



2022

Community Health Needs Assessment

Hartford, Connecticut

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Dear Connecticut Children's Colleagues, Partners and Supporters,

Connecticut Children's has long been recognized locally, regionally and nationally as a leader in promoting the optimal health, development and well-being of children and their families. Our commitment goes well beyond the extraordinary healthcare that our clinical teams provide to also include strengthening families and communities so they are best positioned to help children thrive from their early years into adulthood.

We are proud of our work addressing community needs. Connecticut Children's Office for Community Child Health (the Office) supports 17 community-oriented programs in their work promoting the optimal health, development and well-being of children. This work includes a five-year, \$30 million Promise Neighborhoods grant from the U.S. Department of Education awarded to Connecticut Children's in October 2021. Under the grant, the Office is leading a multi-partner, cross-sector effort to build the North Hartford Ascend Pipeline, which provides cradle to career supports for children living in the federally designated North Hartford Promise Zone to enhance academic, health and life outcomes.

Another example of our organization's community-focused work involves our commitment to addressing the increasing mental health concerns faced by children. In doing so, we are building out a continuum of care for those who present with medical and psychological/psychiatric concerns, which includes plans to add a new medical/psychiatric unit with 12 inpatient beds. Also as part of that continuum, we are increasing the number of psychologists embedded in primary care and specialty care clinics, and enhancing support services for patients who seek mental health care in our Emergency Department but are safely able to be discharged home.

Our work addressing identified community needs also delves into many other areas. As you will see in this Community Health Needs Assessment (CHNA), community needs related to equitable healthcare, chronic diseases, healthy housing, nutritious food, academic success, career opportunities, trauma, violence prevention, and safe neighborhoods are great. We ensure our community-oriented programming is of the highest quality and targeted to meet the evolving needs of the communities we serve by:

- embracing a robust community building strategy;
- conducting a CHNA and developing a Community Health Improvement Plan every three years;
- evaluating our efforts through strong measures and metrics; and
- being transparent in sharing our results through such publications as our annual Community Benefit Reports.

At Connecticut Children's, we remain committed to addressing community needs to do all we can to enhance outcomes for children and help them reach their full potential.

Sincerely,

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PROGRESS ACHIEVED SINCE 2019 COMMUNITY HEALTH NEEDS ASSESSMENT

Prior to this publication, Connecticut Children's most recent Community Health Needs Assessment (CHNA), published in 2019, identified increased need among families to access services that are proven successful in enhancing both short- and long-term outcomes for children and families.

The 2019 CHNA prioritized needs in the following categories:

- Mental Health, Behavioral Health and Trauma
- School Readiness
- Childhood Obesity Prevention
- Housing, Environment and Community Factors

Recommendations outlined in the 2019 CHNA included the following:

- Developing centralized cross-sector care coordination services
- Advancing a strength-based protective factors approach
- Preventing childhood obesity
- Enhancing early identification and intervention for at-risk children
- Increasing collaboration to facilitate school readiness
- Enhancing community-building efforts in targeted neighborhoods
- Strengthening education and outreach for injury and violence prevention

In response to the 2019 CHNA, Connecticut Children's drafted a Community Health Improvement Plan (CHIP). The 2019 CHIP addressed the extensive array of medical, social, and environmental needs identified in the assessment.

Action to Date:

The following includes select examples of how Connecticut Children's has addressed the community needs detailed in the 2019 CHNA.

- **Connecticut Children's Office for Community Child Health (the Office):** The Office is a national leader in addressing critical contemporary issues that have the potential to adversely affect children's health and development. It oversees 17 community-oriented programs that address a wide range of factors that influence children's healthy development, including needs identified in the 2019 CHNA. The Office embraces a "no wrong door" and "all sectors in" approach so each program can work with families to resolve their initial concerns and refer them to other programs for additional support.
- **Help Me Grow (HMG) National Center:** The HMG National Center provides technical assistance to a growing network of affiliates that work to advance early detection and intervention for children who have mild to moderate delays or disorders, or are at risk for developing them, and are often not detected or served through child-serving systems. Its nationwide affiliate network includes 118 HMG systems operating in 28 states and Washington, D.C. Through its work, the HMG National Center also supports the identification and diffusion of system enhancement innovations across its affiliate network, which serves as a laboratory to test and perfect novel practices and strategies designed to strengthen children and families across the country. Such efforts help to increase quality, expand access, and promote equitable outcomes for our youngest children.

- **North Hartford Ascend Pipeline:** The Office is leading the North Hartford Ascend Pipeline project, which is designed to transform academic, health and life outcomes for children living in the three neighborhoods that make up the federally designated North Hartford Promise Zone. Connecticut Children's received its largest grant ever to support this work – a five-year, \$30 million award from the U.S. Department of Education's Promise Neighborhoods program. Through this grant, the Office is collaborating with the City of Hartford and more than 20 additional partners. Ascend will work to improve educational outcomes, leverage private investment, reduce violent crime, enhance public health, and address other priorities identified by the community.
- **Southside Institutions Neighborhood Alliance (SINA):** SINA is a partnership between Connecticut Children's, Hartford Hospital and Trinity College that helps children in South Central Hartford grow, learn and succeed. SINA launched the Frog Hollow Hartford Hero's Mural Project, a digital walking tour of the Frog Hollow neighborhood, and an annual community cleanup. In addition, SINA expects to receive \$1 million in American Rescue Plan Act funds from the city of Hartford to increase homeownership and to cover cost overruns resulting from the COVID-19 pandemic such as the increased cost of lumber.
- **Hospital-Based Violence Intervention and Prevention (HVIP):** HVIP is a partnership overseen by Connecticut Children's Injury Prevention Center that includes the following partners: Trinity Health of New England, Hartford Hospital, Mother's United Against Violence, COMPASS Youth Collaborative, and Hartford Communities That Care. HVIP plans to bring needed resources to families and individuals impacted by violence to prevent re-injury and retaliation.
- **Vaccination Efforts:** Connecticut Children's partnered with the city of Hartford to host a COVID-19 clinic at Dunkin Donuts Park to vaccinate Hartford children ages 5 to 11. In addition, the organization partnered with Hartford HealthCare as part of its Care Alliance to host a COVID-19 vaccine clinic for children ages 12 to 15. Connecticut Children's also hosted numerous COVID-19 vaccine clinics for team members, patients and community residents at its Hartford campus. In addition, the Office collaborated with the United Way of Central and Northeastern Connecticut to assess the reach and effectiveness of messaging to increase the number of people receiving flu and COVID-19 vaccines in the Hartford community.
- **Imagination Library:** Connecticut Children's led the multi-partner effort to launch an Imagination Library chapter in Hartford and continues to be a lead sponsor of the program, which distributes books to enrolled children ages birth through 5 who live in Hartford. Partners include Connecticut Children's, Hartford Hospital, Trinity Health of New England and the United Way of Central and Northeastern Connecticut.

Despite the progress made addressing the needs identified in the 2019 CHNA and CHIP, the 2022 CHNA highlights the work still to be done to address the needs identified during this current assessment period. Areas of opportunity include focusing on healthy, stable and secure housing; access to nutritious food; access to healthcare; educational and occupational opportunities; and safe neighborhoods and violence prevention. Connecticut Children's recognizes the need to eliminate disparities that prevent Hartford residents from fully participating in health services, community life, education and employment and is determined to achieve measurable results and impactful improvement. As an organization, Connecticut Children's is committed to ensuring health equity for all populations and maximizing the contribution of health in other areas where children live, play, and learn.

DESCRIPTION OF COMMUNITY SERVED

Connecticut Children's provides state of the art healthcare for patients across Connecticut and beyond. In addition, the organization is committed to strengthening children, families and communities so they are best positioned to promote children's health, development and well-being. The organization pays particular attention to the city of Hartford, where its main campus is located. Connecticut Children's Office for Community Child Health (the Office), formed in 2012, oversees 17 community oriented programs and is charged with delivering the organization's community health response.

Founded in 1637, Hartford is among the oldest cities in the United States. It is home to the country's oldest art museum, the Wadsworth Atheneum Museum of Art; the oldest public park, Bushnell Park; and the oldest continuously published newspaper, The Hartford Courant. Hartford is also home to Real Art Ways, a non-profit art space established in 1975 that presents and supports contemporary artists. Authors Mark Twain and Harriet Beecher Stowe are among the city's most notable former residents.

Despite its rich history, residents who live in Hartford continue to experience extensive disparities compared to residents living in other parts of the state. Such disparities include access to affordable and equitable healthcare; healthy, stable and affordable housing; nutritious food; higher rates of chronic illnesses in the areas of mental health, asthma, obesity, diabetes, and lead poisoning among others; greater exposure to trauma, violence and injuries; and lower rates of academic and career success.

In 2021, the latest year data are availableⁱ, Hartford's population consisted of 120,576 residents, of which 44.7 percent were Hispanic or Latino, 37.2 percent were Black or African American, and 14.9 percent were white. Hartford consistently ranks among the poorest cities of its size in the country. **Table 1** depicts areas where Hartford residents lag behind the state of Connecticut as a whole,ⁱⁱ including income, housing stability, education, health insurance and other areas.

Table 1: Hartford Disparities Hartford Disparities **Source:** U.S. Census

CATEGORY	HARTFORD RESIDENTS	CONNECTICUT RESIDENTS
Median Household Income	\$36,154	\$79,855
Homeownership Rate	24.9%	66.1%
Residents Living in Poverty	28%	9.7%
Owner Occupied Housing Rates	24.9%	66.1%
High School Graduate or Higher Education	73.9%	90.9%
Bachelor's Degree or Higher Education	17%	40%
Persons Without Health Insurance Under Age 65	10.4%	7.0%
Persons with Disabilities Under Age 65	11.3%	7.6%
Foreign-born Persons	21.1%	14.6%

The city's major employers include the State of Connecticut, Raytheon Technologies, Eversource Energy, Hartford HealthCare, The Hartford Financial Services Group, Aetna, The Travelers, UnitedHealthcare, Trinity College, University of Connecticut and Connecticut Children's. As of August 2022, the unemployment rate for residents of Hartford stood at 4.4% compared to 4.3% for the state of Connecticut and 3.8% for the United States, according to the Connecticut Department of Laborⁱⁱⁱ.



METHODS

Connecticut Children's gathered data and information for this CHNA through a key informant prioritization session, focus groups with community residents, a survey of school nurses and social workers, various publications, and available data sets. The following includes a more detailed explanation about our approach.

Key Informant Prioritization Session:

- Connecticut Children's Office for Community Child Health contracted with the United Way of Central and Northeast Connecticut to organize and facilitate a discussion with key informants to solicit their input on key priorities facing Hartford families. During this session, 18 people attended from the following organizations:
 - City of Hartford
 - City of Hartford Department of Families, Children, Youth and Recreation
 - Community Renewal Team
 - COMPASS Youth Collaborative
 - Connecticut Office of Health Strategies
 - DataHaven
 - Emanuel Lutheran Church
 - Greater Hartford Legal Aid
 - Harc, Inc.
 - Hartford Hospital
 - The Fund for Greater Hartford
 - The United Way of Central and Northeastern Connecticut
 - The Village for Families and Children
 - UConn Health
 - Wellville
 - Workforce Solutions Collaborative of Metro Hartford

Virtual Focus Groups with Residents:

- Connecticut Children's Office for Community Child Health contracted with the United Way of Central and Northeastern Connecticut to organize and facilitate four focus groups in English. In doing so, the United Way of Central and Northeastern Connecticut identified trusted community-based organizations across Hartford to recruit residents to participate in these sessions. In addition, Connecticut Children's Community Relations Manager facilitated one focus group in Spanish. Each participant received an incentive for participating in the focus groups. Each focus group started with a brief review of the *Hartford 2021 Equity Profile* and *2021 DataHaven Community Wellbeing Survey*, both published by DataHaven, and then included a discussion about current strengths and opportunities in Hartford. The following includes detailed information from each focus group:
 - Catholic Charities Archdiocese of Hartford: Tuesday, March 15, 2022
 - 15 residents attended
 - Salvation Army: Tuesday, March 22, 2022
 - 9 residents attended

- Harc, Inc.: Tuesday, March 29, 2022
 - 5 residents attended
 - Greater Hartford YWCA: Thursday, March 31, 2022
 - 17 residents and 1 staff member attended
 - Hartford Parent University: Wednesday, May 4, 2022 (Spanish session)
 - 20 residents and 1 English translator attended
- Demographics: Participants in these focus groups were overwhelmingly Black or Latino, with a smaller number of white residents.

Survey of School Nurses and Social Workers in Hartford Public Schools:

- Connecticut Children's developed and administered a survey to nurses and social workers employed by Hartford Public Schools who work closely with children and families living in the city to learn more about health and community needs.
- 29 nurses and social workers filled out surveys

Data:

- The *Hartford 2021 Equity Profile* and the *2021 DataHaven Community Wellbeing Survey* are both published by the organization DataHaven, which collects and shares high-quality data of relevance to the public.
- The Connecticut Hospital Association's ChimeData portal collects, stores, and analyzes information on Emergency Department, inpatient and outpatient visits across Connecticut.

KEY FINDINGS OF COMMUNITY NEEDS

The discovery period for this Community Health Needs Assessment (CHNA) reinforced that the ongoing needs of residents living in the underserved community of Hartford continue to be extensive in areas related to housing, food security, employment, healthcare access, educational outcomes, safe neighborhoods and violence prevention. It also highlighted the extent to which the ongoing COVID-19 pandemic and longstanding racial injustice exacerbated those needs.

Residents interviewed for this CHNA stressed that they believe systemic racism is a driving factor behind health disparities and that system-level reform is necessary for conditions to improve. They discussed how the neighborhood one lives in should not determine their lifestyle, health and opportunities. They feel hospitals should collaborate more with residents to help build healthy children and communities. One resident noted, "It's equity. It's racial equity. It's gender equity. It's disability rights equity. It's all equity. We want everyone to be treated fairly."

The qualitative and quantitative data collected to support this CHNA through focus groups, surveys and additional areas is broken down into the following categories of identified needs:

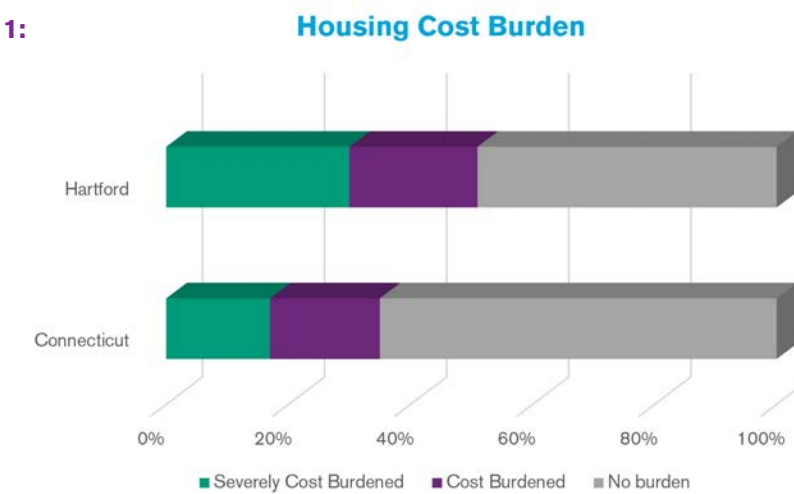
- Healthy, Stable and Secure Housing
- Access to Nutritious Food
- Access to Healthcare
- Educational and Occupational Opportunities
- Safe Neighborhoods and Violence Prevention

Healthy, Stable and Secure Housing

A growing body of research supports the link between housing quality, affordability, stability and overall health outcomes. Too often, substandard housing conditions result in disproportionately higher cases of chronic health conditions in urban and underserved settings, such as lead poisoning and asthma, as well as injuries. Housing instability can result in frequent moves for families that elevate mental health stressors related to financial hardships.

During conversations informing this CHNA, residents and participants in the key informant prioritization session recognized housing as a major concern facing families in Hartford. They shared concerns related to rent being too expensive, housing being of poor quality, and referred to many property owners as "slumlords." One resident stated, "If it wasn't for Section 8, certain people on a fixed income couldn't really make it because they take their whole check and pay rent." As **Figure 1** shows, 51% of Hartford residents surveyed for the *2021 DataHaven Community Wellbeing Survey* reported being "cost burdened," meaning they pay more than 30% of their income toward housing costs, or "severely cost burdened," meaning they pay more than half of their income toward housing costs^{iv}.

Figure 1:



^{iv}**COST BURDENED:** Families that pay more than 30% of their income for housing, according to the U.S. Department of Housing and Urban Development.

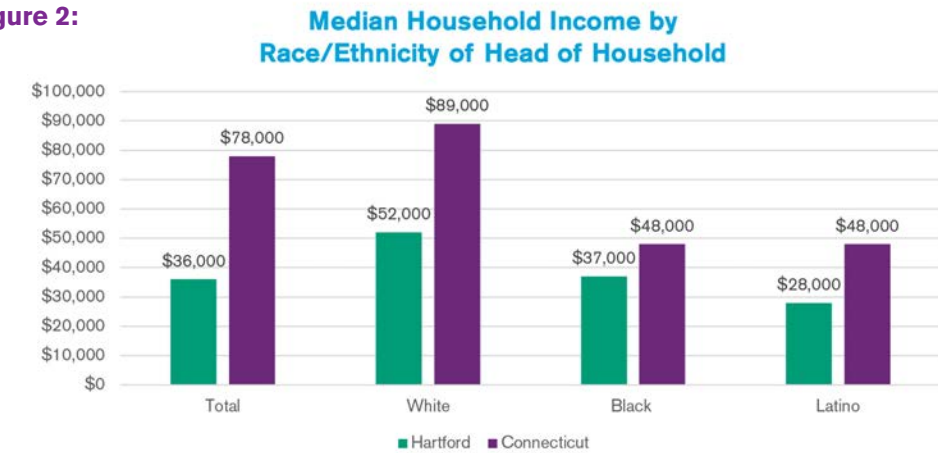
^{iv}**SEVERELY COST BURDENED:** Families that pay more than 50% of their income on housing, according to the U.S. Department of Housing and Urban Development.

Source: 2021 DataHaven Community Wellbeing Survey



In addition, the survey documented significant gaps in median income for heads of household in Hartford compared to statewide, as depicted in **Figure 2**.

Figure 2:



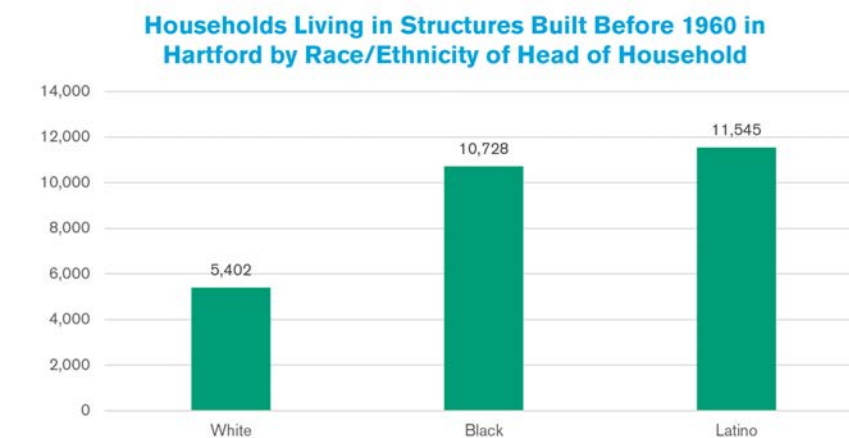
Source: 2021 DataHaven Community Wellbeing Survey

Participants in the key informant prioritization session stated they believe higher percentages of Black and Latino residents will have to leave their homes in two months if they are behind on rent or mortgage payments. They stated women often pay more for housing than men and that long-term residents are being challenged with increasing rent. Residents felt that there are not enough opportunities for people of color to be homeowners and they would like more education around homeownership and mortgages.

School nurses and social workers surveyed for this CHNA indicated a need for safe, affordable and adequate housing. One respondent stated, "I have families who move frequently due to the economy of the past few years. My concern is that despite great access to healthcare in Hartford, these families are falling behind in immunizations and physical well-being – no glasses, no asthma pump, etc."

Chronic health conditions impacted by substandard housing include a higher risk for lead poisoning among children living in houses built before the 1960 due to the greater use of lead paint in older homes, according to the *Hartford 2021 Equity Profile*⁶. Between 2013 and 2017, 3.6 percent of children tested in Hartford were found to have elevated lead levels, according to the profile. As **Figure 3** notes, Black and Latino residents of Hartford are more likely to live in structures built before 1960.

Figure 3:



Source: Hartford 2021 Equity Profile

Lead exposure "causes irreversible neurologic damage to the developing brain, which can lead to developmental delays for toddlers, learning deficits and attention problems for school-age children, and other concerns that linger throughout the lifespan."^{vi}

In Connecticut, cases of childhood lead poisoning declined 23% from 2018 to 2020, according to the Connecticut Department of Public Health,^{vii} as noted in **Table 2**. However, the numbers of children impacted by lead are expected to increase in the coming years, due to the Centers for Disease Control and Prevention (CDC) lowering the standard for what constitutes an acceptable lead level from 5 micrograms per deciliter to 3.5 micrograms per deciliter in October 2021.

Table 2: Connecticut children under age 6 with blood lead levels greater than 5 micrograms per deciliter **Source:** Connecticut Department of Public Health

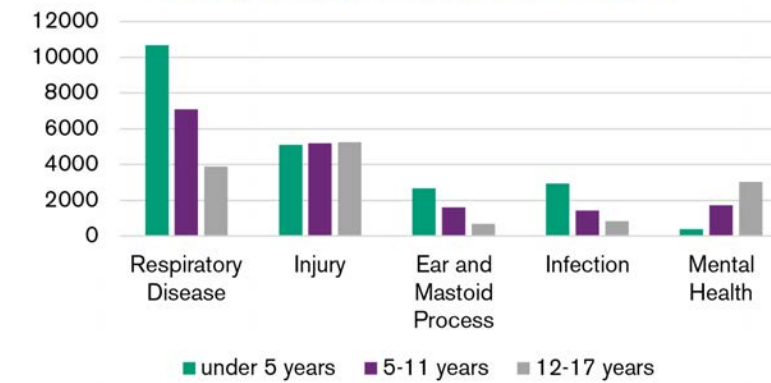
2020	2019	2018
1,024	1,188	1,333

In taking a closer look at data from 2020, 1,024 children younger than age 6 in Connecticut were identified with blood lead levels greater than five micrograms per deciliter, according to the *2020 Childhood Lead Poisoning Surveillance Report* published by the Connecticut Department of Public Health.^{viii} Statewide data show that the incidence rate of blood lead levels greater than five micrograms per deciliter for children younger than age 6 was 1.8 for non-Hispanic Black children, 1.5 for Hispanic children, and 0.7 for non-Hispanic white children. This translates into significant elevated risks of at least two-fold for Black and Hispanic children compared to Non-Hispanic white children. Of the 1,024 children with elevated blood lead levels greater than five micrograms per deciliter, five cities including Hartford made up 49% of all lead poisoned children in Connecticut with the most common source being deteriorating paint in housing units, notes the report.

Asthma is among the most common diseases affecting young children, with as many as 40 percent of cases being attributable to housing conditions.^{ix} Due to concentrated poverty and poor housing quality, asthma is a condition that disproportionately affects urban children in cities such as Hartford. In taking a closer look at emergency department data from 2018 to 2021 in Hartford, asthma was documented in 9.5% of emergency department visits for children and occurred most often in children ages 5 to 11 years old (42.5%) and among Hispanic children (65.8%).^x Statewide, asthma was also documented in 9.5% of emergency department visits for children and occurred most often in children ages 5 to 11 years old (40.5%) and in Hispanic children (47.5%). The *2021 DataHaven Community Wellbeing Survey* also found disparities among those affected by asthma. Among those surveyed, 27% of Hartford residents indicated being affected by asthma, compared to 17% of residents surveyed from across Connecticut. The survey also found that Black (22%) and Latino (31%) adults who were surveyed were affected by asthma to a greater extent compared to white people (16%).

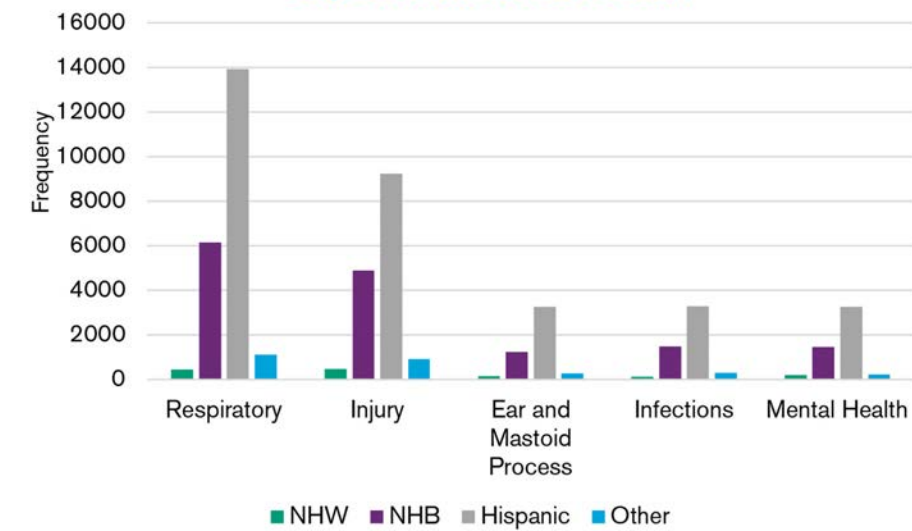
In addition, injuries that occur in non-properly maintained homes are affecting children in Hartford. Such injuries include those related to exposed wiring, missing handrails on stairs, falls out of unsecured windows, and other issues. As detailed in **Figure 4** and **Figure 5**, injuries accounted for the second leading cause of emergency department visits among Hartford children from 2018 through 2021. Other top drivers of ED visits included diseases of the respiratory system, diseases of the ear and mastoid process; infections and parasitic diseases; and mental, behavioral and neurodevelopmental disorders, according to the Connecticut Hospital Association.

Figure 4: Leading causes of ED visits by Age Group, City of Hartford: 2018-2021



Source: Connecticut Hospital Association ChimeData

Figure 5: Leading causes of ED visits by Race/Ethnicity, City of Hartford: 2018-2021



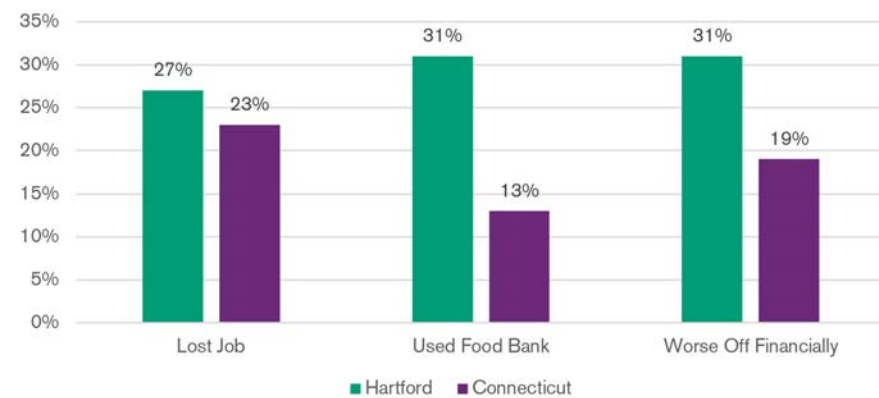
Source: Connecticut Hospital Association ChimeData

Access to Nutritious Food

Access to nutritious food remains a top concern for residents of urban areas such as Hartford, based on focus group feedback, where neighborhoods are often referred to as “food deserts” that provide little access to fresh fruit, vegetables and non-processed items. The lack of nutritious food options leads to higher rates of obesity, diabetes and other chronic health problems, residents stated.

In 2021, 26% of Hartford residents who participated in the *2021 DataHaven Community Wellbeing Survey* indicated that they had difficulty paying for food compared to 11% of residents across the state of Connecticut. Also that year, pandemic-related hardships affected residents of Hartford to a greater degree compared to residents statewide in areas related to unemployment, the use of food banks, and financial hardships, according to the survey. **Figure 6** highlights those pandemic-related disparities.

Figure 6: Pandemic-related Hardships in Hartford and Statewide



Source: 2021 DataHaven Community Wellbeing Survey

Participants in the key informant prioritization session noted the extent to which chronic health conditions are an ongoing issue in Hartford, such as obesity and diabetes. They also mentioned how such co-morbidities factored into residents being at higher risk of severe outcomes from a COVID-19 infection.

Residents who participated in focus groups to inform this CHNA stressed the need for increased healthy food options, including access to grocery stores in the city. One resident asked, “Why is it (an abundance of junk food) allowed in our community?” Residents also stated that stores that sell healthier food options are not interested in moving into their communities. “They want us to be unhealthy,” noted one participant. Residents also stated the lack of healthy food options leads to obesity, diabetes and other health issues. One resident noted, “Obesity is tied to where children live. Parents can’t afford to eat healthy or have access to transportation to healthier markets.” Residents also stated that job opportunities that pay enough to “survive” are lacking in the community. In addition, residents spoke about the overpricing of groceries and other household essentials in cities such as Hartford as compared to suburban communities. One resident noted, “I tell my clients to take circulars from surrounding suburbs to the store with them to get better pricing or price matching.”

School nurses and social workers surveyed for this assessment indicated a need for families to have healthy food choices, appropriate nutrition for children, and access to more food. One of the respondents stated, “A lot of children are overweight. Families need to be educated on proper nutrition.”

Affordability of nutritious food also remains a concern for Hartford residents surveyed by DataHaven and reported in the *Hartford 2021 Equity Profile*, as depicted in **Table 3**. According to the profile, 39% of households indicated that they receive benefits from the U.S. Department of Agriculture’s Supplemental Nutrition Assistance Program (SNAP), compared to 12% of households across the state. Disparities were evident among those surveyed from Hartford, with Black (34%) and Latino (35%) households receiving SNAP benefits to a greater degree compared to white households (18%).

Table 3: Households receiving SNAP benefits

	Total		White		Black		Latino	
	Count	Share	Count	Share	Count	Share	Count	Share
Connecticut	162,967	12%	67,339	7%	34,650	26%	56,091	32%
Hartford	18,093	39%	1,434	18%	6,084	34%	10,529	56%

Source: Hartford 2021 Equity Profile

Chronic health conditions impacted by a lack of access to nutritious food include obesity. Among those who participated in the *2021 DataHaven Community Wellbeing Survey*, 46% of Hartford adults indicated being affected by obesity, compared to 30% of residents surveyed from across Connecticut. The survey also found that Black (47%) and Latino (44%) adults who were surveyed were affected by obesity to a greater extent compared to white people (26%).

Hispanic children are at greater risk for being overweight^{xi}, according to the article *Hispanic Children and Overweight: Causes and Interventions*. The author notes that causes of this disparity include a lower socioeconomic status, a lack of health insurance or being under-insured, having a poor diet, and having parents who are overweight.

Diabetes is another condition affected by a lack of access to nutritious food. The *2021 DataHaven Community Wellbeing Survey* found disparities among those affected by diabetes. Seventeen percent of Hartford residents indicated being affected by diabetes, compared to 10% of residents surveyed from across Connecticut. The survey also found that Black (18%) and Latino (11%) adults were affected by diabetes to a greater extent compared to white people (10%).

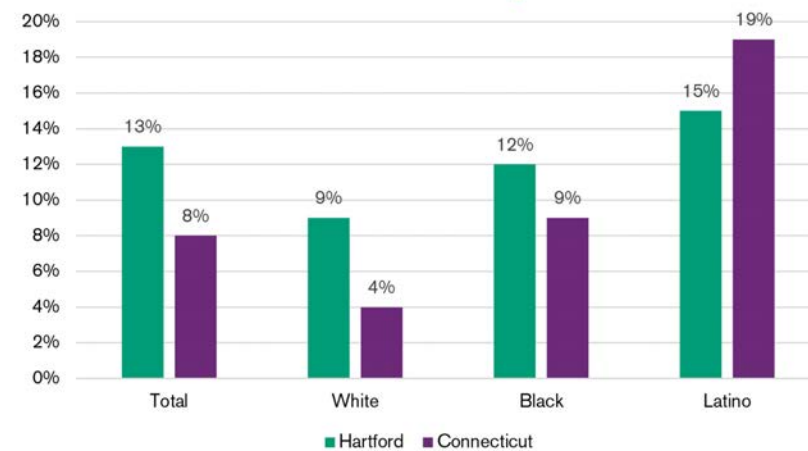
Access to Healthcare

Challenges in accessing the healthcare system proved to be a major theme during the discovery period for this CHNA, with residents, key informants, school nurses and school social workers all raising it as an issue. A lack of access to healthcare is known to cause poor health and well-being for the entire family. In addition, a lack of healthcare access for parents can lead to added stress and worry, which is a social determinant of health for the family, especially for young children. Children access healthcare through parents or caregivers, so gaps in healthcare access may reasonably be assumed to transfer on to children.

During focus groups, residents shared the following perspectives:

- Barriers to accessing healthcare:** Residents expressed concerns with health disparities involving chronic conditions such as lead poisoning, obesity, diabetes and asthma (detailed in earlier sections of this CHNA) that can be exacerbated by challenges accessing healthcare. They also shared that the cost of health services, billing practices, prior insurance denials and a lack of transportation are major factors for those who either lack health insurance, as shown in **Figure 7**, or do not access healthcare services at all. Furthermore, a disproportionate number of Hartford residents do not have a vehicle at home that can be used to access healthcare compared to residents living throughout Connecticut, as shown in **Table 4**. Residents noted that they often do not seek out preventative healthcare due to the expense and lack of time available to leave work or home duties for such appointments. One resident stated, “On top of being very busy, you’re taking care of your family, you’re trying to work from home or not work at all, and you’re afraid that you can’t even pay for the visit. It is \$20, \$25, \$30 even for telehealth. That’s with good insurance too.” Another resident stated, “I fear getting sick because of the high cost of healthcare.” Residents also mentioned delaying care, thinking a condition is not serious enough, which can result in them waiting until it is too late or a minor issue becomes significant.

Figure 7: Uninsured Rate Among Adults Ages 19-64 by Race/Ethnicity



Source: Hartford 2021 Equity Profile

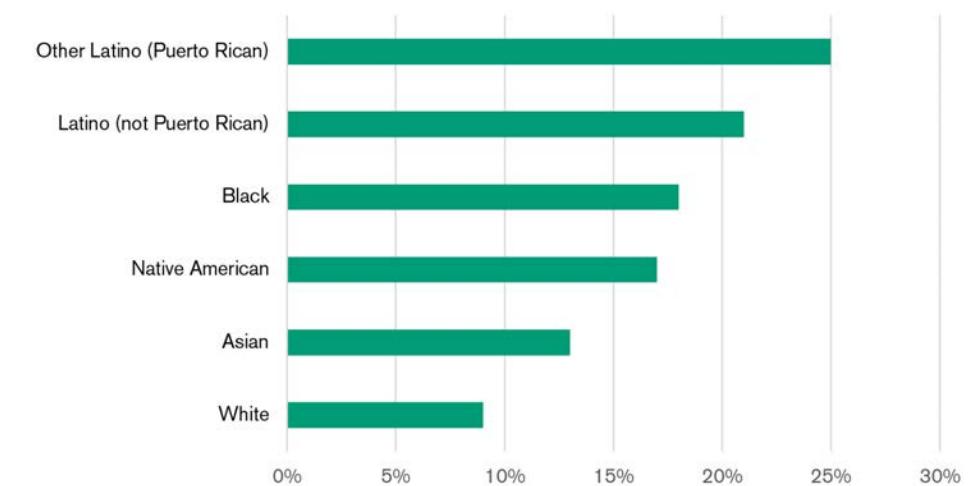
Table 4: Households with no vehicle at home by race/ethnicity of head of household

	Total		White		Black		Latino	
	Count	Share	Count	Share	Count	Share	Count	Share
Connecticut	121,434	9%	55,942	6%	27,048	21%	30,496	17%
Hartford	13,913	30%	1,464	18%	4,992	29%	6,557	35%

Source: Hartford 2021 Equity Profile

- COVID-19 impact on healthcare access:** Residents also discussed the impact of COVID-19 on healthcare access. The pandemic prevented residents from keeping medical appointments, as many did not want to leave their homes, and the lack of access to broadband and technology created barriers to accessing telehealth appointments. Overall, 11% of Hartford residents do not have access to broadband, according to the *2021 DataHaven Community Wellbeing Survey*. However, disparities are evident by race and ethnicity with 25% of people of Puerto Rican heritage lacking access to broadband, as depicted in **Figure 8**. One resident stated, “You’re fearful because you need to go see a doctor, you have to make a decision. You’re afraid to go because you’re afraid to get COVID-19. Then you had to find someone to take care of your child. It was also difficult getting appointments. If you sneeze, they say not to come to their office.” Another resident stated, “How can you do telehealth without internet?” Other residents shared the benefits they feel telehealth offers, with one stating, “I like telemedicine. My son has a nutrition specialist from telemedicine. He was able to express himself more freely through the video visit. It really works.” Another resident mentioned, “The internet helps with My Chart, video medical visits, and it helps me because my son can see his specialist that’s not near us from the comfort of our home.”

Figure 8: Lack of Broadband Access by Race/Ethnicity Greater Hartford



Source: 2021 DataHaven Community Wellbeing Survey

- Barriers to accessing mental healthcare:** Residents described in detail the challenges they face accessing mental healthcare and the impact that has on overall mental health and well-being. Select mental health indicators are depicted in **Table 5**. Similar to health in general, residents noted the impact of the COVID-19 pandemic on mental health, with one stating, “The pandemic, due to isolation, made people experience mental illness.” A recent study found that pandemic-related mental health concerns affected the physical and emotional well-being of both parents and children,^{xi} as 27% of parents who participated in that study reported a decline in their mental health and 14% reported a decline in their children’s mental health. Concerns mentioned by residents related to mental health extended beyond a link to the pandemic. One resident stated, “My child ended up not going to school due to mental health issues that were not addressed. There is no support at school and no support at the hospital for kids with mental health issues.” Other residents noted that extensive wait times for appointments and lack of coverage by insurers are deterrents to seeking such care. Residents also expressed sentiments that diversity and cultural competency of mental health providers is lacking. In addition, they described a lack of bilingual mental health services for Latino children and a need to increase such services.

Table 5: Select mental health indicators, share of adults

	Total	White	Black	Latino
Experiencing anxiety				
Hartford	17%	9%	16%	24%
Connecticut	12%	11%	15%	19%
Bothered by depression				
Hartford	14%	10%	14%	18%
Connecticut	9%	8%	10%	14%

Source: Hartford 2021 Equity Profile

- Barriers to accessing prenatal care:** Access to prenatal healthcare remains a concern for residents of Hartford. Birth outcomes reflect significant disparities for people of color, compared to white parents. Challenging birth outcomes can affect children throughout their lives with regard to developmental delays, behavioral concerns, kindergarten readiness, overall academic performance, and other areas. Select birth outcomes are depicted in **Table 6**.

Table 6: Select birth outcomes by race/ethnicity of parent giving birth

	Total	White	Black	Latina (overall)	Latina (Puerto Rican)	Latina (other)
Late or no prenatal care						
Hartford	5.0%	5.2%	6.5%	3.9%	3.6%	4.9%
Connecticut	3.4%	2.5%	5.7%	4.0%	2.9%	5.1%
Low birthweight						
Hartford	10.3%	7.0%	13.2%	8.8%	9.9%	5.6%
Connecticut	7.8%	6.4%	12.1%	8.3%	10.2%	6.6%
Infant mortality (per 1,000 live births)						
Hartford	9.8	11.7	10.1	9.5	N/A	N/A
Connecticut	4.6	3.1	9.5	5.0	N/A	N/A

Source: Hartford 2021 Equity Profile

- Barriers facing residents who do not speak English:** Residents who do not speak English described facing extensive discrimination when seeking healthcare services. “At the hospital, a Spanish-speaking person gets helped last and gets no interpreters,” stated one resident. There was concern that the growing Latino population in Hartford needs to be supported and have increased access to the healthcare system. Residents also mentioned how they have been treated when they seek medical care. One resident stated, “My child had a bad reaction to medication because the school didn’t listen to me and the hospital didn’t listen to me. They don’t listen because I speak Spanish. No one helped!” Another resident stated, “I went to my daughter’s medical appointment. Since I don’t speak English, I was placed in a room by myself and nobody spoke to me. I waited there for a long time. The nurses were making fun of and laughing at my daughter. I felt so embarrassed I just wanted to run. Why do they have to treat us like that?” Residents stressed that fair services need to be provided regardless of race, income and place of residence.

Residents also expressed a need for hospitals to connect them to community resources to help build the health of children so they can avoid chronic health conditions in their adult lives that affect Hartford residents to a greater degree than people living elsewhere due to systemic racism. One resident noted, “I am very happy with Connecticut Children’s. Connecticut Children’s connects me with services,” however another stated, “We need more information listing services at hospitals.” Ideas for connecting residents to available services included holding block parties and neighborhood cookouts to inform residents about available programs and services. They also mentioned a need to advertise programs and services in areas that residents frequent such as bodegas, schools, barbershops, hair salons and local restaurants.

Participants in the key informant prioritization session mentioned many of the same concerns as residents mentioned, including that Hartford residents have poor healthcare due to a lack of health insurance or insurance not covering a large percentage of treatments. Key informants also noted that physical health conditions are covered far better compared to mental health conditions, but that both often carry high deductibles. Participants also discussed how those who needed healthcare during the COVID-19 pandemic did not seek it due to fear

of being infected with the virus. In addition, they mentioned how fewer residents in Hartford had access to telehealth appointments, partly due to a lack of internet service. One participant noted, “Not only the broadband, but also with telehealth, you have to be alone in a quiet space. That is difficult for individuals with families, especially young children.”

School nurses and school social workers mentioned the prevalence of mental health concerns among students and the need for more access to services for children. One survey respondent mentioned, “Families do not access mental health services enough. Services aren’t promoted enough with access information” through billboards, radio public service announcements, cable access television, and other areas. They also mentioned how community health centers and school-based health clinics are helpful; however, they noted that staff are burned out, overworked and underpaid. Another participant stated, “You would think four social workers for 550 kids is enough, along with two outside therapists. It is not nearly enough for the high level need in this school.” They mentioned untreated trauma as among the biggest contributors to student mental health concerns, including anxiety, self-harm, school disengagement and depression. They described giving parents phone numbers for mental health service professionals but later finding no contact had been made to get children help. These school-based professionals reasoned that stigma and cultural barriers around accessing mental health supports along with distrust of medical professionals might stand in the way of families seeking help. School nurses and social workers also mentioned a lack of health insurance as a barrier to some families accessing health care, as well as parents needing to prioritize health and be consistent in getting annual health assessments and immunizations for their children.

Educational and Occupational Opportunities

Significant needs exist to improve educational and occupational opportunities for children and families in Hartford in order to enhance overall health and well-being. As we know, education, job opportunities and income are social determinants of health and more educational and occupational opportunities are needed in order to help increase children’s well-being.

During the discovery period for this CHNA, residents mentioned the connection between a strong education and the ability to obtain future occupational opportunities. Hartford students continue to lag behind their peers across the state in terms of key indicators of success. “Tracking student success measures is important since disparate academic and disciplinary outcomes are observed as early as preschool and can ultimately affect a person’s long-term educational attainment and economic potential,” states the previously cited *Hartford 2021 Equity Profile*. **Table 7** highlights select disparities related to academic performance and student discipline.

Table 7: Select Academic and Disciplinary Outcomes by Student Race/Ethnicity

	Total	White	Black	Latino
SBAC ELA Passing Rate				
Hartford	26%	54%	24%	18%
Connecticut	55%	67%	31%	31%
Suspensions Per 1,000 Students				
Hartford	134	64	184	129
Connecticut	70	43	149	93
Graduation Rates				
Hartford	73%	92%	75%	64%
Connecticut	89%	93%	80%	80%

Residents mentioned how COVID-19 negatively affected educational outcomes by setting many Hartford students even further behind. One resident stated, “My sister works in the school system and a lot of children just did not have access [to technology]. Unfortunately, they were not being taught.” The affordability of the internet was a major concern expressed by focus group participants. One resident stated, “Internet is too expensive. We have to choose with our very limited income whether to pay rent, buy food, pay our bills, or get internet. We don’t qualify for services since we are undocumented. As a result, we end up not having the internet my kids need for school.” Residents also expressed concerns with the achievement gap between students of color and white students, which was exacerbated by the pandemic. One resident stated, “You would think that every child would be able to read by third grade. We would think that, but I have sixth graders who cannot read right now.” In addition, residents expressed concerns about the lack of diversity in teachers and school staff. They also mentioned feeling that students of color are over-diagnosed with medical problems and over-medicated.

Participants in the key informant prioritization session discussed their thoughts that a lack of education continues the cycle of poverty in Hartford. They expressed concern about lower graduation rates for students in Hartford compared to communities across the state and the resulting impact that has on employment opportunities and prosperity for families. They also stressed the importance of reading, noting that if a child is not reading at grade level by the fourth grade, they are less likely to graduate high school and are more likely to become incarcerated.

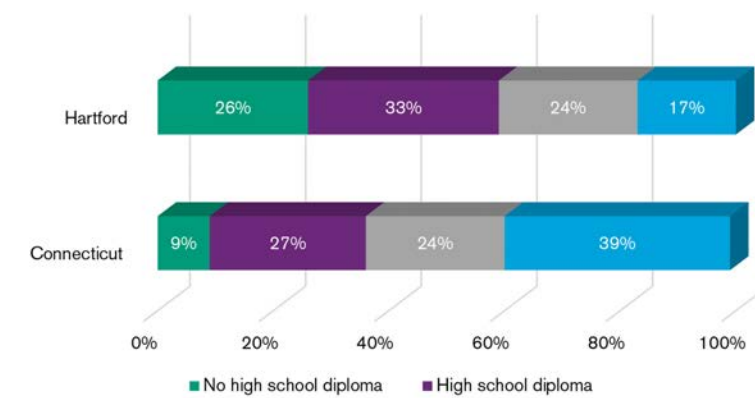




School nurses and social workers mentioned challenges facing students including a need to ensure they have steady attendance at school and a need to educate parents about the importance of consistency. They also commented on what they perceive to be a lack of education for parents and struggles among parents with reading, which then trickles down to students. In addition, they mentioned a need for students to be able to access more extracurricular activities and a need for more supports for students who do not speak English.

With regard to employment, residents stressed the impact that lower educational attainment has on job opportunities, which affects the entire family's well-being. Residents stressed a need for better access to training programs. One resident stated, "We need more online job training courses. We need more GED online training classes. We need more learn to speak English classes online. These classes can help Latinos get the training and education needed to get good quality work." They noted that cars and car insurance are difficult to afford and public transportation is not always dependable, which limits employment options. They mentioned that a lack of consistent transportation makes it difficult to access jobs, healthy food and resources, which has a negative effect on an entire family, especially children. **Figure 9** compares educational attainment between adults in Hartford and across Connecticut who participated in the 2021 *DataHaven Wellbeing Survey*.

Figure 9: Educational Attainment, Share of Adults ages 25 and older



Source: 2021 *DataHaven Community Wellbeing Survey*

Residents mentioned the hardships faced by certain populations in trying to obtain work. One resident stated, "Undocumented, people that were recently incarcerated, and people with special needs and mental health issues are not being hired. This is a big problem. What can they do to find employment? People that come out of jail end up going back because they had to do more illegal things to get money for their families." **Table 8** details some employment-related challenges, which are representative of the overall challenges Hartford families face related to educational and economic prosperity.

Table 8: Select economic opportunities by share of adults

	Access to car	Area has suitable employment	Underemployed
Connecticut	90%	63%	14%
Hartford	74%	40%	19%
White	94%	72%	11%
Black	78%	55%	15%
Latino	80%	48%	30%

Source: 2021 *DataHaven Community Wellbeing Survey*

Safe Neighborhoods and Violence Prevention

Ensuring residents have safe neighborhoods to live in was among the top needs identified by those interviewed for this CHNA, including a need for enhanced violence prevention efforts.

School nurses and school social workers mentioned gun violence and trauma as major issues affecting students in Hartford schools, especially related to academic and mental health outcomes. They noted that supports are available to students and families, but that often such supports are underutilized. "I'm not sure if the availability of supportive services for families is the problem. I'm really not sure if it's availability, or if it's distrust, or lack of initiative. I just know that these kids need some SERIOUS, SERIOUS help and they are not receiving it," stated one participant.

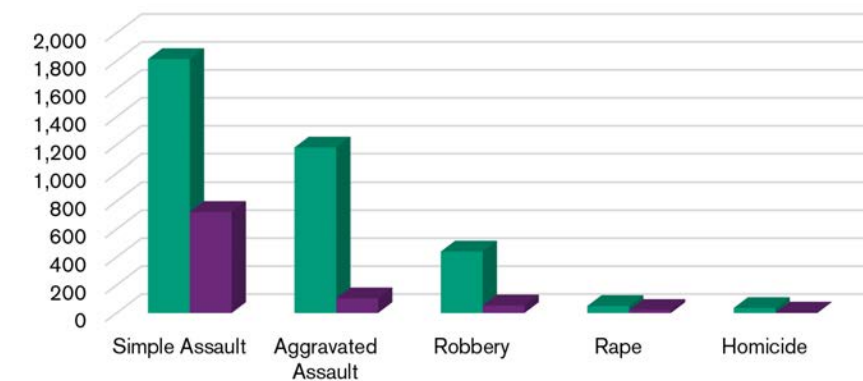
Residents and participants in the key informant prioritization session felt that children need more programs, resources, and safe places and spaces to play. While residents discussed the benefits of having several large parks to visit in Hartford, including Keney Park and Elizabeth Park, they expressed concerns about such parks being far from their homes. One resident stated, "I have to drive so far so that my son can be safe during playtime in the playgrounds." They noted there is too much litter and garbage present, which reflects on the state of the community. Residents and key informants also mentioned a desire for more community spaces filled with greenery, as such spaces make people feel safe and the shade created by trees decreases surface temperatures. Fear related to COVID-19 has also affected the sense of safety in the community. Residents noted that they are beginning to feel comfortable enough to come out and socialize again, but noted how much the pandemic isolated people.

Residents and participants in the key informant prioritization session discussed gun violence as a major concern, feeling their neighborhoods are unsafe because of such violence. Some expressed concerns that violence tends to increase during warmer months and they feel residents are desensitized to it and often ignore it. One resident stated, "It's not safe in Hartford." Another stated, "I am afraid every day that my children would walk by dead bodies on the street." There is a sentiment among residents that gun violence is caused by a mix of the narcotics trade and domestic abuse. Residents and key informants noted that opioids are getting cheaper and are more available, which has fueled an increase in gun violence and overdose deaths. One key informant mentioned, "About 89% of the youth we work with have reported losing a family member or close friend to gun violence. Violence does have a ripple effect in the community." Another key informant noted, "Violence is both an issue of physical health and mental health. Addressing the former partially addresses the latter." Residents mentioned the belief that chronic exposure to death and violence plays a prominent role in heightened levels of stress, which has a negative impact on mental health.

In addition, residents expressed concerns related to the behavior of drivers and traffic crashes in Hartford. One resident noted, "I got run over by a car outside of where I work. No one helped me. It took a person who was homeless to give me the help I needed. As a result of the hit and run, I had to be in a wheelchair for a long time."

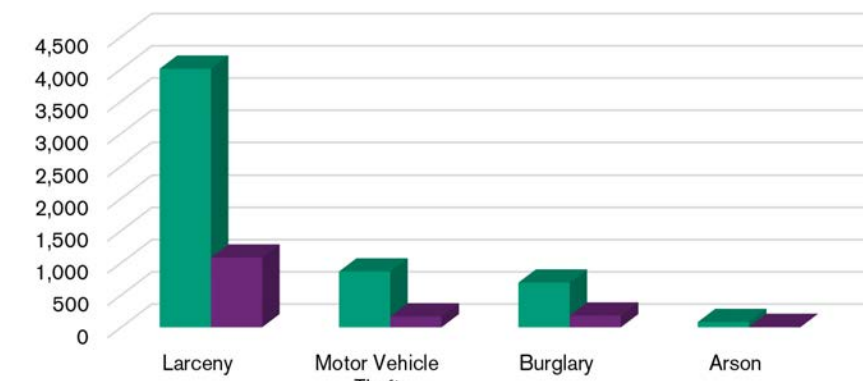
Statistics reinforce the concerns raised by Hartford residents regarding crime and safety in their neighborhoods. Within Hartford, the rates of crimes against persons as depicted in **Figure 10** (assault, robbery, rape and homicide) and crimes against property as depicted in **Figure 11** (larceny, robbery, vehicle theft, burglary and arson) are almost four times higher than statewide, according to information provided by DataHaven in the previously cited *2021 DataHaven Community Wellbeing Survey*. Also in Hartford, residents report the highest rates of the five largest cities in Connecticut regarding a fear of gun violence (52%), witnessing gun violence in the past year (14%), and having a relative shot in the past year (12%), according to the survey, which is depicted in **Figure 12**.

Figure 10: Crime Rates per 100,000 Residents: Crimes Against Persons



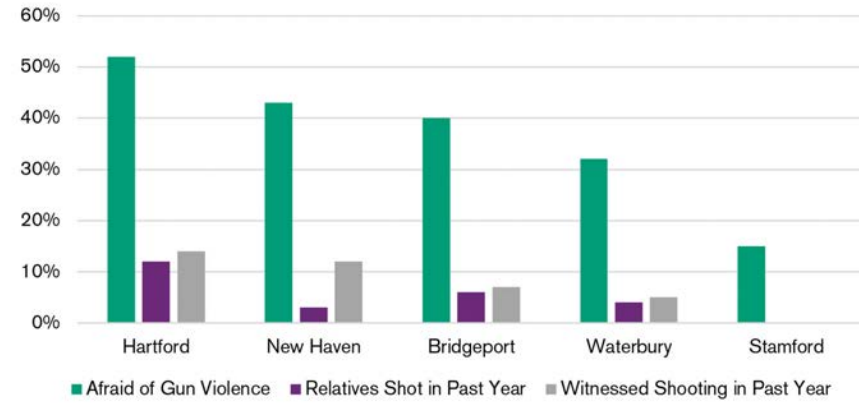
Source: 2021 DataHaven Community Wellbeing Survey

Figure 11: Crime Rates per 100,000 Residents: Crimes Against Property



Source: 2021 DataHaven Community Wellbeing Survey

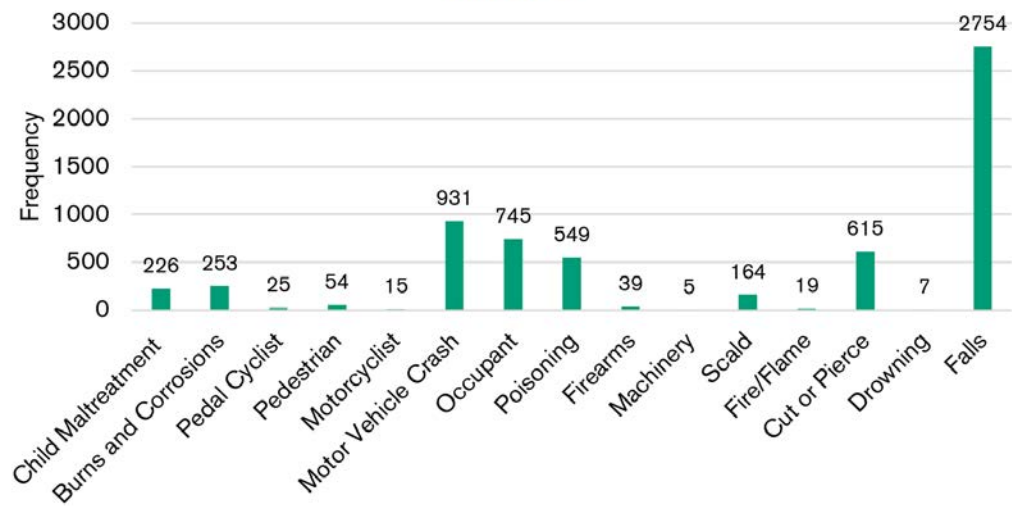
Figure 12: Gun Violence Concern: Share of Adults in Connecticut's Largest Cities



Source: 2021 DataHaven Community Wellbeing Survey

In addition, an analysis of Emergency Department visits in Hartford related specifically to injuries and violence during a three-year period shows that falls, motor vehicle crashes, cuts or piercings, and poisonings were among the top drivers for such visits. Such data are depicted in Figure 13.

Figure 13: Emergency Department Visits by Injury Type in Hartford: 2018-2021



Source: Connecticut Hospital Association ChimeData



RECOMMENDATIONS TO ADDRESS KEY FINDINGS

Recommendations to Address Key Findings:

Connecticut Children's strives to address the healthcare needs of patients while also strengthening communities to help families promote their children's optimal health, development and well-being. As demonstrated in Connecticut Children's 2022 Community Health Needs Assessment (CHNA), Hartford residents continue to experience high levels of need for healthy, stable and secure housing; access to nutritious food, healthcare, educational and occupational opportunities; and safe neighborhoods. Connecticut Children's is committed to addressing and reducing these disparities. In doing so, the organization can ensure health equity and stronger futures for all.

Connecticut Children's leadership and partners recognize the need for interventions to address the medical, social and environmental needs identified in this CHNA. The following recommendations are designed to help improve communities and ensure better futures for Hartford's children.

[1] Healthy, Stable and Secure Housing

Healthy, stable and secure housing is critical to ensuring the optimal health, development and well-being of children. Connecticut Children's is committed to:

- a. Expand Connecticut Children's Healthy Homes Program (Healthy Homes). Healthy Homes program conducts lead abatement and mold remediation, and installs carbon monoxide detectors and other safety devices in homes to prevent injuries. It also leads the multi-partner, cross sector Building for Health Initiative, which increases collaboration between the housing, health and energy sectors with the goal of improving the overall health of children and families living in Hartford, Connecticut.
- b. Support and enhance programs like the North Hartford Ascend Pipeline and the Southside Institutions Neighborhood Alliance, which were both explained in [Progress Achieved Since 2019 Community Health Needs Assessment](#) section of this report.
- c. Advocate for policies and programs that make housing affordability and stability a priority.

[2] Access to Nutritious Food

Access to nutritious food has positive health outcomes. Connecticut Children's is committed to:

- a. Advocate alongside our partners for residents of Hartford to have increased access to healthy foods, such as bringing a supermarket to Hartford and increasing access to farmer's markets.
- b. Support Connecticut Children's Start Childhood Off Right (SCOR) program, which educates community members and providers about the importance of healthy eating and physical activity. Among its activities, SCOR launched a food insecurity screening program for families that visit Connecticut Children's Emergency Department. Those determined to be at risk of going hungry receive vouchers, which they can redeem outside the Emergency Department entrance at a mobile market. The program is funded by Healthier Kids For Our Future grant from Cigna.

[3] Access to Healthcare:

Connecticut Children's understands the importance of promoting the physical, social, and emotional health of children and youth. The organization offers a variety of programs and services to meet these needs and reduce the impact that adverse childhood experiences will have on overall health and well-being outcomes.

- a. Expand Connecticut Children's Care Network to include additional value-based contracts and covered lives while also expanding other population health initiatives to ensure healthier outcomes for children.

- b. Develop an integrated continuum of care for children facing medical diagnoses combined with psychiatric or psychological diagnoses, who need more specialized care than is typically offered in traditional mental health treatment programs.
- c. Expand the training and use of the Strengthening Families Protective Factors Framework among Connecticut Children's departments and divisions, pediatricians, community health workers, and others who work with children and families in Hartford and beyond. The approach, developed by the Center for the Study of Social Policy, enhances resiliency and social emotional development by building on families' strengths to create positive outcomes and reduce the likelihood of child abuse and neglect.
- d. Expand the Connecticut Newborn Screening Network. The Connecticut Newborn Screening Network identifies gaps in care for children ages 0-5 as well as infants who may be high risk. The program connects those families to the Center for Care Coordination for comprehensive and culturally competent care coordination services.
- e. Support universal suicide screening for all patients ages 10 and older who visit Connecticut Children's Emergency Department and other clinical departments.
- f. Support Connecticut Children's Center for Care Coordination in connecting children and families to needed medical, mental health, educational, and basic needs.
- g. Support Connecticut Children's experts to dedicate their time to serving on various state advisory committees focused on improving access to mental health services for children and reducing healthcare disparities.
- h. Enhance Connecticut Children's commitment to advancing research related to mental health and educating parents and the broader public on best practices for supporting children's mental health.
- i. Continue to advocate for policies like the bipartisan Safer Communities Act^{xxiii} that provides \$80 million in grants to support pediatric primary care providers to rapidly access mental health expertise in guiding patient treatment and additional grant funding earmarked to train healthcare professionals who treat children and youth for mental health concerns.

[4] Educational and Occupational Opportunities

Educational and occupational opportunities are critical to increase the quality of life for Hartford residents. Connecticut Children's continues its commitment to ensuring Hartford families are able to thrive in educational settings to set them up for success in attaining employment. Connecticut Children's is committed to:

- a. Support programs such as Imagination Library and the North Hartford Ascend Pipeline, which were both explained in the [Progress Achieved Since 2022 Community Health Needs Assessment](#) section of this report.
- b. Expand access to job training and workforce development programs offered by SINA, which enhance quality of life for Hartford residents.
- c. Continue to advocate alongside our partners for increased resources for Hartford residents, including job training programs, employment services and opportunities, affordable childcare, community centers, enhanced public library hours and transportation.
- d. Increase collaboration with early care and education providers, home visitors, family centers, and public schools to champion school readiness initiatives, which could include early literacy promotion, back to school events, school supply drives and other endeavors.
- e. Advocate, along with city and state leaders, for policies that increase access to, and affordability of, Pre-K and early learning programs, as well as additional policies that promote educational attainment and workforce development.



[5] Safe Neighborhoods and Violence Prevention

Safe neighborhoods and violence prevention initiatives are key to families' well-being, child development and overall health. Injuries and violence are a devastating and costly public health concern and are largely preventable. Connecticut Children's is committed to:

- a. Support the work of Connecticut Children's Injury Prevention Center in reducing the occurrence of preventable and predictable injuries in children and adults through research, program implementation, education and training, and policy advocacy.
- b. Ensure residents of Hartford have increased opportunities for physical activity in community centers, safe and well-maintained parks, and safe neighborhoods with walking police patrols.
- c. Enhance programs like the Southside Institution Neighborhood Alliance (SINA), which has been previously explained in this report and has launched the Frog Hollow Hartford Hero's Mural Project, a digital walking tour of the Frog Hollow neighborhood, as well as an annual community cleanup, among other activities.
- d. Consider broadening the Hartford Gun Buyback program. There is evidence to suggest that gun buybacks are a productive strategy in local gun violence prevention efforts. Gun buyback programs serve goals beyond reducing gun-related death, injury, and crime and can include strengthening community mobilization, social cohesion, heightened awareness, and shifting the culture around firearms.
- f. Support the Hospital-based Violence Intervention Program (HVIP), which was explained in the **Progress Achieved Since 2022 Community Health Needs Assessment** section of this report.
- g. Continue to advocate for policies like the bipartisan Safer Communities Act^{xiv} that provides \$750 million in funding for community-based violence prevention initiatives and other resources.

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