy lifestyle) in 2013 compared to 19% of children in Connecticut overall.<sup>vii</sup> A survey of 226 Bridgeport residents found 35% self-identified as having very low food security. For those living in areas without a grocery store, the effects of food insecurity are felt more harshly. For example, residents in Bridgeport's East End are forced to rely on corner stores that typically offer a limited supply of fresh fruits and vegetables and instead supply foods that lack proper nutrition. The lack of accessible, healthy, and affordable food options in the neediest areas of Bridgeport result in increased rates of obesity, diabetes, and heart disease.<sup>viii</sup>

#### FAMILY STATUS

In 2014, 54.1% of Bridgeport children under the age of 18 lived in single-parent families (43.2% with a single mother and 10.9% with a single father), compared to 32.7% of children statewide (25.7% with a single mother and 6.9% with a single father). The number of single male-headed households increased 2.9% in 2014.

In 2014, 40.2% of single female-headed families with children under the age of 18 in Bridgeport lived in poverty, compared to 12.1% of families with children under the age of 18 headed by married couples. 1,387 Bridgeport children were cared for by a grandparent; a slight rise from the 1,345 children recorded in 2013.

### **Economic Insecurity**

Economic security and stability are essential in creating a healthy, safe, and reliable environment for children and families to thrive. In Bridgeport, the lack of stable income, affordable housing, and reliable means of transportation, as well as the prevalence of family homelessness, detract from the economic stability that children need to thrive mentally, socially, emotionally, and academically. By working to create more affordable housing and transportation options that match the needs of the city, we will achieve greater economic outcomes for the families of Bridgeport.

#### HOUSING

In 2015, the fair market rent for a two-bedroom apartment in Greater Bridgeport was \$1,283 a month.  $^{\mbox{\tiny ix}}$ 

56.6% of Bridgeport families with children under the age of 18 are renters, a slight increase (.8%) from 2013.

The 2015 fair market rent in Bridgeport (\$1,283) was 81% of what a parent working 40 hours a week at minimum wage (\$9.15/hour) earns before taxes (\$1,586 a month). The recommended percent of an individual's earning wage that should be spent on monthly rent is no more than 30%.

There are 2,700 public housing units in Bridgeport, of which 1,923 (71%) are two bedrooms or more. As of January 2016, there were 1,736 families on the waiting list for public housing in Bridgeport.



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Child in

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MORE THAN DOUBLE THAT OF FAIRFIELD COUNTY OR CONNECTICUT RESIDENTS'



#### HOMELESSNESS

From October 1, 2014 – September 30, 2015, 167 children spent time in a Bridgeport area homeless shelter. Of these children, 70 (41.9%) were under the age of six. In 2013-14, 285 children spent time in a Bridgeport area shelter, marking a decrease of 41.4% fewer children facing homelessness in 2014-15.

Statewide, 916 families reportedly spent time in a homeless shelter from 2014-15, compared to 76 Bridgeport families.

In 2014-15, there were 4.5 homeless children in Bridgeport shelters per 1,000 children compared to the statewide rate of 2.0 homeless children per 1,000 children.

#### EMPLOYMENT

The unemployment rate in Bridgeport decreased from 9.4% in November 2014 to 7.4% in November 2015. However, Bridgeport continues to have the highest unemployment rate in Fairfield County and ranks third in the state for those out of work or unable to find a job. Connecticut's unemployment rate declined to 5.1% in 2015, the closest it's been to the national employment rate (5% in 2015) since 2013.

In 2014, the unemployment rate for Bridgeport youth ages 16-19 who were looking for work was 32.7%, the lowest youth unemployment rate since 2009. There has been a 45.3% drop since the 2013 youth unemployment rate of 59.8%. However, the number of Bridgeport unemployed youth remains higher than that of Fairfield County's at 23% and statewide overall (22.9%).

#### TRANSPORTATION

In 2014, 19.2% of Bridgeport occupied housing units did not have a car, compared to 7.7% in Fairfield County and 9.1% statewide. 14% of Bridgeport residents carpooled to work, while 9.7% used public transportation. An estimated 32.4% of Bridgeport workers who use public transportation are under 149% of the federal poverty line, compared to 20.5% in 2013.

# Child Care & Early Childhood Education

Quality early childhood education and care are studied concepts that show the more a child is exposed to both, the more successful they will be mentally, physically, emotionally, and socially later on in life. Early education and quality care is not only an investment in a child's future but can help deter any number of complex social issues that can arise as a child grows and develops. Children who experience high-quality or stable child care score higher on measures of cognitive ability, adjust better in school environments, and show reduced behavioral problems in school and at home. In Bridgeport, the number of children who attend early childhood education programs continues to fall short of statewide and Fairfield County rates. In order for Bridgeport children to reach their full potential, it is critical we continue to put an emphasis on early childhood education and high-quality child care. A HOUSEHOLD IN BRIDGEPORT MUST EARN<sup>xi</sup>

# \$24.67/hr



\$51,320

07

#### CHILD CARE CAPACITY AND NEED

In 2014, 10,089 Bridgeport children under the age of six (81.9%) lived in families in which all of the adults were in the labor force. This is a substantial increase from 2013, where only 63.9% of children had caregivers who were employed.

In 2014, there were 13.4 child care spaces per 100 children under the age of three in Bridgeport, compared to 17.4 spaces per 100 children under the age of three statewide.

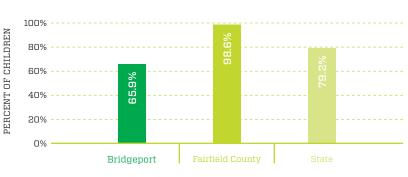
#### CHILD CARE COSTS & QUALITY

In 2015, the average cost for full-time licensed child care at a center for infants and toddlers in Bridgeport amounted to \$496 per week and \$213 weekly for family day care homes serving infant and toddlers. The weekly average of sending a preschool-aged child to a full-time licensed child care center is less expensive at \$192 and for family day care home service, \$201 per week.<sup>xii</sup>

2,454 children attend Bridgeport child care centers or preschool programs accredited by the National Association for the Education of Young Children (NAEYC) or its equivalent. In addition, 844 children attend programs that meet standards established by Head Start.

#### EARLY CHILDHOOD EDUCATION

#### Fewer Kindergartners Have Preschool Experience in Bridgeport<sup>xiii</sup>



PERCENT OF STUDENTS ENTERING KINDERGARTEN WITH PRESCHOOL EXPERIENCE, 2013-14

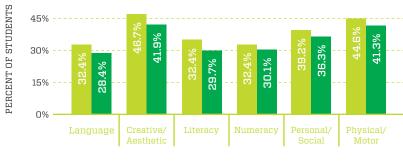


#### ALL OUR KIN PROVIDES RESOURCES THAT HELP CHILDCARE PROVIDERS SUCCEED

Natasha Auguste-Williams, a dedicated early childcare provider in All Our Kin's Bridgeport network, has been working with children for nineteen years now. Along with her two year-old son, the children in her very own Sweetpea Home Daycare are thriving. Natasha immerses her daycare children in exciting activities to aide in their learning, like bringing them on trips to explore local parks and museums, and engaging their senses with music and art. She stresses the need for children to have increased human interaction rather than screen-time, and she is constantly fascinated by the speed in which children pick up information. After successfully obtaining her Child Development Associate's credential from All Our Kin and making use of their Business Series, Natasha continues to stay involved with the organization by taking part in their Garden Project.

Less children entering Kindergarten in 2013-14 were placed at a Kindergarten Entrance Inventory Level 3 rating than those in 2012-13.

#### Number of Kindergartners With Level 3 Rating for High Entrance Inventory Results Declines in 2012-14<sup>xiv</sup>



2012-13 2013-14

KINDERGARTEN ENTRANCE INVENTORY RESULTS, PERCENT OF STUDENTS AT LEVEL 3\*, 2012-14

\*Students have skills needed and require minimal instructional support.

# **Education**

The educational opportunities that children have access to in Bridgeport are crucial to their future achievement, well-being, and the continued growth of our community. Although there remain pressing issues to address within our schools such as high suspension rates, fluctuating academic scores, and low graduation numbers, the impact of a joint community working to give Bridgeport students more has led to stories of success across many classrooms. Community members are working cohesively to ensure that Bridgeport's public education system becomes a model urban district; one in which children can thrive and reach their greatest potential.

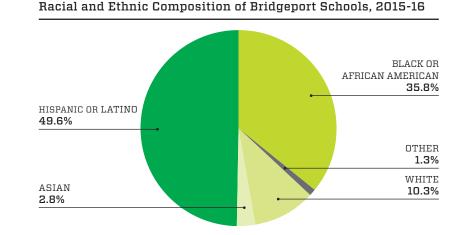


#### RULER CHANGES CLASSROOM DYNAMICS AT THOMAS HOOKER SCHOOL

Thomas Hooker School has kicked off their implementation of the RULER Approach (Recognizing emotions, Understanding causes and consequences of emotions, Labeling the full range of feelings, Expressing them appropriately, and Regulating emotions to foster healthy relationships). The versatile anchor tools as well as the shared common language for students and staff are components of the initiative that Hooker School applauded. Two 8th graders, Louis and Annabella, shared how RULER helps them navigate and transition through unpleasant emotions during the school day. Louis noticed that "When you're in a bad mood, the teachers know and they don't put as much pressure on you." Annabella was relieved that teachers give students time to express feelings through writing. "It helps me because sometimes when I get mad or sad, I could just write it down, and I can write why I had that feeling." Assistant Principal Wojchik and teachers Smuckler and Pocock agreed that students appreciate teacher participation in sharing feelings as well. They like to see that their teacher is just as human as they are, moving through the full range of pleasant/unpleasant and high energy/low energy feelings throughout the school day. "Students fight with one another less now- they're more conscious about what they're saying."

#### BRIDGEPORT PUBLIC SCHOOL STUDENT PROFILE

As of October 1, 2015, there were 21,050 students in the Bridgeport Public School District.





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During the 2014-15 school year, 100% of Bridgeport Public School students were eligible for free or reduced price lunch because they lived in families earning less than 185% of the federal poverty level (\$36,612 for a family of three in 2014), compared to 37.7% of students statewide.

During the same school year, 14.3% of Bridgeport students (3,031) were not fluent in English, compared to 6.4% of students statewide. Bilingual education is provided in Spanish and Portuguese for all students as well as Haitian Creole for high schoolers.<sup>xv</sup> There are currently 75 languages spoken by students in the Bridgeport schools. Studies show bilingual education plays a critical role in the cognitive, cultural, and academic development of a student.



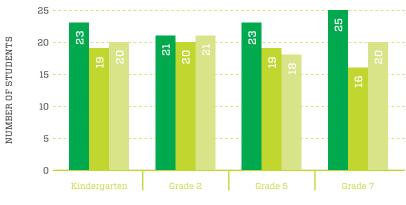
15.4% of Bridgeport students (3,252) received special education services in 2014-15, compared to 12.7% statewide.

Over the 2014-15 school year, 524 students with special education needs were placed out-of-district, a 15% increase from 2013-14.

#### Breakout of Bridgeport Special Education Students by Category, 2014-15

AUTISM	7.6%
LEARNING DISABILITY	37.2%
INTELLECTUAL DISABILITY	5.1%
EMOTIONAL DISTURBANCE	7.4%
SPEECH IMPAIRMENT	9.4%
OTHER HEALTH IMPAIRMENT	4.7%
OTHER DISABILITIES	27.4%

#### Bridgeport's Classroom Sizes Continue to Fluctuate



2012-13 2013-14 2014-15

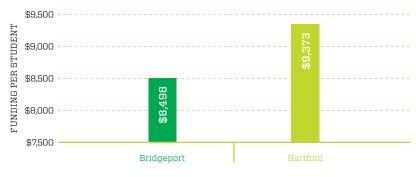
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Child

AVERAGE CLASS SIZE, SELECTED GRADES, 2012-15

#### Bridgeport Students Receive Less State Education Cost Sharing (ECS) Dollars Than Hartford Students

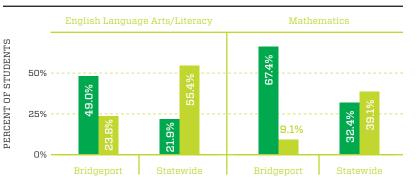


STATE EDUCATION COST SHARING (ECS) FUNDING PER STUDENT, 2014-15

#### STANDARDIZED TESTING RESULTS

Beginning the 2013-14 school year, Connecticut stopped offering the Connecticut Mastery Test (CMT) and the Connecticut Academic Performance Test (CAPT) and replaced these testing measures with the Smarter Balanced Assessment Consortium (SBAC).

#### Smarter Balanced Assessment Results, 2015

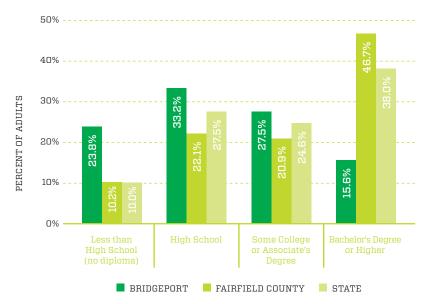


PERCENT AT LEVEL 1: DOES NOT MEET THE ACHIEVEMENT LEVEL
PERCENT AT LEVEL 3&4 : MEETS OR EXCEEDS THE ACHIEVEMENT LEVEL

PERCENT OF BRIDGEPORT PUBLIC SCHOOL DISTRICT AND STATEWIDE STUDENTS ACHIEVING LEVELS 1, 3, AND 4 ON THEIR SBACS, 2015



# Bridgeport Adults Lag Behind Adults in the County and Statewide in Educational Attainment



EDUCATIONAL ATTAINMENT, BRIDGEPORT ADULTS OVER AGE 25, 2014

Research shows children tend to follow in their parents' footsteps with regard to educational attainment. Children whose parents did not complete high school are twice as likely to drop out of high school themselves. Furthermore, a parent with more than a high school degree increases the likelihood of their child going on to seek higher education after high school.

#### SCHOLASTIC APTITUDE TEST SCORES

94% of Bridgeport's Class of 2015 took the Scholastic Aptitude Test (SAT), compared to 85% of students statewide.

#### Bridgeport Trails Behind State and National SAT Scores, Class of 2015

	CRITICAL READING	MATHEMATICS	WRITING
BRIDGEPORT	354	341	351
STATEWIDE	494	495	494
NATIONAL	489	498	475

In 2014-15, African American and Hispanic students outpaced statewide SAT participation increases by 5.8% and 11%, respectively. Connecticut students continue to outperform their peers nationally in reading and writing, while missing the national math average by only three points.



24.7

WITHOUT A HIGH SCHOOL DIPLOMA LIVING IN POVERTY, A





INCREASE SINCE 2013

#### BCAC'S CIVIC ENGAGEMENT WORKSHOPS EMPOWER

BCAC's Civic Engagement workshops have served as a tool to empower Bridgeport's families to speak up and ask for their needs to be met. This year, PT Partners, a resident-led collaboration of PT Barnum residents, used the workshop as a resource to voice their concern in creating neighborhood enhancements as part of any development in their 360-unit housing complex. The group found that adequate preparation prior to presenting to community leaders is key to having their voices heard. One member developed a statement requesting the Bridgeport Housing Authority take on "green" initiatives by starting a recycling program in Bridgeport's public housing. Another group, parents who attend Board of Education (BOE) meetings, used skills learned at the workshop to address the BOE with their concerns on the behavior and negative climate at BOE meetings. These parents developed testimony and delivered it to the Board, expressing their input to reinstate the reciting of the Code of Conduct at the start of every meeting. At BCAC, we work to ensure that these groups, comprised of parents, community members, and other concerned residents, are fully educated on the issues they're most passionate about and teach them the advocacy skills needed to create effective change.



Bridgeport Students Score Lower Than Students Statewide

on SAT Content Area Benchmark Measurements<sup>xvi</sup>

SAT TEST-TAKERS WHO REACHED SAT CONTENT AREA BENCHMARK, CLASS OF 2014

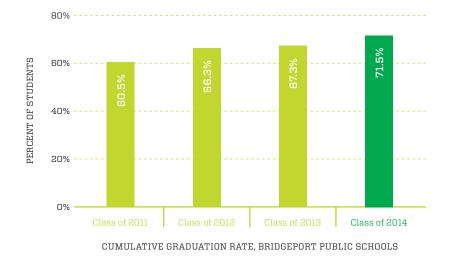
While the SATs provide information on students' overall preparedness for college and career success, SAT Content Area Benchmarks measure student's preparedness in each subject area. College Board research shows that students who earn high Benchmark scores are highly likely to achieve strong scores on AP Exams.





#### **GRADUATION RATES**

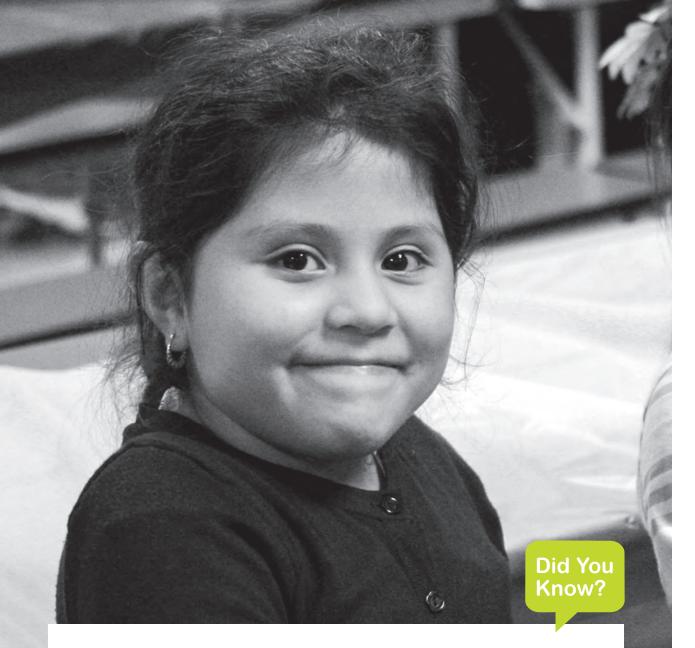
#### Bridgeport Students Graduating Within Four Years



71.5% of Bridgeport's Class of 2014 graduated high school within four years, compared to the state's 87% graduation completion rate (up 1.5% from 2013).

English Language Learners (ELL) in the Bridgeport Public School District graduate at a lower rate than students with English as their primary language. 61.6% of ELL students graduated with a high school diploma in 2014, compared to 73.1% non-ELL students.

50.6% of Bridgeport students receiving special education services in 2013-14 graduated with a standard high school diploma, compared to 65.2% statewide.



#### 2014-15 BRIDGEPORT PUBLIC SCHOOL STUDENTS





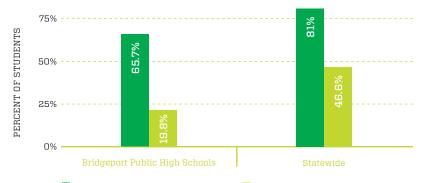




15.4 14.3

# FLUENT IN

#### Fewer Bridgeport Students Enroll in or Graduate College than Students Statewide<sup>xvii</sup>



Post-Secondary School Enrollment Rate Post-Secondary School Graduation Rate

POST-SECONDARY SCHOOL ENROLLMENT AND GRADUATION RATE, PUBLIC SCHOOL STUDENTS, 2008-14

An estimated 65.7% of the Class of 2008 (high school) enrolled in post-secondary education in Bridgeport, compared to 81% statewide. Only 19.8% of Bridgeport's Class of 2008 graduated college within 6 years earning either a 2 or 4 year degree (Class of 2014) while 46.6% of students statewide went on to graduate from post-secondary education (Class of 2014).xviii

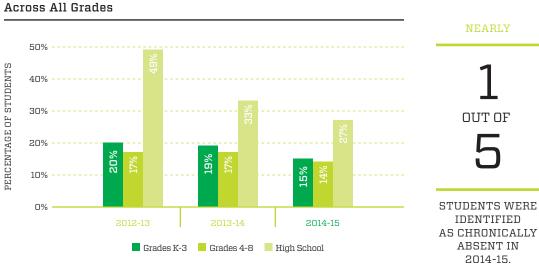
#### ABSENTEEISM

STUDENTS

PERCENTAGE OF

Students who are chronically absent from school often have external issues preventing them from regularly attending school. Studies show that students who do not receive early intervention for attendance problems are more likely to drop out of school and become involved in the juvenile and/or adult criminal justice system. During the 2014-15 school year, 19.3% of Bridgeport students were chronically absent.

Chronic Absenteeism Rates in 2014-15 Fall Below 30%



THREE YEAR CHRONIC ABSENTEEISM TREND, BRIDGEPORT PUBLIC SCHOOLS



#### MOBILITY/SCHOOL DISCIPLINE

Frequently moving between schools can make student achievement, conduct, and stability difficult to achieve. Out of the thirty-nine schools in the Bridgeport Public School District, 46% have considerably high mobility rates over 30%.

#### Bridgeport Schools With High Mobility\* Rates, 2014-15

ELEMENTARY SCHOOL	MOBILITY RATE
ROOSEVELT	46.1%
MARIN	47.2%
HALL	47.8%
CURIALE	51.5%
HIGH SCHOOL	MOBILITY RATE
BASSICK	44.6%
HARDING	52.5%

These Bridgeport Public Schools are highlighted because each had a mobility rate of at least 41%. \*Mobility is defined as the rate at which students enroll and withdraw from schools around the Bridgeport Public School District.

During the 2014-15 school year, 2,121 Bridgeport Public School students were suspended out-of-school and 2,322 were suspended in-school.

Students receiving special education services during the 2014-15 school year received 1,248 out-of-school suspensions, a 7.14% decrease from the 1,344 given in the previous academic year. The number of special education students with in-school suspensions increased, from 966 in 2013-14 to 1,172 in 2014-15 (a 21.3% increase).

For more in-depth information on Bridgeport Public School suspensions and lost class time, please see our 2015 report: "Lost Class Time: Redefining School Discipline and Improving School Climate in Bridgeport."

A DATAHAVEN



## Health

It is difficult for a child or family to function when their health care needs are unfulfilled, especially when surrounded by a poor-quality environment. High-quality health care is a multi-faceted issue, and is the cornerstone of a child's well-being. Healthy development and cognitive, social-emotional, physiological, and behavioral health care options must be addressed in order to ensure a child's successful development into adulthood. With this in mind, we're working to continue Bridgeport's progression of a healthy environment and accessible, high-quality health care for all families.

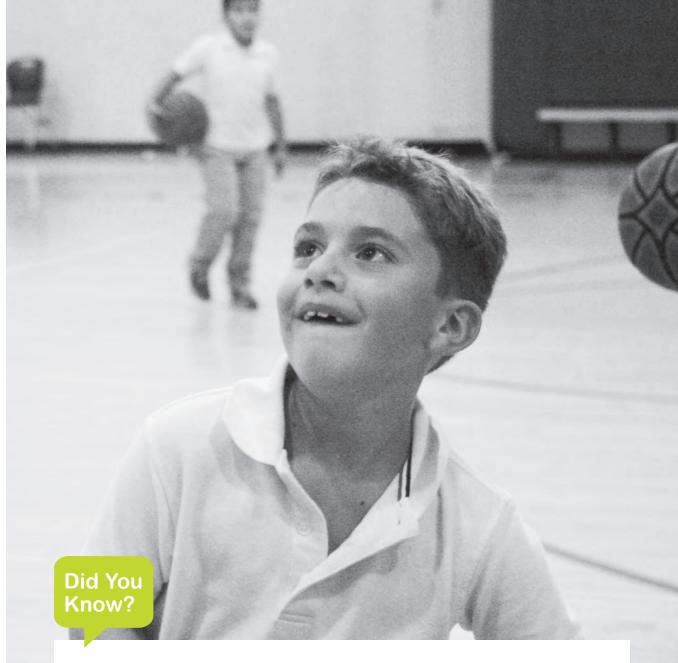


#### INFANT HEALTH

In 2012, 16.4% of Bridgeport mothers received late or no prenatal care during their pregnancies, compared to 21.6% in 2011. Statewide, 13.1% of mothers received late or no prenatal care in 2012.

OF RESPONDENTS DID NOT GET THE MEDICAL CARE THEY NEEDED DUE TO COST

In 2012, the infant mortality rate in Bridgeport was 10.4 infant deaths in the first year of life per 1,000 live births, compared to 4.9 in 2011, a significant increase of 112%.

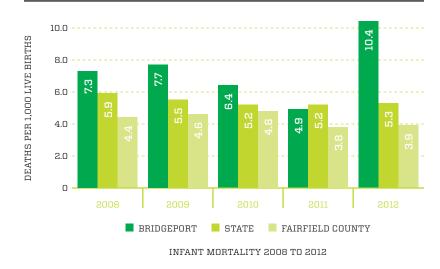


#### FAR FEWER SCHOOL-BASED ARRESTS OVER THE LAST 3 YEARS



SCHOOL-BASED ARRESTS IN BRIDGEPORT REFERRED TO JUVENILE COURT<sup>XX</sup>

# Infant Mortality in Bridgeport Soars over Fairfield County and Statewide Rates



In 2012, the rate of neonatal deaths in Bridgeport (those within the first month of life) was 8.9 deaths per 1,000 live births.

In 2012, 8.7% of all Bridgeport babies were born with low birthweight (less than 5.8 pounds at birth), compared to 9.4% in 2011, and 7.9% statewide.

Smoking has been correlated to premature births; in Bridgeport 2.5% of mothers reported smoking during pregnancy, compared to 4.5% statewide.

#### Infant Mortality, Low Birthweight, and Prenatal Care By Race and Ethnicity in Bridgeport, 2012

	AFRICAN AMERICAN	LATINO	WHITE
INFANT MORTALITY (INFANT DEATHS PER 1,000 LIVE BIRTHS)	12.9%	12.6%	7.8%
LOW BIRTHWEIGHT	11.3%	8%	6.1%
LATE OR NO PRENATAL CARE	18.8%	17.7%	10.1%

#### PREVENTIVE HEALTH CARE

84% of Bridgeport children born in 2011 and enrolled in the State Immunization Registry and Tracking System were vaccinated against major vaccine-preventable diseases before they turned 2, nearly the same as the statewide rate of 83%.

#### OBESITY

The CT Department of Public Health estimates one-quarter of Connecticut high school students are overweight (13.9%) or obese (12.3%). One-third of Connecticut students in kindergarten and 3rd grade are overweight (15.6%) or obese (16.1%) as well.<sup>xxi</sup>

#### Less Than Half of Bridgeport Student Participants Pass State Physical Fitness Challenges

GRADE LEVEL	INDICATOR: PHYSICAL FITNESS	TOTAL TESTED	% PASSED
4	569	1557	37%
6	452	1306	35%
8	437	1337	33%
10	37	95	39%



PHYSICAL FITNESS TEST RESULTS, BRIDGEPORT PUBLIC SCHOOL\*, 2014-15 \* Physical fitness is measured by flexibility, abdominal strength and endurance, upper-body strength, and aerobic endurance

#### ASTHMA

From 2009-13, the CT Department of Public Health recorded 11,632 hospitalization or emergency room visits for asthma or asthma-related attacks by Bridgeport residents. 3,793 of these visits were by children aged 14 or younger.

Statewide, the rate of children who experienced hospitalization and/ or emergency room visits due to asthma was 131.6 visits per 10,000 children. Bridgeport's rate of asthma-related hospital visits is 252.2 incident per 10,000 children.

The most impoverished sections of the city had the highest reported asthma cases in Bridgeport.  $^{\mbox{xxii}}$ 

#### LEAD POISONING

In 2013, 402 Bridgeport children (6.5% of those screened) under the age of six had lead poisoning (based on a confirmed blood lead level >5 ug/dL).xiii This is an 18% increase from 2012 (342 children).

In 2013, 81% of Bridgeport children under the age of two were screened for lead poisoning, compared to 71.4% statewide. Bridgeport is one of four cities that have the highest number of households with incomes below poverty level and the highest rates of childhood lead poisoning in Connecticut.

85.3% of Bridgeport occupied housing units were built before 1979, compared to 74.8% in Fairfield County and 71.9% statewide. Almost 50% of Bridgeport's housing was built in 1939 or earlier. Lead paint was banned nationwide in 1978.

21

ALL OF BRIDGEPORT IS BETTER SERVED WITH GROCERY STORE OPTIONS



THAT OFFER FRESH FRUITS AND VEGETABLES

20

#### BRIDGEPORT RECOGNIZED AS 2015 CULTURE OF HEALTH WINNER

This year, Bridgeport celebrated recognition as one of Robert Wood Johnson Foundation's 2015 Culture of Health Winners. Kristin duBay Horton, Bridgeport's Director of Health, expressed how people and organizations in Bridgeport are working to change the city's narrative. "What Robert Wood Johnson is recognizing Bridgeport for is collaboration- among city departments, among community partners, to overcome health disparities and achieve goals even when resources are scarce." From PT Partners and Anaergia building greenhouses that will offer jobs and fresh produce to the city, to hospitals partnering with community health centers and food pantries to offer free health screenings, to Park City Green recycling mattresses and books, to BCAC continuing to mobilize advocates with data and research, Bridgeport's people are making strides in bringing health to the forefront of the city's culture. The community is also focused on making schools socially and emotionally healthier, and taking necessary steps to ensure quality low-cost afterschool programs. In addition, numerous partnerships have emerged as a result of the emphasis on public safety and the recognition that gun violence is indeed a public health issue. Bridgeport continues to hope and work toward a healthier and more equitable future.

#### DRAL HEALTH

HEALTH COVERAGE

#### Percentage of Children in Bridgeport on HUSKY A Receiving Dental Care<sup>xxiv</sup>

workforce obstacles, and/or coverage inconsistencies.

children and 9.4% of the total population).

almost \$25 million in cuts to Medicaid.xxv

	2011	2012	2013
PREVENTIVE DENTAL CARE	67.0%	70.0%	70.0%
DENTAL TREATMENT	38.3%	37.2%	38.6%

barriers such as transportation challenges, a lack of oral health literacy,

According to the U.S. Census, 4.4% Bridgeport children were uninsured in 2014, compared to 7.2% in 2013. Among all Bridgeport residents,

15.9% were uninsured in 2014, compared to 22.0% in 2013. Statewide,

3.7% of children and 6.9% of all residents were uninsured in 2014,

showing a steady decrease from those uninsured in 2013 (4.3% of

From July 1, 2014 – June 30, 2015, 15,774 Bridgeport children were

enrolled in HUSKY A/Medicaid health insurance. As of April 2015, 709

children age 18 and younger were enrolled in HUSKY B. In December

2015, the Connecticut fiscal year 2016-17 state budget was passed with

Underutilization of oral health care treatment can be effected by

IN 2014

22

15.9



BRIDGEPORT RESIDENTS WERE UNINSURED COMPARED TO





#### TEEN HEALTH

In 2014, 438 Bridgeport adolescents under the age of 20 were treated for sexually transmitted diseases, compared to 451 in 2013, a decrease of 2.8%.

Bridgeport's rate of sexually transmitted diseases in 2014 was 21.9 cases per 1,000 adolescents, compared to 8.1 cases per 1,000 adolescents statewide.

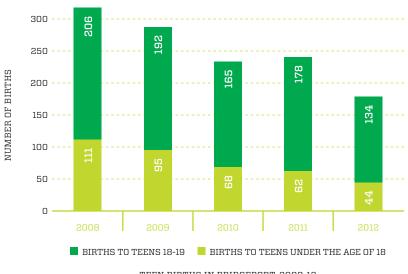
In 2013, a Connecticut School Health Survey found 26% of Connecticut high school students had been in a verbally or emotionally abusive dating relationship, 9% in a physically abusive dating relationship, 11% in a sexually abusive relationship, and 9% were forced into having sexual intercourse.<sup>xxvi</sup>

#### **TEEN PREGNANCY**

In 2012, there were 44 births to teens under the age of 18, a decrease of 29% compared to 2011.

The 2008-12 birth rate for Bridgeport teens ages 15-19 was 45.2 births per 1,000 teenage girls, compared to the statewide rate of 18.8 births per 1,000 teenage girls.

#### Teen Pregnancies in Bridgeport Continue to Decline



TEEN BIRTHS IN BRIDGEPORT, 2008-12



# Safety

When children are safe and secure, they are healthier, happier, and better prepared to learn. Exposure to violence at home, in the streets, or at school causes stress in children-toxic stress than can cause long-term negative effects on both mental and social development. Research has shown that when families and communities are economically secure, violence decreases both in and outside the home. We must reduce our entire community's exposure to violence in Bridgeport.

#### CHILD ABUSE

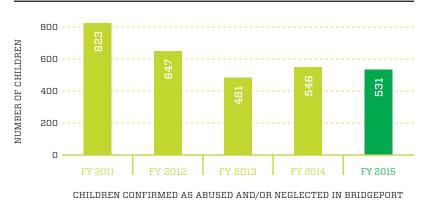
**Did You** 

Know?

From 2013-14 to 2014-15, the number of children in Bridgeport substantiated as abused and/or neglected declined 2.7%. Statewide, there was an 11.7% decrease.

In 2014-15 in Bridgeport, there were 14.4 children substantiated as abused or neglected per 1,000 children, compared to 7.9 children substantiated as abused and/or neglected per 1,000 children statewide.

#### Bridgeport Shows Slight Decrease in Number of Child Abuse Cases



#### DOMESTIC VIOLENCE

In 2013, there were 760 arrests for family violence in Bridgeport, compared to 770 in 2012, a minor decrease of 1.2%. Bridgeport's rate of family violence arrests was 23.8 arrests per 1,000 families, compared to 20.7 statewide.

In 2013, 30.6% of all domestic disputes resulting in an arrest occurred with a child involved or present.

In 2014-15, 253 Bridgeport students were referred to the Juvenile Review Board (JRB), compared to 239 in 2013-14 and 209 in 2012-13. Out of the 71% of youth who have successfully completed the JRB program, only 18% have recidivated. Police can also make referrals to the JRB.

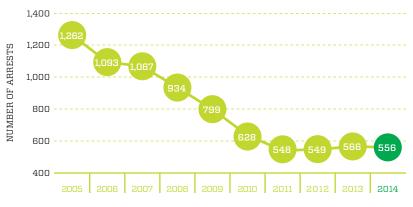
A 2015

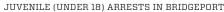
28



REPORTED NOT FEELING SAFE ENOUGH TO WALK IN THEIR NEIGHBORHOOD AT NIGHT, COMPARED TO ONLY **16%** STATEWIDE

25





In 2014, there were 556 juvenile arrests in Bridgeport, a 1.7% decrease compared to 2013. 31% of all juvenile arrests occurred either after school from 3:00 pm to 5:00 pm or between 8:00 pm and 9:00 pm.

In 2014, Bridgeport's juvenile crime arrest rate was 36.6 arrests per 1,000 youth ages 10 to 17, compared to a rate of 25.0 arrests per 1,000 youth statewide.

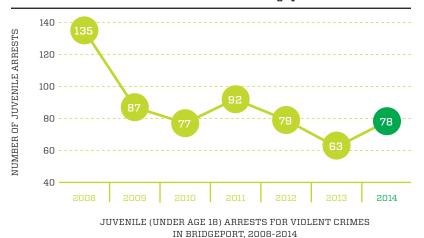
As of November 2015, 17.9% of Connecticut Juvenile Training School (CJTS) offenders were Bridgeport youth. CJTS is a maximum security correctional center for boys aged 12-20.

In 2014, 307 arrests, 55% of all juvenile arrests in Bridgeport, involved children 15 years of age or younger, compared to 344 arrests (60.8%) in 2013.

From 2013-14, juvenile arrests for violent crimes (defined as murder, manslaughter, rape, robbery, and aggravated assault) in Bridgeport increased by 23.8%. There were 78 juvenile arrests for violent crimes in 2014, compared to 63 in 2013.



Juvenile Arrests for Violent Crimes in Bridgeport Increase



#### Restraint and Seclusion<sup>xxviii</sup>

	ALL R/S INCIDENTS	EMERGENCY RESTRAINTS*	EMERGENCY SECLUSIONS**
	INCIDENT COUNT / STUDENT COUNT	INCIDENT COUNT / STUDENT COUNT	INCIDENT COUNT / STUDENT COUNT
BRIDGEPORT	109 / 27	<5 / <5	104/24
STATE	35,892/2,460	18,103 / 1,986	12,350 / 1,247

Emergency Restraint means any mechanical or personal restriction that immobilizes or reduces the free movement of a child's arms, legs or head.

\* Emergency Seclusion means the confinement of a child in a room, whether alone or with staff supervision, in a manner that prevents the child from leaving.

From 2013-14, 109 incidents of restraint and seclusion (R/S) in the Bridgeport Public School District were recorded, along with 104 incidents in situations resulting in a child's emergency seclusion. Statewide, 2,460 students accounted for the 35,892 R/S incidents in 2013-14. R/S procedures are intended to isolate an individual in order to reduce the risk of injury/harm to themselves or others, however decades worth of research shows R/S is not effective in reducing the occurrence of problem behaviors and instead can result in lifelong trauma.<sup>xxix</sup>

#### **PASSIONS INTERTWINE TO FIGHT YOUTH VIOLENCE**

Kingsley Osei, Executive Director of Connecticut Against Violence (CAV), launched the organization at a time when he felt a deep sense of moral responsibility after hearing the story of Justin Thompson, a fourteen year-old Bridgeport teen shot and killed while walking home with friends. CAV unites community groups with law enforcement and the school district to join together to reduce violence in Bridgeport. CAV uses an unconventional approach for violence prevention. Throughout the many violence prevention rallies and youth summits Kingsley holds across Bridgeport, he uses his background as a DJ and in hip hop music culture to engage youth. The organization itself is branded in the way that a hip hop album would be, and is promoted similarly. Kingsley believes that music is a tool that can be used to uplift our youth and prevent them from going downhill. CAV's events and workshops motivate youth to stay focused and to be intentional with their decisions throughout high school rather than becoming victims of the school-to-prison pipeline.

#### **Notes and Definitions**

- i Census data from the 2014 American Community Survey, unless otherwise noted.
- ii Based off 20 metropolitan areas with the most uneven income distribution in the US, as calculated by the Gini coefficient.
  iii The 2014 Federal Poverty Level (FPL) was defined as an annual income of 19,790 for a family of three.
- The U.S. government adjusts the FPL for inflation each year.
- iv Alliance for a Just Society. The Job Gap Economic Prosperity Series, 2015, http:// allianceforajustsociety.org/wp-content/uploads/2015/10/Pay-Up-Final-R2-10.13.15.pdf.
- v Living Wage as calculated for a family of 3 (one adult; two children) by Massachusetts Institute of Technology (MIT), Living Wage Project, http://livingwage.mit.edu/.
- vi Executive Office of the President of the United States, Long Term Benefits of the Supplemental Nutritional Assistance Program, December 2015, https://www.whitehouse.gov/sites/whitehouse.gov/ files/documents/SNAP\_report\_final\_nonembargo.pdf.
- vii Feeding America, Map the Meal Gap, 2015, Overall Food Insecurity in Connecticut by County in 2013, http://www.feedingamerica.org/hunger-in-america/our-research/map-the-meal-gap/2013/ CT\_AllCounties\_CDs\_CFI\_2013.pdf.
- viii The Food Policy Council, Food Action Plan for Bridgeport, CT, May 2015, https://www.bridgeportct.gov/ filestorage/89019/95959/210592/287048/2015\_Bridgeport\_Food\_Action\_Plan.pdf.
- ix The U.S. Department of Housing and Urban Development (HUD) defines Fair Market Rent (FMR) as "the 40th percentile of gross rents (including utilities) for typical, non-substandard rental units occupied by recent movers in a local housing market." Source: http://www.huduser.org/periodicals/ ushmc/winter98/summary-2.html.
- x As recorded by Connecticut's annual Point-in-Time Count. All information was gathered on a single night in February, 2015. Connecticut Coalition to End Homelessness, Connecticut Counts, http://cceh. org/wp-content/uploads/2015/06/CT-Counts-v2-1.pdf.
- xi National Low Income Housing Coalition, Out of Reach 2015, http://nlihc.org/sites/default/files/oor/ OOR\_2015\_FULL.pdf.
- xii Licensed full-time child care center and home prices are averages, as reported by individual providers to Connecticut 2-1-1 Child Care, 2015. Child care providers have the option not to report their fee for services to the state. Thusly, these averages should not be taken as the definite price of child care for all centers and homes in Bridgeport.
- $xiii \quad {\tt Connecticut \, Data \, Collaborative, Education \, Results \, http://ctdata.org/data_by_topic#education.}$
- xiv The kindergarten assessment is a look into the skills and behaviors students demonstrate based on teachers' observations at the beginning of the kindergarten year. Students at Level 3 demonstrate the skills in the specified domain and require minimal instructional support.
- xv Haitian Creole availability is for students seeking support services, Bridgeport Public Schools.
- xvi SAT Content Area Benchmarks: An Analysis Conducted by Research and Development for the National Assessment Governing Board, 2012, https://www.nagb.org/content/nagb/assets/documents/what-wedo/preparedness-research/statistical-relationships/sat-content-area-benchmarks.pdf.
- xvii Connecticut State Department of Education, High School Reports on College Enrollment, Persistence, and Graduation, http://www.sde.ct.gov/sde/cwp/view.asp?a=2758&Q=335288.
- xviii Only Bassick, Central, and Harding High Schools were chosen because not enough conclusive data exists for the high schools which opened in 2013-2014. E.g., Fairchild Wheeler Interdistrict Magnet (which includes Hydrospace Engineering and Physical Sciences High School, Information Technology and Software Engineering High School, and Biotechnology Research and Zoological Sciences High School) and Bridgeport Military Academy.
- xix Results from the "Community Wellbeing Survey," August 2015, conducted and authored by DataHaven and Siena College Research Institute.
- xx Connecticut Judicial Branch, Court Support Services defines a school-based arrest as "an arrest for an incident that occurred on school grounds during school hours." The data does not include students age 18 and older (those referrals go to adult court) or arrests not referred to court; police may refer students to a Juvenile Review Board or other diversion options in the community.
- xxi Connecticut Department of Public Health analysis of 2013 data for high school students; 2010-11 data for Kindergarten and students in grade 3; CT Department of Public Health, Childhood Obesity in Connecticut, DPH Nutrition, Physical Activity and Obesity Program, Fall 2013, http://www.ct.gov/dph/lib/dph/hems/nutrition/pdf/chob\_fact\_sheet\_2015nov.pdf.
- xxii Based off a 400 point incident rate. Gathered by the State of Connecticut Department of Public Health, Asthma Program, 2015.
- xxiii According to the Connecticut Department of Public Health, children are considered lead poisoned when diagnosed with a confirmed blood lead level >5 ug/dL. In 2013, CT DPH lowered the case management action level from >10 ug/dL to >5 ug/dL to correspond with the Centers for Disease Control and Prevention (CDC).
- xxiv Children living below 185% of the Federal Poverty Level (\$35,316.50 for a family of three in 2013) qualify for HUSKY A/Medicaid health insurance.
- xxv Retrieved from the Hartford Courant, FY 2016 General Fund Holdbacks, https://assets.documentcloud. org/documents/2662247/FY2016-All-Holdbacks-General-Fund.pdf.
- xxvi Connecticut Department of Education, Preventing Teen Dating Violence & Promoting Healthy Relationships, 2013, http://www.sde.ct.gov/sde/lib/sde/pdf/tdv/tdv\_factsheet.pdf.
- xxvii Results from the Search Institute Survey, "Profiles of Student Life: Attitudes and Behaviors," August 2014, conducted and financed by Regional Youth Adult Social Action Partnership (RYASAP).

xxviii All incidents of emergency restraint and emergency seclusion were reported for students with disabilities. General education students were not reported in this data, unless they were in the evaluation process for special education services at the time of the restraint or seclusion. Connecticut State Department of Education, Annual Report on the Use of Physical Restraint and Seclusion in Connecticut, School Year 2013-14, http://www.sde.ct.gov/sde/lib/sde/pdf/deps/special/restraint\_and\_ seclusion\_annual\_report\_2013\_14.pdf.

xxix U.S. Department of Education, Restraint and Seclusion: Resource Document, 2012, https://www2. ed.gov/policy/seclusion/restraints-and-seclusion-resources.pdf.

# **The Bridgeport Child Advocacy Coalition**

#### **Member Organizations**

A Child's World. Inc. ABCD, Inc. All Our Kin American Association of University Women -Bridgeport Branch Big Brothers Big Sisters of SWCT Boys & Girls Village, Inc. Bridgeport Alliance for Young Children Bridgeport Hospital Bridgeport Neighborhood Trust Bridgeport Public Education Fund **Burroughs Community Center** Cardinal Shehan Center Career Resources, Inc. Caroline House Catholic Charities of Fairfield County Inc. The Child & Family Guidance Center Christ & Holy Trinity Church Congregation B'nai Israel **Congregation Rodeph Sholom** CT Against Gun Violence (CAGV) Connecticut Legal Services, Inc. The Council of Churches of Greater Bridgeport The Discovery Museum Fairfield Grace United Methodist Church Fairfield University School of Nursing GBAPP

# Golden Hill United Methodist ChurchHall Neighborhood House, Inc.International Institute of Connecticut, Inc.The Kennedy CenterLifeBridge Community ServicesMcGivney Community CenterMercy Learning CenterMount Aery Baptist ChurchNew Beginnnings Family AcademyNichols United Methodist WomenOptimus Health CareRYASAPThe Salvation ArmySchool Volunteer Association of BridgeportSouthwestern AHEC, Inc.St. Vincent's Medical CenterSt. Vincent's Special Needs CenterSummerfield United MethodistTrinity Episcopal ChurchUnitarian Church in WestportUnitarian Universalist Church of Greater BridgeportUnited Way of Coastal Fairfield County

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# Bridgeport Child Advocacy Coalition

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bcacct.org



State of the Child in Bridgeport 2015

# Everyday, in a thousand little ways, Bridgeport is improving.

If you share the Bridgeport Child Advocacy Coalition's vision that all of Bridgeport's families deserve the nurturing and supports needed to achieve their full potential, please join us.

Together, we'll work to create a community in which all children:

- Are safe, supported, and healthy.
- Receive a high-quality education at every stage.
- Grow up in families that are economically independent and secure.

BCAC works to improve the well-being of children and families by:

- Leading collaboratively.
- Acting as an information clearinghouse.
- Organizing our broader community.
- Employing facts, analytical tools, and proven practices.
- Highlighting Bridgeport's strengths.

Call, visit our website, or engage with us on social media to find out how you can get involved.



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