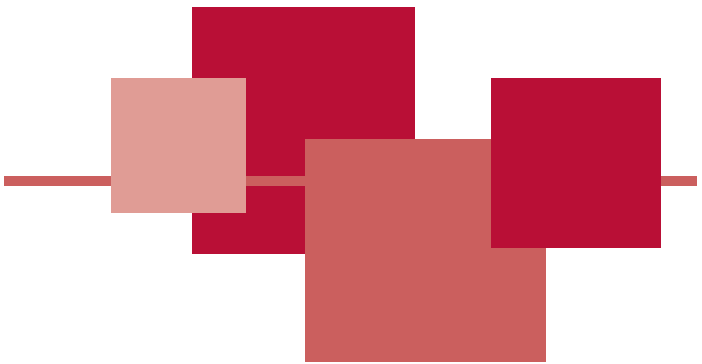


**2007 REPORT ON THE**

---

# **STATE OF THE CHILD IN BRIDGEPORT**



**Bridgeport  
Child  
Advocacy  
Coalition**



*Mobilizing for Children*

# 2007 REPORT ON THE STATE OF THE CHILD IN BRIDGEPORT

**BCAC calls upon concerned residents and our government at all levels – local, state, and federal – to work with us to ensure that all Bridgeport’s children:**

- Have an equal opportunity to succeed in life
- Grow up in families with the economic resources to be self-sufficient
- Have access to affordable, licensed, quality child care
- Receive a high-quality education
- Have a healthy start in life
- Have access to quality health care
- Have a clean environment
- Live in decent housing
- Live in an environment that is safe and free from violence
- Receive the nurturing and support needed to achieve their full potential

Every year, the Bridgeport Child Advocacy Coalition (BCAC) publishes our State of the Child report. The report presents a snapshot of Bridgeport’s children. It compares Bridgeport’s children to children statewide and shows if progress has been made in key areas from one year to the next.

The 2007 report demonstrates many disparities between Bridgeport’s children and children statewide. At the same time, there has been significant progress in the last year on a number of indicators used to measure well-being. **However, the increasing rate of child poverty in Bridgeport is alarming. This trend could effectively eliminate all the gains that have been made.**

## WHERE IS BRIDGEPORT FAILING?

This year, the Report Card on the Well-Being of Bridgeport’s Children assessed 22 indicators of child well-being. When compared to children statewide, Bridgeport failed – received an F – on 16 indicators: Childhood poverty and economically disadvantaged students; preschool experience and availability of child care; student achievement and dropout rates; health status – infant mortality, low birthweight, teen births, prenatal care; environmental health – lead poisoning and air pollution; homelessness; and child safety, including juvenile arrests, family violence, and child abuse and neglect.

## WHERE IS BRIDGEPORT IMPROVING?

Bridgeport earned a record five A+’s – this means the indicator improved more than 20% from the previous year. The gains were significant. The cumulative dropout rate improved by 27%. Infant mortality improved by 22%. There were 14 fewer high ozone days. The number of children in homeless shelters decreased by 36% and the number of abused and neglected children decreased by 25%.

## DISTURBING TRENDS

The most disturbing trend in Bridgeport is the growing rate of childhood poverty. In one year, the number of Bridgeport children living in poverty increased 9%. Poverty influences every aspect of a child’s life – where she lives, goes to school, her health, her safety, even the air she breathes.

# A Report Card on the Well-Being of Bridgeport Children

	<b>Grade</b> Bridgeport vs. State	<b>Effort</b> Progress from Previous Year
<b>Economic resources</b>		
% Children living in poverty	F	D
% Economically disadvantaged students (family income less than 185% of federal poverty level)	F	C
<b>Quality child care</b>		
% Children entering school with preschool experience	F	C
Licensed child care for infants and toddlers	F	B
<b>High-quality education</b>		
% Meeting CT Mastery Test proficiency in reading	F	C
Dropout rate	F	A+
<b>Healthy start in life</b>		
Infant mortality rate	F	A+
% Low birthweight	F	B
% Late or no prenatal care	F	C
Teen births	F	C

**KEY:**  
 A+ = more than 20% better      C = less than 5% difference  
 A = 10 to 20% better          D = 5 to 10% worse  
 B = 5 to 9% better              F = more than 10% worse

\* First year indicator included in report  
 \*\* Based on 2004 data

	<b>Grade</b> Bridgeport vs. State	<b>Effort</b> Progress from Previous Year
<b>Quality health care</b>		
Rate of increase in number of children with health insurance through HUSKY	C	C
% Children on HUSKY with well-child checkups	B	C
<b>Clean environment</b>		
% Lead-poisoned children	F	A
% Increase in air pollution and high ozone days	F	A+
<b>Decent housing</b>		
Homeless children	F	A+
Families on the waiting list for public housing	NA	F
% New housing development affordable to Bridgeport families*	NA	F
<b>Safe environment</b>		
Children confirmed abused or neglected	F	A+
Family violence arrests	F	B
Juvenile arrests	F**	A
Juvenile arrests for violent crimes	F**	F
<b>Nurturing and Support</b>		
After-school programs*	NA	F

## AGE BREAKDOWN

Age Breakdown	Population 2005*
Under the age of 5	9,634
Ages 5-9	10,878
Ages 10-14	9,289
Ages 15-17	6,208
Total Children Bridgeport	36,009

**Total Population Bridgeport** 132,011

**Children as % of the Total Population** 27%

\* Estimated by the U.S. Bureau of the Census

## RACIAL AND ETHNIC COMPOSITION\*

### Children under age 18 in 2000

African-American	37%
Asian	3%
Latino	41%
Native American	0.4%
White	33%
Multiracial	8%
Other	19%

\* Total percentage equals more than 100% due to respondents checking more than one category on the census.

## All children should grow up in families with the economic resources to be self-sufficient.

Nearly one in three Bridgeport children lives in a family with an income at or below the federal poverty level – \$17,170 for a family of three. Living in poverty puts children at greater risk for disease, poor nutrition, poor school performance, homelessness, violence, and abuse.

## CHILD POVERTY

- Childhood poverty increased 9% from 2005 to 2006. According to the U.S. Census Bureau, 10,623 Bridgeport children, 29.5%, live in poverty, compared to 9,722 children, 27%, in 2005.
- Bridgeport's rate of child poverty, 29.5%, is more than twice the statewide rate of 11%. Nationwide, 18.5% of children live in poverty.
- In 2005, one in three Bridgeport children living in poverty (3,185) was under the age of 5.
- In 2000, one in four African-American children, one in three Latino children, and one in eight white children lived in poverty in Bridgeport. More recent data on child poverty by race and ethnicity is not available.
- More than half of Bridgeport children live below 200% of the federal poverty level, \$34,340 for a family of three, the income that is considered necessary to meet a family's basic costs, including food, housing, transportation, and clothing.
- During 2006, an average of 136 **new** Bridgeport families were added to the welfare caseload each month, for a total of 1,626 new families in 2006.

## CHILD HUNGER

- 8,538 Bridgeport children lived in families receiving food stamps during June 2006. More than one in three of these children were under the age of six. Statewide, only one in two eligible families receives food stamps.

## FAMILY STRUCTURE

- In 2000, 42% of Bridgeport's children lived in single-parent households, compared to 23% statewide; an additional 16% lived with someone other than their parents.

### All children should have access to affordable, licensed, quality child care.

Children from low-income families who participate in quality early childhood programs are less likely to be held back in school, be referred to special education, become teen parents, or engage in criminal behavior than those children who do not participate. They are also more likely to perform better academically, become high school graduates, become employed, and earn a higher income.

## CAPACITY AND NEED

- 66% of kindergarten students entered Bridgeport public schools with preschool, nursery school, or Head Start experience in the 2005-06 school year, compared to 64% in 2004-05. Statewide, 79% of kindergarten students entered school with preschool experience.
- More than 7,950 Bridgeport children under the age of six (68%) live in families in which both parents or the only parent is in the labor force and may need child care.

## BRIDGEPORT CHILD CARE AND PRESCHOOL LICENSED PROGRAM CAPACITY - 2006

	Infants/ Toddlers	3-4-Year Olds
Licensed child care centers	537	2,726
Licensed family day care homes	200	432
Head Start (full-day)	---	455
Head Start (part-day)	---	477
Early Head Start	32	---
Board of Education pre-kindergarten (part-day)	---	400
<b>Total</b>	<b>769</b>	<b>4,490</b>

- In 2006, there were 769 licensed spaces for infants and toddlers in Bridgeport, compared to 704 in 2005, an increase of 9%. Bridgeport's rate of licensed child care spaces for infants and toddlers is significantly lower than the rate statewide. There are only 11 licensed child care spaces per 100 children under the age of three in Bridgeport, compared to 18 spaces per 100 children under the age of three statewide.

## CHILD CARE COSTS

- In the Bridgeport area, full-time licensed child care for one year ranges from \$9,958 to \$13,335 for infants and toddlers, and \$9,629 to \$10,565 for preschool age children. On average, child care costs nearly \$1,700 more per year in Bridgeport than it does statewide.
- In 2006, 2,173 Bridgeport children received Care4Kids, the State's child care subsidy program, 100 more children than in 2005. However, participation in Care4Kids is 45% below what it was in 2000 due to the lack of State funding.

## CHILD CARE DURING NON-TRADITIONAL HOURS

*Studies show that as many as one in three working women with a child under age six, including mothers on or transitioning off welfare, work evening or weekend hours.*

- Nearly 2,500 Bridgeport children under the age of six need child care during the evening or weekend hours. There are currently 385 licensed spaces for evening child care and fewer than 60 licensed spaces for weekend child care in Bridgeport.

## CHILD CARE QUALITY

- 14 out of 39 Bridgeport licensed child care centers, serving 1,170 children, and four preschool programs in Bridgeport schools serving over 200 children are accredited by the National Association for the Education of Young Children (NAEYC); over 900 children attend programs that meet standards established by Head Start.
- In 2006, 1,105 Bridgeport children receiving State child care subsidies (51%) were in informal child care settings, including care provided by a grandparent, other relative, or non-related adult in the child's home, comparable to the statewide rate.

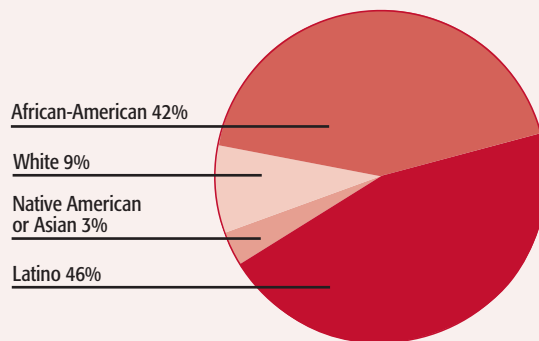
### All children should receive a high-quality education.

Education is critical in helping children become productive adults. Overcrowded classrooms, high teacher turnover, and unsafe school environments contribute to poor student achievement and high dropout rates.

## STUDENT ENROLLMENT

- There were 21,312 students in the Bridgeport school system as of October 1, 2006.

## RACIAL AND ETHNIC COMPOSITION BRIDGEPORT SCHOOLS 2006-07

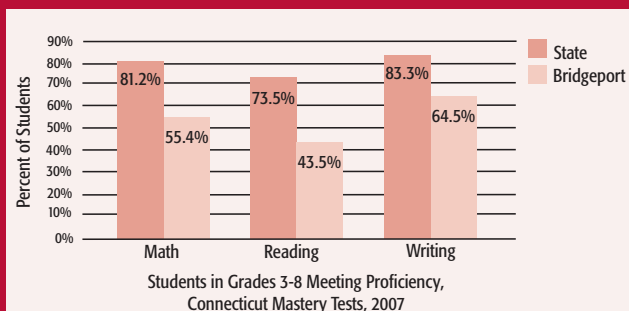


- During the 2005-06 school year, more than 95% of Bridgeport public school students were economically disadvantaged or lived in families earning less than 185% of the federal poverty level (\$31,765 for a family of three), compared to 27% of students statewide and comparable to 2004-05.

## ACADEMIC PERFORMANCE

- 55% of Bridgeport students in grades 3-8 met the federal standards of proficiency on the 2007 Connecticut Mastery Test in math, compared to 53% in 2006; 43.5% met proficiency in reading, compared to 45% in 2006; and 64.5% met proficiency in writing, the same as in 2006.

## FAR FEWER BRIDGEPORT STUDENTS MET PROFICIENCY ON THE CONNECTICUT MASTERY TESTS THAN STUDENTS STATEWIDE



- Of the 10th graders in Bridgeport who took the Connecticut Academic Performance Test (CAPT) in spring 2007, 34% met the federal standards of proficiency in math, compared to 41% in 2006, and 33% met proficiency in reading, compared to 43% in 2006. Statewide, 77% of 10th graders met proficiency in math and 81% met proficiency in reading.

- In 2006, 70.5% of the public school student population – 15,035 students – attended the 19 schools that did not make sufficient progress on the State Mastery Tests and are considered “in need of improvement” according to the standards set by the federal “No Child Left Behind” legislation.

- 56% of Bridgeport’s Class of 2005 took the SAT (Scholastic Aptitude Test), compared to 75% statewide. Bridgeport students averaged 397 on the verbal and 405 on the math SAT. Statewide, students averaged 510 on the verbal and 512 on the math SAT.

- Bridgeport’s graduating seniors are pursuing higher education: 71% of the graduating Class of 2005 went on to post-secondary education, compared to 82% statewide.

## BILINGUAL EDUCATION

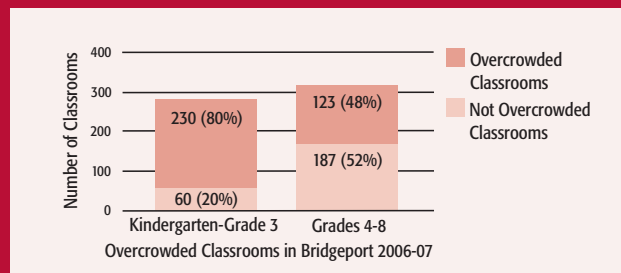
*Academic achievement of limited-English-proficiency students is a challenge to the education system.*

- During the 2005-06 school year, 8,385 Bridgeport students (39%) came from homes in which English is not the home language, compared to 13% of students statewide.
- Bridgeport students speak a total of 70 different languages.
- 2,858 Bridgeport students (13%) participated in bilingual education and English as a Second Language programs during the 2006-07 school year. Bilingual education is provided in four languages: Spanish, Portuguese, Kurdish, and Haitian Creole.

## CLASS SIZE

*The Connecticut Department of Education recommends a class size no larger than 18 in kindergarten through grade 3. The U.S. Department of Education recommends no more than 24 students in grades 4-8. By these criteria, nearly two in three Bridgeport classrooms are overcrowded.*

### MANY BRIDGEPORT CLASSROOMS IN GRADES K-8 ARE OVERCROWDED



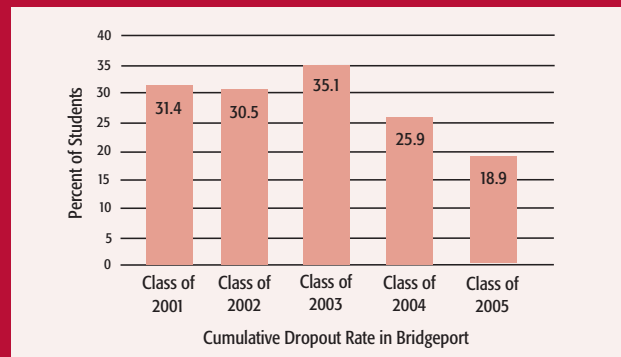
- More than 35% of Bridgeport’s high school classes are overcrowded with more than 25 students per class.

## DROPOUT RATE

*Youth who drop out of school are more likely to live in poverty and be involved in criminal activity as adults than those who graduate from high school.*

- While Bridgeport’s cumulative dropout rate continues to improve, it is still more than twice the statewide rate of 7.4%.

### THE CUMULATIVE DROPOUT RATE CONTINUES TO IMPROVE



## SCHOOL BEHAVIOR

- There were 14,355 student suspensions in the 2006-07 school year, compared to 14,071 suspensions in 2005-06.
- There were 185 school security offenses committed by students during the 2006-07 school year, including disorderly conduct, weapons possession, breach of peace, and assaults, compared to 230 offenses in 2005-06, a **decrease of 20%**.

## SCHOOL FACILITIES

- Within Bridgeport's 35 public schools, 8,840 students attend the 15 schools that are between 50 and 100 years old. Seven school buildings, with 2,044 students, are more than 100 years old.

## SPECIAL EDUCATION

- 2,794 Bridgeport students (12.7%) received special education services in 2005-06, compared to 11.8% statewide.
- During the 2005-06 school year, 5.3% of Bridgeport's total student population were classified as having a learning disability, compared to 4.3% statewide; 0.7% an intellectual disability, compared to 0.5% statewide; 1.6% an emotional disturbance, compared to 1.2% statewide; 2.0% a speech impairment, compared to 2.5% statewide; and 3.3% another disability, compared to 3.2% statewide.

## TEACHER RETENTION

*Retaining high-quality, experienced teachers is critical to closing the achievement gap.*

- Excluding retirees, 66 Bridgeport teachers (4%) did not return to teach for the 2006-07 school year, compared to 133 teachers in 2005-06 (8%).

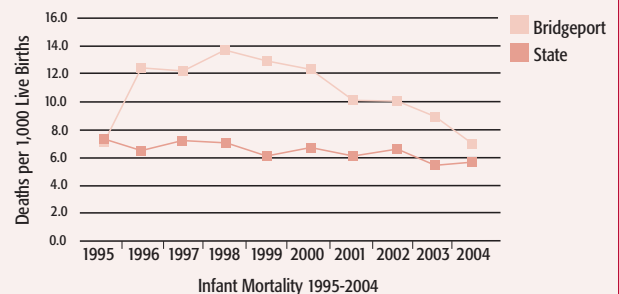
## All children should have a healthy start in life.

Infant mortality and low birthweight are the most sensitive indicators of a community's health and reflect the availability and accessibility of preventive health services.

## INFANT MORTALITY & LOW BIRTHWEIGHT BABIES

- The infant mortality rate in Bridgeport was 6.9 infant deaths per 1,000 live births in 2004, compared to 8.9 in 2003, a **significant decrease of 22.5%**. Bridgeport's rate was 20% higher than the state rate of 5.6.

### BRIDGEPORT'S INFANT MORTALITY RATE IS THE LOWEST IT HAS BEEN IN 10 YEARS



- In 2004, 8.6% of all Bridgeport babies were born with low birthweight (about 5.5 pounds at birth), compared to 9.4% in 2003. Statewide, 7.8% of all babies were born with low birthweight.
- Mothers who receive late or no prenatal care are more likely to have a low-birthweight baby than mothers who receive prenatal care beginning in the first trimester of pregnancy. During 2004, 20.5% of Bridgeport mothers received late or no prenatal care during their pregnancy, compared to 21.1% in 2003. Statewide, 12.8% of mothers received late or no prenatal care in 2004.

## RACE AND ETHNICITY SIGNIFICANTLY IMPACT PRENATAL CARE AND INFANT HEALTH

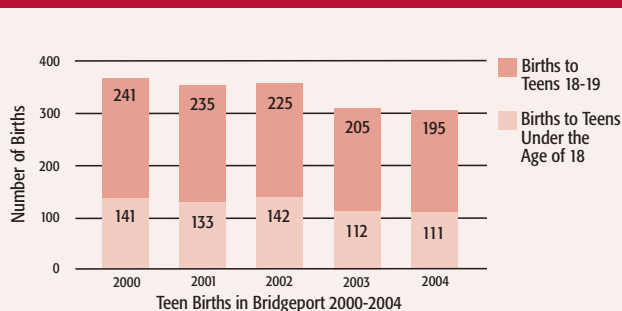
	African-American	Latino	White
Infant Mortality infant deaths per 1,000 live births	9.5	6.2	6.2
Low Birthweight	10.2%	8.8%	4.9%
Late or No Prenatal Care	25.4%	28.2%	13.5%

Infant Mortality, Low Birthweight, and Prenatal Care by Weight and Ethnicity, Bridgeport, 2004

## TEEN PREGNANCY

Teenage mothers are at high risk of poverty, domestic violence, and unemployment. Children born to teens are more likely to drop out of school and become single parents themselves, and are seven times more likely to live in poverty than children born to mothers who are not in their teens.

## THE NUMBER OF BIRTHS TO TEENAGERS IN BRIDGEPORT CONTINUES TO DECLINE



- There were 306 births to teens ages 19 and younger in Bridgeport in 2004, compared to 317 in 2003, a slight decrease of 3%.

- Although the number of teen births has decreased, Bridgeport's teen birth rate is nearly **three times** the statewide rate. The 2002-04 birth rate for Bridgeport teens ages 15-17 was 40 births per 1,000 teenage girls, compared to the statewide rate of 14.5 births per 1,000 teenage girls.

## All children should have access to quality health care.

Programs such as HUSKY, Connecticut's health insurance program for low-income children, have helped more children get health insurance, which is important for health care access. Even with HUSKY, only three in five children receive preventive checkups, fewer than three in four preschoolers are immunized, and less than one in two children goes to the dentist for preventive care.

## HEALTH INSURANCE

People without health insurance are less likely to go to the doctor, get a needed medical test, or fill a prescription than those with health insurance. Two-thirds of the uninsured are working.

- As of June 2007, 21,249 Bridgeport children were enrolled in HUSKY, virtually the same number as in June 2006. Statewide, enrollment in HUSKY increased by less than 1%.
- As many as 16,350 Bridgeport residents under the age of 65 do not have health insurance.

## MENTAL HEALTH

The U.S. Surgeon General reports that, nationwide, one in nine children suffers from some level of mental illness, yet fewer than one in five children receives needed mental health treatment. Mental health disorders are the second leading cause of disability among youth.

- The National Institute of Mental Health estimates that as many as 11% of children under the age of 18 need mental health services and 3% have a serious emotional disturbance. Data for Bridgeport children are not available, but if these figures are applied to Bridgeport, approximately 3,960 children have a need for mental health services and 1,080 children have a serious emotional disturbance.
- According to a 2005 survey conducted by RYASAP, as many as 19% of Bridgeport students in grades 7-12 reported attempting suicide.

## OBESITY

*The prevalence of obese children in America is growing at an alarming rate, doubling in the past 20 years. If current trends continue, researchers predict that for the first time in history the life expectancy of today's children will be shorter than that of their parents.*

- An analysis of the heights and weights of children in Bridgeport Head Start programs found that one in three preschool children is obese or at risk of obesity – 20% of preschoolers are obese and 16% are at risk for obesity. Nationwide, 10% of preschool children are obese.
- An analysis of students in kindergarten, 6th, and 11th grades in 10 Bridgeport schools found that nearly one in two school-age children is obese or at risk for obesity – 24% of students are obese and an additional 19% are at risk for obesity. Bridgeport's obesity rate is nearly double the nationwide rate of 13%.

## ORAL HEALTH

*Children from low-income families are much more likely to have dental decay and much less likely to obtain dental care than children from high-income families.*

- In 2005, only 40% of Bridgeport children insured under HUSKY went to the dentist for preventive care, no change from 2004. Dental visits are fully covered under HUSKY but there are few dentists who accept HUSKY patients.

## PREVENTIVE HEALTH CARE

*Low-income children who are up-to-date on their well-child doctor visits have 20-40% fewer hospitalizations than children who do not have regular well-child visits.*

- In 2005, 61% of Bridgeport's children ages 2-19 enrolled in HUSKY received a well-child check-up, compared to 58% in the rest of the state; 13% received no health care at all, comparable to the rest of the state.
- Immunizations help children stay healthy. In Bridgeport, 72% of children born in 2003 and enrolled in the state Immunization Registry and Tracking System were vaccinated against major vaccine-preventable diseases before they turned two, compared to 80% statewide.

## SEXUALLY TRANSMITTED DISEASES

- In 2006, 470 Bridgeport adolescents under the age of 20 were treated for sexually transmitted diseases, including chlamydia and gonorrhea, compared to 550 in 2005, which is a decrease of nearly 15%.

## SUBSTANCE ABUSE AND SMOKING

*Substance abuse is one of the most serious health problems facing today's youth. It is associated with family violence, child abuse, crime, gang activity, and unemployment. Recent studies show that smoking increases the likelihood of illegal drug use, particularly among young people.*

### FROM 2001 TO 2005, ALCOHOL AND TOBACCO USE BY BRIDGEPORT STUDENTS INCREASED WHILE OTHER ILLICIT DRUG USE DECREASED

	2001	2005
Alcohol Use	20%	26%
Tobacco Use	9%	10%
Smoking Marijuana	15%	15%
Other Illicit Drug Use	4%	1%

## HOUSING

Many low- and moderate-income families cannot afford the high cost of housing in Bridgeport. A parent working 40 hours a week at the minimum wage (\$7.65/hour) earns less than \$16,000 per year.

- In 2006, the fair market rent for a two-bedroom apartment in greater Bridgeport was \$1,024 a month, an increase of \$58 since 2005. The federal definition of affordable housing is housing that costs no more than 30% of a family's income. Using this definition, a family would have to earn \$19.69 an hour, more than two and one-half times the minimum wage, to afford the average two-bedroom apartment.
- More than one in two Bridgeport renters (53%) cannot afford the rent for a two-bedroom apartment. One in four renters spends more than half of his or her income on rent and is at high risk for becoming homeless.
- As of June 2007, 2,099 families were on the waiting list for public housing, compared to 1,686 families the previous year, an **increase of 24.5%**. In the last 15 years, Bridgeport has lost more than 1,300 public housing apartments through demolition. As of June 2007, only 594 of the 878 required replacement units have been completed.
- As of June 2007, 2,532 Bridgeport families were using a Section 8 voucher or a state Rental Assistance Program (RAP) certificate, with 3,813 families on the waiting list.
- Over the past two years, 98% of Bridgeport's new housing has not been affordable to Bridgeport families earning up to 80% of the city's median income (\$35,700).

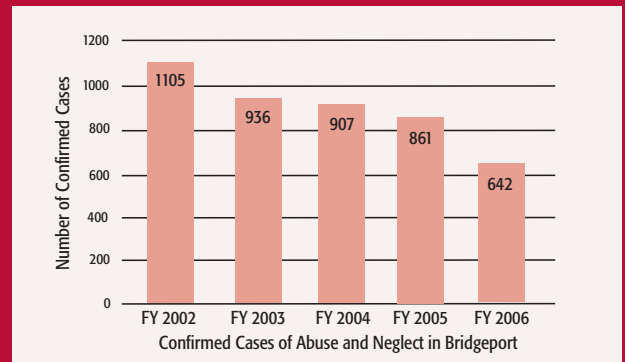
## All children should live in an environment that is safe and free from violence.

Keeping children safe from family, school, and community violence is critically important for their healthy development. Exposure to violence has long-lasting consequences for children. Long-term exposure can lead to academic failure, depression, and delinquency. Children exposed to violence are nearly 40% more likely to commit a violent crime when they reach adulthood than children not exposed to violence.

## CHILD PROTECTION

Child abuse and neglect have damaging effects on the physical, psychological, educational, and behavioral development of children. Research shows a clear correlation between child abuse and increased risk of dropping out of school, teen pregnancy, juvenile delinquency, and adult crime.

### IN FIVE YEARS THE NUMBER OF BRIDGEPORT CHILDREN CONFIRMED AS ABUSED OR NEGLECTED DROPPED BY MORE THAN 40%



- The rate of child abuse and neglect is much higher in Bridgeport than it is statewide. In Bridgeport, there were 16 confirmed cases of abuse and neglect per 1,000 children in FY 2005-06, compared to 12 cases per 1,000 children statewide.

## DOMESTIC VIOLENCE

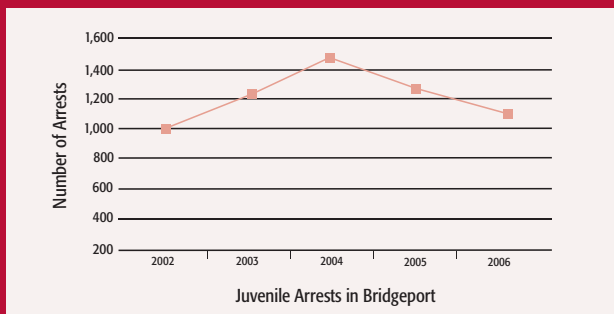
*Children who experience domestic violence are more likely to demonstrate aggressive behavior than children from nonviolent homes.*

- Arrests for family violence decreased 9% in Bridgeport. There were 1,090 arrests for family violence in 2005, compared to 1,202 arrests in 2004.
- Bridgeport's rate of family violence arrests (33 arrests per 1,000 families) is **45% higher** than the statewide rate (23 arrests per 1,000 families).
- In 2006, 69 women and 59 children, 42 of whom were under the age of five, stayed in a shelter for victims of domestic violence.

## JUVENILE VIOLENCE

*Quality early childhood programs, as well as programs aimed at keeping young people in school until graduation, can help reduce juvenile crime.*

### AFTER PEAKING IN 2004, JUVENILE ARRESTS IN BRIDGEPORT HAVE BEEN STEADILY DECLINING



- There were 1,093 juvenile arrests in Bridgeport in 2006, compared to 1,262 in 2005, a decrease of 13%.
- In 2004\*, Bridgeport's juvenile crime arrest rate (88 arrests per 1,000 youth ages 10 to 17) was **32% higher** than the state rate (66.5 arrests per 1,000 youth).
- In 2006, 394 arrests, 36% of all juvenile arrests in Bridgeport, involved children under the age of 15, compared to 421 in 2005.
- While juvenile arrests decreased in 2006, arrests for violent crimes\*\* increased. There were 126 juvenile arrests for violent crimes in 2006, compared to 101 in 2005, a **significant increase of 25%**.

- Bridgeport's juvenile violent crime arrest rate in 2004\* (8.5 arrests per 1,000 youth ages 10 to 17) was **more than double** the state rate (3.5 arrests per 1,000 youth).
- In 2006, 30 homicides occurred in Bridgeport, compared to 19 in 2005; 4 victims in 2006 were younger than 19, compared to 2 victims in 2005.

\*State data for 2005 and 2006 is not available.

\*\* Violent crimes are defined as murder, manslaughter, rape, robbery, and aggravated assault.

### All children should receive the nurturing and support needed to achieve their full potential.

Research indicates that positive experiences in a child's life can serve as a buffer against high-risk behavior. Quality youth development programs can reduce juvenile crime by 25%, and improve high school graduation rates and reduce illegal drug use by as much as 50%.

- During the 2006-07 school year, 2,100 children participated in the Lighthouse After-School Program, compared to an average of 2,600 children the year before. There are 1,200 after-school spaces in community center programs.

### FEWER BRIDGEPORT STUDENTS REPORT POSITIVE EXPERIENCES IN THEIR LIVES

	2001	2005
Live in a caring neighborhood	30%	29%
Attend a school with a caring environment	27%	24%
Feel engaged in school	58%	52%
Participate in youth programs outside of school	47%	45%

## EVERY \$1 SPENT ON...

### ■ After-School Programs

*can save \$4.00  
in criminal justice costs*

### ■ Childhood Immunizations

*can save \$10.00  
in later health care costs*

### ■ Early Childhood Education

*can save \$7.16  
in later special education,  
crime, and welfare costs*

### ■ Mental Health Treatment

*can save \$5.00  
in later health care costs*

### ■ Prenatal Care

*can save \$3.38  
in health care costs during  
an infant's first year of life*



### BRIDGEPORT CHILD ADVOCACY COALITION

2470 Fairfield Avenue  
Bridgeport, CT 06605

(203) 549-0075

FAX (203) 549-0203

[www.bcacct.org](http://www.bcacct.org)

#### Chairwoman

Edith Cassidy

#### Executive Director

Marilyn Ondrasik

#### Assistant Director

Barbara Edinberg

#### Director of Development and Communications

Catherine Onyemelukwe

#### Health Care Community Organizer

Mory Hernandez

#### Administrative Assistant

Nicole Bass



Sources available upon request  
Information based on the most current data available  
9.07

**A VERY SPECIAL THANKS TO**



*Engineering the flow of communication™*

**FOR PRINTING THIS REPORT**

**AND TO**



*Unilever*



*The United Illuminating Company*

***People's United Bank***

**FOR THEIR SUPPORT!**

## **GROWING NUMBERS OF CHILDREN LIVING IN POVERTY**

This year's 2007 State of the Child in Bridgeport Report on the Well-Being of Children gives Bridgeport five A+'s – infant mortality, dropout rate, child homelessness, child abuse and neglect, and high ozone days – because these indicators improved by more than 20% from last year to this year. Another two indicators – juvenile arrests and lead-poisoned children – also showed significant improvement.

These are all good signs. However, overshadowing all these gains is the growing rate of poverty in Bridgeport.

**Child poverty in Bridgeport rose from 27% in 2005 to 29.5% in 2006, a significant increase of 9%. The number of children living in poverty rose by nearly 800 in one year alone.**

Poverty is one of the most important factors that impact a child's life. A child living in poverty is more likely to experience poor health, poor school performance, and violence than a child who is not poor.

In order to sustain the gains that have been made, it will be increasingly important for children in Bridgeport and their parents to be able to access quality, affordable, accessible health care. Children need schools that provide a healthy learning environment and that are safe, not overcrowded or crumbling. They need after-school programs so they can have a safe place to go after school. Their families need affordable housing so they are not forced to double-up with family or friends, or become homeless. And, their parents need jobs that move their families out of poverty.

**We need YOU to join us in advocating for public policies and programs to address the alarming rise in child poverty, and to ensure that the gains that have been made are sustained so that all Bridgeport children have the opportunities to reach their full potential.**

**By educating our community, keeping the pressure on, working collaboratively, and organizing and empowering stakeholders, BCAC has had a major role in these successes:**

- Partnering with Casey Family Services to highlight critical issues for children at its Annual Breakfast Conference. The 2007 conference featured Juan Figueroa, President, Universal Health Care Foundation of Connecticut, who addressed an audience of 350 on challenges families face accessing health care.
- Holding Children's Issues Forums to educate the public and our elected representatives about critical children's needs, reaching over 250 community residents and legislators.
- Organizing the first-ever Gubernatorial Candidates Forum with over 300 participants to talk about education, after-school care, and health care.
- Engaging 600 advocates in the campaign for universal health care in Connecticut, including mobilizing over 150 parents to participate in a statewide rally on universal health care in Hartford. The end result – 9,700 more working parents and 2,500 pregnant women statewide eligible for HUSKY, Connecticut's health insurance program for low-income children and their parents.

- Leading 200 parents, students, and community leaders at a rally in Hartford and for continuing advocacy for equity in state education funding for Bridgeport. Our efforts paid off. Bridgeport received \$10.2 million in new state education funding for the 2007-08 school year.
- Releasing a second report on housing, "City Response to Bridgeport's Affordable Housing Crisis: Housing...But for Whom?" which highlighted the need for City policies to support the development of affordable housing in Bridgeport, particularly affordable rental housing.
- Raising \$4,000 to purchase educational materials and toys for child care programs for teen parents at Bridgeport high schools.
- Organizing 15 service providers to meet with women at York Prison before their release to help them connect with community resources.
- Tracking trends in school violence and advocating strategies for prevention.

**THE ROLE OF BCAC AS AN ADVOCATE FOR BRIDGEPORT'S CHILDREN AND THEIR FAMILIES IS CRITICALLY IMPORTANT.**

Through its coalition of more than 80 member organizations and its six Task Forces, BCAC promotes policies and programs to ensure that no children will live in poverty, that all children will have an opportunity to grow up healthy and safe, and receive the education and skills to help them reach their full potential.

The Bridgeport Child Advocacy Coalition (BCAC), founded in 1985, is a coalition of organizations, parents, and concerned individuals committed to improving the well-being of Bridgeport's children through research, advocacy, community education, and mobilization. All organizations sharing this commitment are encouraged to become Organizational Members of BCAC. Individuals sharing this commitment are encouraged to become Advocates for Children.

**YES! I wish to become an Advocate for Children by supporting BCAC's efforts on behalf of children. Please add my name to BCAC's list of Advocates for Children.**

\$100     \$50     \$25     Other \_\_\_\_\_

I am eligible for a matching gift from my employer.

I am interested in volunteering to help children. Please contact me.

Please send me more information on BCAC.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/TOWN \_\_\_\_\_

STATE/ZIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_

E-MAIL \_\_\_\_\_

*Please make your tax-deductible check payable to BCAC and mail to:*



2470 Fairfield Avenue  
Bridgeport, CT 06605  
(203) 549-0075  
www.bcacct.org

**Thank You!**