



Early Head Start

Community Assessment

July 2026

Executive Summary

The United Way of Greater New Haven's **Early Head Start (EHS)** program provides child-development and family-centered services for income-eligible families in Hamden, New Haven, and West Haven. This two-generational program focuses on the well-being of the child, as well as building a relationship with the family. Children benefit from learning in a nurturing, year-round, high-quality program, while parents are connected to services that enable them to pursue goals, such as going back to school and working.

The United Way works with four partners to deliver EHS:

- **All Our Kin** supports a network of EHS family child care programs (FCC) in New Haven, West Haven, and Hamden.
- Student Parenting and Family Services offers EHS primarily for teen parents at the **Elizabeth Celotto Child Care Center** at Wilbur Cross High School.
- **Morning Glory Infant Toddler Center's** EHS program provides high-quality, year-round care, with a strong focus on family support and family engagement.
- **West Haven Child Development Center's** EHS program provides family-centered services designed to promote child development and family self-sufficiency.

Starting in winter 2026, the United Way of Greater New Haven (UWGNH) worked with Cross Sector Consulting to collect and compile data for a comprehensive community assessment. The assessment process included: (1) compilation of existing data from federal, state and local sources; (2) surveys of current Head Start parents and parents in the community; (3) focus groups with EHS directors and Family Services staff; and (4) planning meetings with the EHS Director, United Way Education Team, and EHS Policy Council to review results and develop the plan.

Key findings from the community assessment include the following:

- The **challenges facing EHS families are primarily economic**, reflecting the high cost of living in the region. The family survey and focus group with Family Services staff both indicate that many families are struggling economically, particularly with the high cost of housing. EHS is working to address families' basic needs, but addressing housing is much more difficult.
- Many parents are **stressed** – given affordability challenges and the demands of parenting young children.
- The number of **children with special needs has been increasing**. This increase is placing greater stress on EHS programs, B23, school districts, communities, and families.
- **Staffing challenges** and **state requirements** are critical challenges for EHS programs. The New Haven Early Childhood Council has highlighted these system-level challenges; its efforts can benefit EHS and all ECE providers in the region.
- **Increased competition** for ECE slots is affecting EHS enrollment.

The EHS teams identified the following **recommendations and responses**:

- **Strengthen and promote community partnerships.** The Policy Council stressed the importance of employment and career services. The UWGNH and EHS partners can promote their existing community partnerships with education and workforce agencies – including the American Job Center (across the hall from the UWGNH) and education / training opportunities at CT State Gateway campus (including [SNAP Employment & Training](#)). The UWGNH can also assess current MOUs with key community partners, and identify opportunities to strengthen these partnerships. Finally, the United Way often has one-time or time-limited resources (like funding for security deposits) that can benefit EHS families, and can publicize these as they arise.
- **Improve food security.** The West Haven program partners with a local supermarket and farm for weekly feed deliveries to the program. The UWGNH has also applied for a federal nutrition and healthy eating grant, and can explore partnerships with local non-profits like [CitySeed](#) that are supporting access to health food and the growth of early-stage food enterprises via a [Food Business Incubator](#) program.
- **Expand family activities.** EHS programs can expand the number of family activities that include opportunities for families to connect with one another and build their family-family support networks.
- **Streamline and improve EHS forms and materials.** The UWGNH is piloting a new online application portal linked to its data system to reduce the need for families to provide the same information and documents multiple times. The UWGNH can also revise its Family Assessment to make it easier to complete and more relevant to family needs and goals. These pilot efforts can include a process for soliciting feedback from EHS staff and families in order to create better, more family-friendly forms.
- **Address transportation challenges.** The program can pilot the use of bus passes as a way to improve attendance, and can engage the CT Head Start Association to discuss statewide options for improving transportation options for EHS and HS families (e.g., reduced-cost ride-share contracts).
- **Support EHS marketing and recruitment efforts.** The UWGNH Marketing Department will offer EHS partners support in marketing their programs (i.e., design materials, technical assistance), and the UWGNH is working to revitalize its DCF partnership to recruit more foster families – including presentations to all DCF in the region.

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1. Introduction

The United Way of Greater New Haven's **Early Head Start (EHS)** program provides child-development and family-centered services for income-eligible families in Hamden, New Haven, and West Haven. This two-generational program focuses on the well-being of the child and building strong relationships with the family. Children benefit from learning in a nurturing, year-round, high-quality program, while parents are connected to services that enable them to pursue goals, such as going back to school and working.

The United Way works with four partners to deliver EHS:

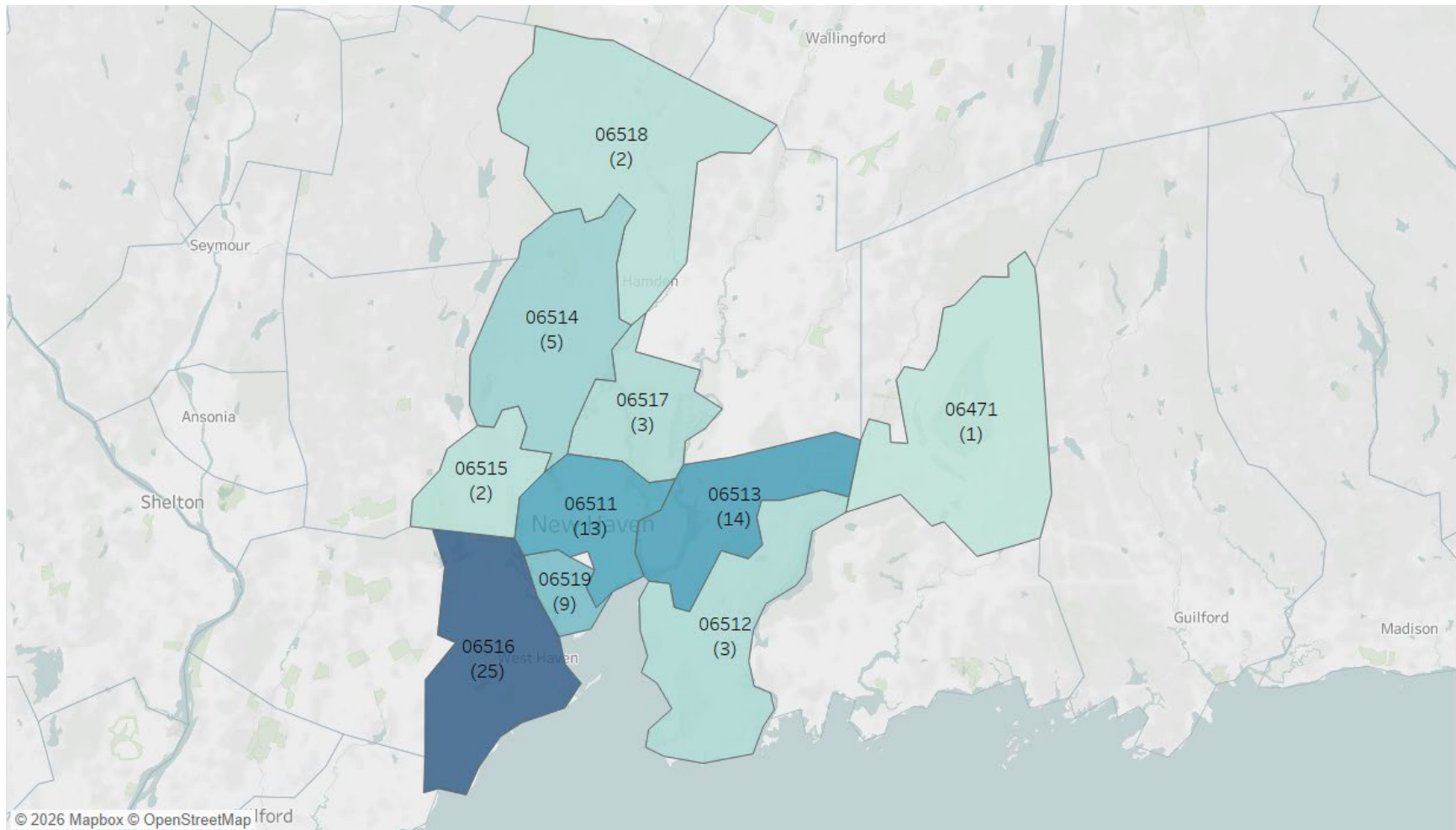
- **All Our Kin** supports a network of EHS family child care programs (FCC) in New Haven, West Haven, and Hamden. These programs are neighborhood-based, culturally diverse, and offer flexible, full-day, full-year programming.
- Student Parenting and Family Services offers EHS at the **Elizabeth Celotto Child Care Center**. The program, located at Wilbur Cross High School in New Haven, primarily supports teen parents – allowing young parents to finish high school, transition to college, or secure employment.
- **Morning Glory Infant Toddler Center's** EHS program provides high-quality, year-round care, with a strong focus on family support and family engagement.
- **West Haven Child Development Center's** EHS program provides family-centered services designed to promote the development of the children, and to enable their parents to fulfill their roles as parents and to move toward self-sufficiency.

Looking at recent program years (2022-23 through 2024-25), Early Head Start served the following students and their families:

- Approximately 150 children per year, with approximately 50% of funded slots for center-based care and 50% for family child care.
- 90% of children were under age 3.
- 37% of students were Hispanic / Latino and 36% were non-Hispanic Black / African-American.
- 48% of families were SNAP recipients (per revised HS eligibility criteria), and 35% of families had incomes below the federal poverty line.
- 82% were single-parent families.
- 29% of parents had not completed high school.
- 30% of students spoke a language other than English.
- 22% of students were receiving Birth To Three (B23) services to address developmental delays.

Figure 1 (on next page) shows the location of Early Head Start children for the 2025-26 school year. Most families live in neighborhoods with higher poverty rates (see Figure 3 for poverty rates by census tract).

Figure 1: Number of Early Head Start Children by Zip Code, 2025-26



2. Community Assessment Process

Starting in winter 2026, the United Way worked with Cross Sector Consulting to collect and compile data for a comprehensive community assessment. The assessment process included: (1) compilation of existing data from federal, state and local sources; (2) surveys of current Head Start parents and parents in the community; (3) focus groups with EHS directors and Family Services staff; and (4) planning meetings with the EHS Director, United Way Education Team, and EHS Policy Council to review results and develop the plan.

Key **data categories** included:

- Overall demographic data – including race / ethnicity, income, and family structure.
- Health and safety data – including access to healthy food.
- Housing and transportation data – including homelessness and affordable housing.
- Early childhood education availability and affordability.
- Education attendance and performance data.
- Estimates of the number of Early Head Start eligible families.
- Resources for families with young children.

The team identified different **data sources** and reports for the assessment:

- State Sources: Birth To Three (B23), Connecticut Department of Children and Families (DCF), Connecticut State Department of Education (SDE), Connecticut Department of Public Health (DPH), Connecticut Department of Social Services (DSS), Connecticut Office of Early Childhood (OEC), the Connecticut Department of Labor (DOL), and the Governor's Blue Ribbon Panel on Child Care, among others.
- Federal Sources: Census and the American Community Survey (ACS), Centers for Disease Control (CDC), and the Department of Agriculture (USDA), among others.
- Other Databases and Reports: Partnership for Strong Communities Housing Report, Data Haven Community Profiles, and United Way of Connecticut (UWCT) ALICE Reports.

The **assessment process** included:

- Compilation of existing data from multiple sources (see above).
- Design, administration and analysis of a survey of current Early Head Start parents and guardians, and a survey of New Haven parents / guardians in the community (in collaboration with the New Haven Early Childhood Collaborative).
- Focus groups with EHS directors and EHS Family Services staff.
- Planning meetings with the EHS Director, United Way Education Team, and EHS Policy Council to review results and develop the plan.
- Feedback and edits to the draft community assessment report from Early Head Start staff.

3. Key Data, Needs and Resources

a. Data

The Early Head Start service area of New Haven, Hamden, and West Haven is a diverse urban region in South Central Connecticut anchored by New Haven, the state's second-largest city. Together the three municipalities are home to approximately 13,300 children under age five. New Haven is a majority-minority city — 61% of residents identify as Black or Hispanic — and is home to Yale University and Yale New Haven Hospital, two of the state's largest employers.

Despite this institutional wealth, New Haven has the lowest median household income of the three towns at \$56,851, compared with \$74,382 in West Haven and \$98,306 in Hamden. Income disparities are even starker by race: median household income for Black households in New Haven is \$48,446 and for Hispanic households \$44,996, compared with the statewide median household income of over \$95,000. Sixty percent (60%) of New Haven households are struggling to make ends meet, and 76% of New Haven public school students qualify for free or reduced-price meals (see below for details).

Demographic Data. Table 1 shows the region's population by race / ethnicity. New Haven and the EHS region are much more diverse than the state. More than half of the region's residents are Black (27%) or Hispanic (25%), compared with 27% for Connecticut. More recent ACS estimates show the region becoming more diverse (e.g., 67% people of color in New Haven in 2024).

Table 1: Race and Ethnicity, 2020 Census

	Hamden	New Haven	West Haven	Region	CT
Non-Hispanic White	32,384	37,010	25,960	95,354	2,279,232
Non-Hispanic Black	14,834	40,788	11,485	67,107	360,937
Hispanic of any race	7,836	41,068	13,177	62,081	623,293
Non-Hispanic Asian	3,447	9,044	2,609	15,100	170,459
Non-Hispanic Two or More Races	2,163	4,840	1,876	8,879	137,569
Non-Hispanic Other Races	505	1,273	477	2,255	34,454
Total	61,169	134,023	55,584	250,776	3,605,944

Table 2 (on next page) shows median household income for different populations. The median household income for the region is well below the state income, with substantial disparities within the region for single-parent households and for Black / Latino households. The median income for single-parent households is less than half the state average. The median household income for New Haven households is less than \$57,000, compared with \$74,000 in West Haven and \$98,000 in Hamden.

Table 2: Median Household Income, 2020-2024 ACS

	Hamden	New Haven	West Haven	Region	CT
All households	\$98,306	\$56,851	\$74,382	\$70,415	\$95,781
Black / African American households	\$85,295	\$48,446	\$64,095	\$59,550	\$65,521
Hispanic / Latino households	\$76,705	\$44,996	\$65,082	\$53,097	\$63,457
Female householder, no spouse present with children	\$73,432	\$35,840	\$46,482	\$47,033	\$44,406
Male householder, no spouse present with children	\$53,125	\$48,914	\$41,250	\$47,650	\$64,519

The United Way has developed an additional measure for **ALICE families** – defined as Asset Limited, Income Constrained, Employed. These are households that earn more than the Federal Poverty Level, but less than the basic costs of living for the region (i.e., the ALICE Threshold). Households below the ALICE Threshold cannot afford the basics in the communities where they live.

Overall, **52% of households** in the region had incomes below the ALICE Threshold of Financial Survival in 2023. The percent of ALICE households ranged from 38% in Hamden to 60% by in New Haven. The percentage of children below the ALICE Threshold appears even higher when looking at Census-defined geographic areas in greater New Haven (see [ALICE Children](#) map for details).

In addition, large numbers of individuals and families receive income-based public benefits. In 2025, approximately 58,000 people in the EHS region received SNAP benefits and nearly 4,000 people received Temporary Family Assistance (TFA), according to the [DSS dashboard](#).

Table 3 shows additional demographic data for households and families. More than half of household renters in the region are considered cost-burdened – spending more than 30% of their income on rent. Nearly 30% of households speak a language other than English at home, and more than 2 in 5 families are single-parent families. Over 900 families have grandparents raising their grandchildren.

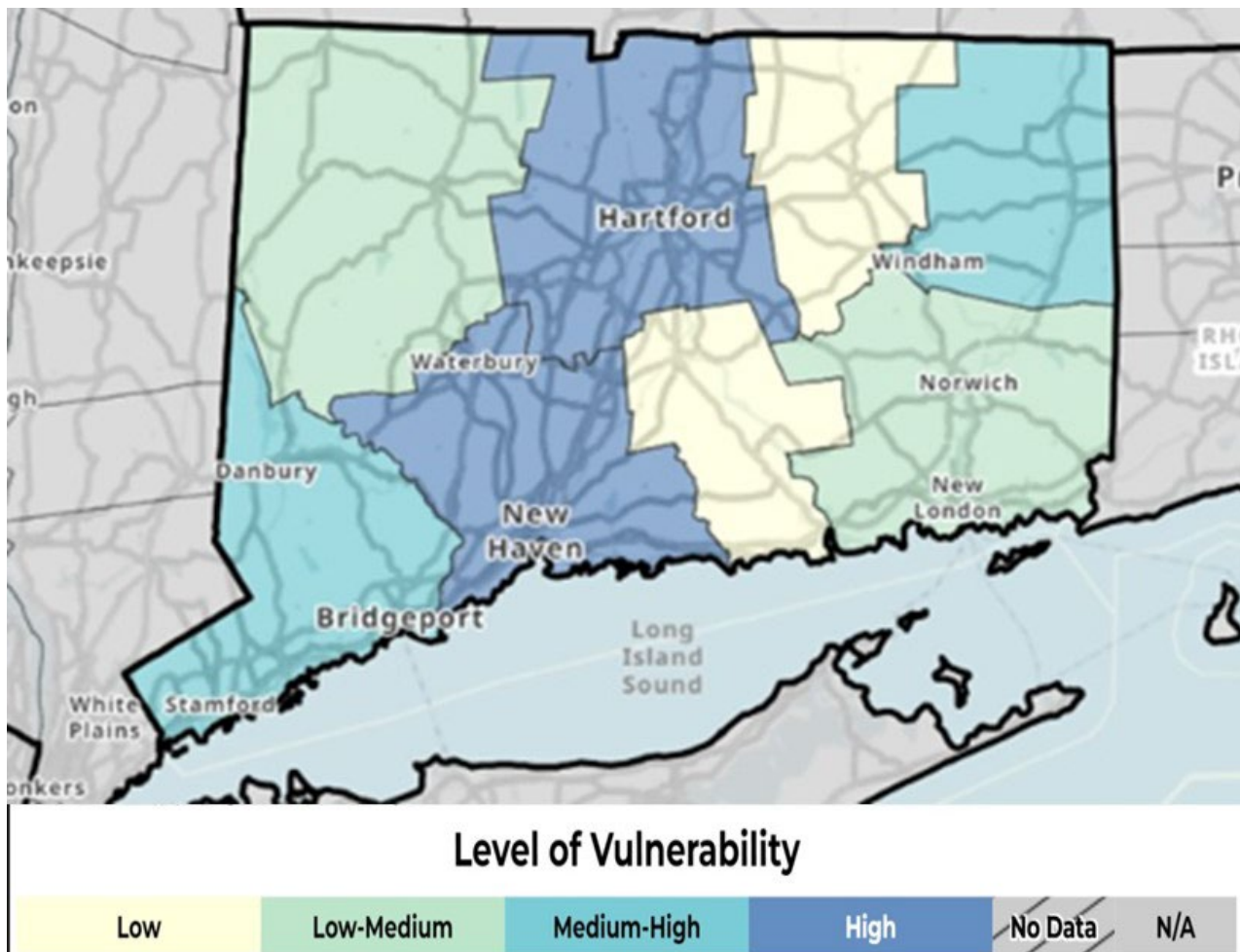
Table 3: Households and Families, 2020-2024 ACS and State Sources

Household Demographics	Hamden	New Haven	West Haven	Region	CT
% of households that spend 30%+ of total income on rent	50.9%	56.6%	53.4%	55.2%	52.6%
ALICE Households (UWCT 2023)	38%	60%	48%	52%	40%
Unemployment rate (DOL 12/25)	3.9%	4.4%	4.5%	4.3%	4.1%
% of children living in poverty	10.4%	31.2%	16.7%	23.7%	13.0%
% of K-12 students eligible for free or reduced-price meals (SDE 2025-26)	48.3%	76.3%	57.5%	67.3%	44.2%
% of households that speak a language other than English	18.3%	33.1%	32.1%	29.2%	23.4%

Household Demographics	Hamden	New Haven	West Haven	Region	CT
% of single-parent families	27.6%	51.8%	37.7%	42.2%	27.4%
% of single-parent families with own children under age 18	33%	57%	39%	47%	32%
# grandparents raising grandchildren	161	584	185	930	5,481

The **Social Vulnerability Index (SVI)** was developed by the federal government to assess “the degree to which a community exhibits certain social conditions, including high poverty, low percentage of vehicle access, or crowded households, may affect that community’s ability to prevent human suffering and financial loss in the event of disaster.” Figure 2 shows the [SVI results](#) using the 2020 Census data – with great disparities by county from low to high vulnerability.¹

Figure 2: Social Vulnerability Index



Looking at the EHS region, Figure 3 (on next page) shows poverty rates by census tract. High rates of poverty (20%+) are concentrated in New Haven, with rates higher than 35% in 6 census tracts.

¹ See <https://www.atsdr.cdc.gov/placeandhealth/svi/index.html> for information on how the SVI is calculated.

Figure 3: Poverty Rate by Census Tract, ACS 2020-2024 Estimates

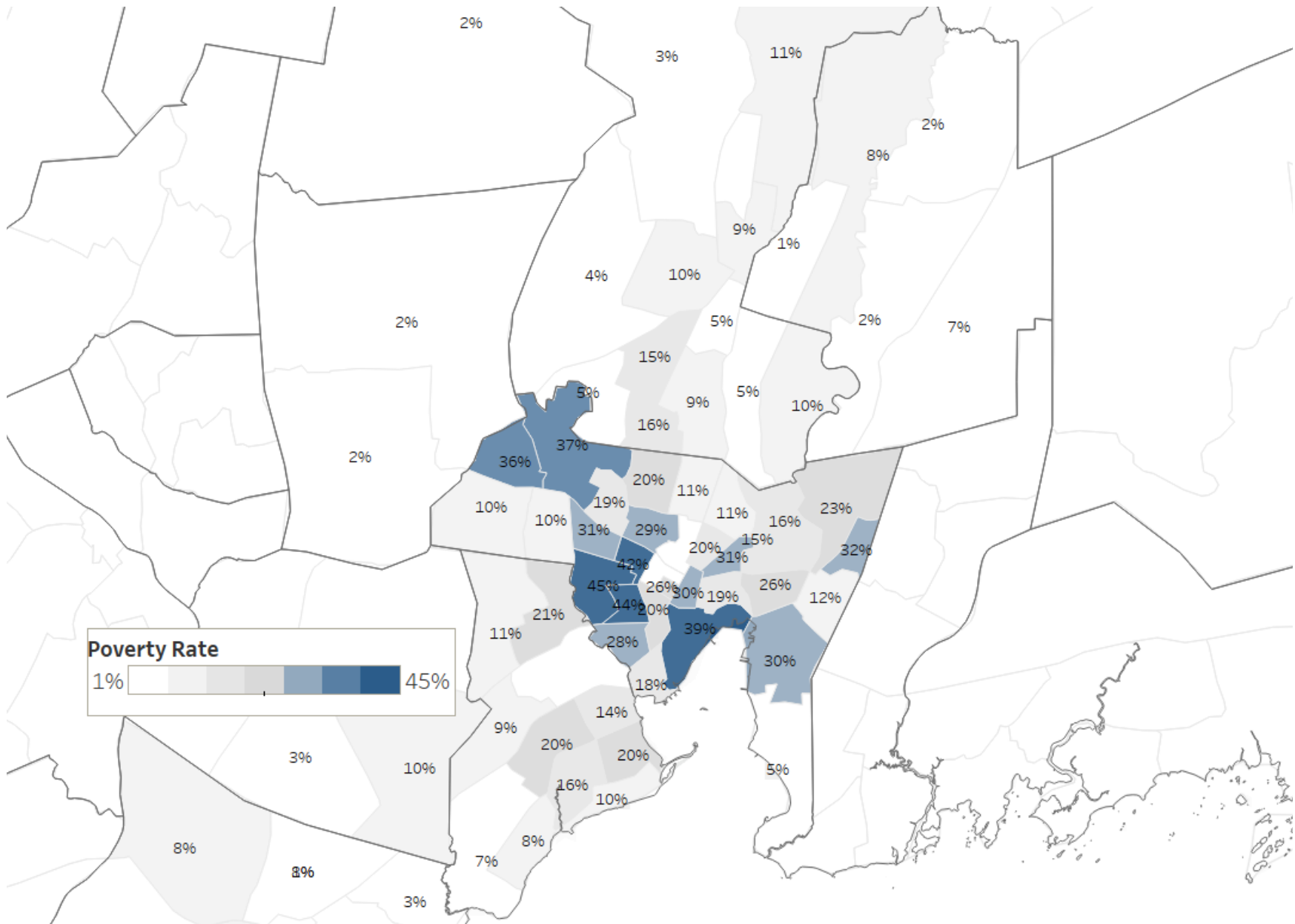


Table 4 shows demographic data for young children. The number of births in the region has declined by 23% since 2013, reflecting state and national trends. The percentage of kindergartners with preschool experience has rebounded since the pandemic, although. New Haven kindergarten students are still below pre-COVID levels in preschool experience. The number of young children determined eligible for Birth To Three (for developmental delays) has increased by approximately 54% since 2016-17.

Table 4: Young Children

Child Demographics	Hamden	New Haven	West Haven	Region	CT	Source
# births	518	1,438	499	2,455	34,566	DPH, 2023
# of young children (under age 5)	2,593	7,703	3,028	13,324	181,691	ACS 2020-24
# of young children determined eligible for Birth To Three (B23)	111	377	123	611	7,470	OEC 2023-24
# preschool children with disabilities with an IEP or ISP	74	184	140	398	NA	OEC 10/2024
% of kindergartners with preschool experience	77%	63%	74%	68%	79%	CSDE, 2024-25

Health and Safety Data. Table 5 shows birth outcomes for 2023. There are substantial disparities in low birthweight by race/ethnicity by town – for Black (15.9%) and Hispanic (11.1%) babies in Hamden, and for Black (14.5%) babies in New Haven, compared with 9.9% for the region as a whole. Teen birth rates have been declining nationally and in Connecticut over the past 10+ years, although New Haven’s teen birth rate is still double the state rate.

Table 5: Birth Outcomes

Birth Data	Hamden	New Haven	West Haven	Region	CT	Source
% of expectant mothers who did not receive pre-natal care in 1 st trimester	18.5%	22.9%	22.2%	21.8%	16.8%	DPH 2023
Teen births per 1,000 teens	4.2	14.7	6.8	10.2	7.4	DPH 2018-22
% pre-term births (<37 weeks)	9.9%	10.6%	10.2%	10.4%	9.3%	DPH 2023
% low birthweight babies	9.1%	10.2%	9.8%	9.9%	7.9%	DPH 2023

Table 6 shows available data on child health, development and safety. The National Survey of Children’s Health (NSCH) found that more than 1 in 5 Connecticut children (ages 5-11) were obese in 2021, reflecting national trends. The vast majority of kindergartners were fully immunized; only 3 of 25 schools with data had immunization rates below 95% in 2024-25.

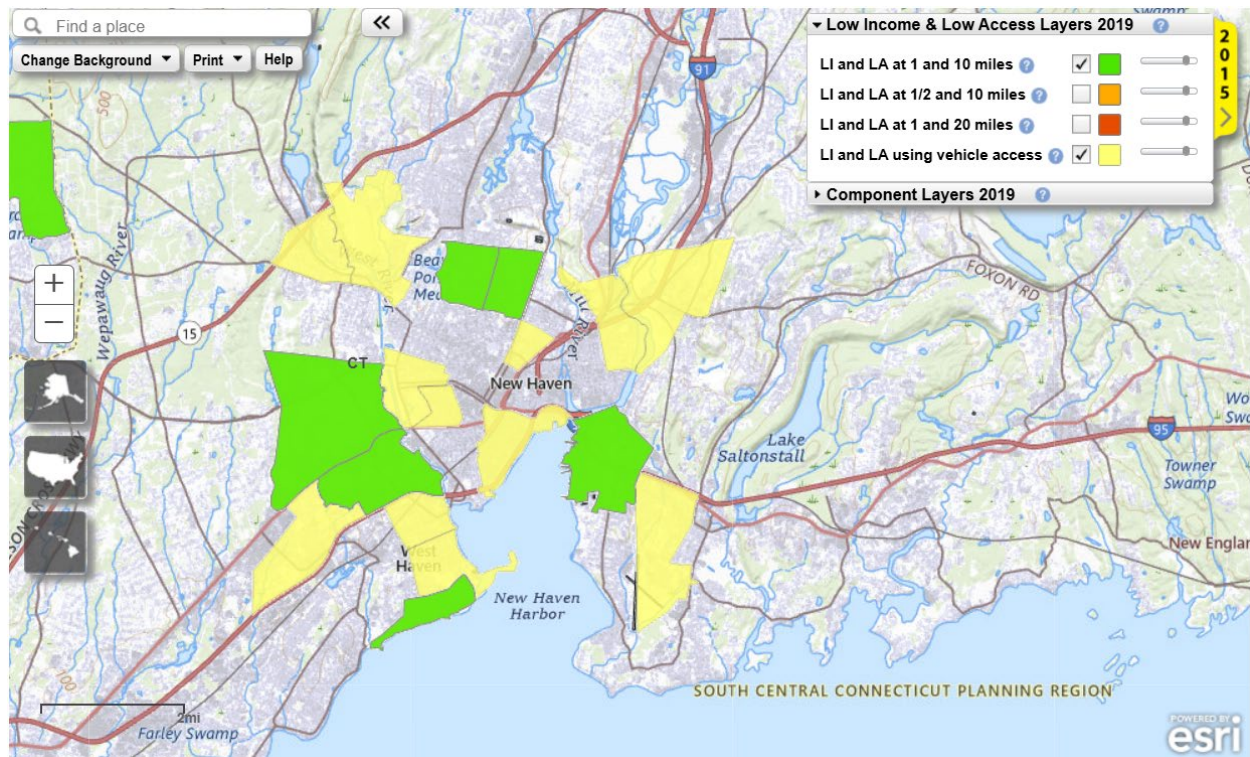
Table 6: Health, Development and Safety

Measure	Hamden	New Haven	West Haven	Region	CT	Source
Estimated % of children ages 5-11 who are obese	NA	NA	NA	NA	23.5%	2021-22 NSCH
# children B23 with Individual Service Plans (for developmental delays)	232	652	225	1,109	NA	OEC 2023-24
% of kindergartners fully immunized	~96%	~97%	~97%	~97%	~97%	DPH, 2024-25

Measure	Hamden	New Haven	West Haven	Region	CT	Source
% of K-12 students with disabilities	19.1%	16.8%	18.2%	17.5%	17.8%	SDE 2024-25
# family violence incidents	239	1668	267	2,174	15,791	DESSP, 2022
# children with a substantiated child abuse / neglect allegation	NA	NA	NA	1,085	5,983	2020-21 DCF

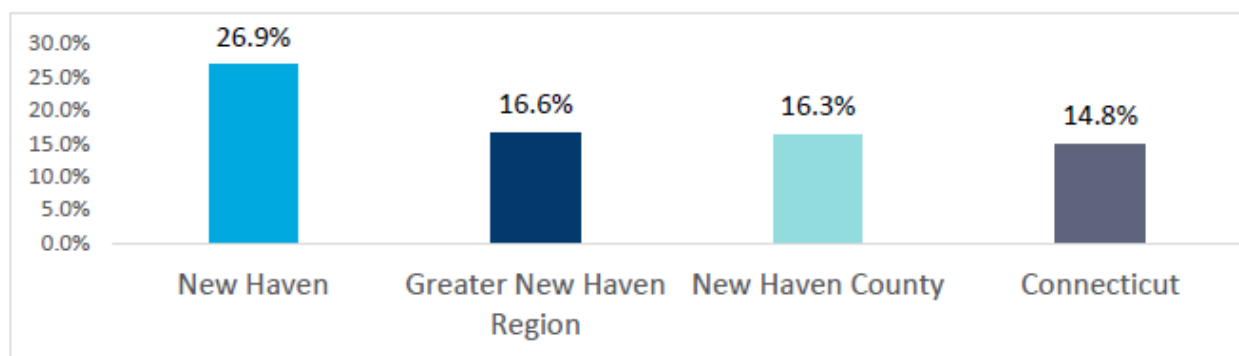
Figure 4 shows the location of **food deserts** in the region (in green), based on 2019 data from the [U.S. Department of Agriculture](#). Food deserts are low-income census tracts where a significant number or share of residents is more than 1 mile (urban) or 10 miles (rural) from the nearest supermarket. Food deserts are located primarily in urban and rural areas of the state. Figure 4 also shows the connection with vehicle access – census tracts in which more than 100 households have no access to a vehicle and are more than 1/2 mile from the nearest supermarket, or a significant number or share of residents are more than 20 miles from the nearest supermarket (in yellow). As can be seen, many neighborhoods in the region have limited access to supermarkets.

Figure 4: Food Deserts and Vehicle Access, USDA 2019



Yale New Haven Hospital's 2025 [Community Health Needs Assessment](#) found higher rates of food insecurity among adults in New Haven and adults in the region compared with Connecticut (see Exhibit 8 excerpt on next page).

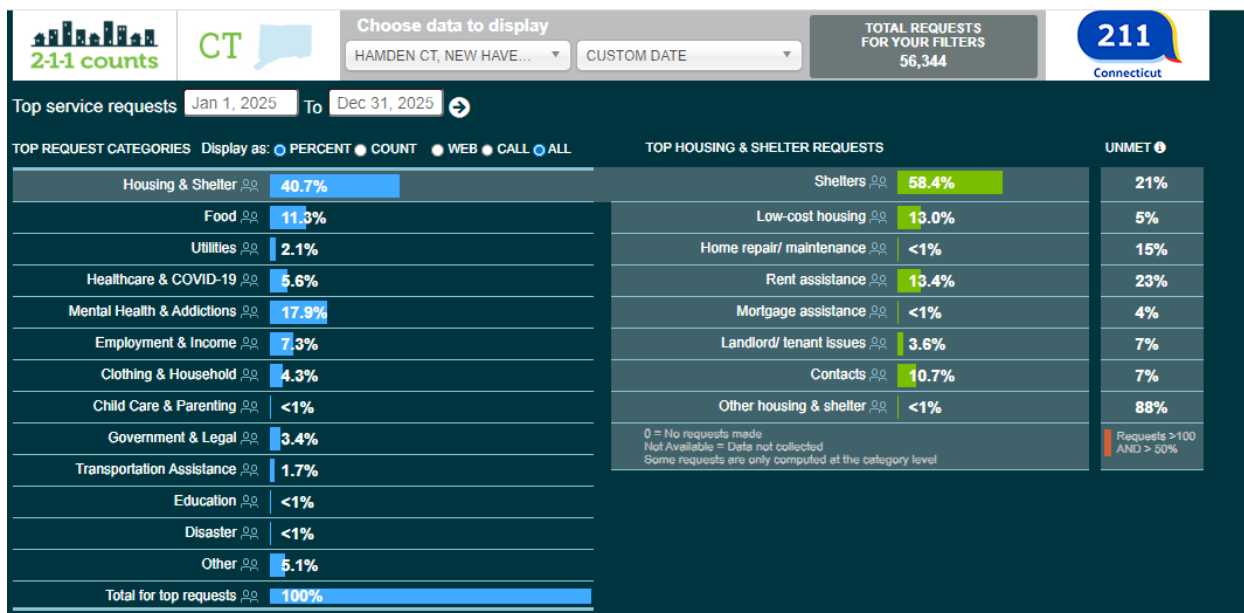
EXHIBIT 8: RATES OF FOOD INSECURITY AMONG ADULTS



Source: CDC BRFSS PLACES 2022. Table 32

Housing and Transportation. The United Way of Connecticut's [211 Counts](#) shows the number of 211 calls by topic (top requests), date, and geography (state, county, town, zip code). Figure 5 shows the 211 calls for 2025. **Housing requests** were the top request category by far, with more than 40% of all calls for housing & shelter services.

Figure 5: 211 Calls for EHS Region in 2025



Using a definition of homelessness² that includes families who are doubled-up, the State Department of Education (SDE) counted **5,137 homeless students in 2024-25**, an increase from an average of 4,600 in the pre-COVID years (2016-17 through 2019-20). In the EHS region, nearly 400 students in grades PK-5 were homeless in 2024-25, nearly 3% of all students (see Table 7 on next page).

² See <https://nche.ed.gov/mckinney-vento-definition/> for the homelessness definition in the McKinney-Vento federal legislation.

Table 7: Homeless Students in Grades Pre-K-5, CSDE 2024-25

Town	# Homeless PK-5	# Enrolled PK-5	Percent Homeless
Hamden	21	2,458	0.9%
New Haven	341	8,534	4.0%
West Haven	23	2,662	0.9%
Region	385	13,654	2.8%

The Partnership for Strong Communities 2025 State of Housing report highlighted the housing affordability crisis in the region and state:

- The hourly wage in New Haven to affordably rent a 2-bedroom apartment is **\$35.70/hour**.
- 5,952 new housing units were built in CT in 2024, compared with 8,600 annual average in the 1990s and early 2000s. Connecticut needs 4 times as many new homes to keep pace with population growth.
- Homelessness (via the [Point In Time Count](#)) has risen 43% since 2021, and 9.5% from 2024 to 2025. “In their 2022 book, Homelessness is a Housing Problem, Colburn and Aldern demonstrate that population-level homelessness is uncorrelated with common explanations such as serious mental illness, poverty, welfare policy, or climate. Instead, homelessness is best explained by structural factors in the housing market, specifically **high rents and low vacancy rates**, which are directly impacted by an area’s new housing construction.”³
- Only 1 in 4 eligible households in Connecticut receive federal housing vouchers.
- Housing stability is [closely linked](#) to outcomes in **health, economic security, mobility, child development, and educational attainment**.

Table 8 shows mobility among households living in poverty. Overall, **1 in 5 poor households moved in the past year**, with similar rates across the region. Similarly, nearly 1 in 5 all households have no vehicle access, although New Haven has the highest rate (26.9%).

Table 8: Mobility and Vehicle Access, 2020-24 ACS

Percent of households that...	Hamden	New Haven	West Haven	Region	CT
Moved in last year (in poverty)	19.3%	20.3%	19.3%	20.0%	16.2%
Have no vehicle access (all)	8.0%	26.9%	10.9%	19.0%	8.8%

Early Childhood Education (ECE). In 2023, the [Governor’s Blue Ribbon Panel on Child Care](#) conducted a comprehensive analysis of the state’s child care system and produced “5-year strategic plan for a child care system that works for families, providers, and Connecticut’s economy.” Key findings from the report include:

- The earliest years of a child’s life are the single most critical window for optimizing human development. The fundamental architecture of the brain is being “wired” during this time in

³ 2025 State of Housing in Connecticut, Partnership for Strong Communities, p. 35.

ways that will serve to either support – or hinder – children’s long-term success in school and life. This means the quality of care our young children receive really matters.

- At precisely the time young children most require stable, responsive relationships with early childhood educators, America’s child care system provides just the opposite: **a revolving door of staff so poorly compensated that as many as 40% leave the field each year.**
- Child care is a significant productivity and workforce issue for businesses, in part reflecting the gender gap in workforce participation for parents of young children. It is estimated that Connecticut loses \$1.5 billion per year due to the lack of infant and toddler care alone.
- **Families struggle to access and afford child care with disproportionate impact on under-resourced families;** providers scrape by on the narrowest of margins.
- Most families need some form of child care. Approximately 73% of young children have all available parents participating in the workforce.
- Assuming about half of parents want formal care for their infants and toddlers, and those parents already have access to Connecticut’s paid family leave, Connecticut needs approximately 17,000 more slots. Low-income families are particularly impacted by this supply shortage as relatively few infant and toddler slots are subsidized.
- Connecticut currently has a large gender gap between the employment rate of mothers with young children (74%) and the employment rate of men, ages 25-54 (89%). This is driven, in part, by the lack of accessible, affordable child care. Substantially reducing or closing this gap would yield an additional 11,000-20,000 more women in the workforce.
- Connecticut lost only about 1% of its ECE capacity during the pandemic due to one-time federal COVID relief dollars and state funds. But capacity is different than enrollment, and **hundreds of classrooms across the state cannot open or add enrollment due to chronic workforce shortages.**

The **cost of care** is a great challenge for many families. The [average annual cost](#) for a full-time pre-school center is over \$15,000. Data from the [United Way of Connecticut](#) identified the following data for the region:

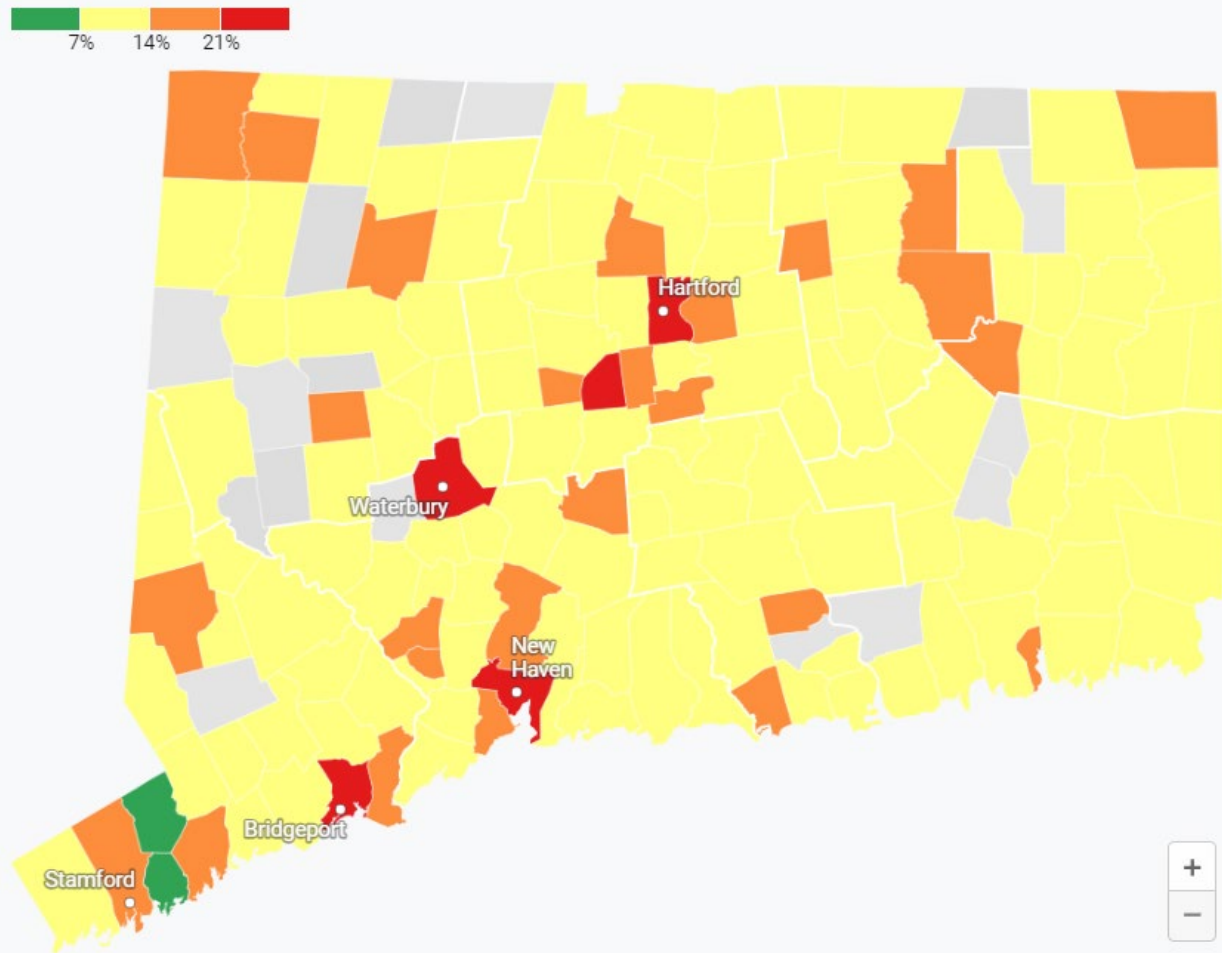
- Approximately 2,100 infant/toddler slots and 4,100 pre-k slots in 2025.
- Approximately 80% enrollment rate in 2025.

A recent [report by Trinity College](#) shows the percent of families paying more than 7% of the town’s median family income on infant/toddler child care by town (Figure 8 on next page). In New Haven, more than 20% of the median family income would be needed to pay for full-time infant/toddler care.

Figure 6

Percent of Average Family Income to Afford Market Rate Infant-Toddler Care in Connecticut Towns

All but two towns are above the 7% recommended income threshold



Education. Entering kindergarten students are assessed by teachers on the [Kindergarten Entrance Inventory \(KEI\)](#) that focuses on child development across 6 domains. Figures 7-9 shows trends in the percent of kindergarteners needing substantial for literacy, language, and numeracy. Depending on the domain and school district, 20% to 50% of entering kindergarteners needed substantial support on these domains in 2024-25, well above state averages. In West Haven, the percent of kindergartners needing substantial support has been increasing in recent years, compared with generally stable percentages in New Haven and Hamden.

Figure 7: Kindergarten Entrance Inventory: Percent Requiring Substantial Support in Language Domain

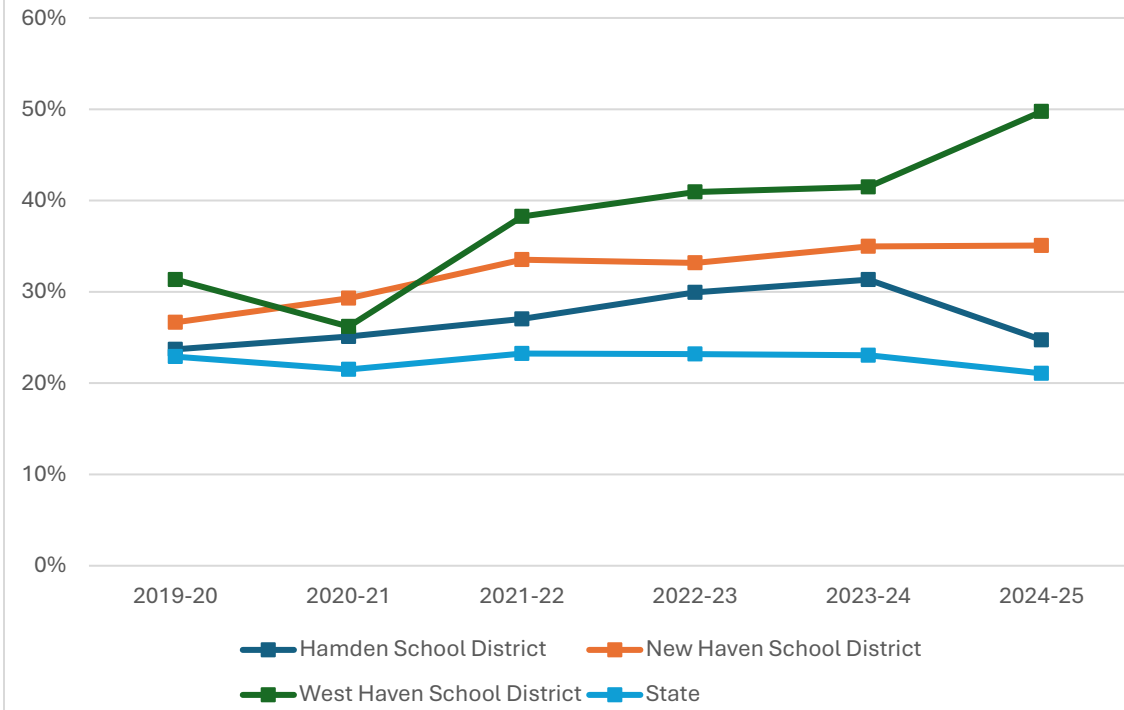
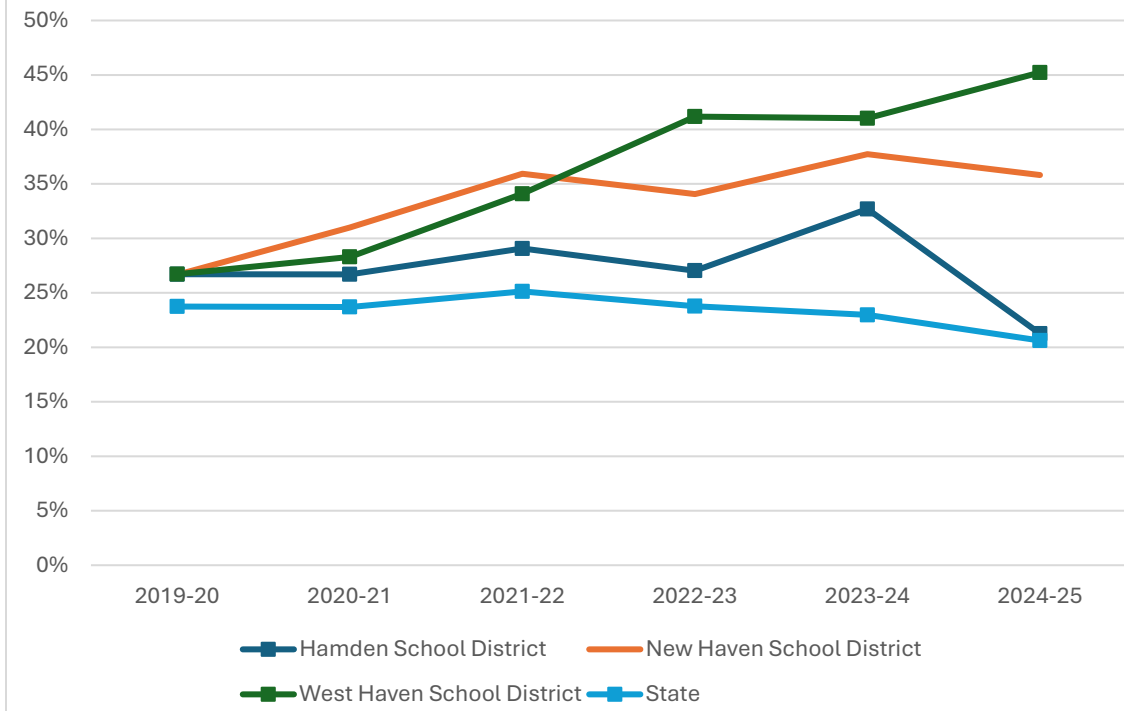
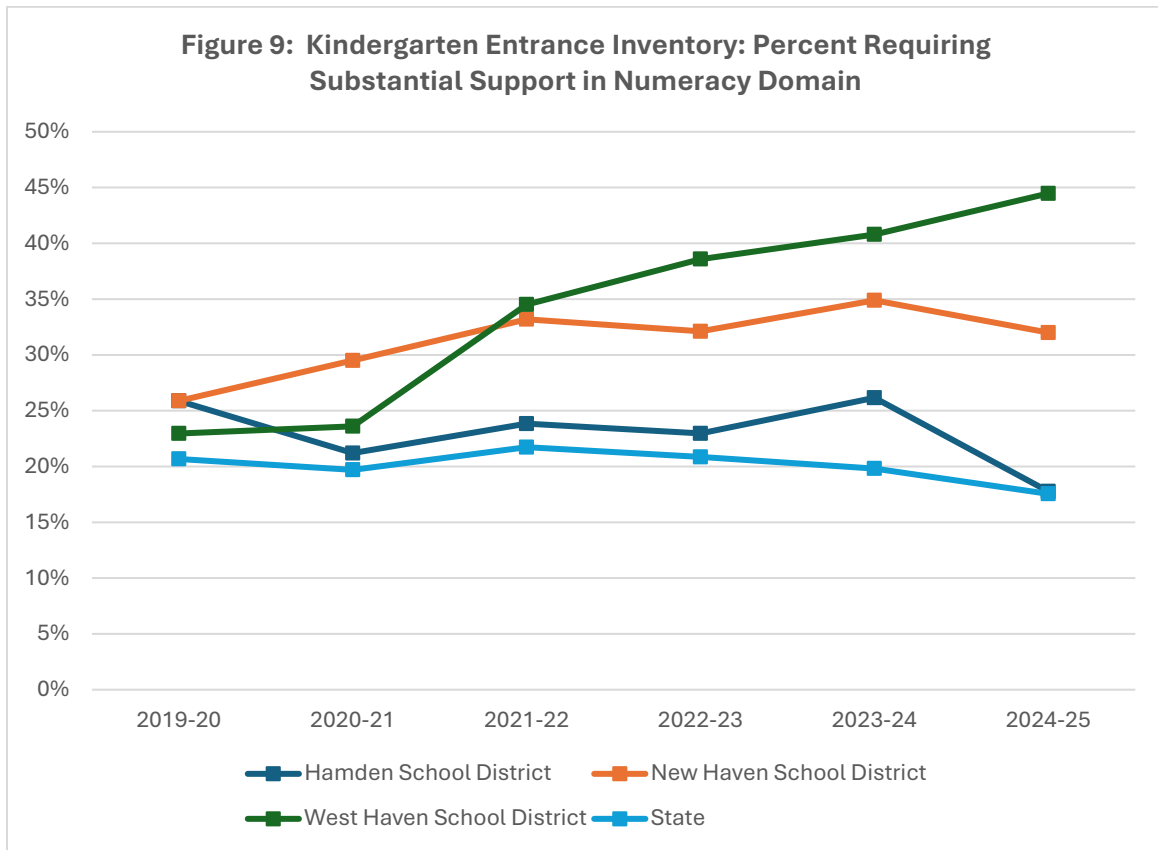


Figure 8: Kindergarten Entrance Inventory: Percent Requiring Substantial Support in Literacy Domain





On [state assessments](#), approximately 29% of third graders in the region met or exceeded English/Language Arts standards and 24% met or exceeded Math standards in 2024-25, well below state averages (see Table 9).

Table 9: Percent Meeting or Exceeding Standards on Grade 3 State Assessments, 2024-25

Subject	Hamden	New Haven	West Haven	Region	CT
Math	35.0%	21.3%	44.7%	29.0%	52.2%
English Language Arts	29.1%	17.1%	38.1%	24.0%	46.9%

Chronic absenteeism – students absent more than 10% of school days – spiked across Connecticut during the pandemic. While the rates have decreased in recent years, **32.1% of New Haven students** were chronically absent in 2024-25, along with 25.5% of West Haven students and 20.8% of Hamden students.

Head Start Eligibility. Table 10 (on next page) shows data for estimating the number of children in the region eligible for Head Start. Overall, the number of eligible families has stayed fairly stable over the past four years, within a range of 3,700 children using SNAP as the primary measure. Note that SNAP eligibility has increased the number of eligible children; changes to the SNAP program in 2026 may negatively affect these numbers.

Table 10: Early Head Start Eligibility Estimates

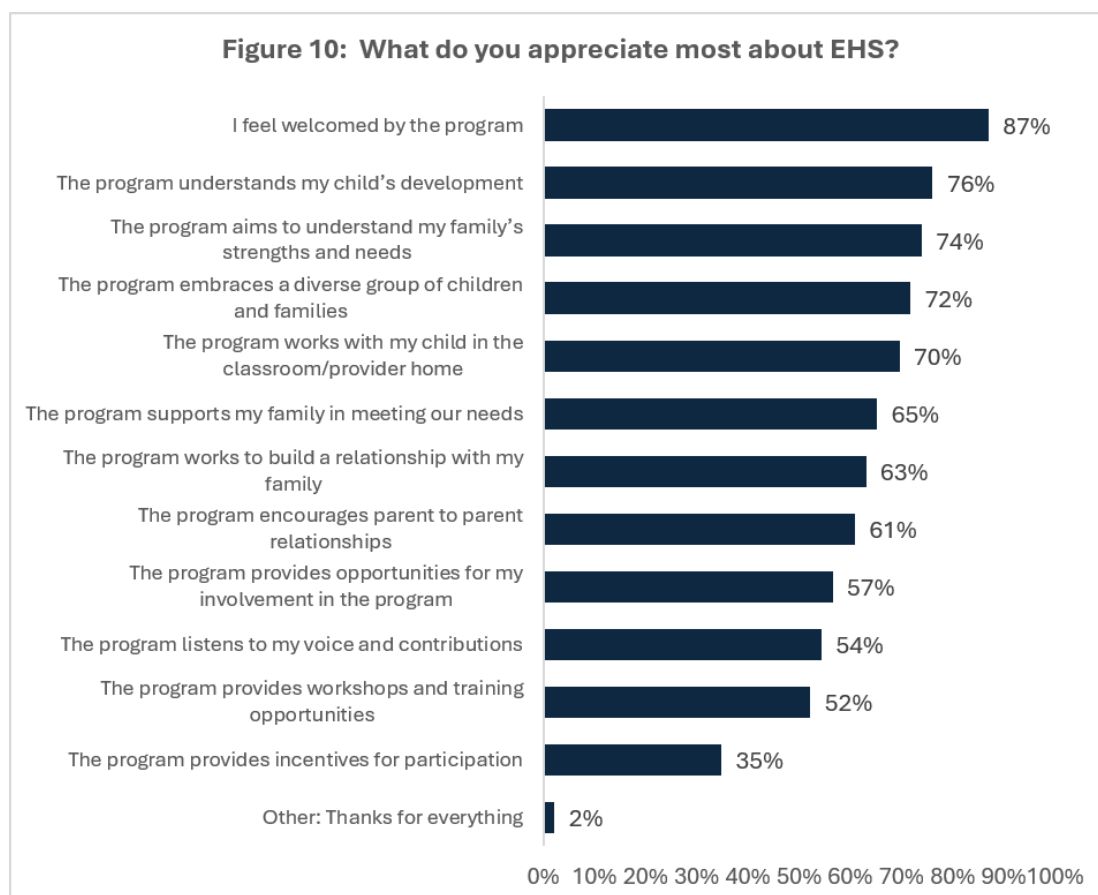
Measure	2021	2022	2023	2024
# infants and toddlers (under 3)	8,341	8,183	8,141	7,994
# eligible by receiving SNAP benefits	3,733	3,900	3,969	3,789
# B23 children with IFSPs	896	974	1,041	1,109
# homeless infants / toddlers (2.8% per CSDE)	234	229	228	224
# infants / toddlers in foster care	<100	<100	<100	<100

b. Needs

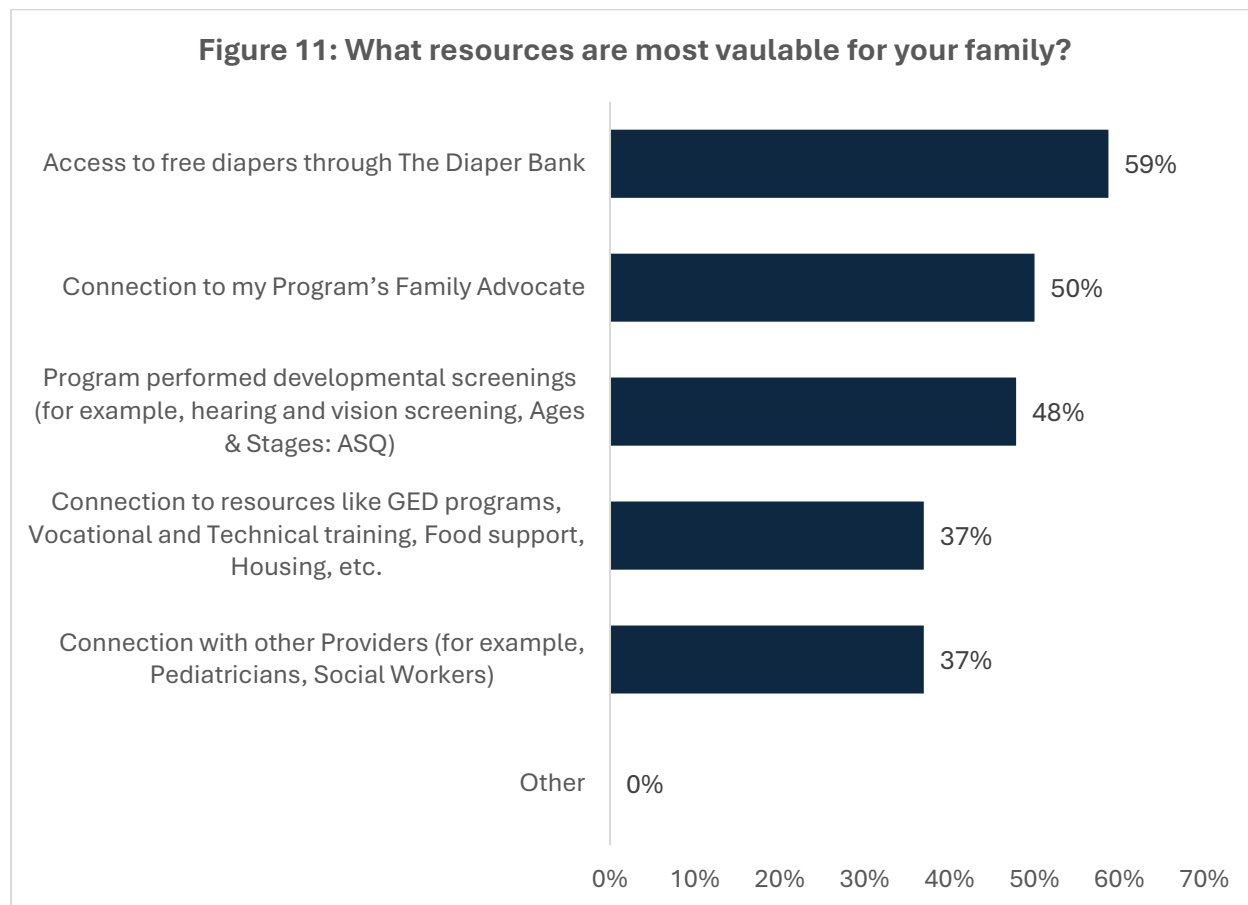
In addition to data available from public sources, the community assessment included data collection from parents and EHS staff. The findings from each of these efforts are summarized below.

Survey of Early Head Start Parents. The assessment utilized a brief survey to assess parent satisfaction, what challenges families face, and how Early Head Start can support families.

A total of 46 EHS parents completed the survey in Spring 2026, approximately half of enrolled families. Respondents rated the program highly. Families “most appreciated” feeling welcomed by the program (87%), understanding of their child’s development (76%), and understanding their family’s needs and strengths (74%). See Figure 10 for details.



Respondents cited access to free diapers (59%), the connection with their Family Advocate (50%), and developmental screenings (48%) as the most valuable resources (see Figure 11).



The vast majority of respondents (67%) did not have problems enrolling their children in EHS. The most common participation challenges were: program hours (15%), having multiple children in different schools (13%), and parent-to-parent relationship challenges (9%).

The survey included an open-ended question asking how to improve EHS. Most respondents (17 of 25) stated that no improvements were needed. Several (2-3) suggested improved communications with families, longer hours, and more family events. Quotes from EHS parent featured in UWGNH's annual report illustrate parent views of the program (see sidebar).



“ I'm a single mom of four. A couple years ago their father passed away, so now it's just me. I am a lab assistant, so I make more than the minimum wage, but it's still hard. I want to go back to school to finish my bachelor's degree. I am so close! But I am working just to survive.

I don't know what I'd do without United Way and Early Head Start helping me afford childcare, helping with toys and clothes for my kids, and helping me with groceries when SNAP was delayed earlier this year.

”

Mercedes Robinson, Early Head Start mom

 **ALICE IN ACTION**

New Haven Early Childhood Family Survey. In collaboration with the New Haven Early Childhood Council, the UWGNH is conducting a survey of parents of young children – disseminated primarily through all of the early childhood centers and family child care programs in New Haven. As this survey is part of the broader early childhood planning effort, it was not designed specifically for HS-eligible families, but can provide insights to inform EHS planning efforts.

As of June 30, 196 parents have taken the survey. Key findings include:

- **Cost of ECE** is a key barrier. Of the 41 respondents who did not use ECE, 61% cited the high cost as the main reason.
- Respondents learned about ECE options primarily via **word of mouth** (55%) and **Internet** searches (44%).
- The main criteria respondents used in selecting ECE were: program reputation / **quality** (73%), **location** (71%), program **hours** (59%), and **cost** (56%).
- Of those respondents using ECE, 95%+ were **satisfied** with their children's programs.
- Respondents reported that the main challenges they face are: the high cost of living / **affordability** (66%), and **stress / anxiety** (30%).
- Respondents suggested the following as the most helpful early childhood services: safe, affordable **play spaces** for young children (65%), **affordable ECE** (60%), and **family activities** in the community (52%).

Focus Groups with EHS Staff. EHS staff reinforced many of the themes from the data and parent surveys. For their EHS families, staff cited the following as key challenges:

1. Housing instability and overall financial challenges (i.e., access to basic needs).
2. Transportation to programs.
3. Financial literacy skills and (particularly for young parents) life skills.

EHS program directors noted the following overall program challenges:

1. Staffing challenges (e.g., hiring, turnover, meeting staff education requirements). These are not unique to EHS, but are affecting nearly all ECE programs in the region and the state.
2. Increased competition for ECE slots, with the expansion of early childhood programs statewide.
3. Attendance and developmental challenges. Many children were sick this winter, and programs are enrolling more children with special needs.
4. Challenges with the state bureaucracy and funding (see the New Haven Local Needs Assessment for details).
5. The EHS application process is challenging for many families.

c. Resources

Connecticut has substantial resources to support families with young children. The United Way of Connecticut's 211 [Infoline system](#) shows the different resources available to families – including for health and mental health care, housing, transportation, basic needs, employment, and specific resources for children and families. Table 11 includes service categories and programs that can benefit families with young children.

Table 11: Infoline Resources for Families

Category	Resource / Program	Infoline Link
Children & Families	Child Care Programs	https://www.211childcare.org/
	Child Development (starting from pregnancy)	https://cdi.211ct.org/
	See screenshot on next page for resources and programs	https://uwc.211ct.org/categorysearch/children/
Food	Emergency Food	https://uwc.211ct.org/categorysearch/food/
	Meals	
Mental Health	Mental Health Care	https://uwc.211ct.org/categorysearch/mental-health/
	Counseling Services and Referrals – Adults	
	Counseling Services and Referrals – Children/Youth	
	Support Groups	
Health Care	Payment and Insurance	https://uwc.211ct.org/categorysearch/health-care/
	Prevention and Treatment	
	Additional Resources	
Housing	Emergency Housing & Shelter	https://www.211ct.org/topic_pages/housing
	Affordable Housing	
	Rental Assistance	
	Assistance for Homeowners	
Substance Use	Treatment	https://uwc.211ct.org/categorysearch/substance-abuse/
	Education/Prevention	
	Additional Information	
Transportation	Ride Options	https://uwc.211ct.org/categorysearch/transportation/ See also CT Transit
	Transit	
Utility Assistance	Help with Utility Bills	https://www.211ct.org/topic_pages/utilityassistance
	Help with Deliverable Fuels	
	Saving Money on Utility Bills	

Category	Resource / Program	Infoline Link
	Discounted Phone, Internet, Tech	
Income	Employment	https://uwc.211ct.org/categorysearch/income/
	Financial Literacy	
Crisis	Crisis Services	https://uwc.211ct.org/categorysearch/crisis/
	Shelter	
	Food	
Other Basic Needs	Holiday Assistance	https://uwc.211ct.org/categorysearch/basicneeds/
	Clothing	
	Household Items	
Legal Assistance	Family Law	https://uwc.211ct.org/categorysearch/legal-assistance/
	General Legal Services	
Re-Entry	Re-Entry Services	https://uwc.211ct.org/reentry/
Kinship	Legal Resources	https://www.211ct.org/topic_pages/kinship
	Housing Resources	
	Community Programs for Kinship Caregivers	

Early Care & Education

- 2-1-1 Child Care
- Birth to Three
- Help Me Grow
- Head Start
- Homeless Education
- Pre-Kindergarten Programs

Home Visiting Programs

- Birth to Three
- Early Head Start
- Minding the Baby
- Nurse Family Partnership
- Child First
- Early Childhood Consultation Partnership

"Parents As Teachers" Model

- Nurturing Families Network
- Parents as Teachers Programs in CT

Child Nutrition Programs

- SNAP
- WIC
- Summer Food
- Nutrition Education

Housing Resources

- Low income/Subsidized Private Rental Housing
- Section 8 Housing Choice Vouchers
- Landlord/Tenant Assistance
- Runaway/Youth Shelters

Income Assistance

- Temporary Family Assistance (TFA)
- Child Support
- Care 4 Kids
- 2-1-1 Navigator (Benefits Screener)

Mental Health

- EMPS
- Child Guidance
- Adolescent/Youth Counseling
- Child Abuse Counseling

Parenting Support

- Parenting Education
- Youth Enrichment Programs
- Parent to Parent Networking
- Safe Havens for Abandoned Newborns

In addition to these main categories, Infoline includes resources for [dental care](#), [lead screening](#), [parent leadership](#), and the [Earned Income Tax Credit](#) (EITC) among others, with the ability to search in your town and for more specific resources.

The [Partnership for Strong Communities 2025 State of Housing](#) report also noted two key housing resources:

- Connecticut established a **Right to Counsel (RTC) program** in 2021. RTC provides free legal representation to income-eligible tenants and occupants facing eviction or the termination of a rental subsidy. The five [legal service providers](#) are Connecticut Legal Services, Connecticut Veterans Legal Center, Greater Hartford Legal Aid, New Haven Legal Assistance Association, and Statewide Legal Services of Connecticut.
- **Fair Rent Commissions** are municipal boards, typically composed of resident volunteers, which review and decide cases related to rent increases and other housing fees. These commissions can investigate complaints, hold hearings, and issue binding decisions – ensuring that rent increases are not excessive and that tenants are protected from unfair practices. [New Haven](#), [Hamden](#), and [West Haven](#) have commissions.

Additional resources for families include:

- Adult Education programs in [New Haven](#), [Hamden](#), and [West Haven](#).
- [CT State Gateway Campus](#) in New Haven, the region's community college.
- Public libraries in [New Haven](#), [Hamden](#), and [West Haven](#).
- CT Office of Early Childhood (OEC) resources include the [Head Start on Housing](#) program to support stable housing for Early Head Start and Head Start families, and the [Parent Cabinet](#) that brings together parents from across the state to advise OEC to help make improvements in the lives of CT's children and families. OEC also supports Local Governance Partners (formerly School Readiness Councils) in [New Haven](#), [Hamden](#), and [West Haven](#).
- All three communities have [Family Resource Centers](#) that “promote comprehensive, community-based systems of family supports and child development services integrated in the public school system.”
- The region has parent leadership and empowerment programs, including the Parent Leadership Training Institute ([PLTI](#)) and [Parent Ambassadors](#) affiliated with Local Governance Partners.

Finally, EHS benefits from being part of the **United Way of Greater New Haven** – drawing on the United Way's strong network of community partners and connecting EHS families to related United Way programs and services.

d. Planning Team Analysis

In June, the EHS Policy Council and UWGNH staff met to discuss key findings and potential responses. The groups identified the following issues:

- The **challenges facing EHS families are primarily economic**, reflecting the high cost of living in the region. The New Haven Family Survey and focus group with Family Services staff both indicate that many families are struggling economically, particularly with the high cost of housing. EHS is working to address families' basic needs, but addressing housing is much more difficult. The program can strengthen its partnerships with training / education and employment organizations – to help families increase their incomes, and build on existing partnerships that address basic needs.
- Many parents are **stressed** – given affordability challenges and the demands of parenting young children. EHS can consider ways to build social support among families and reduce families' logistical challenges (e.g., transportation, paperwork).
- The number of **children with special needs has been increasing**. This increase is placing greater stress on EHS programs, B23, school districts, communities, and families.
- **Staffing challenges** and **state requirements** are critical challenges for EHS programs. The New Haven Early Childhood Council has highlighted these system-level challenges; its efforts can benefit EHS and all ECE providers in the region.
- **Increased competition** for ECE slots is affecting EHS enrollment. EHS can strengthen its marketing and recruitment efforts to ensure that all programs are at capacity and benefiting families.

4. Recommendations

Table 12 (on next page) summarizes our plans to strengthen the EHS program. Our key strategies to accomplish this include:

- **Strengthen and promote community partnerships.** The Policy Council stressed the importance of employment and career services. The UWGNH and EHS partners can promote their existing community partnerships with education and workforce agencies – including the American Job Center (across the hall from the UWGNH) and education / training opportunities at CT State Gateway campus (including [SNAP Employment & Training](#)). The UWGNH can also assess current MOUs with key community partners, and identify opportunities to strengthen these partnerships. Finally, the United Way often has one-time or time-limited resources (like funding for security deposits) that can benefit EHS families, and can publicize these as they arise.
- **Improve food security.** The West Haven program partners with a local supermarket and farm for weekly feed deliveries to the program. The UWGNH has also applied for a federal nutrition and healthy eating grant, and can explore partnerships with local non-profits like [CitySeed](#) that are supporting access to health food and the growth of early-stage food enterprises via a [Food Business Incubator](#) program.
- **Expand family activities.** EHS programs can expand the number of family activities that include opportunities for families to connect with one another and build their family-family support networks.
- **Streamline and improve EHS forms and materials.** The UWGNH is piloting a new online application portal linked to its data system to reduce the need for families to provide the same information and documents multiple times. The UWGNH can also revise its Family Assessment to make it easier to complete and more relevant to family needs and goals. These pilot efforts can include a process for soliciting feedback from EHS staff and families in order to create better, more family-friendly forms.
- **Address transportation challenges.** The program can pilot the use of bus passes as a way to improve attendance, and can engage the CT Head Start Association to discuss statewide options for improving transportation options for EHS and HS families (e.g., reduced-cost ride-share contracts).
- **Support EHS marketing and recruitment efforts.** The UWGNH Marketing Department will offer EHS partners support in marketing their programs (i.e., design materials, technical assistance), and the UWGNH is working to revitalize its DCF partnership to recruit more foster families – including presentations to all DCF in the region.

The United Way’s Early Head Start program delivers high-quality early education and child care for young children, connections to comprehensive family resources, and family engagement and leadership opportunities. The proposed recommendations will help programs sustain, expand and improve these efforts – leading to healthier, empowered children and families and stronger, more vibrant communities.

Table 11: Goals, Objectives, and Strategies

Long-Term Goals	Performance Measures	Strategies to Achieve Goals
Strengthen and promote community partnerships	• Number of revised MOUs with partners • Number of EHS families participating in education, training and/or employment services • Annual assessment of gaps in services	• Promote existing education and employment partners (e.g., AJC, Gateway) at all programs • Assess existing community partnerships and revise MOUs as needed to strengthen partnerships • Connect EHS families to UWGNH resources as they arise
Improve food security	• Funding for healthy eating and nutrition efforts (i.e., pending federal grant) • CitySeed partnership progress (e.g., meetings, MOU, participation)	• Secure funding to address food security and promote healthy eating • Explore a partnership with CitySeed to improve access to healthy food and provide entrepreneurial opportunities for EHS families
Expand family activities	• Attendance at family activities • Percent of family activities that include a social / connection component • Family feedback on connections (e.g., parent survey)	• Work with programs to design and implement family activities that build social capital and family connections
Streamline and improve EHS forms and materials	• Revised application form / process • Family feedback on forms incorporated into final versions	• Pilot-test and refine the online application portal and form • Revise and pilot-test the Family Assessment
Address transportation challenges	• Number of families using bus passes • Attendance rates • Statewide transportation pilot implemented	• Expand the number of EHS families receiving bus passes • Work with the CT Head Start Association to develop a statewide option / initiative to improve transportation
Support EHS marketing and recruitment efforts	• # marketing products supported by UWGNH • Overall EHS enrollment • # families on waiting lists • Enrollment of foster families	• Connect EHS programs to the UWGNH Marketing Department to support marketing and recruitment • Schedule regular meetings with DCF staff in the region to present EHS as a resource for foster families