

PA #23-205 Legislative Request: Final Report



Prepared by the University of Connecticut School of Social Work as part of the Connecticut Office of Early Childhood Partnership

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Executive Summary

As stipulated in Public Act #23-205ⁱ, this brief aims to identify home visiting, child care, family resource center, and healthcare assets within “high poverty, low opportunity” (HPLO)ⁱⁱⁱ communities through asset mapping and identifying the number of children and families served. Our team at the University of Connecticut School of Social Work worked in partnership with the Office of Early Childhood to create this report.

Methodology

Our team worked to first identify reliable data sources for home visiting, child care, family resource center, and healthcare for children ages 0-5 in Connecticut. We then cleaned and analyzed data, employing several data validation strategies. Asset maps were created using ArcGIS Pro 3.2.1 and Tableau visualization software. Numbers served were calculated at the town level from state-provided and publicly available data sources (see Appendix, Table 1 for data sources). The HPLO census tracts are within the following 12 towns: Bridgeport, Enfield, Hartford, Mansfield, Meriden, Middletown, New Britain, New Haven, New London, Stamford, Waterbury, and Windham.

Limitations

There are several limitations that need to be heeded when interpreting results. These include:

- Differences in data sources across key dimensions, including the (1) age ranges, (2) timing of data collection, and (3) geographic level at which data were available. These differences limit accurate reporting and constrain comparisons.
- Lack of data at the census tract level. For most service sectors, data were not available at the census tract level resulting in numbers served being reported at the town level. As a result, **most findings are not specific to the identified HPLO census tracts** and should be interpreted with caution.
- Data source specific limitations. For example, Family Resource Center data are only indicative of how many families are served by family resource centers located in the 12 towns but do not specify ages of those served or where those who are served live.
- Limited healthcare data. Healthcare data for this analysis are limited to the location of two children’s hospitals and federally qualified health centers (FQHC) that provide pediatric or family care (excluding mobile, shelter-based, and school-based FQHCs), and the number of individuals covered by Husky A and Husky B health insurance. Data on private healthcare providers, private health insurance coverage, and the numbers served by healthcare providers are unknown. Likewise, it is also unknown how many of those covered by Husky A and Husky B health insurance are within the age group of interest.

Asset Maps Results

The asset map can be found here:

https://public.tableau.com/shared/SKS3TNTBR?:display_count=n&:origin=viz_share_link.

- Child care locations (e.g., child care centers, family child care homes) are present in all HPLO tracts in all towns except for Hartford, Meriden, and New Haven where they are present for 80%, 60%, and 90% of the HPLO tracts respectively. Therefore, those three towns have an HPLO census tract without child care providers.
- Although most towns (except for Mansfield) have at least one family resource center, only four towns – Bridgeport, Hartford, New Haven, Windham – have a family resource center in an HPLO census tract.
- There is a FQHC in all 12 towns except for Windham; however, only seven towns have a FQHC in an HPLO census tract. Among those towns with an FQHC in an HPLO census tract, FQHCs are present in 10%-33% of HPLO tracts, except for Enfield who has an FQHC in its one HPLO tract (100%). One children's hospital is in Hartford (Connecticut Children's Medical Center) and the other is in New Haven (Yale New Haven Children's Hospital).

Numbers Served Results

- Overall, the numbers of families served across the four services were lower than might be expected. **Caution should be used when interpreting the numbers served percentages as the comparison census data may not align fully with the numbers served data reported.** For example, we do not know the ages of recipients of all services.
- Home visiting rates ranged from 0%-8% of families with child(ren) ages 0-5 and 0%-7% of children ages 0-4 across the 12 towns. Birth to Three services were accessed by less than 1% of families with child(ren) ages 0-5 and of children ages 0-4 for all towns.
- For child care enrollment rates, percentages of families with child(ren) ages 0-5 and of children ages 0-4 were under 50% for all towns other than Mansfield.
- The prevalence of families with children ages 0-5 using Family Resource Center services ranged from 0%-19% across towns.

Conclusion

Both asset maps and numbers served findings suggest services are not equitably distributed across the state and numbers of families and children accessing and using services in HPLO towns are lower than might be expected. Future consideration of the quality of services available, as well as factors related to service usage, is warranted to inform action steps to support service access and usage among families with young children in HPLO census tracts.

Next Steps

We have identified several next steps we would like to take to increase the rigor and interpretability of the analyses. With additional time and resources, we would like to:

- Access more data for all services at the census tract level. This would facilitate analyses specific to the HPLO census tracts.
- Include comparison groups for context. Adding information from across Connecticut would allow for a more comprehensive comparison across regions, and a better understanding of statewide distribution of services.

- Consider adding numbers served to the asset maps for a more comprehensive presentation.
- Identify more specific locations and ages of children and families served.
- Access data that are consistent with respect to age ranges served and locations of families served to increase precision of the data presented.
- Conduct a more comprehensive examination of factors that lead to service usage across sectors, examining availability, accessibility, accommodation, affordability, and acceptability. We know that *service provision* alone does not directly link to *service usage*, and better understanding families' needs and the programmatic features that facilitate or impede usage and access is essential.

Introduction

Access to early childhood services, including home visiting, high quality child care, family resource centers, and pediatric health care, benefits health and developmental outcomes for young children and their families. For instance, high quality early childhood care has numerous documented short- and long-term benefits, such as increasing children’s school readiness, improving physical and cognitive outcomes, and mitigating achievement disparities (e.g., socioeconomic-based achievement gaps), among myriad other benefits.^{i,ii} Yet, families, particularly those in census tracts identified by the Office of Policy and Management as “high poverty, low opportunity” (HPLO)ⁱⁱⁱ, may have limited access to early childhood services. Barriers may include cost, limited slots, location, and language.

As stipulated in Public Act #23-205, this brief aims to identify home visiting, child care, family resource centers, and healthcare assets within HPLO communities through asset mapping (see “Asset Map Results”) and identifying the number of children and families served (see “Numbers Served Results”).^{iv} Findings can highlight resource needs and inform plans put forth by the Office of Early Childhood (OEC) “to prioritize services and assess costs of assuring access in HPLO census tracts.

Methodology

The first step was to identify reliable data sources for each of the four early childhood services stipulated in Public Act 23-205: home visiting, child care, family resource centers, and healthcare (See Appendix, Table 1). Sources identified included publicly available state data (e.g., HUSKY A and HUSKY B data, federally qualified health centers (FQHCs)), data from the OEC (e.g., lists of state- and federally funded home visiting programs), and data from the Connecticut State Department of Education (i.e., family resource center enrollment/households served data). Where possible, we sought to access original, raw data files. We then reviewed data applicability to the request, including reviewing data completeness, timeframe/recency, geographic level, age ranges, and verification that data sources were mutually exclusive. Data cleaning and management processes included integrating data across sources into a single, harmonized spreadsheet and, where applicable, geocoding address-level data to assign a census tract for the asset map.

Quality assurance procedures were built into these processes, including a review of data cleaning and entry processes, and a manual review by a second researcher cross-checking that calculations and approach were accurate and the data tables in this report are consistent with the raw data. We also validated geocoded addresses displayed in the asset map by comparing results obtained using two different platforms: ArcGIS World Geocoding Services (using ArcGIS Pro 3.2.1) and OpenStreetMap’s Nominatim service (accessed through R).^{v,vi} Approximately 96% of the results aligned well between the two platforms (i.e., latitude differences were below $|.001|$). Geocoordinates obtained with ArcGIS took preference. However, any major discrepancies were double-checked and corrected

when needed. Geocoding issues were primarily attributable to incorrect addresses or spelling errors in the input data. In addition, we verified the reliability of the “numbers served” data tables for towns outside of the 12 stipulated in Public Act 23-205 (see Appendix). Specifically, we verified all summary calculations and cross-checked 20% of the data tabled in the appendices with the raw data. In addition, we verified the locations to properly tabulate numbers served using a crosswalk of places to towns in Connecticut. This crosswalk was created by linking the smaller places within the towns to the corresponding towns based on their spatial overlap using ArcGIS Pro 3.2.1 and Python 3.7. This resulted in reassigning the number served in several villages into towns that incorporate these smaller geographic areas. These updated numbers are reflected in the Child Care and Home Visiting HPLO and All CT tables in the body of this report and the Appendix.

Limitations

It is imperative to interpret findings in light of several limitations. First, the data sources included in this analysis differ across key dimensions, including:

- age range captured, where age is specified (e.g., the Omnibus Report and home visiting data include children <6 years of age, Census data include children <5 years of age),
- the timing of data collection (e.g., Omnibus data were collected September 2023 through December 2023, the list of Connecticut’s Family Resource Centers was generated in 2022), and
- the geographic level at which data were available (e.g., Omnibus Report data and Family Resource Center address data are available at the census tract level, state- and federally funded home visiting data are at the zip code level, Birth to Three data are at the town level).

These differences limit the ability to compare findings across data sources and limit the extent to which analyses could adhere to the specifications of the Public Act (e.g., “number of children...in need of support...under five years of age”). Furthermore, some data were only available at the town or zip code level, rather than at the census tract level. Indeed, because so few data sources on “numbers served” by early childhood services could be examined at the census tract level, “numbers served” findings are reported at the town level. As a result, **most findings are not specific to the identified HPLO census tracts** and should be interpreted with caution. Further, per the OEC website (<https://www.ctoec.org/home-visiting/>), home visiting services are available in every town (e.g., a home visiting center in one town may serve multiple Connecticut towns) and, thus, are not included in the asset map. Home visiting data are only reported at the town level in the numbers served section.

Data source limitations specific to Family Resource Centers include: (1) that we do not have the locations of families served and, thus, cannot ascertain how many of those served reside in HPLO census tracts; (2) that numbers served data includes all families, not specifically families with young children, and could include services

offered to parents (e.g., pregnancy prevention, education assistance) or older children (e.g., after school care); (3) families served only reflect where they received services, it does not indicate where they live and the larger catchment area of one center can include more than one town; and (4) that data quality may be affected by staff proficiency level. In the future we may be able to access additional Family Resource Center specific data (e.g., via the Public School Information System).

Data source limitations related to healthcare include: (1) only having locations for children's hospitals and FQHCs; we do not have access to data for private pediatric or family medicine practices; (2) only having locations of healthcare sites, no information on numbers served; (3) health insurance coverage is limited to numbers covered by Husky A Medicaid and Husky B CHIP coverage which includes all people covered inclusive of children through age 19, parents or caregiver relatives, pregnant and post-partum individuals of any age and individuals formerly in foster care up to age 26; these values were compared to the total number of families in each town, and thus comparisons are not limited to the age group of interest; (4) not having data on private health insurance coverage rates; and (5) we did not include all FQHCs. Specifically, we focused on FQHCs that were independent clinics that clearly offered pediatric services, excluding mobile, shelter-based, and school-based clinics due to ambiguity around whether they served young children, whether they were indeed FQHCs, and what their address was (e.g., in some cases, locations overlapped with clinic locations).

It is also important to note that, while the data used in this analysis provide insight into the location of services and the numbers of children and families served, they provide no indication of the quality of the services/resources. Other important contextual considerations are absent from this analysis, including barriers to service access that families experience (e.g., limited hours, transportation) and exact catchment areas of families served. Likewise, without comparison data from census tracts other than those defined as HPLO, interpretability of findings is limited. It is unclear, for instance, how the number of assets available in HPLO census tracts compare to census tracts that might be classified as "low poverty, high opportunity."

Finally, the focus on identified HPLO census tracts is narrow in scope and risks overlooking other Connecticut communities and families in need of early childhood services. The designation of census tracts as HPLO "where 30% or more of the residents have incomes below the federal poverty line"ⁱⁱⁱⁱ is limited; the categorization of census tracts as either HPLO or not does not allow for nuance or varying levels of HPLO "severity" to be captured, and may not encompass all towns that have "low levels of opportunity."

Asset Maps Results

Specific Methodology

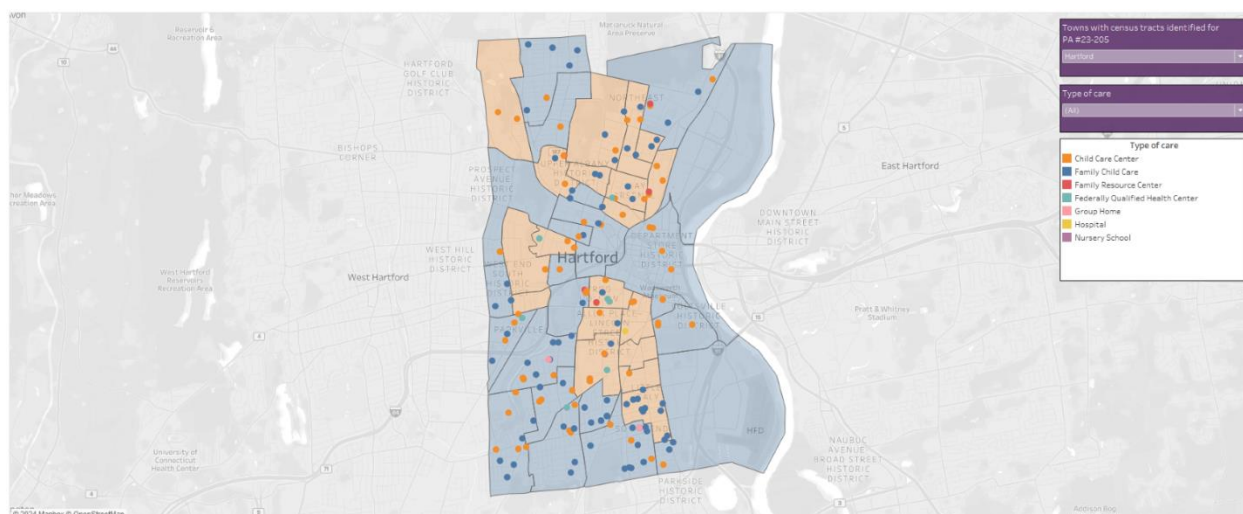
In order to create asset maps, addresses for each service were geocoded using ArcGIS World Geocoding Services. The census tracts boundary for Connecticut

was downloaded from 2023 TIGER/Line® Shapefiles: Census Tracts.^{vii} Addresses for FQHCs (excluding mobile, school-based, and shelter-based sites) were obtained from the National Provider Identifier Database Lookup and were checked for relevance using individual practice website information and Google Maps.^{viii} FQHCs provide comprehensive health services to underserved communities on a sliding fee scale and/or offer Medicare or Medicaid reimbursement.^{ix} Addresses for Family Resource Centers were obtained from the Connecticut Department of Education's Family Resource Centers page and are accurate as of 2022.^x Addresses for Yale New Haven Hospital and Connecticut Children's Medical Center were added at the request of OEC. All other addresses were for child care providers and come from the Omnibus Report developed by the United Way of Connecticut based on data collected between September and December 2023. Child Care Centers and Family Child Care Homes include licensed, and license exempt center-based programs, but not those with inactive licenses due to lapse. *Home visiting was not included in asset maps as home visiting data were not available at the recipient level to identify where families are that receive home visiting in the identified localities. Per the OEC website (<https://www.ctoec.org/home-visiting/>) home visiting is accessible in all towns in Connecticut.*

Summary

A detailed interactive map of identified assets was created using Tableau Desktop version 2024.1. and can be found here: https://public.tableau.com/shared/SKS3TNTBR?:display_count=n&:origin=viz_share_link. The interactive map displays services currently available to support families with young children in towns with at least one census tract identified to be HPLO as delineated in Public Act (PA) #23-205. HPLO census tracts are shaded in the map in **orange** and towns in which they are embedded are in **blue**.

As an example, Figure 1 shows a static image of the interactive map with assets shown for Hartford. In the town of Hartford, all services (child care, family resource centers, and hospitals/FQHCs) are present. However, not all HPLO census tracts have all three services.

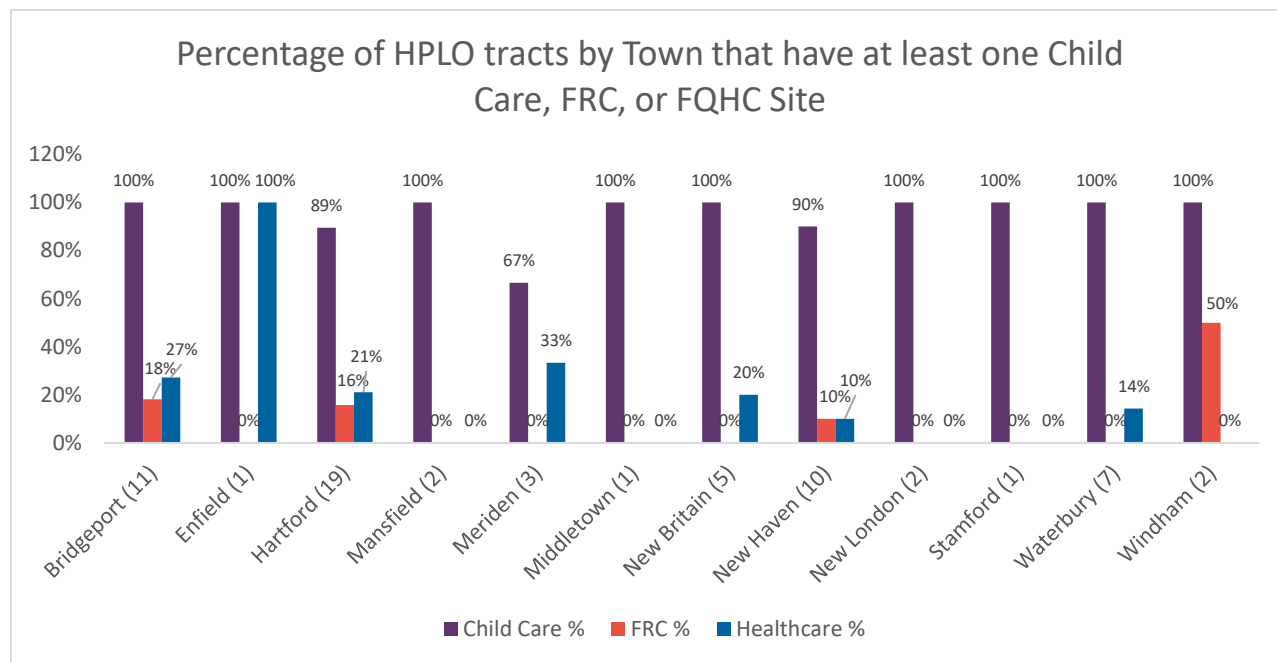
Figure 1. Sample Asset Map of Hartford

Examination of the other towns in the interactive map revealed several patterns, including:

- Child care locations (e.g., child care centers, family child care homes) are present in 100% of HPL0 tracts in all towns except for Hartford, Meriden, and New Haven where they are present for 80%, 60%, and 90% of the HPL0 tracts respectively. Therefore, those three towns have an HPL0 census tract without child care providers.
- Family Resource Centers are in all of the 12 towns except Mansfield. However, only four towns – Bridgeport, Hartford, New Haven, Windham – have a family resource center in an HPL0 census tract. The remaining eight towns do not have family resource centers in the HPL0 census tracts.
- One children’s hospital is in Hartford (Connecticut Children’s Medical Center) and the other is in New Haven (Yale New Haven Children’s Hospital).
- There is a FQHC in all 12 towns except for Windham; however, only seven towns have a FQHC in an HPL0 census tract. Among those towns with an FQHC in an HPL0 census tract, FQHCs are present in 10%-33% of HPL0 tracts, except for Enfield who has an FQHC in its one HLPO tract (100%).
- There are three HPL0 census tracts – two in Hartford and one in New Haven – that do not have any of the identified resources.

These patterns are illustrated in Figure 2.

Figure 2. HPLO Resources



Next Steps

We have identified several next steps to further examine data and create more detailed interactive maps. These include:

- Adding information from all towns/census tracts in CT. This would allow for comparison groups which can provide context around the distribution of services and where numbers served differ by community.
- Finding additional data sources with census tract level data to have a deeper understanding of where services, and children and families served, are located.
- Updating interactive maps to include the numbers served by each service.
- Investigating potential barriers to access, including transportation, language services are offered in, and flexibility of hours would allow for a better understanding of service usage and accessibility, in addition to service availability.

Numbers Served Results

Specific Methodology

As noted above, initial steps included identifying suitable data. Data were examined for content and applicability to the ask. For the Birth to Three home visiting program and family resource centers, data sets on numbers served were only available at the town level. The remaining home visiting programs data were available at the zip code level. Only child care data were available at the census tract level. Thus, to be consistent, all data here are presented at the town level. Below data are presented only for the 12 towns that have at least one HPLO census tract in them.

More complete tables that show numbers served in all towns where services are provided can be found in the appendices.

Summary

For context, we first provide census data for the total number of families and those with at least one child under the age of five in the 12 towns with HPLO census tract(s) (see Table 1). This allows for better understanding of the proportions of families and children served for each service. Table 2 shows the number of children ages 0-4 by town. For tables 3-6, a column is presented to reflect the percentage of the most relevant context variable (e.g., percentage of total families, families with a child ages 0-5, or children 0-4 per town). **These percentages should be interpreted with caution given that we do not always know the ages of those served by resources and, when we do, the ages may not align with those ranges provided by the comparison Census data.**

Table 1. Estimated number of total households and households with at least one child ages 0 to 5: Census data five-year estimates (2018-2022), high poverty-low opportunity towns only

Town	Total number of families (whether or not children are present)	Total number of families with at least one child* ages 0 to 5
Bridgeport	32,314	5,754
Enfield	10,250	1,874
Hartford	26,325	5,464
Mansfield	3,262	391
Meriden	15,177	2,514
Middletown	10,756	1,838
New Britain	16,742	3,139
New Haven	26,777	5,233
New London	5,682	1,249
Stamford	33,003	6,829
Waterbury	27,583	5,920
Windham	4,722	591

Data Source: Steven Manson, Jonathan Schroeder, David Van Riper, Katherine Knowles, Tracy Kugler, Finn Roberts, and Steven Ruggles. IPUMS National Historical Geographic Information System: Version 18.0 [dataset]. Minneapolis, MN: IPUMS. 2023. <http://doi.org/10.18128/D050.V18.0>

Note. IPUMS National Historical Geographic Information System (NHGIS) provides Census data in the datasets with specific combinations of variables.^{xi} The data above represent five-year estimates (2018-2022) of town-level data. The most recent data (one-year estimates) are only available for areas with populations of 65,000+.

*These data refer to all related children within the family

Table 2. Number of children ages 0-4 by town, per Census data

Town	Total
Bridgeport	8,332
Enfield	2,642
Hartford	6,582
Mansfield	362
Meriden	3,736
Middletown	1,884
New Britain	4,887
New Haven	8,264
New London	1,419
Stamford	7,528
Waterbury	7,179
Windham	614

Data Source: IPUMS NHGIS, University of Minnesota, www.nhgis.org

Home Visiting – 12 HPLO areas in CT

As can be seen in Table 3, each HPLO town had at least one family served by home visiting. The percentage of families with children ages 0-5 receiving home visiting services in each town ranges from 0% (Mansfield, Windham) to 8% (Hartford). Similarly, among children ages 0-4, percentages receiving home visiting also range from 0% (Mansfield) to 7% (Hartford). Home visiting services are available in all towns as a universal intervention. Therefore, it would be reasonable to expect there to be families served in all towns. Furthermore, as home visiting is a universal service targeting children through age five, we might expect to see higher rates of numbers served.

Table 3. Number of households served through Home Visiting by town, 2022-2023 (N=1,437)

Town	Total	Home visiting % of families with at least one child ages 0-5	Home visiting % of children ages 0-4
Bridgeport	141	2%	2%
Enfield	28	1%	1%
Hartford	435	8%	7%
Mansfield	1	0%	0%
Meriden	55	2%	1%
Middletown	55	3%	3%
New Britain	121	4%	2%
New Haven	235	4%	3%
New London	50	4%	4%
Stamford	141	2%	2%

Town	Total	Home visiting % of families with at least one child ages 0-5	Home visiting % of children ages 0-4
Waterbury	139	2%	2%
Windham	36	6%	6%
Total	1,437		

Data Source: Dataset provided by OEC

Birth to Three – 12 HPLO areas in CT

Table 4 shows the number of families served through Birth to Three home visiting services in the 12 towns with HPLO regions. Birth to Three services are provided to those who meet certain eligibility criteria: a child ages 0-3 with a developmental delay or medical condition likely to cause a developmental delay.^{xii} Due to the specific eligibility criteria for Birth to Three, adequate comparison data were unavailable to assess the proportion of Birth to Three eligible families accessing this service. In all towns, the number of families who receive this service reflect <1% of families with children 0-5 and <1% of children ages 0-4 in the respective towns. Because Birth to Three services are only provided to those children ages birth to two years, 350 days who qualify for services based on developmental delay or medical eligibility criteria, smaller proportions of families and children served are expected.

Table 4. Number of children served through Birth to Three by town, 2022-2023 (N=2,474)

Town	Total	Birth to Three % of families with at least one child ages 0-5	Birth to Three % of children ages 0-4
Bridgeport	833	<1%	<1%
Enfield	148	<1%	<1%
Hartford	723	<1%	<1%
Mansfield	30	<1%	<1%
Meriden	352	<1%	<1%
Middletown	161	<1%	<1%
New Britain	437	<1%	<1%
New Haven	600	<1%	<1%
New London	125	<1%	<1%
Stamford	574	<1%	<1%
Waterbury	736	<1%	<1%
Windham	137	<1%	<1%
Total	4,856		

Data Source: Dataset provided by OEC

Child Care – 12 HPLO areas in CT

Table 5 shows the number of children who receive child care, inclusive of Child Care Centers, Family Child Care Homes, Group Homes, and Nursery Schools. Examining the number of children enrolled in child care in a town as a percentage of families with at least one child ages 0-5, values range from 12% (New Britain and New London) to 52% (Mansfield). Additional towns with 25% child care enrollment or above include Bridgeport, Enfield, Hartford, Meriden, Middletown, Stamford, and Waterbury. Similarly, when examined in the context of the percentage of children ages 0-4, values range from 11% to 56% with Mansfield again being the only town with over 50% enrolled in child care. It is unclear from this data if child care usage is used by less than half of all families with children ages 0-5 and children ages 0-4 in all towns except Mansfield due to family choice, affordability, location, availability of slots, hours, or other factors. Furthermore, caution should be used when interpreting these percentages as child care enrollment data are among children ages 0-5; comparison data are among *families* with a child age 0-5 (who may have more than one child in this age range) and *children* ages 0-4.

Table 5. Number of children served through Child Care by town, Sept 2023 – Dec 2023 (N=11,255)

Town	Total	Child care % of families with at least one child ages 0-5	Child care % of children ages 0-4
Bridgeport	2,053	36%	25%
Enfield	832	44%	31%
Hartford	1,438**	26%	22%
Mansfield	388	52%	56%
Meriden	618	25%	17%
Middletown	529	29%	28%
New Britain	369	12%	8%
New Haven	1276	24%	15%
New London	151	12%	11%
Stamford	1972	27%	25%
Waterbury	1678	28%	23%
Windham	137	23%	22%
Total	11,255		

Data Source: Dataset created by the United Way of CT, provided by OEC

**supplemented by one early childhood care site provided by an additional data source: a list of number of children enrolled at ECE sites at CT public schools

Family Resource Centers – 12 HPLO areas in CT

Table 6 shows the number of families served by the Family Resource Centers in each town. Of note, the households served by Family Resource Centers in a town may not necessarily reside in that town. Mansfield does not have any Family Resource

Centers. New Britain and Stamford’s Family Resource Centers both serve less than 1% of families in their town with children ages 0-5. The other towns range from serving 4% to 19% of families with children ages 0-5 with none serving 20% or more. Caution should be used in interpreting these percentages as 1) Family Resource Centers may serve families from surrounding towns and 2) Family Resource Centers may serve families with children over age 5.

Table 6. Number of households served through a Family Resource Center by town, 2022-2023 (N=2,474)

Town	Total	Family resource centers % of families with at least one child ages 0-5
Bridgeport	209	4%
Enfield	361	19%
Hartford	423	8%
Mansfield	0	0%
Meriden	386	15%
Middletown	292	16%
New Britain	19	<1%
New Haven	505	10%
New London	127	10%
Stamford	28	0%
Waterbury	44	<1%
Windham	80	14%
Total	2,474	

Data Source: Dataset provided by CT State Department of Education

Husky A and Husky B Healthcare Coverage – 12 HPLO areas in CT

Table 7 shows the number of families that receive either Husky A or Husky B healthcare coverage. Comparison to census data is not possible as Husky data include children through age 19, parents or caregiver relatives, pregnant and post-partum individuals of any age and individuals formerly in foster care up to age 26 and parallel census data is not available. Without this contextual information, we cannot specify what percentage of young children and/or their families are covered by Husky A or Husky B. Further, the scope of the below data provides only a limited picture of the healthcare coverage landscape for young children and their families; we do not have data on private health insurance coverage.

Table 7. Count of Husky A and Husky B plans in December 2023

Town or City	Number of Husky A plans	Number of Husky B plans
Bridgeport	44,333	1,164
Enfield	5,669	187

Hartford	40,724	598
Mansfield	1,088	42
Meriden	15,245	374
Middletown	6,533	168
New Britain	23,819	409
New Haven	34,868	620
New London	6,883	145
Stamford	20,479	779
Waterbury	40,130	756
Windham	5,853	154

Data source: CT Department of Social Services: "People Served by Town and Medical Benefit Plan by Month - CY 2023-2024," accessed from CT Open Data, 2/20/24.

Overall Numbers Served Summary

Overall, the number of families served by these four services represents a smaller percentage of families with children ages 0-5 and children ages 0-4 than might be anticipated. Home visiting rates ranged from 0%-8% and Birth to Three rates were under 1% for all towns. For child care enrollment rates, percentages of families with children ages 0-5 and of children ages 0-4 were under 50% for all towns other than Mansfield. The percentage of families with children ages 0-5 using Family Resource Center services ranges from 0%-19% across towns. Together, these numbers served findings seem to indicate a need for more services for families with young children in these HPLO towns. Future research is needed to explore how numbers served by such services compare in other towns. In addition, more exploration of contextual factors that lead to service usage, such as number of slots, location, hours, languages used, eligibility criteria, and length of service/enrollment, is warranted.

Next Steps

There are several future steps we would like to take to increase the accuracy of the numbers served data and to better understand the landscape of numbers served across services. These include:

- Getting census tract level data across the four service areas to better capture the HPLO regions specifically.
- Accessing data that is more consistent across age ranges and time frames to better facilitate comparisons.
- Accessing data that provide contextual information to distinguish access from usage barriers and examine services within six key dimensions of access: awareness, availability, accessibility, accommodation, affordability, and acceptability.^{xiii, xiv}

Conclusions

This preliminary report aimed to provide insights into *where* four early child care assets (i.e., home visiting, child care, family resources centers, and healthcare) are offered in relation to identified HPLO census tracts within 12 towns, and *how many children/families are served* across the four service sectors. Utilizing asset mapping techniques, we created visual maps of where child care, family resource centers, and health care services are provided. We likewise reported the numbers served by home visiting, child care, family resources centers, and healthcare services in the context of census data on families with child(ren) ages 0-5 and data on children ages 0-4 in each of the 12 towns.

Findings suggest that **services are not evenly distributed** across the 12 towns and are not present in all of the identified HPLO census tracts. Furthermore, the **numbers served by services are lower than might be expected** when compared to the number of families with children ages 0-5 and number of children ages 0-4 in the 12 towns. Taken together, these findings indicate there may be barriers to access and use of services in Connecticut. Further exploration is needed to better understand and address the needs of families with young children in Connecticut.

As noted above, these findings must be interpreted with caution in light of significant limitations to both the asset maps and numbers served. Indeed, these findings provide only a very limited snapshot of assets available and numbers served, and most findings are not specific to HPLO census tracts due to data constraints. Furthermore, without comparison groups, it is difficult to contextualize how these assets compare to elsewhere in Connecticut. We cannot conclude, for example, that the number of children and families served in these 12 towns are significantly lower or higher than elsewhere in Connecticut. Future consideration of other important contextual factors, such as service quality, as well as factors that lead to service usage (e.g., availability, accessibility, accommodation, affordability, acceptability) is also essential.

Appendices

Table 1. Data sources used for asset mapping and assessing numbers served by resources in the identified “high poverty, low opportunity” towns

Asset Mapping				Numbers Served			
Home Visiting	Child Care	Family Resource Centers	Healthcare	Home Visiting	Child Care	Family Resource Centers	Healthcare
	Omnibus Report ¹	Addresses of Family Resource Centers in CT ¹	CT Children’s Hospitals ¹	Federally funded Home Visiting Program List ³	Omnibus Report ³	State Department of Education Family Resource Center Household Enrollment Data ³	HUSKY A & HUSKY B Coverage ^{3,*}
			Federally Qualified Health Centers ¹	State funded Home Visiting Program List ³	Public School ECE sites ^{3,**}		
				Birth to Three ³			

Note. ¹= census tract level data; ² = zip code level data; ³ = town level data

*Per Access Health CT,^{xv} HUSKY A is “Medicaid for children and teens up to age 19, parents or relative caregivers of any age with a dependent child(ren) under age 19, pregnant and post-partum individuals of any age, and individuals formerly in foster care up to age 26.” HUSKY B is “Children’s Health Insurance Program (CHIP) for uninsured children and teens up to age 19 who have too much income to qualify for Medicaid. HUSKY B also provides prenatal care to individuals of any age who do not qualify for Medicaid due to immigration status.” Learn more here: <https://portal.ct.gov/HUSKY/How-to-Qualify>

**Most of the Public School ECE data, obtained from the Office of Early Childhood, overlapped with the Omnibus Report. In only two towns was there an ECE site not represented in the Omnibus Report: Hartford and Windsor (see Table 5).

Census data

Table 2. Estimated average number of total households and households with at least one child ages 0 to 5: Census data five-year averages (2018-2022), all towns

Town or City	Total number of families (whether or not children are present)	Total number of families with at least one child* ages 0 to 5
Andover	917	126
Ansonia	4,752	731
Ashford	1,263	118
Avon	5,316	687
Barkhamsted	1,166	141
Beacon Falls	1,633	150
Berlin	5,924	749
Bethany	1,483	197
Bethel	5,077	918
Bethlehem	963	123
Bloomfield	5,517	514
Bolton	1,374	172
Bozrah	718	88
Branford	7,844	827
Bridgeport	32,314	5,754
Bridgewater	512	44
Bristol	15,221	2,521
Brookfield	5,075	687
Brooklyn	2,330	595
Burlington	2,507	337
Canaan	332	46
Canterbury	1,576	139
Canton	2,833	378
Chaplin	656	123
Cheshire	6,918	814
Chester	1,013	126
Clinton	3,633	340
Colchester	4,320	811
Colebrook	443	39
Columbia	1,682	167
Cornwall	393	26
Coventry	3,701	465
Cromwell	3,735	679
Danbury	20,715	3,539
Darien	5,819	1,241
Deep River	1,287	202
Derby	3,345	387
Durham	2,200	518

Town or City	Total number of families (whether or not children are present)	Total number of families with at least one child* ages 0 to 5
East Granby	1,350	198
East Haddam	2,653	313
East Hampton	3,478	696
East Hartford	12,960	2,115
East Haven	6,988	650
East Lyme	4,892	437
East Windsor	2,926	452
Eastford	428	50
Easton	2,195	226
Ellington	4,414	757
Enfield	10,250	1,874
Essex	1,768	139
Fairfield	15,313	2,374
Farmington	7,235	921
Franklin	504	88
Gastonbury	9,545	1,355
Goshen	868	141
Granby	3,064	660
Greenwich	16,848	2,819
Griswold	3,387	297
Groton	9,715	1,677
Guilford	6,482	681
Haddam	2,531	286
Hamden	13,597	2,086
Hampton	471	76
Hartford	26,325	5,464
Hartland	485	47
Harwinton	1,553	119
Hebron	2,760	343
Kent	666	69
Killingly	4,606	855
Killingworth	1,781	225
Lebanon	1,966	176
Ledyard	3,884	728
Lisbon	1,280	213
Litchfield	2,220	280
Lyme	722	121
Madison	5,281	434
Manchester	14,839	2,964
Mansfield	3,262	391
Marlborough	1,754	266
Meriden	15,177	2,514

Town or City	Total number of families (whether or not children are present)	Total number of families with at least one child* ages 0 to 5
Middlebury	2,065	400
Middlefield	1,167	82
Middletown	10,756	1,838
Milford	13,722	1,687
Monroe	4,901	788
Montville	4,366	445
Morris	567	35
Naugatuck	8,030	1,106
New Britain	16,742	3,139
New Canaan	5,580	834
New Fairfield	3,627	421
New Hartford	2,048	310
New Haven	26,777	5,233
New London	5,682	1,249
New Milford	7,663	1,271
Newington	8,224	1,092
Newtown	7,427	911
Norfolk	491	65
North Branford	3,683	368
North Canaan	691	144
North Haven	6,800	665
North Stonington	1,524	155
Norwalk	22,614	3,826
Norwich	9,950	1,923
Old Lyme	2,172	267
Old Saybrook	2,754	287
Orange	4,108	579
Oxford	3,775	556
Plainfield	4,036	1,012
Plainville	4,016	504
Plymouth	3,059	356
Pomfret	1,062	80
Portland	2,611	382
Preston	1,262	177
Prospect	2,383	226
Putnam	2,210	428
Redding	2,650	349
Ridgefield	7,033	1,191
Rocky Hill	5,620	964
Roxbury	541	100
Salem	1,260	130
Salisbury	981	121

Town or City	Total number of families (whether or not children are present)	Total number of families with at least one child* ages 0 to 5
Scotland	410	34
Seymour	4,339	486
Sharon	743	97
Shelton	11,077	1,947
Sherman	1,029	112
Simsbury	6,524	1,037
Somers	2,576	340
South Windsor	7,367	1,388
Southbury	5,032	692
Southington	12,213	1,615
Sprague	776	136
Stafford	3,029	339
Stamford	33,003	6,829
Sterling	978	170
Stonington	5,257	733
Stratford	13,628	1,851
Suffield	3,929	426
Thomaston	1,929	392
Thompson	2,550	449
Tolland	4,291	703
Torrington	8,880	1,563
Trumbull	9,874	1,734
Union	311	19
Vernon	7,592	1,656
Voluntown	797	103
Wallingford	11,434	1,729
Warren	384	15
Washington	968	187
Waterbury	27,583	5,920
Waterford	5,358	858
Watertown	6,117	879
West Hartford	16,084	2,465
West Haven	12,956	2,111
Westbrook	1,804	142
Weston	3,020	358
Westport	7,445	1,257
Wethersfield	7,606	1,208
Willington	1,471	210
Wilton	4,941	844
Winchester	2,808	341
Windham	4,722	591
Windsor Locks	3,504	575

Town or City	Total number of families (whether or not children are present)	Total number of families with at least one child* ages 0 to 5
Windsor	7,787	842
Wolcott	4,200	518
Woodbridge	2,732	404
Woodbury	2,887	265
Woodstock	2,363	169
Total	911,868	144,531

Data Source: IPUMS NHGIS, University of Minnesota, www.nhgis.org

* These data refer to all related children within the family

Home Visiting – all CT

Table 3. Number of households served through Home Visiting by town/village, 2022-2023 (N=2,941)

Town/Village	Total
Amston	3
Andover	1
Ansonia	14
Ashford	1
Avon	2
Baltic	2
Bantam	1
Barkhamsted	5
Beacon Falls	1
Berlin	1
Bethel	6
Bloomfield	19
Bolton	2
Branford	10
*Bridgeport	141
Bridgewater	1
Bristol	19
Broad Brook	2
Brookfield	2
Brooklyn	7
Burlington	1
Canaan	2
Canterbury	2
Canton	1

Town/Village	Total
Cheshire	2
Clinton	6
Colchester	3
Colebrook	2
Columbia	1
Coventry	4
Cromwell	1
Danbury	99
Danielson	7
Dayville	9
Deep River	1
Derby	9
East Granby	1
East Haddam	2
East Hampton	4
East Hartford	95
East Hartland	1
East Haven	26
East Lyme	1
East Windsor	4
Eastford	2
Ellington	4
*Enfield	28
Fairfield	3
Falls Village	1
Farmington	3
Gales Ferry	3
Glastonbury	1
Goshen	1
Granby	1
Greenwich	9
Griswold	3
Groton	29
Guilford	6
Hamden	53
*Hartford	435
Harwinton	3
Higganum	1
Ivoryton	1

Town/Village	Total
Jewett City	6
Kent	1
Killingly	7
Lebanon	1
Ledyard	5
Lisbon	3
Litchfield	5
Lyme	1
Madison	3
Manchester	63
*Mansfield	1
*Meriden	55
Middlefield	1
*Middletown	55
Milford	10
Monroe	1
Montville	3
Moodus	1
Moosup	3
Mystic	5
Naugatuck	12
*New Britain	121
New Canaan	2
New Fairfield	3
New Hartford	3
*New Haven	235
*New London	50
New Milford	11
Newington	8
Newtown	3
Niantic	4
North Branford	4
North Grosvenor Dale	1
North Haven	10
North Stonington	1
Northford	1
Norwalk	151
Norwich	69
Oakdale	3

Town/Village	Total
Oakville	1
Old Lyme	3
Old Saybrook	2
Orange	4
Pawcatuck	4
Plainfield	6
Plainville	5
Plantsville	4
Plymouth	1
Portland	4
Preston	1
Putnam	8
Redding	3
Riverside	1
Rocky Hill	7
Salem	1
Salisbury	1
Seymour	13
Sharon	1
Shelton	4
Simsbury	2
South Windsor	5
Southington	8
Stafford	1
Stafford Springs	2
*Stamford	14 ¹
Sterling	1
Stonington	1
Stratford	11
Suffield	2
Taftville	6
Tariffville	1
Terryville	7
Tolland	2
Torrington	130
Trumbull	3
Unionville	1
Vernon	37
Voluntown	1

Town/Village	Total
Wallingford	16
*Waterbury	139
Waterford	7
Watertown	4
Wauregan	2
West Hartford	20
West Hartland	1
West Haven	68
West Simsbury	2
Westbrook	1
Westport	1
Wethersfield	5
Willington	1
Winchester	1
*Windham	36
Windsor	16
Windsor Locks	4
Winsted	23
Woodbury	1
Woodstock	3
	3
Total Towns/Villages (N=162, one unknown)	2,941

Data Source: Dataset provided by OEC

* HPLO town of interest identified by Office of Policy and Management for PA 23-205

Note: If a town is not listed there were no numbers reported (unless it was a town in a HPLO area)

Birth to Three – all CT

Table 4. Number of children served through Birth to Three by town, 2022-2023
(N=13,747)

Town	Total
Andover	9
Ansonia	102
Ashford	12
Avon	57
Barkhamsted	6
Beacon Falls	24
Berlin	54
Bethany	16

Town	Total
Bethel	84
Bethlehem	<6
Bloomfield	81
Bolton	17
Bozrah	7
Branford	55
*Bridgeport	833
Bridgewater	<6
Bristol	275
Brookfield	48
Brooklyn	33
Burlington	30
Canaan	<6
Canterbury	15
Canton	25
Chaplin	10
Cheshire	79
Chester	8
Clinton	39
Colchester	53
Colebrook	<6
Columbia	17
Cornwall	<6
Coventry	46
Cromwell	30
Danbury	386
Darien	75
Deep River	8
Derby	55
Durham	23
East Granby	16
East Haddam	21
East Hampton	38
East Hartford	273
East Haven	110
East Lyme	49
East Windsor	34
Eastford	6
Easton	23

Town	Total
Ellington	46
*Enfield	148
Essex	10
Fairfield	193
Farmington	48
Franklin	<6
Glastonbury	120
Goshen	<6
Granby	21
Greenwich	194
Griswold	40
Groton	144
Guilford	59
Haddam	17
Hamden	218
Hampton	6
*Hartford	723
Hartland	<6
Harwinton	22
Hebron	24
Kent	<6
Killingly	56
Killingworth	20
Lebanon	25
Ledyard	57
Lisbon	15
Litchfield	17
Lyme	<6
Madison	51
Manchester	258
*Mansfield	30
Marlborough	29
*Meriden	352
Middlebury	23
Middlefield	8
*Middletown	161
Milford	142
Monroe	73
Montville	61

Town	Total
Morris	<6
Naugatuck	137
*New Britain	437
New Canaan	50
New Fairfield	56
New Hartford	15
*New Haven	600
*New London	125
New Milford	74
Newington	100
Newtown	96
Norfolk	<6
North Branford	43
North Canaan	<6
North Haven	84
North Stonington	13
Norwalk	396
Norwich	169
Old Lyme	24
Old Saybrook	16
Orange	37
Oxford	44
Plainfield	51
Plainville	52
Plymouth	45
Pomfret	12
Portland	37
Preston	7
Prospect	23
Putnam	36
Redding	14
Ridgefield	76
Rocky Hill	65
Roxbury	<6
Salem	12
Salisbury	<6
Scotland	<6
Seymour	63
Sharon	<6

Town	Total
Shelton	161
Sherman	10
Simsbury	83
Somers	32
South Windsor	90
Southbury	38
Southington	135
Sprague	13
Stafford	42
*Stamford	574
Sterling	11
Stonington	21
Stratford	218
Suffield	53
Thomaston	25
Thompson	28
Tolland	47
Torrington	133
Trumbull	137
Union	<6
Vernon	119
Voluntown	9
Wallingford	151
Warren	<6
Washington	<6
*Waterbury	736
Waterford	50
Watertown	77
West Hartford	197
West Haven	223
Westbrook	15
Weston	47
Westport	88
Wethersfield	81
Willington	18
Wilton	57
Winchester	33
*Windham	137
Windsor	101

Town	Total
Windsor Locks	34
Wolcott	48
Woodbridge	24
Woodbury	28
Woodstock	21
Total Towns (N=169)	13,747

Data Source: Dataset provided by OEC

* HPLO town of interest identified by Office of Policy and Management for PA 23-205

Note: If a town is not listed there were no numbers reported (unless it was a town in a HPLO area)

Child Care – all CT

Table 5. Number of children served through Child Care by town/village, Sept 2023 – Dec 2023 (N=37,841)

Town/Village	Total
Amston	27
Andover	0
Ansonia	315
Ashford	6
Avon	486
Baltic	4
Barkhamsted	12
Beacon Falls	35
Berlin	299
Bethany	85
Bethel	101
Bethlehem	5
Bloomfield	273
Bolton	11
Bozrah	0
Branford	387
*Bridgeport	2,053
Bristol	410
Broad Brook	6
Brookfield	98
Brooklyn	15

Town/Village	Total
Burlington	98
Canaan	16
Canterbury	88
Canton	0
Centerbrook	0
Central Village	3
Chaplin	48
Cheshire	356
Chester	35
Clinton	125
Colchester	268
Collinsville	0
Columbia	155
Cos Cob	12
Coventry	117
Cromwell	252
Danbury	784
Danielson	49
Darien	235
Dayville	50
Deep River	0
Derby	11
Durham	80
East Berlin	0
East Canaan	6
East Granby	65
East Haddam	65
East Hampton	147
East Hartford	187
East Haven	263
East Lyme	3
East Windsor	27
Eastford	17
Easton	46
Ellington	246
*Enfield	832
Essex	22
Fairfield	839
Falls Village	23

Town/Village	Total
Farmington	277
Forestville	0
Franklin	17
Gales Ferry	63
Gaylordsville	3
Glastonbury	535
Granby	88
Greenwich	436
Griswold	3
Groton	287
Guilford	322
Haddam	0
Hamden	672
Hampton	14
Hanover	0
*Hartford	1,438**
Hartland	9
Harwinton	90
Hebron	107
Higganum	93
Huntington	54
Ivoryton	9
Jewett City	6
Kensington	39
Kent	121
Killingworth	8
Lakeville	32
Lebanon	16
Ledyard	128
Lisbon	2
Litchfield	111
Lyme	0
Madison	276
Manchester	275
*Mansfield	338
Marlborough	57
*Meriden	618
Middlebury	230
Middlefield	12

Town/Village	Total
*Middletown	529
Milford	614
Milldale	58
Monroe	288
Moodus	49
Moosup	20
Mystic	176
Naugatuck	332
*New Britain	369
New Canaan	147
New Fairfield	138
New Hartford	14
*New Haven	1,276
*New London	151
New Milford	185
New Preston	0
Newington	292
Newtown	71
Niantic	181
Norfolk	21
North Branford	79
North Canaan	32
North Franklin	61
North Grosvenordale	114
North Haven	277
North Stonington	71
Northfield	18
Northford	87
Norwalk	1,029
Norwich	123
Oakdale	50
Oakville	2
Old Greenwich	205
Old Lyme	9
Old Saybrook	259
Oneco	1
Orange	285
Oxford	58
Pawcatuck	91

Town/Village	Total
Pine Meadow	0
Plainfield	0
Plainville	210
Plantsville	121
Pleasant Valley	0
Plymouth	0
Pomfret	0
Pomfret Center	6
Portland	138
Preston	0
Prospect	46
Putnam	198
Quaker Hill	15
Redding	38
Ridgefield	224
Riverside	116
Rockville	0
Rocky Hill	110
Rogers	118
Salem	66
Salisbury	38
Sandy Hook	196
Scotland	31
Seymour	199
Sharon	0
Shelton	533
Sherman	0
Simsbury	233
Somers	27
South Glastonbury	0
South Windsor	321
Southbury	102
Southington	180
Southport	102
Stafford	49
Stafford Springs	15
*Stamford	1,972
Sterling	47
Stonington	44

Town/Village	Total
Stratford	386
Suffield	10
Taftville	2
Tariffville	0
Terryville	95
Thomaston	0
Thompson	67
Tolland	183
Torrington	330
Trumbull	208
Uncasville	95
Unionville	86
Vernon	26
Vernon Rockville	148
Voluntown	67
Wallingford	465
Warren	0
Washington Depot	0
*Waterbury	1,678
Waterford	111
Watertown	249
Weatogue	3
West Cornwall	0
West Hartford	838
West Haven	448
West Simsbury	12
West Suffield	4
Westbrook	5
Weston	59
Westport	517
Wethersfield	124
Willington	39
Wilton	313
Winchester	0
*Windham	137
Windsor	240**
Windsor Locks	154
Winsted	11
Wolcott	243

Town/Village	Total
Woodbridge	116
Woodbury	65
Woodstock	6
Woodstock Valley	0
Total Towns/Villages (N=220)	37,841

Data Source: Dataset created by the United Way of CT, provided by OEC

* HPLO town of interest identified by Office of Policy and Management for PA 23-205

**supplemented by two early childhood care sites (Hartford, n=12 children enrolled; Windsor, n=16 children enrolled) provided by an additional data source: a list of number of children enrolled at ECE sites at CT public schools

Note: If a town is not listed there were no numbers reported (unless it was a town in a HPLO area)

Family Resource Centers – all CT

Table 6. Number of households served through a Family Resource Center by town, 2022-2023 (N=9126)

Town	Total
Bloomfield	67
Branford	223
*Bridgeport	209
Bristol	1,617
Danbury	205
East Hartford	113
East Haven	29
East Windsor	131
*Enfield	361
Groton	53
Hamden	106
*Hartford	423
Hebron	168
Killingly	55
Manchester	29
*Mansfield	0
*Meriden	386
*Middletown	292
Milford	555
*New Britain	19
*New Haven	505

Town	Total
*New London	127
North Branford	322
Norwalk	340
Norwich	72
Plainfield	246
Plainville	194
Plymouth	149
Putnam	266
Stafford	41
*Stamford	28
Stratford	233
Tolland	605
Torrington	305
Vernon	4
*Waterbury	44
West Hartford	87
West Haven	198
Winsted	126
*Windham	80
Windsor	113
Total Towns (N=42)	9126

Data Source: provided by CT State Department of Education

* HPLO town of interest identified by Office of Policy and Management for PA 23-205

Note: If a town is not listed there were no numbers reported (unless it was a town in a HPLO area)

References

- ⁱ Donoghue, E. A. (2017). Quality early education and child care from birth to kindergarten. *Pediatrics*, 140(2). <https://doi.org/10.1542/peds.2017-1488>
- ⁱⁱ Bustamante, A. S., Dearing, E., Zachrisson, H. D., & Vandell, D. L. (2022). Adult outcomes of sustained high-quality early child care and education: Do they vary by family income? *Child Development*, 93(2), 502–523. <https://doi.org/10.1111/cdev.13696>
- ⁱⁱⁱ CT Open Data Portal. (n.d.). *Census tracts identified for PA 23-205*. <https://data.ct.gov/stories/s/Census-Tracts-Identified-for-PA-23-205/2bp4-qckf/>
- ^{iv} CT House Bill No. 6942, Public Act No. 23-205. (2023). <https://www.cga.ct.gov/2023/act/pa/pdf/2023PA-00205-R00HB-06942-PA.pdf>
- ^v Geocode Addresses. (Geocoding)—ArcGIS Pro | Documentation, ArcGIS Pro. (n.d.). <https://pro.arcgis.com/en/pro-app/latest/tool-reference/geocoding/geocode-addresses.htm>
- ^{vi} Nominatim. (n.d.). *Open-source geocoding with OpenStreetMap data*. <https://nominatim.org/>
- ^{vii} U.S. Census Bureau. (2023). *2023 TIGER/Line® Shapefiles: Census Tracts*. <https://www.census.gov/cgi-bin/geo/shapefiles/index.php?year=2023&layergroup=Census+Tracts>
- ^{viii} NPIdb. (n.d.). *Federally Qualified Health Center (FQHC) - 261QF0400X – Connecticut*. https://npidb.org/organizations/ambulatory_health_care/federally-qualified-health-center-fqhc_261qf0400x/ct/?page=1
- ^{ix} FQHC Associates. (n.d.). *What is a Federally Qualified Health Center (FQHC)?* <https://www.fqhc.org/what-is-an-fqhc/>
- ^x Connecticut Department of Education, *Family Resource Centers – Overview*. <https://portal.ct.gov/SDE/FRC/Family-Resource-Centers>
- ^{xi} IPUMS NHGIS, University of Minnesota, www.nhgis.org
- ^{xii} Connecticut Birth to Three. (n.d.). *Is my child eligible?* <https://www.birth23.org/families/is-my-child-eligible/>
- ^{xiii} Penchansky, R., & Thomas, J. W. (1981). The Concept of Access: Definition and Relationship to Consumer Satisfaction. *Medical Care*, 19(2), 127–140. <https://doi.org/10.1097/00005650-198102000-00001>

^{xiv} Saurman, E. (2016). Improving access: Modifying Penchansky and Thomas's Theory of Access. *Journal of Health Services Research & Policy*, 21(1), 36–39.

<https://doi.org/10.1177/1355819615600001>

^{xv} Access Health CT. (n.d.). *Eligibility for Medicaid (Husky Health) & Chip*.

https://help.accesshealthct.com/en_US/eligibility-for-medicaid-husky-health-chip-