

State of Connecticut

2025-29 Consolidated Plan for Housing and Community Development



Submitted to the
U.S. Department of Housing and Urban Development

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DRAFT April 7, 2025

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Executive Summary

ES-05 Executive Summary - 24 CFR 91.200(c), 91.220(b)

Introduction

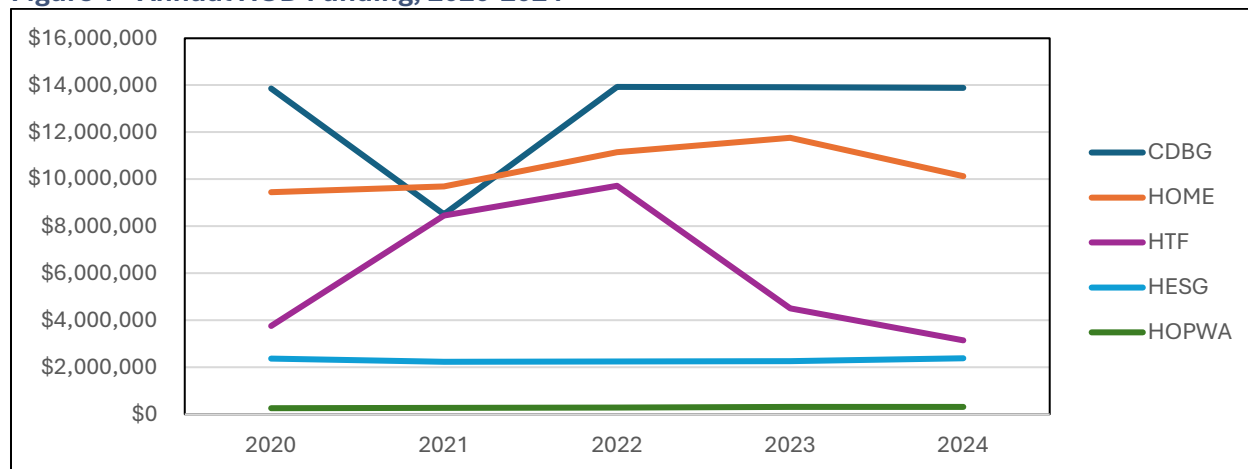
Connecticut is currently facing an urgent housing affordability crisis. The state has the most constrained housing market in the nation, with 1.07 housing units per household, and a vacancy rate of only 7% compared to the national average of 11%. This severe shortage means that there are not enough affordable homes to meet the high demand of housing in the state. This leaves many current and potential residents struggling to find suitable housing and inhibits economic growth in the state. The situation is particularly dire in Fairfield County and parts of Litchfield County, where housing underproduction is most pronounced. Without immediate and effective interventions, the crisis will continue to worsen, affecting not only the most economically vulnerable populations but also the middle and high-income families. Addressing this issue is critical to ensuring that all residents have access to safe, affordable housing.

The State of Connecticut Department of Housing (DOH) has completed the Consolidated Planning process for the 2025-2029 Program Years. In accordance with Section 8-37t of the Connecticut General Statutes and Title 24 Part 91 of the U.S. Code of Federal Regulations, Connecticut's Consolidated Plan for Housing and Community Development provides the framework for the allocation of federal formula grant funding received by the CT Department of Housing (DOH) and describes the methods for the intended distribution of federal and state resources to address the housing and community development needs of extremely low-, low- and moderate-income households in the state over the next five years.

The purpose of the Plan is to discuss the state's housing, community development, public service, and economic development needs, prioritize those needs, and develop goals and strategies about how funding will be allocated to eligible housing and community development activities to meet the state's priority needs. The Consolidated Plan provides the vision that guides policies and the use of State resources to address these important issues over a five-year period.

The State of Connecticut receives annual allocations of Community Development Block Grant (CDBG) funds, HOME Investment Partnership Program (HOME) funds, Emergency Solutions Grant (ESG) funds, Housing Opportunities for Person with HIV/AIDS (HOPWA) funds, and the National Housing Trust Fund (HTF). The total amount of federal funding fluctuates but was approximately \$30 million for the previous program year. All proposed activities' budgets will be proportionally increased or decreased from the estimated funding levels to match actual allocation amounts.

Figure 1 - Annual HUD Funding, 2020-2024



Data Source: HUD Integrated Disbursement & Information System
Note: Allocations of emergency pandemic related funding were issued for the 2020 and 2021 grant years. Those were excluded as they were one-time allocations.

The state anticipates receiving approximately **\$150 million** in total funding over the 5-year period from July 1, 2025 to June 30, 2030. The Consolidated Plan assists in making strategic and planful allocation decisions about how to use these federal resources for housing, social services, public infrastructure, facility improvements, economic development, and other community development programs and projects throughout the state of CT. This Consolidated Plan includes an overview of the state's economic and demographic characteristics, assesses housing needs, analyzes the current housing market and is the basis for the policies, strategies, goals and objectives which will be implemented by the State of Connecticut with regard to housing and housing related activities.

The Consolidated Plan is carried out through annual Action Plans, which provide a concise summary of the actions, activities, and the specific federal and non-federal resources that will be used each year to address the priority needs and specific goals identified by the Consolidated Plan. The state reports on accomplishments and progress toward Consolidated Plan goals in the Performance Evaluation Report (PER). To access these documents, please visit the Department of Housing's Notices and Publications website at: <https://portal.ct.gov/doh/doh/housing/notices-and-publications>.

The state contracted with CEW Advisors, Inc. to draft the Consolidated Plan following the prescribed format detailed by HUD and ensuring compliance with all relevant federal regulatory requirements. The plan was developed based on an analysis of demographic, housing and economic data, and information collected from consultation interviews with stakeholders, community meetings and focus groups, survey data, past program performance, current planning documents and studies, and other public input.

The 2025-2029 Consolidated Plan is divided into five sections:

- The Process
- Needs Assessment
- Market Analysis
- Strategic Plan
- First-Year Action Plan

The Process section describes the development of the Plan and discusses how residents were involved in the process, and how state agencies, nonprofit and for-profit developers, service providers, and other stakeholders were consulted in the development of the Plan. The section also shares key findings from the citizen participation and consultation processes.

The Needs Assessment provides data, analysis, and other relevant information on the state's needs for affordable housing, special needs housing and services, community development, economic development, and homelessness. Throughout the Needs Assessment section, special attention is paid to the needs of Low and Moderate Income (LMI) households, racial and ethnic minorities, homeless persons, and non-homeless special needs populations.

The Market Analysis provides data and analysis on the state's housing market conditions and economic landscape. The Market Analysis is meant to supplement information gleaned from the Needs Assessment to identify existing resources and assets to best understand the gaps between the needs of the state and the existing assets to meet those needs. In this way, the strategies developed are able to leverage the existing assets of the state to ensure that the priority goals developed through the planning process will work effectively.

The Strategic Plan section is based on the findings from the Needs Assessment, Market Analysis, stakeholder and resident input, and review of additional planning documents and studies. The purpose of the Strategic Plan is to prioritize the needs identified through the Consolidated Planning process and create goals to direct the allocation of federal funds that maximize community impact and is driven by the preferences of those who are to benefit from these investments.

Finally, the Annual Action Plan describes the state's first year activities and projects for addressing the needs and priorities set forth in the Strategic Plan.

Summary of objectives and outcomes

The overall goal of the housing and community development programs covered by this plan is to ensure everyone has access to quality housing opportunities and options throughout the State of Connecticut. The primary means towards this end is to extend and strengthen partnerships among all levels of government and the private sector, including for-profit and non-profit organizations, in the preservation, production and operation of affordable housing and its supportive services.

The 2025-2029 Consolidated Plan describes the state's strategic goals and objectives relative to the use of its state and federal resources, specifically with regard to affordable housing, public housing, homelessness, supporting individuals with special needs, and other non-housing community development needs.

In addition, it is intended to address issues related to: Community revitalization; Barriers to affordable housing; Lead-based paint hazards; The state's anti-poverty strategy; Coordination among state agencies and with other interested parties, both public and private; and Low-income housing tax credit use.

Housing Affordability - The cost of housing has increased significantly over the past several years. Extremely low-, very low-, and low-income households are increasingly cost burdened. The limited amount of new housing production over the past several years has exacerbated the affordability crisis throughout the state. While the circumstances of the affordability crisis look different in different areas of the state, related to urban, suburban, and rural areas.

Housing Rehabilitation - There are 6,415 renter households occupying substandard housing, and another 1,870 owner households occupying substandard housing. Additionally, Connecticut's large inventory of older housing stock (units built before 1980) needs ongoing rehabilitation and home maintenance that is associated with the age of the home. There are 328k renter occupied homes built before 1980 and another 632k owner-occupied homes built before 1980. Most of the oldest renter-occupied units are in New Haven, Hartford, and Fairfield counties. Typically, the most significant home repair needs among homes of this age are roof repairs and replacements, window replacement, exterior siding or painting, boilers, hot water heaters, HVAC system, etc.

Housing Modifications - Connecticut has seen a significant 28% increase in the population aged 65 and older over the past 12+ years, from 491,703 in 2010 to 629,108 in 2022. This expands the housing needs of people with a wider range of abilities, needs and disabilities. These needs range from the more typical age-related changes such as those relating to vision, hearing, and mobility that may require specific types of home modifications to accommodate these challenges. There will also be a greater demand for addressing the health needs of the growing senior population, including in-home care, assisted living, and nursing home care. It will grow increasingly important for communities to plan for and address the growing spectrum of needs for individuals who are growing older, living longer, and are interested in aging in place.

Public Housing - The demand for public housing and other types of affordable units is incredibly high. On average, the wait time can range from several months to several years depending on the circumstances of the individual or family seeking public housing or a voucher. The needs of public housing residents are no different than the population at large, particularly those of the same income level, age, and disability status. The primary needs for low-income families are affordable housing, opportunities to earn more income through higher-wage jobs, and a myriad of services

required to help support those that are living in or near poverty such as food assistance, affordable childcare and afterschool programs, transportation options, financial literacy, and educational and workforce development programs for higher quality and higher-wage employment.

Homelessness - Homelessness has increased substantially in the state of CT over the past several years. There were 3,410 sheltered and unsheltered persons experiencing homelessness on the night of January 23rd, 2024. This is an overall increase of 395 (13%) from last year's count of 3,015, and a 32% increase from 2021 when homelessness was at its lowest level in CT. More and more individuals and families who have never experienced homelessness before are becoming homeless or at greater risk of homelessness, including single mothers, seniors, and the working poor. There has been a conflation of factors that have all contributed to the increase in homelessness in CT: rapid increase in housing costs, stagnation in wages, the end of the state's eviction moratorium, the acceleration of pandemic-related home purchasing, and the ongoing commodification of rental housing by large real estate investors.

Non-Homeless Special Needs

- ***Elderly and Frail Elderly*** - Connecticut, like most of the country, has an aging population, comprising 629,108 persons, or approximately 17.4% of the total population. The total number of senior households has grown substantially over the past 10+ years, with the 65-74 population increasing 51% from 2010-2022. Among the senior population aged 65 and older, 108,685 have ambulatory difficulties, 41,957 have self-care difficulties, and 77,299 have independent living difficulties. Often, multiple disabilities manifest as people age. The total number of seniors aged 65 and over with any type of disability is 177,198. Seniors consistently highlight how they struggle to make ends meet, being financially overwhelmed due to fixed income and never-ending increases in rent, utilities, healthcare costs, transportation, food and household items.
- ***Persons with Physical or Cognitive Disabilities*** - The most common disability type is ambulatory disabilities (192,364 CT residents), followed by cognitive difficulty (166,001 CT residents), independent living difficulties (151,115 CT residents), hearing difficulties (107,895 CT residents), self-care difficulties (79,464 CT residents), and vision difficulties (73,155 CT residents). Residents that are physically or cognitively disabled have special housing needs to accommodate their specific conditions. The largest absolute number of CT residents living with a disability are adults aged 18 to 64, with 203,437 persons living with a disability (5.7% of the total population, and 17.4% of the total 18-64 population). Seniors aged 65 and older are more likely to have a disability, with 177,198 seniors having some type of disability, approximately 5% of the total population and 29.1% of the total population aged 65 and older.
- ***Persons with Alcohol or Other Drug Addiction*** - in the 2023 National Substance Use and Mental Health Services Survey for Connecticut, it was reported that there were 171 substance use treatment facilities that reported 43,470 clients in substance use treatment on March 31, 2023. Among these clients served, 1,994 were under the age of 18. The survey response rate for substance use treatment facilities in Connecticut was 90.6 percent.

- **Victims of Domestic Violence** - Aggregate data for the state shows that the 18 primary agencies that comprise the CT Coalition Against Domestic Violence served victims of domestic violence served 38,989 households in 2021. Shelters for this vulnerable population operated at 156 percent of their occupancy capacity, indicating a need for additional emergency shelter capacity for victims of domestic violence. Of the 3,410 unhoused individuals in Connecticut in 2024, 692, or 39%, are survivors of some form of domestic violence.
- **Persons with HIV/AIDS** - As of 2022, there were 10,738 people living with HIV in the state of Connecticut, equating to a prevalence rate of 286.2 per 100,000 residents. In 2022, there were 222 new cases of HIV diagnosed throughout CT, representing a rate of 6.1 per 100,000 residents. Among these, 40 individuals (18%) progressed to an AIDS diagnosis within three months of their initial HIV diagnosis. New cases are primarily concentrated in the urban core areas of Bridgeport, New Haven, Hartford, and to a lesser extent, Waterbury and Stamford. These cities also represent the primary locations of HIV infection in the state.
- **Veterans** - Connecticut is home to approximately 146,179 military veterans. It is worth noting that in 2016, the State of Connecticut was certified as the first state in the country to end veteran homelessness. Since then, the total number of homeless Veterans has increased to 191 as of the 2024 PIT count. Of the 191 homeless veterans, 17 were defined as chronically homeless, and 31 were unsheltered. Most of these Veterans are single and over the age of 50. Many Veterans have co-occurring mental health and/or drug addiction issues and other mental health disorders such as anxiety, depression, or post-traumatic stress disorder (PTSD). There were 8,469 Veterans living in poverty and an additional 26,227 Veterans were experiencing financial hardship, living in households that earned above the Federal Poverty Level, but not enough to cover the essentials in their communities.

Non-Housing Community Development Needs

- **Public Facilities** - The State of Connecticut prioritizes community development projects aimed at benefiting low- and moderate-income individuals, with a particular emphasis on addressing the urgent need for all types of housing development, especially affordable and deeply affordable housing options. These developments will integrate supportive services into their models to better serve vulnerable populations. Housing and community development programs will directly support these efforts.
- **Public Infrastructure** - As a general rule, the state will adopt and employ, to the greatest extent possible, responsible growth strategies consistent with the State's Conservation and Development (C&D) Plan, including but not limited to: inter-municipal or regional collaborations; reuse, rehabilitation, and revitalization of land, property and infrastructure; urban infill development; mixed-use developments; walkable environments; transit-oriented developments; and incorporation of sustainable development standards in the implementation of all the strategies and objectives outlined in this plan.
- **Public Services** - Through the consultation and citizen participation processes, there were several discussions related to the need of pairing affordable housing development with the

wraparound services to assist extremely low-income households in navigating the barriers to their housing stability. These include Mental Health Services; Substance Use Treatment; Healthcare Services; Life Skills Training; Employment Support; Ongoing Case Management; Legal Assistance; Transportation Services; and Affordable Childcare.

Evaluation of past performance

DOH focuses its available resources to achieve the creation of new quality affordable rental units; to achieve the creation of new affordable homeownership opportunities; to achieve the preservation of existing affordable rental housing units; and to maintain homeownership opportunities. Program success is measured through increased rental and homeowner housing opportunities that serve low-and-moderate income households in a variety of geographies.

During FFY 2020-2024, these five programs were successfully administered by the Department of Housing (DOH):

1. Community Development Block Grant Program-Small Cities (CDBG-SC): the CDBG-SC program assists smaller cities/towns across the state to address their affordable housing, community development and economic development needs.
2. HOME Investment Partnership Program (HOME): The HOME program funds the acquisition, construction and rehabilitation of affordable housing around the state.
3. Emergency Solutions Grant Program (ESG): The ESG program provides funds to emergency shelters, transitional housing for the homeless, and essential housing both to assist the homeless and to prevent homelessness.
4. Housing Opportunities for Persons with AIDS Program (HOPWA): the HOPWA program aids non- profit organizations in meeting the housing and social service needs of persons with AIDS and HIV related illnesses and their families.
5. National Housing Trust Program (NHTF): The NHTF program provides formula grants to states to increase and preserve the supply of decent, safe, and sanitary affordable housing for extremely low-income and very low-income households, including homeless families.

Each of these programs is funded by formula grants from the United States Department of Housing and Urban Development (HUD). A recent HUD monitoring of all five programs indicated that the State of Connecticut continues to administer these programs in accordance with federal requirements.

Each year, an evaluation of the success and outcomes of the projects and programming described in each Annual Action Plan is conducted and reviewed annually in a Performance Evaluation Report. These reports are available on DOH's website.¹ In summary, DOH has met or exceeded its outcomes every year during the previous Consolidated Plan period of July 1, 2020 to June 30, 2024. As of the writing of the 2025-2029 Consolidated Plan, DOH is on track to meet or exceed all of its goals for the final year of the previous Consolidated Plan, from July 1, 2024 to June 30, 2025.

¹ <https://portal.ct.gov/doh/doh/housing/notices-and-publications>

Summary of citizen participation process and consultation process

To be written after public comment period ends.

Summary of public comments

To be written after public comment period ends.

Summary of comments or views not accepted and the reasons for not accepting them

To be written after public comment period ends.

Summary

DOH's focus is to produce and preserve affordable housing units as quickly and efficiently as possible to ensure everyone has access to quality housing opportunities and options throughout the State of Connecticut. The overall goal of the housing and community development programs covered by this plan is to develop viable communities by providing decent housing and a suitable living environment for very low-, low- and moderate-income individuals and families.

The primary means towards this end is to extend and strengthen partnerships among all levels of government, the private sector, and non-profit organizations in the preservation, production and operation of affordable housing and its supportive services.

Ensuring affordable housing options, for both owners and renters is an important contributing factor to future economic health. Connecticut's most vulnerable households are in need of high-quality affordable housing. To address these needs, it is critical to add new housing as well as preserve affordable housing presently serving households in need.

The 2025-2029 Consolidated Plan for Housing and Community Development is in conformance with the state's State Plan of Conservation and Development (C&D Plan). The state C&D Plan is built around four Guiding Principles that are incorporated into the Consolidated Plan. These Guiding Principles are the values that underpin all aspects of the C&D Plan and inform the Visions, Policies, and Implementation Measures.

- 1) **SUSTAINABLE:** Balance the ecological, social, and economic dimensions of conservation and development to meet current needs without compromising the future. This entails protecting, preserving, and conserving our natural resources, efficiently and responsibly using our economic and human resources, and achieving and maintaining social wellbeing.
- 2) **EQUITABLE and JUST:** Ensure a high quality of life and opportunity for people of any income, race, ethnicity, religion, gender, ability, or age. This requires recognizing the ongoing impacts of past state, local, and private actions and addressing resulting disparities in outcomes, access, and opportunities; minimizing environmental, public health, and other burdens; and ensuring historically excluded populations benefit from state actions.
- 3) **VIBRANT:** Create and maintain culturally, economically, and physically diverse communities and an innovative, thriving statewide economy. This involves cultivating diverse businesses in type, size, and ownership, and creating, preserving, and promoting distinct communities and regions and their unique mixes of historic, natural, cultural, and social features.
- 4) **RESILIENT:** Develop and maintain the capacity to prepare for, recover from, adapt to, and thrive in changing and disruptive conditions. This demands that Connecticut understand, avoid, and/or reduce a variety of environmental, economic, public health, and social well-being risks; build technical, staffing, fiscal, and other capacity to implement resilience measures; and capitalize on opportunities to provide multiple resilience benefits

The state intends to use its federal formula grant funding, as well as its state allocations to address Connecticut's housing and community development needs through the application of these six Growth Management Principles by giving funding priority to projects that address multiple needs and leverage existing infrastructure and resources.

The Process

PR-05 Lead & Responsible Agencies 24 CFR 91.200(b)

Describe agency/entity responsible for preparing the Consolidated Plan and those responsible for administration of each grant program and funding source

The following are the agencies/entities responsible for preparing the Consolidated Plan and those responsible for administration of each grant program and funding source.

PR-05 Figure 1: Responsible Agencies

Agency Role	Name	Department/Agency
CDBG Administrator	CONNECTICUT	Department of Housing
HOPWA Administrator	CONNECTICUT	Department of Housing
HOME Administrator	CONNECTICUT	Department of Housing
ESG Administrator	CONNECTICUT	Department of Housing
Housing Trust Fund	CONNECTICUT	Department of Housing

Narrative

As part of the Consolidated Planning process, the State of Connecticut must identify the lead agency or entity for overseeing the development of the Consolidated Plan and the major public and private agencies that administer programs covered by the plan. In accordance with Title 24, Section 91.300(b), the Connecticut Department of Housing (DOH) has been designated as the lead agency responsible for the preparation of the Five-Year Consolidated Plans, Annual Action Plans and annual Performance Evaluation Reports. DOH administers all five of the federal block grants covered by this Consolidated Plan listed in the table above. Multiple other state agencies and partners, including for-profit and non-profit organizations, also participate in providing affordable housing, community development activities, and public services throughout the state. Those entities and sources of funding are identified in SP-40, the Institutional Delivery Structure section of this Plan. This section also assesses the strengths and weaknesses within the delivery system and makes suggestions for overcoming deficiencies while addressing housing needs.

This Consolidated Plan is intended to establish the framework for the allocation of both the federal formula grant funding, as well as state resources provided by the CT Legislature related to the activities of the Department of Housing. Given the magnitude of the affordability crisis facing every community of the state, efficient and effective resource alignment to maximize housing production for low-income families and households is critical.

Many HUD programs require that either the jurisdiction receiving funds directly from HUD have a Consolidated Plan that is approved by HUD or the application for HUD funds contains a certification that the application is consistent with a HUD-approved consolidated plan. Further, Public Housing Agency Plan (PHA Plan) submissions (see 24 CFR part 903) require a certification by the appropriate state or local official that the PHA Plan is consistent with the applicable

consolidated plan for the jurisdiction in which the public housing agency is located and must describe the manner in which the applicable contents of the PHA Plan are consistent with the consolidated plan. DOH reviews and issues these Certifications of Consistency.

Consolidated Plan Public Contact Information

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PR-10 Consultation – 91.100, 91.110, 91.200(b), 91.300(b), 91.215(I) and 91.315(I)

Introduction

A critical component of the consolidated planning process is to reach out to and consult with other public and private agencies when developing the plan. The plan itself must include a summary of the consultation process, including identification of the agencies that participated in the process. A summary of the efforts of DOH to enhance coordination between public and private agencies is included in this section.

The State of Connecticut recognizes that socio-economic and economic issues and challenges must not be viewed in isolation, nor can they be adequately and/or appropriately addressed in isolation of larger regional, statewide, national systems and structures. Housing, social services, education, public safety, transportation, public health, environmental justice, and economic development are all inter-related and intrinsically interconnected. To be truly effective and efficiently implemented/executed, efforts and activities to address the state's needs must be comprehensive, inclusive, coordinated, and aligned.

To encourage, promote and ensure that coordination between public and assisted housing providers and private and governmental health, mental health, and service agencies, the state also participates (via membership) in various associations such as the Connecticut Chapter of the National Association of Housing and Redevelopment Officials (CONN-NAHRO), Partnership for Strong Communities (PSC), and the Connecticut Coalition to End Homelessness (CCEH) to name a few. The state also has in place numerous interagency councils, committees, task forces, commissions and working groups to coordinate services and discuss larger statewide issues.

In developing the Consolidated Plan, the State of Connecticut Department of Housing contracted with CEW Advisors which facilitated a thorough outreach effort to engage with critical stakeholders throughout the state. Outreach efforts were designed to duly record stakeholder input and develop an informed set of priority needs to help guide DOH's investment strategies over the 2025-2029 time period for this Consolidated Plan. This outreach effort included multiple stakeholder interviews, roundtable discussions, focus groups, and community meetings, where multiple state agencies, for-profit and non-profit agencies, community-based organizations, and neighborhood associations that work in the areas of providing affordable housing, social services, homelessness, and community development activities and services throughout the state to discuss needs and strategies to address those needs. Several outreach and engagement efforts were used to consult with various agencies, partners, and residents to inform the Plan. Additionally, an online survey allowed for additional opportunities for residents of Connecticut to add their voice and articulate community needs.

Provide a concise summary of the jurisdiction's activities to enhance coordination between public and assisted housing providers and private and governmental health, mental health and service agencies (91.215(I)).

Connecticut is comprised of many types of communities, including urban centers, suburban ring community, and rural communities. The complementary nature between proposed services and programs is determined, in part, by the mission of each service provider in the system. Factors such as a municipality's current housing infrastructure, the size and expertise of its professional staff, access to transportation, and the relative affordability of its housing stock, all help determine

realistic strategies for a town to pursue. The coordination and delivery capabilities described in the Institutional Structure section of the Consolidated Plan will compliment state efforts to foster coordination of services.

As lead agency designated in the Consolidated Plan to coordinate and manage the process, DOH is responsible for providing oversight and coordination to the related service providers and the public on HUD-related matters. Consultation with outside individuals and agencies was programmed as a vital part of the Consolidated Plan development. Contributors included both public and private, individual and agency, for-profit and non-profit, local, regional and state entities. This was supplemented by a series of public meetings, focus groups, and an online survey.

DOH recognizes the importance of partnering with other agencies to help serve its housing and community development needs. Nonprofit agencies and Regional Councils of Government play an important role in the provision of affordable housing, supportive housing and social services, and economic development activities. Local organizations with direct public contact have a clear view and understanding of the state's housing and human service needs. Such organizations are an essential part of the state's institutional structure and how we address the problems of the populations we serve. Coordination with other state agencies and the private sector is also critical to reaching the populations we serve. DOH will continue to bolster communication and effort to address cross-population issues and to provide services that address our ever-changing needs.

The state provides direct guidance to its funding recipients on various program requirements. Technical assistance and monitoring are the primary means of fostering the state's awareness of program participants meeting requirements of federal funding. These efforts are designed to: 1) achieve various program objectives; 2) increase capacity to understand and administer all aspects of the various programs; 3) meet statutory requirements and certifications; and 4) resolve any problems or issues identified as a result of a review.

Successful implementation of the state Analysis of Impediments to Fair Housing Choice requires coordination between several state agencies. Connecticut can begin addressing limitations on fair housing choice by achieving the following six objectives: 1) providing better training of state employees in the area of fair housing; 2) expanding fair housing outreach and education activities; 3) increasing monitoring and enforcement of fair housing laws and policies; 4) improving the infrastructure necessary for viable diverse communities; 5) increasing the supply of affordable housing; and 6) increasing the access of racial and ethnic minorities, the disabled and families with children to the existing supply of housing.

In January of 2024, Gov. Ned Lamont established the Interagency Council on Homelessness as a mechanism to advise and assist DOH in improving homelessness prevention and response efforts statewide. The council seeks to develop and implement strategies and solutions to address the problems associated with homelessness, including the development of supportive housing options and reducing inappropriate use of emergency health care, shelter, chemical dependency, corrections, foster care, and similar services. Current membership includes the Commissioners (or their designees) of the departments of Aging and Disability Services, Children and Families, Correction, Housing, Labor, Mental Health and Addictive Services, Social Services, Veterans Affairs, Office of Policy and Management, Judicial Department Court Support Services Division, Office of Health Strategy, and the Connecticut Housing Finance Authority. Ad Hoc Members include The Department of Developmental Services, The Department of Economic and Community Development, The Department of Emergency Services and Public Protection, The Department of Public Health, The Office of Early Childhood, The State Department of Education, The Department of Transportation and The Department of Higher Education.

Describe coordination with the Continuum of Care and efforts to address the needs of homeless persons (particularly chronically homeless individuals and families, families with children, veterans, and unaccompanied youth) and persons at risk of homelessness

Connecticut Balance of State Continuum of Care (CT BOS CoC) is co-chaired by Department of Housing senior staff who provides direct coordination of the policies and services associated with the programs that fall under the responsibilities of the CT BOS CoC. In addition, DOH staff coordinates and collaborates with the other continuum of care (the Bridgeport, Stamford, Norwalk/Fairfield County CoC) on strategies, policies and practices to better serve all persons and families affected by homelessness.

CT BOS is led by a Steering Committee comprised of representatives from the localities that make up the BOS CoC including Advancing Connecticut Together, Coordinated Access Network (CAN) representatives, CT Coalition Against Domestic Violence, CT Coalition to End Homelessness, CT Department of Children and Families, CT Department of Corrections, CT Department of Education, CT Department of Housing, CT Department of Labor, CT Department of Mental Health and Addiction Services, CT Department of Social Services, CT Housing Finance Agency, Corporation for Supportive Housing, Partnership for Strong Communities, U.S. Department of Veteran Affairs, and persons who have experienced homelessness.

The CT BOS CoC Steering Committee is the planning body that coordinates policies, strategies and activities toward ending homelessness in the CT BOS region. The Steering Committee gathers and analyzes information in order to determine the local needs of people experiencing homelessness, implements strategic responses, educates the community on homeless issues, provides advice and input on the operations of homeless services, and measures CoC performance.

The CoC Steering Committee is comprised of representatives of state government agencies (including ESG recipients), nonprofit intermediaries, up to two consumers (homeless/formerly homeless persons), and homeless provider organizations representing sub-regions of the BOS. New members may be added by a majority vote of the existing Steering Committee. Government representatives are appointed by their respective commissioners and include the CT Department of Mental Health and Addiction Services, Department of Housing (ESG recipient), CT Housing Finance Agency, CT Department of Education, CT Department of Social Services, CT Department of Children and Families, CT Department of Correction, CT Department of Veteran Affairs, and U.S. Department of Veterans Affairs.

The Steering Committee manages year-round planning efforts that includes:

- Establishing policies and plans toward ending homelessness in the CT BOS region
- Analyzing information to determine the needs of people experiencing homelessness in the region
- Establishing priorities for how to use funding made available by HUD
- Setting performance standards and evaluating projects funded through CT BOS
- Monitoring project compliance with HUD and CT BOS requirements
- Offering training and technical assistance to support agencies' efforts to provide the highest quality services
- Coordinating with other systems and programs serving people experiencing homelessness
- Educating the community about homelessness

The CT BOS CoC and ODFC CoC work collaboratively with US Department of Housing and Urban Development, CT Field Office (HUD CT) and Emergency Solutions Grant (ESG) in each CAN region to ensure that the entry process for coordinated screening, assessment, and referrals for ESG projects are consistent with the written standards for administering ESG assistance.

Describe consultation with the Continuum(s) of Care that serves the jurisdiction's area in determining how to allocate ESG funds, develop performance standards and evaluate outcomes, and develop funding, policies and procedures for the administration of HMIS

In addition to the above, DOH has negotiated client-based outcomes and measures with directors of the emergency shelters it works with. Each shelter selects and negotiates individual numerical outcomes and measures with DOH staff and submits monthly statistical demographics reports, as well as ESG annual performance reports. DOH has also added contractual language as it relates to Homeless Management information System (HMIS) requirements and utilization. The projected numerical goals represent statewide outcomes that will be evaluated every six months.

- Measure 1: At least 40% of clients access permanent housing.
- Measure 2: No more than 15% of clients are discharged to homelessness.
- Measure 3: At least 100% of clients access additional social and/or outpatient treatment services as needed in the housing plan.
- Measure 4: For clients whose housing plans include agreed upon goals of accessing information on health, education, housing, budgeting, and/or other services as defined in the program component selected above, in order to make informed decisions about their health, education, finances, housing and other identified needs, 100 percent will be provided with such information, as individually appropriate.
- Measure 5: The monthly shelter utilization rate, as reported in the Monthly Shelter Utilizer Report, shall be at or above 80%.
- Measure 6: If the monthly shelter utilization rate falls under 80% for more than 3 months consistently during this contract period, the contractor will communicate with DOH to explain the reasons for the low utilization rate.

Agencies and Organizations

Describe Agencies, groups, organizations and others who participated in the process and describe the jurisdictions consultations with housing, social service agencies and other entities

PR-10 Figure 1: Agencies, groups, organizations who participated

1. CT Dept. of Housing	
<i>Agency/Group/Organization</i>	CT Dept. of Housing
<i>Agency/Group/Organization Type</i>	Housing PHA Services - Housing Services-Children Services-Elderly Persons Services-Persons with Disabilities Services-Persons with HIV/AIDS Services-Victims of Domestic Violence Services-homeless Service-Fair Housing Agency - Managing Flood Prone Areas Other government - State Planning organization
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Lead-based Paint Strategy Public Housing Needs Homelessness Strategy Homeless Needs - Chronically homeless Homeless Needs - Families with children Homelessness Needs - Veterans Homelessness Needs - Unaccompanied youth Non-Homeless Special Needs HOPWA Strategy Economic Development Market Analysis Anti-poverty Strategy
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Regular communication between DOH and CEW Advisors to discuss the overall progress of the Consolidated Plan, each element and section, discussed priorities and historical work of DOH and how DOH interacts with other state agencies and the larger network of housing developers and agencies throughout the state to help facilitate the development of affordable housing.
2. Corporation for Independent Living	
<i>Agency/Group/Organization</i>	Corporation for Independent Living

<i>Agency/Group/Organization Type</i>	Housing Regional Organization Community Development Financial Institution
<i>What section of the Plan was addressed by Consultation?</i>	Lead Based Paint Strategy Non Homeless Special Needs
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts Coordinated meetings One on One consultations

3. Department of Aging and Disability Services

<i>Agency/Group/Organization</i>	Department of Aging and Disability Services
<i>Agency/Group/Organization Type</i>	Services-Housing Services-Elderly Persons Services- Persons with Disabilities Other government – State
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Public Housing Needs Non Homeless Special Needs
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

4. Commission on Human Rights and Opportunities

<i>Agency/Group/Organization</i>	Commission on Human Rights and Opportunities
<i>Agency/Group/Organization Type</i>	Service-Fair Housing Services - Victims Other government – State
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment

<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.
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5. Department of Education

<i>Agency/Group/Organization</i>	Department of Education
<i>Agency/Group/Organization Type</i>	Services-Children Services-Education Other government – State
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Lead-based Paint Strategy Homeless Needs - Families with children Homelessness Needs - Unaccompanied youth
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

6. Department of Developmental Services

<i>Agency/Group/Organization</i>	Department of Developmental Services
<i>Agency/Group/Organization Type</i>	Housing PHA Services - Housing Services-Children Services-Elderly Persons Services-Persons with Disabilities Services-Health Services-Education Services-Employment Other government – State
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Non-Homeless Special Needs
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

7 Department of Children and Families

<i>Agency/Group/Organization</i>	Department of Children and Families
<i>Agency/Group/Organization Type</i>	Services - Housing Services-Children Services-Health Services-Education Child Welfare Agency Other government – State
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Non-Homeless Special Needs
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

8. Department of Mental Health and Addiction Services

<i>Agency/Group/Organization</i>	Department of Mental Health and Addiction Services
<i>Agency/Group/Organization Type</i>	Housing Services - Housing Services-Persons with Disabilities Services-homeless Services-Health Other government - State
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Homelessness Strategy Homeless Needs - Chronically homeless Non-Homeless Special Needs
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

9. Department of Public Health

<i>Agency/Group/Organization</i>	Department of Public Health
<i>Agency/Group/Organization Type</i>	Services - Housing Services-Health Services-Education Health Agency Other government - State

<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Lead-based Paint Strategy
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

10. Connecticut Housing Finance Authority

<i>Agency/Group/Organization</i>	Connecticut Housing Finance Authority
<i>Agency/Group/Organization Type</i>	Housing PHA Other government - State Financial Institution Community Development Financial Institution
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Lead-based Paint Strategy Public Housing Needs Non-Homeless Special Needs Economic Development
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

11. Capital For Change

<i>Agency/Group/Organization</i>	Capital For Change
<i>Agency/Group/Organization Type</i>	Housing PHA Financial Institution Community Development Financial Institution
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Lead-based Paint Strategy Public Housing Needs Non-Homeless Special Needs Economic Development
<i>How was the Agency/Group/Organization consulted and what are the</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with

<i>anticipated outcomes of the consultation or areas for improved coordination?</i>	identifying the specific priorities for the Strategic Plan.
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12. Community Renewal Team

<i>Agency/Group/Organization</i>	Community Renewal Team
<i>Agency/Group/Organization Type</i>	Housing Services - Housing Services-Children Services-homeless Services-Education Regional organization
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Homelessness Strategy Non-Homeless Special Needs
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

13. Department of Labor

<i>Agency/Group/Organization</i>	Department of Labor
<i>Agency/Group/Organization Type</i>	Services-Education Services-Employment Other government - State
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Economic Development Market Analysis
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

14. Department of Correction

<i>Agency/Group/Organization</i>	Department of Correction
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<i>Agency/Group/Organization Type</i>	Housing Services - Housing Services-Education Other government - State
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Public Housing Needs Homelessness Strategy Non-Homeless Special Needs
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

15. Department of Veterans' Affairs

<i>Agency/Group/Organization</i>	Department of Veterans' Affairs
<i>Agency/Group/Organization Type</i>	Housing Services - Housing Services-Elderly Persons Services-Persons with Disabilities Services-homeless Services-Health Services-Education Services-Employment Other government - State
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Homelessness Needs - Veterans Non-Homeless Special Needs
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

16. Department of Social Services

<i>Agency/Group/Organization</i>	Department of Social Services
<i>Agency/Group/Organization Type</i>	Housing PHA Services - Housing Services-Children Services-Elderly Persons Services-Health Other government - State
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Public Housing Needs Homelessness Strategy Homeless Needs - Families with children Non-Homeless Special Needs
<i>How was the Agency/Group/Organization</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and

<i>consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.
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17. Office of Policy and Management

<i>Agency/Group/Organization</i>	Office of Policy and Management
<i>Agency/Group/Organization Type</i>	Services-Education Other government - State Planning organization Business and Civic Leaders Financial Programs
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Lead-based Paint Strategy Public Housing Needs Homelessness Strategy Homeless Needs - Chronically homeless Homeless Needs - Families with children Homelessness Needs - Veterans Homelessness Needs - Unaccompanied youth Non-Homeless Special Needs HOPWA Strategy Economic Development Market Analysis Anti-poverty Strategy
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

18. Interagency Committee on Supportive Housing and Homelessness

<i>Agency/Group/Organization</i>	Interagency Committee on Supportive Housing and Homelessness
<i>Agency/Group/Organization Type</i>	Housing PHA Services - Housing Other government - State State Agency Task Group
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Public Housing Needs Homelessness Strategy
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

19. Statewide Long Term (Disaster) Recovery Committee

<i>Agency/Group/Organization</i>	Statewide Long Term (Disaster) Recovery Committee
<i>Agency/Group/Organization Type</i>	Agency - Managing Flood Prone Areas Agency - Emergency Management Other government - State State Agency Task Group
<i>What section of the Plan was addressed by Consultation?</i>	Disaster Recovery/Emergency Mgt
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

20. The Governor's Council on Climate Change

<i>Agency/Group/Organization</i>	The Governor's Council on Climate Change
<i>Agency/Group/Organization Type</i>	Agency - Managing Flood Prone Areas Agency - Emergency Management Other government - Federal State Agency Task Group
<i>What section of the Plan was addressed by Consultation?</i>	Climate Change/Emergency Mgt
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

21. U.S. Department of Housing and Urban Development

<i>Agency/Group/Organization</i>	U.S. Department of Housing and Urban Development
<i>Agency/Group/Organization Type</i>	Housing PHA Services - Housing Services-Children Services-Elderly Persons Services-Persons with Disabilities Services-

	Persons with HIV/AIDS Services-Victims of Domestic Violence Services-homeless Services-Health Services-Education Services-Employment Service-Fair Housing Services - Victims Services - Broadband Internet Service Providers Services - Narrowing the Digital Divide Health Agency Child Welfare Agency Agency - Managing Flood Prone Areas Agency - Management of Public Land or Water Resources Agency - Emergency Management Publicly Funded Institution/System of Care Other government - Federal Planning organization
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Lead-based Paint Strategy Public Housing Needs Homelessness Strategy Homeless Needs - Chronically homeless Homeless Needs - Families with children Homelessness Needs - Veterans Homelessness Needs - Unaccompanied youth Non-Homeless Special Needs HOPWA Strategy Economic Development Market Analysis Anti-poverty Strategy
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

22. Social Security Administration

<i>Agency/Group/Organization</i>	Social Security Administration
<i>Agency/Group/Organization Type</i>	Services-Children Services-Elderly Persons Services-Persons with Disabilities Other government - Federal Financial
<i>What section of the Plan was addressed by Consultation?</i>	Financial
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

23. Federal Home Loan bank

<i>Agency/Group/Organization</i>	Federal Home Loan bank
<i>Agency/Group/Organization Type</i>	Services - Housing Service-Fair Housing Financial/Community Development
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Economic Development Financial
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

24. Connecticut Association of Realtors

<i>Agency/Group/Organization</i>	Connecticut Association of Realtors
<i>Agency/Group/Organization Type</i>	Services - Housing Business and Civic Leaders
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Market Analysis
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

25. Connecticut Fair Housing Center

<i>Agency/Group/Organization</i>	Connecticut Fair Housing Center
<i>Agency/Group/Organization Type</i>	Services - Housing Service-Fair Housing Services - Victims Civic Leaders
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Market Analysis
<i>How was the Agency/Group/Organization consulted and what are the</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with

<i>anticipated outcomes of the consultation or areas for improved coordination?</i>	identifying the specific priorities for the Strategic Plan.
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26. Affordable Housing Alliance

<i>Agency/Group/Organization</i>	Affordable Housing Alliance
<i>Agency/Group/Organization Type</i>	Services - Housing Civic Leaders Policy/Advocacy
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

27. Americans with Disabilities Act Coalition of Connecticut, Inc

<i>Agency/Group/Organization</i>	Americans with Disabilities Act Coalition of Connecticut, Inc
<i>Agency/Group/Organization Type</i>	Services - Housing Services-Persons with Disabilities Services-Education
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Non-Homeless Special Needs
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

28. Families United for Children's Mental Health

<i>Agency/Group/Organization</i>	Families United for Children's Mental Health
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<i>Agency/Group/Organization Type</i>	Services-Children Health Agency Children's Advocacy
<i>What section of the Plan was addressed by Consultation?</i>	Children's Advocacy
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

29. Connecticut Council of Organizations Serving the Deaf, Inc

<i>Agency/Group/Organization</i>	Connecticut Council of Organizations Serving the Deaf, Inc
<i>Agency/Group/Organization Type</i>	Services-Children Services-Elderly Persons Services-Persons with Disabilities Services-Education Advocacy/Deaf
<i>What section of the Plan was addressed by Consultation?</i>	Advocacy/Deaf
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

30. Conn NAHRO

<i>Agency/Group/Organization</i>	Conn Nahro
<i>Agency/Group/Organization Type</i>	Planning organization Housing Advocacy
<i>What section of the Plan was addressed by Consultation?</i>	Housing Need Assessment Market Analysis Housing Advocacy
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

<i>consultation or areas for improved coordination?</i>	
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31. Connecticut Coalition to End Homelessness

<i>Agency/Group/Organization</i>	Connecticut Coalition to End Homelessness
<i>Agency/Group/Organization Type</i>	Continuum of Care Services -Homeless
<i>What section of the Plan was addressed by Consultation?</i>	Homelessness Needs; Homelessness Needs- Children; Homelessness Needs-Veterans; Homelessness Needs- Chronically Homeless
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

32. CLASS

<i>Agency/Group/Organization</i>	Connecticut Local Administrators of Social Services
<i>Agency/Group/Organization Type</i>	Other Government - Local
<i>What section of the Plan was addressed by Consultation?</i>	Housing Needs Assessment Market Analysis
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

33. Center for Housing Opportunity

<i>Agency/Group/Organization</i>	Center for Housing Opportunity
<i>Agency/Group/Organization Type</i>	Housing Continuum of Care Regional Organization Planning Organization
<i>What section of the Plan was addressed by Consultation?</i>	Housing Needs Assessment Public Housing Needs Homelessness Strategy
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

34. Alliance for Community Empowerment

<i>Agency/Group/Organization</i>	Alliance For Community Empowerment
<i>Agency/Group/Organization Type</i>	Services Homelessness Services Children Services Elderly Services Veterans
<i>What section of the Plan was addressed by Consultation?</i>	Housing Needs Assessment Public Housing Needs Homeless Needs-Chronically Homeless Homeless Needs- Families with Children Homeless Needs-Veterans
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

35. Access Community Action Agency

<i>Agency/Group/Organization</i>	Access Community Action Agency
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<i>Agency/Group/Organization Type</i>	Services Homelessness Services Children Services Elderly Services Veterans
<i>What section of the Plan was addressed by Consultation?</i>	Housing Needs Assessment Public Housing Needs Homeless Needs-Chronically Homeless Homeless Needs- Families with Children Homeless Needs-Veterans
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

36. Desegregate Connecticut

<i>Agency/Group/Organization</i>	Desegregate Connecticut
<i>Agency/Group/Organization Type</i>	Housing
<i>What section of the Plan was addressed by Consultation?</i>	Housing Needs Assessment Public Housing Needs Anti-Poverty Strategy
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

37. LISC Connecticut

<i>Agency/Group/Organization</i>	LISC Connecticut
<i>Agency/Group/Organization Type</i>	Housing Community Development Financial Institution

<i>What section of the Plan was addressed by Consultation?</i>	Housing Needs Assessment
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

38. Partnership for Strong Communities

<i>Agency/Group/Organization</i>	Partnership for Strong Communities
<i>Agency/Group/Organization Type</i>	Services-Fair Housing
<i>What section of the Plan was addressed by Consultation?</i>	Housing Needs Assessment Public Housing Needs Homeless Needs-Chronically Homeless Homeless Needs- Families with Children Homeless Needs-Veterans
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

39. Ledge Light Health District

<i>Agency/Group/Organization</i>	Ledge Light Health District
<i>Agency/Group/Organization Type</i>	Health Agency
<i>What section of the Plan was addressed by Consultation?</i>	Housing Needs Assessment Public Housing Needs Homeless Needs-Chronically Homeless Homeless Needs- Families with Children Homeless Needs-Veterans

<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.
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40. Wethersfield Social and Youth Services Department

<i>Agency/Group/Organization</i>	Town of Wethersfield Social and Youth Services Department
<i>Agency/Group/Organization Type</i>	Other Government - Local
<i>What section of the Plan was addressed by Consultation?</i>	Housing Needs Assessment Public Housing Needs Homeless Needs-Chronically Homeless Homeless Needs- Families with Children Homeless Needs-Veterans
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

41. The Housing Collective

<i>Agency/Group/Organization</i>	CT Centers for Housing Opportunity
<i>Agency/Group/Organization Type</i>	Services-Fair Housing Market Analysis Anti-Poverty Strategy
<i>What section of the Plan was addressed by Consultation?</i>	Housing Needs Assessment Public Housing Needs Homeless Needs-Chronically Homeless Homeless Needs- Families with Children Homeless Needs-Veterans

<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.
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41. Connecticut Councils of Governments

<i>Agency/Group/Organization</i>	Connecticut Council of Governments
<i>Agency/Group/Organization Type</i>	Regional Organization Other Government - County
<i>What section of the Plan was addressed by Consultation?</i>	Housing Needs Assessment Public Housing Needs Homeless Needs-Chronically Homeless Homeless Needs- Families with Children Homeless Needs-Veterans Homelessness Strategy
<i>How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?</i>	Email blasts; Coordinated meetings; Roundtable discussions Information gathered informed the needs assessment and market analysis of the Consolidated Plan and assists with identifying the specific priorities for the Strategic Plan.

Identify any Agency Types not consulted and provide rationale for not consulting

CEW Advisors, Inc., the consultant hired by the State of Connecticut, scheduled several roundtable discussions, focus groups, and one-on-one conversations with organizations and agencies engaged in affordable housing, homelessness, social service delivery, senior and youth programming, community and economic development, and other relevant issue areas. These organizations and agencies have existing relationships and partnerships with DOH. Every effort was made to be inclusive of every type of organization required for the Consolidated Planning process. There were no specific agency types that were not consulted during the development of this Consolidated Plan. Further, the information gleaned from the myriad agencies and community members consulted were largely in alignment and self-reinforcing.

PR-10 Figure 2: Other local / regional / federal planning efforts

Name of Plan	Lead Organization	How do the goals of your Strategic Plan overlap with the goals of each plan?
Balance of State Continuum of Care (BOS CoC)	CT Dept. of Housing	The CT BOS CoC is a united coalition of community and state systems that assist homeless and near homeless residents in the BOS region to obtain housing, economic stability, and an enhanced quality of life through comprehensive services. The CT BOS CoC addresses critical issues related to homelessness through a coordinated community-based process of identifying and addressing needs utilizing not only HUD dollars, but also mainstream resources and other sources of funding. Connecticut Balance of State Continuum of Care (CT BOS CoC) is co-chaired by Department of Housing senior staff who provides direct coordination of the policies and services associated with the programs that fall under the responsibilities of the Connecticut Balance of State Continuum of Care, including allocation of ESG funds, development of performance standards, evaluation of outcomes and the administration of HMIS. In addition, this staff person coordinates and collaborates with other local continuum of care on strategies, policies and practices to better serve all persons and families affected by homelessness. The goals of the CT BOS Continuum of Care are articulated in the Comprehensive Plan.
2025-2030 State Conservation and Development Policies Plan (State C&D Plan)	CT Office of Responsible Growth	The Conservation and Development Policies Plan (C&D Plan) is a five-year comprehensive plan guiding state agency actions that affect land and water resources. Specifically, agencies must be consistent with the C&D Plan whenever they undertake or authorize grants for the following actions using more than \$200,000 of state or federal funding for the acquisition of real property, the development or improvement of real property, or the acquisition of public transportation equipment or facilities.
Connecticut Housing & Segregation Study	Connecticut Office of Policy and Management	Study provided additional analysis used to understand the extent of racial and economic segregation throughout the state and among the municipalities as well as the role state and federal housing programs may play in these conditions. The mandate of the legislation is to determine levels of segregation in CT and determine the extent to which government-assisted affordable housing has contributed to or alleviated it over time.
Fair Housing Choice and Racial and Economic Integration	Connecticut Housing Finance Authority	CHFA collects the racial composition of persons moving into a CHFA-funded multifamily housing development, those occupants currently residing in a development, and those on the waiting list of a housing development supervised by the agency to ensure the agency is fair in promoting fair housing choice and racial and economic integration. CHFA also collects information

		of single-family borrowers to ensure our programs are reaching those who need them most. This study provided important information about the trends in racial segregation in the state.
CHFA Housing Needs Assessment	Connecticut Housing Finance Authority	Study provided important information related to state's unmet housing needs.
Shared Stewardship: 2018-2023 -Statewide Historic Preservation Plan	Connecticut State Historic Preservation Office	Study provided important information about the SHPO's efforts and accomplishments related to historic preservation in the state of Connecticut.
A Study of Tenants in State-Funded Elderly/Disabled Housing	Connecticut Department of Housing	Study provided important information to understand areas of conflict between tenants who are elderly and tenants who are young and disabled, best practices for addressing areas of conflict, and the resources needed to ensure that all tenants can use and enjoy state-funded elderly/disabled housing.
Analysis of Impediments to Fair Housing Choice	Connecticut Fair Housing Center	Study provided important information related to the state's barriers to affordable housing and strategies to alleviate these barriers.
Connecticut Housing Assessment: Current and Future Trends in Affordable and Accessible Housing Supply and Needs	Urban Institute	Study provided important information related to state's unmet housing needs.
Bringing Zoning into Focus: A Fine-Grained Analysis of Zoning's Relationships to Housing Affordability, Income Distributions, and Segregation in Connecticut	Urban Institute	Study provided important information related to local land-use and zoning policies and how they impact the development of multi-family and affordable housing.
CT Fair Share Housing Study Interim Report	ECONorthwest CT Office of Policy and Management	Analysis was commissioned to study potential options for a methodology that can be used to calculate a Fair Share Housing Allocation in an effort to develop a fair share housing allocation.
State of Reentry 2024	Connecticut Department of Correction	Study provided important information related to discharge planning of formerly incarcerated individuals and the housing challenges faced by formerly incarcerated persons.

Describe cooperation and coordination with other public entities, including the State and any adjacent units of general local government, in the implementation of the Consolidated Plan (91.215(l))

As discussed above, DOH has productive working relationships with various state agencies to align efforts and resources to address housing and homelessness in Connecticut. These include departments of Aging and Disability Services, Children and Families, Correction, Housing, Labor, Mental Health and Addictive Services, Social Services, Veterans Affairs, Office of Policy and Management, Judicial Department Court Support Services Division, Office of Health Strategy, and the Connecticut Housing Finance Authority.

As part of the consultation process for the development of this Consolidated Plan, CEW Advisors, Inc., the consulting firm that was contracted by DOH, facilitated several roundtable discussions with state agency partners, municipal leaders and staff, public housing authorities, homelessness services providers, affordable housing developers, and other stakeholders. These roundtable discussions were well attended and participants provided substantial information that helped inform the Consolidated Plan.

Narrative (optional)

The Department of Housing (DOH) is identified as the "first point of contact" for the institutional structure presented in this Consolidated Plan. This role is supported at three levels: first, through the designation by the legislature to serve as the state's lead agency; second, the role as "grantee" of various HUD program funds; and third, the mission to serve all the citizens of Connecticut. As such, DOH will conduct and foster open participation, including supportive assistance, with the goal of facilitating meaningful involvement. DOH will work to increase participation at all levels, especially among extremely low- and very low-income groups, as well as those traditionally under-represented. Finally, DOH will involve organizations that represent special need populations across Connecticut.

At the state level, DOH has productive working relationships with various state agencies to align efforts and resources to address housing and homelessness in Connecticut. These include departments of Aging and Disability Services, Children and Families, Correction, Housing, Labor, Mental Health and Addictive Services, Social Services, Veterans Affairs, Office of Policy and Management, Judicial Department Court Support Services Division, Office of Health Strategy, and the Connecticut Housing Finance Authority.

Consultation with outside individuals and agencies was also a vital part of the development of this Consolidated Plan. Contributors include both public and private, individual and agency, for-profit and non-profit, local, regional and state entities. Non-profit agencies play an important role in the provision of affordable housing, supportive housing and social services, and economic development activities. Local organizations with direct public contact have a clear view and understanding of the state's housing and human service needs. Such organizations are an essential part of the state's institutional structure and typically serve in one or more of the following capacities: 1) are eligible to receive public and private funds or resources targeted at serving need populations; 2) are legally restricted or structured by organizational charter to serve lower income or specific need populations; 3) are identified by regulation, program or otherwise allowed to undertake certain governmental programs serving need populations; or 4) have daily contact with, represent or advocate on behalf of, certain populations in need.

The private sector participants that focus on the preservation or development of the state's housing and community development delivery system include financial institutions, builders/developers, foundations and realtors. Local financial institutions provide construction financing, low interest rehabilitation loans, mortgage financing and loan servicing, while builders/developers are active in participating in affordable housing projects. Many private businesses and organizations are involved or support the efforts of public agencies to provide human services and opportunities throughout Connecticut. Based on the needs and objectives developed in the Consolidated Plan, the state is prepared to support applications for assistance by other entities that serve to accomplish the goals set forth in the plan.

Additionally, the DOH will seek to coordinate the allocation of resources towards implementing goals and strategies identified in the various state sponsored comprehensive planning activities. These include regional and state housing needs assessments, the State Plan of Conservation and Development, locally adopted Affordable Housing plans (8-30j), COG Regional Housing Plans, housing development strategies identified by OPM's Office of Responsible Growth and the Commission on Connecticut's Development and Future. Where appropriate, the DOH will also direct resources towards local and regional entities that seek to implement strategies that further housing choice, address affordability, supportive housing, and support homeless populations identified in adopted comprehensive planning documents.

PR-15 Citizen Participation – 91.105, 91.115, 91.200(c) and 91.300(c)

*Summary of citizen participation process/Efforts made to broaden citizen participation
Summarize citizen participation process and how it impacted goal-setting*

It is important that there are opportunities provided for the public to participate in the development of the Consolidated Plan. This section provides a summary of the citizen participation efforts made by the DOH, including efforts to broaden public participation, a summary of citizen comments and recommendations for the plan, and responses to those comments.

DOH solicited input into the development of the 2025-2029 Consolidated Plan for Housing and Community Development and the First Year Action Plan by conducting the following:

6 Community Meetings

- Access Community Action in Willimantic, CT: October 8, 2024, 6-8pm
- New Haven Public Library in New Haven, CT: October 15, 6-8pm
- East Hartford Public Library in East Hartford, CT: October 16, 6-8pm
- Bridgeport North Library in Bridgeport, CT: October 17, 6-8pm
- New London Public Library in New London, CT: October 23, 6-8pm
- The Place for CommUNITY Wellbeing in New London, CT: December 12, 2024

Community Roundtable Discussions

- New Haven CAP Agency in New Haven, CT: October 4, 2024, 3-5pm
- Catholic Institute for Hispanic Families, Hispanic Senior Center in Hartford, CT: October 16, 2024, 10-11am
- Hartford CAP Agency Community Response Team in Hartford, CT: October 16, 12:30-2pm
- CLASS Executive Board Meeting November 14 at 10:30am

6 Virtual Roundtables Discussions

- Municipal Roundtable #1: Virtual Meeting: 10/1/2024, 10:00-11:30am
- State Agencies Roundtable: Virtual Meeting: 10/2/2024, 10:00-11:30am
- Municipal Roundtable #2: Virtual Meeting: 10/3/2024, 10:00-11:30am
- Municipal Roundtable #3: Virtual Meeting: 10/8/2024, 10:00-11:30am
- Municipal Roundtable #4: Virtual Meeting: 10/10/2024, 10:00-11:30am
- Municipal Roundtable #5: Virtual Meeting: 10/17/2024, 10:00-11:30am

DOH Managers Meeting: Virtual Meeting. December 6, 2024, 2-3pm

Additionally, supplementary information was gathered from the following events.

- CT Housing Conference: Building Foundations: CT Convention Center. October 24, 2024, 9am to 4pm
- CT Coalition to End Homelessness 2024 Annual Meeting: Virtual Event. November 7, 2024, 10am
- South Norwalk Lexington and South Main Community Development Plan Community Meeting: Virtual Event. November 18, 2024, 6pm
- Connecticut Affordable Housing Conference 2024: Virtual Event. November 18-19, 2024, 9:30am – 4pm

Online Survey with 772 participants from 84 municipalities throughout the state. Survey was open for responses from October 1, 2024 and closed on January 2, 2025. The online survey was available in English and Spanish. Survey link was emailed to over 1,000 contacts in the state of CT including state agency staff, municipal leaders and senior staff, nonprofit agency staff, Community Action Agencies, and public libraries.

A legal notice for the public meetings was published in 3 newspapers, including 1 in Spanish. The legal notice was posted on DOH's web site and forwarded to all 169 municipal chief elected officials, all public housing authorities, regional planning organizations, and our Community Partners list.

- The First Public Hearing was held virtually on **Tuesday, April 8, 2025 at 11am**. The primary audience for this public hearing were state agency partners and municipal staff and leadership.
- The Second Public Hearing was held virtually on **Wednesday, April 9, 2025 at 11am**. The primary audience for this public hearing were the network of community partners and nonprofit agencies that comprise the institutional delivery structure.
- The Third Public Hearing was held virtually on **Wednesday, April 16, 2025 at 5:30pm**. The primary audience for this public hearing was the broader community.
- Final Public Comment Period was from **April 1, 2025 to May 2, 2025**.

Those that could not attend the abundance of meetings, focus groups, and discussions were encouraged to submit written comments. People were referred to DOH's website, www.ct.gov/DOH, or the State Library for copies of former documents.

DOH took into consideration all comments on the 2025-2029 Consolidated Plan for Housing and Community Development and the annual 2025-2026 Action Plan that were received at the public meetings/hearings and round table discussions, or in writing.

PR-15 Figure 1: Citizen Participation Outreach

1. Newspaper Advertisement	
<i>Mode of outreach</i>	Newspaper
<i>Target of outreach</i>	Minorities Non-English Speaking- Spanish Persons with Disabilities Residents of Public and Assisted Housing
<i>Summary of response/attendance</i>	Legal notice for the public meetings was published in the Waterbury Republican, Hartford Courant, and LaVoz Hispana on September 26, 2024. The legal notice was also posted on DOH's web site and forwarded to all 169 municipal chief elected officials as well as all public housing authorities and regional planning organizations.
<i>Summary of comments received</i>	Not applicable
<i>Summary of comments not accepted and reasons</i>	Not applicable

<i>URL (If applicable)</i>	Not applicable
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2. Public Meeting – Willimantic Connecticut – Access Community Action

<i>Mode of outreach</i>	Public Meeting
<i>Target of outreach</i>	Minorities Non-English Speaking - Specify other language: Spanish Persons with disabilities Nontargeted/bro ad community Residents of Public and Assisted Housing
<i>Summary of response/attendance</i>	The first community meeting was held at Access Community Action in Willimantic, CT: October 8, 2024, 6-8pm. The purpose of the meeting was to solicit input into the development of the 2025-2029 Consolidated Plan. Those that were not able to attend were encouraged to submit written testimony via email. At the meeting there were 7 participants from the general public.
<i>Summary of comments received</i>	Infrastructure Deficiencies: - Lack of essential infrastructure, especially water and sewer connections, in rural and suburban areas poses a significant barrier to housing development. This limits the potential for expanding housing options in these locations. Stakeholders also discussed difficulties related to public transportation Childcare Access: - Limited childcare availability presents a major challenge for families seeking housing and for developers aiming to attract residents to new housing developments. This underscores the interconnectedness of housing and childcare as essential needs. Youth Homelessness: - A critical concern is the lack of focus on youth homelessness (ages 18-24), particularly those transitioning out of foster care. This highlights the need for targeted interventions and support services to prevent and address homelessness among this vulnerable population. Housing Affordability: - Rising rental costs, high upfront payment requirements (security deposits, first/last month's rent), and stringent credit score requirements create significant barriers to accessing affordable

	housing. This affects a wide range of individuals and families. Funding & Collaboration: Effectively addressing these housing challenges requires navigating complex federal and state funding opportunities and fostering strong collaboration between state agencies and local non-profit organizations.
<i>Summary of comments not accepted and reasons</i>	Not Applicable
<i>URL (If applicable)</i>	Not Applicable

2. Public Meeting – New Haven Public Library

<i>Mode of outreach</i>	New Haven Public Library in New Haven, CT: October 15, 6-8pm
<i>Target of outreach</i>	Minorities Non-English Speaking - Specify other language: Spanish Persons with disabilities Nontargeted/bro ad community Residents of Public and Assisted Housing
<i>Summary of response/attendance</i>	The second community meeting was held at New Haven Public Library: October 15, 2024, 6-8pm. The purpose of the meeting was to solicit input into the development of the 2025-2029 Consolidated Plan. Those that were not able to attend were encouraged to submit written testimony via email. At the meeting there were 4 participants from the general public.
<i>Summary of comments received</i>	Housing Affordability Crisis: - Rents in New Haven are increasing rapidly, and wages are not keeping pace, making it extremely difficult for many to afford housing. Barriers to Housing: - Eviction records create significant obstacles for people seeking housing, even when they have rental assistance vouchers. Need for Increased Section 8 Participation: - Expanding landlord participation in the Section 8 program is crucial to providing more affordable housing options. Community-Wide Engagement:

	- Addressing the housing crisis requires the involvement of the entire community, including homeowners, in finding solutions. Impact on Individuals: - The current housing situation causes immense stress and instability for individuals experiencing homelessness or facing housing insecurity.
<i>Summary of comments not accepted and reasons</i>	Not Applicable
<i>URL (If applicable)</i>	Not Applicable

3. Public Meeting – East Hartford Public Library

<i>Mode of outreach</i>	East Hartford Public Library in East Hartford, CT: October 16, 6-8pm
<i>Target of outreach</i>	Minorities Non-English Speaking - Specify other language: Spanish Persons with disabilities Nontargeted/bro ad community Residents of Public and Assisted Housing
<i>Summary of response/attendance</i>	The third community meeting was held at New Haven Public Library: October 16, 2024, 6-8pm. The purpose of the meeting was to solicit input into the development of the 2025-2029 Consolidated Plan. Those that were not able to attend were encouraged to submit written testimony via email. At the meeting there were no participants who were from the general public.
<i>Summary of comments received</i>	Not Applicable
<i>Summary of comments not accepted and reasons</i>	Not Applicable
<i>URL (If applicable)</i>	Not Applicable

4. Public Meeting – Bridgeport North Library

<i>Mode of outreach</i>	Bridgeport North Library in Bridgeport, CT: October 17, 6-8pm
<i>Target of outreach</i>	Minorities Non-English Speaking - Specify other language: Spanish Persons with disabilities Nontargeted/bro ad community Residents of Public and Assisted Housing

<i>Summary of response/attendance</i>	The fourth community meeting was held at Bridgeport North Public Library: October 17, 2024, 6-8pm. The purpose of the meeting was to solicit input into the development of the 2025-2029 Consolidated Plan. Those that were not able to attend were encouraged to submit written testimony via email. At the meeting there were no participants who were from the general public.
<i>Summary of comments received</i>	Concerns about Public Housing: - Acknowledgement of the need to support people experiencing homelessness, but a sense that Bridgeport has already contributed its "fair share" of public housing and a desire to see responsibility more widely shared throughout the state. Homelessness: - Increased visibility of homelessness in the area. Support for Seniors: - Desire for more activities and support services for the elderly population. Appreciation for Community Resources: - Expression of gratitude for the library and its role in the community.
<i>Summary of comments not accepted and reasons</i>	Non Applicable
<i>URL (If applicable)</i>	Non Applicable

5. Public Meeting – New London Public Library

<i>Mode of outreach</i>	New London Public Library in New London, CT: October 23, 6-8pm
<i>Target of outreach</i>	Minorities Non-English Speaking - Specify other language: Spanish Persons with disabilities Nontargeted/bro ad community Residents of Public and Assisted Housing
<i>Summary of response/attendance</i>	The fifth community meeting was held at New London Public Library: October 16, 2024, 6-8pm. The purpose of the meeting was to solicit input into the development of the 2025-2029 Consolidated Plan. Those that were not able to attend were encouraged to submit written testimony via email. At the meeting there were no participants who were from the general public. At the Meeting in New London had 5 people present, including

	the Mayor of New London, Michael Passero and staff members of Sen. Chris Murphy and Rep. Joe Courtney.
<i>Summary of comments received</i>	Rising Rents and Corporatization of Landlords: - Local landlords are selling properties to corporations, leading to rising rents and a lack of affordable housing. - This shift reduces affordability, as corporations often prioritize profit over tenant well-being. Impact of EB and Economic Growth on Housing: - Hiring at Electric Boat (EB) and other large employers increases housing demand. - The influx of new employees strains the housing market, especially in urban areas - Market-rate housing development caters to higher-income earners, displacing lower-income residents. Increase in Homelessness: - Rising homelessness in New London and surrounding areas, particularly among seniors. - Example: 82 individuals reported homeless in Norwich, living in precarious conditions. Lack of Shelter Capacity: - Shortage of shelter spaces forces people into unsafe living situations. - Difficulty finding housing for medically compromised individuals and families with children. Eviction Barriers: - Evicted families face stigma and increased upfront rental costs, hindering their ability to secure new housing. Coordination Between State and Local Services: - Lack of coordination at the state level in addressing housing and homelessness. - Multiple agencies with overlapping responsibilities but no unified approach. Supportive Housing Needs: - Importance of integrating support services (healthcare, mental health, etc.) into housing developments. - Without support, housing placements are often temporary, leading to a return to homelessness. Brownfields and Contaminated Land:

	• Environmental issues hinder development in some areas of New London. • Remediation costs exceed local budgets, limiting affordable housing construction. Tiny Homes and Other Innovative Solutions: • Exploring alternative housing models like tiny homes and trailer parks to increase affordability and cater to diverse needs. Decline in Youth Population: • New London's youth population is declining while the senior population increases. • This shift impacts housing needs, with less demand for large family homes and more for smaller, affordable units. Workforce and Trade Training: • Need for stronger workforce development programs for young people not attending college. • Focus on creating jobs that provide wages sufficient to support housing costs
<i>Summary of comments not accepted and reasons</i>	Not Applicable
<i>URL (If applicable)</i>	Not Applicable

6. Public Meeting – The Place for CommUNITY Wellbeing	
<i>Mode of outreach</i>	The Place for CommUNITY Wellbeing in New London, CT: December 12, 2024
<i>Target of outreach</i>	Minorities Non-English Speaking - Specify other language: Spanish Persons with disabilities Nontargeted/bro ad community Residents of Public and Assisted Housing
<i>Summary of response/attendance</i>	The sixth community meeting was held at The Place for CommUNITY Wellbeing in New London, CT: December 12, 2024 . The purpose of the meeting was to solicit input into the development of the 2025-2029 Consolidated Plan. Those that were not able to attend were encouraged to submit written testimony via email. At the meeting there were 8 participants who were from the general public.
<i>Summary of comments received</i>	External pressures:

	- Suburban towns are directing their homeless populations to New London, increasing the burden on the city's resources. Difficult choices: - Residents are forced to make difficult choices between basic necessities like housing, food, and medication due to high housing costs. Accessibility concerns: - A lack of accessible housing presents an additional challenge for people with disabilities. Historical inequities: - Participants identified historical redlining as a contributing factor to current housing unaffordability, with its effects continuing to impact the community today. Affordability: - The Place for CommUNITY serves as a food pantry and during their wait, they were asked if New London was affordable. 38 People responded with no. The 6 who responded with yes were all elderly home owners.
<i>Summary of comments not accepted and reasons</i>	Not Applicable
<i>URL (If applicable)</i>	Not Applicable

1. Community Roundtable – Community Action Agency of New Haven	
<i>Mode of outreach</i>	Community Action of New Haven
<i>Target of outreach</i>	Minorities Non-English Speaking - Specify other language: Spanish Persons with disabilities Nontargeted/bro ad community Residents of Public and Assisted Housing
<i>Summary of response/attendance</i>	The first community roundtable was held at Community Action of New Haven: October 4th, 2024 . The purpose of the meeting was to solicit input into the development of the 2025-2029 Consolidated Plan. Those that were not able to attend were encouraged to submit written testimony via email. At the meeting were 37 participants who were staff at the agency and members of the general public.

Summary of comments received

Severe Affordability Crisis:

- Rental and home prices are skyrocketing, making New Haven unaffordable for many, including young professionals and families.
- Limited affordable housing options, with new developments primarily offering expensive units.
- Stringent rental requirements (high credit scores, income verification, etc.) create barriers for those seeking housing.
- Predatory landlords like Mandy Properties contribute to the problem through poor management, high rents, and restrictive requirements.

Homelessness and Support Gaps:

- Increasing homelessness due to lack of affordable housing and shelter space.
- Long waitlists for shelters and housing assistance, forcing families to sleep in cars.
- Barriers to accessing support, including security deposit requirements and strict eligibility criteria.
- Limited services for the homeless, including a lack of safe spaces for receiving medication and limited warming center availability.

Gentrification and Displacement:

- Gentrification is displacing long-term residents, particularly in formerly affordable neighborhoods.
- New developments cater to wealthier individuals, driving up property values and rental costs.
- Lack of housing tailored to the needs of local working-class residents.

Systemic Issues:

- The Section 8 voucher system is difficult to navigate, with long waitlists and complicated processes.
- Eviction records create long-lasting barriers to securing housing.
- Lack of state support for affordable housing, homelessness programs, and rental assistance.

Proposed Solutions:

- Rent control and eviction moratoriums to protect tenants.
- Repurposing vacant buildings for affordable housing and shelters.
- Increased rental assistance and security deposit support.

	• Tiny homes and income-capped communities to provide dignified affordable housing. • Stronger oversight of private property management companies. • Expanded shelter capacity and services for the homeless. Additional Concerns: • Impact of large real estate investment companies on housing affordability. • Discrimination against individuals with felony convictions. • Challenges faced by older adults on fixed incomes. • Need for increased mental health services
<i>Summary of comments not accepted and reasons</i>	Not Applicable
<i>URL (If applicable)</i>	Not Applicable

2. Community Roundtable – Catholic Institute for Hispanic Families, Hispanic Senior Center in Hartford, CT: October 16, 2024, 10-11am

<i>Mode of outreach</i>	Catholic Institute for Hispanic Families, Hispanic Senior Center in Hartford, CT: October 16, 2024, 10-11am
<i>Target of outreach</i>	Minorities Non-English Speaking - Specify other language: Spanish Persons with disabilities Nontargeted/broad community Residents of Public and Assisted Housing
<i>Summary of response/attendance</i>	The second community roundtable was held at the Catholic Institute for Hispanic Families, in Hartford on October 16th, 2024. The purpose of the meeting was to solicit input into the development of the 2025-2029 Consolidated Plan. Those that were not able to attend were encouraged to submit written testimony via email. At the meeting there were 42 participants who members of the general public and a few agency staff.
<i>Summary of comments received</i>	High Rents, Low Incomes: • Most seniors rent, relying on Section 8 vouchers or senior housing. Even with subsidies, rising rents make it extremely difficult to afford housing, forcing many to choose between rent, food, and utilities. Mortgage Issues:

	- One homeowner described their mortgage payments doubling over time due to the mortgage being sold to different companies. This highlights the vulnerability of seniors with mortgages to fluctuating interest rates and predatory lending practices. Fear of Complaining: - A resident in senior housing expressed fear of complaining about building safety and security issues due to concerns about being evicted, illustrating the power imbalance between tenants and landlords. Lack of Support for Homeowners: - Seniors who own homes struggle to afford upkeep and repairs. Existing programs are often inaccessible or ineffective, with one participant describing an approved window replacement program that ran out of funding before the work could be completed. Need for Outreach: - Seniors are often unaware of available programs and services. There's a need for better outreach and communication from agencies and politicians. Inaccessible Programs: - Even when seniors are aware of programs, bureaucratic hurdles and eligibility criteria make them difficult to access. Lack of Funding: - Funding for senior centers and support programs is insufficient, limiting their ability to provide adequate services. Utility Assistance: - Seniors struggle to afford utilities, especially during the winter months. Accessing energy assistance programs is often complicated. Lack of Water: - One participant described a situation where they were without water for five days and faced difficulties getting timely repairs. Fear of Retaliation: - Seniors are hesitant to report problems to the city or their landlords due to fear of retaliation or further complications.
Summary of comments not accepted and reasons	Not Applicable

URL (If applicable)	Not Applicable
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Municipal Roundtable – 1	
<i>Mode of outreach</i>	Municipal Roundtable #1: Virtual Meeting: 10/1/2024, 10:00-11:30am
<i>Target of outreach</i>	Other (Municipal Employees)
<i>Summary of response/attendance</i>	The first municipal round table discussion was held virtually on October 1, 2024 from 10:00am-11:30am. Municipalities, housing authorities, advocacy groups and others were invited to attend and provide oral or written comments on housing and community development needs in CT. People were referred to the Department of Housing's website or the State library for copies of former documents. There were 41 attendees from municipal government and state agencies.
<i>Summary of comments received</i>	Infrastructure Gaps: Lack of essential infrastructure, such as sewer and water services, hinders housing development, especially in rural areas. Affordability Crisis: Participants consistently highlighted the severe lack of affordable housing across the state, impacting both urban and rural areas. Rising rents, stagnant wages, and stringent rental requirements create significant barriers for individuals and families seeking housing. Senior Homelessness: A growing concern is the rise of homelessness among seniors, often due to factors like fixed incomes, declining health, and lack of support for homeowners. • Supportive Housing Needs: There's a critical need for supportive housing options for individuals exiting homelessness, particularly those with disabilities, mental health challenges, or substance use disorders. • Lack of Housing Diversity: The limited variety of housing options (e.g., single-family homes, apartments, condos) contributes to bottlenecks in the housing market and limits choices for residents.

	Infrastructure and Development: • Infrastructure Gaps: Lack of essential infrastructure, such as sewer and water services, hinders housing development, especially in rural areas. • Land Use and Zoning: Restrictive zoning regulations and reliance on the private market for development can limit the creation of affordable housing options. • Transportation: Access to transportation is a crucial consideration for housing development, particularly for supportive housing and in areas with limited public transportation options. Data and Planning: • Data Collection and Analysis: Improved data collection and analysis are needed to understand the specific needs of individuals experiencing homelessness and to inform housing development strategies. • Plan Alignment: Better alignment between state, regional, and municipal plans is needed to ensure coordinated efforts and effective implementation of housing initiatives. Key Recommendations: • Increase Affordable Housing Development: Prioritize the development of diverse, affordable housing options, including deeply affordable units, supportive housing, and senior housing. • Invest in Infrastructure: Address infrastructure gaps to facilitate housing development, particularly in rural areas. • Support Homeownership: Promote and support homeownership opportunities, especially in urban communities. • Expand Supportive Services: Increase funding and availability of supportive services to help individuals and families maintain housing stability. • Strengthen Coordination and Collaboration: Improve coordination between state agencies, municipalities, and community partners to streamline housing development and service delivery. Additional Points: • Extreme Weather: Consider extreme weather events, including heat waves, in housing planning and development.
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	• Land Acquisition Costs: Explore ways to reduce land acquisition costs for affordable housing developers. • Utility Costs: Address the burden of high utility costs for low-income residents. • Capital Stack Building: Facilitate conversations and provide resources to help developers secure funding for affordable housing projects.
<i>Summary of comments not accepted and reasons</i>	Not Applicable
<i>URL (If applicable)</i>	Not Applicable

State Agency Roundtable – 1	
<i>Mode of outreach</i>	State Agencies Roundtable: Virtual Meeting: 10/2/2024, 10:00-11:30am
<i>Target of outreach</i>	Other (State Employees)
<i>Summary of response/attendance</i>	The state agency roundtable discussion was held virtually on October 2, 2024 from 10:00am-11:30am. Municipalities, housing authorities, advocacy groups and others were invited to attend and provide oral or written comments on housing and community development needs in CT. People were referred to the Department of Housing's website or the State library for copies of former documents. There were 59 attendees from municipal government and state agencies.
<i>Summary of comments received</i>	Aging Population & Housing Needs: • Significant increase in seniors: Across all counties, the 65+ population is growing rapidly, necessitating a focus on housing and services that support aging in place. • Accessibility and universal design: More housing needs to be designed or adapted to meet the needs of seniors and people with disabilities. • Affordability for fixed incomes: Many seniors rely on fixed incomes (Social Security, SSI), making affordability a critical concern. Housing Affordability & Availability: • Lack of deeply affordable units: Even with existing affordable housing programs, many units

	remain out of reach for those with extremely low incomes. • Limited housing options for families: Shortage of larger units (3+ bedrooms) makes it difficult for families with children to find suitable and affordable housing. • Housing quality and safety: Concerns about the quality and safety of affordable housing, particularly for families. Homelessness & Support Services • Increasing homelessness: The homeless population is growing, straining existing shelter capacity and support services. • Need for wrap-around services: Participants emphasized the importance of wrap-around case management and supportive services to help people exit homelessness and maintain housing stability. • Funding for services: Increased funding is needed for homelessness prevention, emergency shelters, and supportive services. Interagency Collaboration: • Breaking down silos: The need for better collaboration and coordination between state agencies to address the interconnected challenges of housing, homelessness, aging, and disability. • Whole-life approach: A more holistic approach to service delivery that considers the full spectrum of individual and family needs. • Universal case management: Exploring the feasibility of a universal case management model to help people navigate complex systems and access necessary supports. Other Important Considerations: • Transportation: Access to transportation is critical, particularly for seniors, people with disabilities, and those living in rural areas. • Energy affordability: High energy burdens contribute to housing instability, highlighting the need for energy efficiency and affordability programs. • Climate resilience: Housing needs to be designed and built to withstand the impacts of climate change, including extreme weather events.
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	• Workforce development: Investing in workforce development programs can help residents access better-paying jobs and increase their ability to afford housing. • Land use and zoning: Addressing restrictive zoning regulations can help increase the supply and diversity of housing options.
<i>Summary of comments not accepted and reasons</i>	Not Applicable
<i>URL (If applicable)</i>	Not Applicable

Municipal Roundtable – 2	
<i>Mode of outreach</i>	Municipal Roundtable #2: Virtual Meeting: 10/3/2024, 10:00-11:30am
<i>Target of outreach</i>	Other (Municipal Employees)
<i>Summary of response/attendance</i>	The second municipal roundtable discussion was held virtually on October 3, 2024 from 10:00am-11:30am. Municipalities, housing authorities, advocacy groups and others were invited to attend and provide oral or written comments on housing and community development needs in CT. People were referred to the Department of Housing's website or the State library for copies of former documents. There were 52 attendees from municipal government and state agencies.
<i>Summary of comments received</i>	Funding and Financing: • Difficulty securing 9% Low-Income Housing Tax Credits (LIHTC) for rural areas. • Need for more funding for infrastructure to support affordable housing development. • Gap between lending practices and actual development costs. • Limited funding for emergency shelters and supportive services. Infrastructure: • Lack of water and sewer infrastructure hinders development in many areas. • Existing infrastructure may be inadequate and require costly upgrades to support new housing.

	• Need for improved coordination with utility companies and DEEP. Housing Types and Needs: • Demand for diverse housing options, including smaller units (studios, one-bedrooms) to meet the needs of individuals and seniors. • Need for senior housing with supportive services, including assisted living. • Challenges in balancing affordability goals with local preferences and zoning regulations. Homelessness: • Need for more comprehensive data on homelessness throughout the year, not just the Point-in-Time count. • Increased need for emergency shelter beds and services, especially for seniors. • Importance of prevention efforts to keep people housed and reduce evictions. Public Safety: • Increased housing density necessitates greater attention to public safety, including fire services and emergency response capabilities. • Concerns about staffing shortages in fire departments and the affordability challenges faced by first responders. • Need for early involvement of public safety officials in housing development projects. Other Important Considerations: • Mental health services are critical for both younger and older residents. • Transportation access is essential, particularly for seniors and individuals with disabilities. • Need for greater state support and guidance for municipalities, including pre-approved housing plans and technical assistance. Rural Challenges: • Rural areas face unique challenges in developing affordable housing due to infrastructure limitations, funding constraints, and local opposition. Senior Needs: • The aging population requires a greater focus on senior housing with supportive services and accessible design. Holistic Approach:
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	Affordable housing development requires a holistic approach that considers infrastructure, public safety, supportive services, and community needs. State Leadership: The state needs to play a more active role in supporting municipalities, providing funding, and streamlining the development process.
<i>Summary of comments not accepted and reasons</i>	Not Applicable
<i>URL (If applicable)</i>	Not Applicable

Municipal Roundtable- 3	
<i>Mode of outreach</i>	Municipal Roundtable #3: Virtual Meeting: 10/8/2024, 10:00-11:30am
<i>Target of outreach</i>	Other (Municipal Employees)
<i>Summary of response/attendance</i>	The second municipal roundtable discussion was held virtually on October 8, 2024 from 10:00am-11:30am. Municipalities, housing authorities, advocacy groups and others were invited to attend and provide oral or written comments on housing and community development needs in CT. People were referred to the Department of Housing's website or the State library for copies of former documents. There were 32 attendees from municipal government and state agencies.
<i>Summary of comments received</i>	Affordable Housing Crisis: Lack of deeply affordable units: Even with new developments, many units remain out of reach for those with extremely low incomes. High rents and home prices: Escalating costs create significant barriers for renters and potential homeowners, particularly seniors and young families. Limited rental assistance: Long waitlists and limited availability of rental assistance programs leave many struggling to secure housing. Homelessness: Increasing homelessness, particularly among seniors, highlights the urgent need for affordable housing and support services. Funding and Development Challenges:

	• Need for increased funding: More funding is needed for deeply affordable housing development, emergency shelters, and supportive services. • Pre-development funding gaps: Housing authorities and developers face challenges securing funding for pre-development activities, hindering new projects. • Land availability: Limited availability of developable land, particularly in desirable areas, restricts housing development. • Construction costs: High construction costs, exacerbated by requirements like prevailing wage, make development more expensive and challenging. Policy and Program Recommendations: • Re-evaluate per-unit cost limits: Adjust subsidy limits to reflect the higher costs of development in certain areas. • Prioritize deeply affordable housing: Increase funding and policy support for the creation of deeply affordable units. • Invest in prevention: Expand funding for eviction prevention and homelessness prevention programs. • Support adaptive reuse: Create programs to incentivize the conversion of underutilized commercial properties into affordable housing. • Revisit prevailing wage requirements: Explore flexibility in prevailing wage requirements for certain projects, particularly historic mill renovations. Other Important Considerations: • Senior housing: The need for senior housing with supportive services, including assisted living and accessible design. • Emergency shelter: Increased funding and capacity for emergency shelters, particularly during cold weather months. • Transitional housing: The need for transitional housing options for individuals exiting homelessness who need more time to secure permanent housing. • Data collection: More comprehensive data is needed to understand the full scope of homelessness and housing needs.
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<i>Summary of comments not accepted and reasons</i>	Not Applicable
<i>URL (If applicable)</i>	Not Applicable

6. Municipal Roundtable-4	
<i>Mode of outreach</i>	Municipal Roundtable #4: Virtual Meeting: 10/10/2024, 10:00-11:30am
<i>Target of outreach</i>	Other (Municipal Employees)
<i>Summary of response/attendance</i>	The second municipal roundtable discussion was held virtually on October 10, 2024 from 10:00am-11:30am. Municipalities, housing authorities, advocacy groups and others were invited to attend and provide oral or written comments on housing and community development needs in CT. People were referred to the Department of Housing's website or the State library for copies of former documents. There were 35 attendees from municipal government and state agencies.
<i>Summary of comments received</i>	Affordable Housing Crisis: • Lack of deeply affordable units: Even with new developments, many units remain out of reach for those with extremely low incomes. • High rents and home prices: Escalating costs create significant barriers for renters and potential homeowners, particularly seniors and young families. • Limited rental assistance: Long waitlists and limited availability of rental assistance programs leave many struggling to secure housing. • Homelessness: Increasing homelessness, particularly among seniors, highlights the urgent need for affordable housing and support services. Funding and Development Challenges: • Need for increased funding: More funding is needed for deeply affordable housing development, emergency shelters, and supportive services.

	• Pre-development funding gaps: Housing authorities and developers face challenges securing funding for pre-development activities, hindering new projects. • Land availability: Limited availability of developable land, particularly in desirable areas, restricts housing development. • Construction costs: High construction costs, exacerbated by requirements like prevailing wage, make development more expensive and challenging. Policy and Program Recommendations: • Re-evaluate per-unit cost limits: Adjust subsidy limits to reflect the higher costs of development in certain areas. • Prioritize deeply affordable housing: Increase funding and policy support for the creation of deeply affordable units. • Invest in prevention: Expand funding for eviction prevention and homelessness prevention programs. • Support adaptive reuse: Create programs to incentivize the conversion of underutilized commercial properties into affordable housing. • Revisit prevailing wage requirements: Explore flexibility in prevailing wage requirements for certain projects, particularly historic mill renovations. Other Important Considerations: • Senior housing: The need for senior housing with supportive services, including assisted living and accessible design. • Emergency shelter: Increased funding and capacity for emergency shelters, particularly during cold weather months. • Transitional housing: The need for transitional housing options for individuals exiting homelessness who need more time to secure permanent housing. • Data collection: More comprehensive data is needed to understand the full scope of homelessness and housing needs.
Summary of comments not accepted and reasons	Not Applicable

<i>URL (If applicable)</i>	Not Applicable
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Municipal Roundtable - 5	
<i>Mode of outreach</i>	Municipal Roundtable #5: Virtual Meeting: 10/17/2024, 10:00-11:30am
<i>Target of outreach</i>	(Other)Municipal Employees
<i>Summary of response/attendance</i>	The second municipal roundtable discussion was held virtually on October 17, 2024 from 10:00am-11:30am. Municipalities, housing authorities, advocacy groups and others were invited to attend and provide oral or written comments on housing and community development needs in CT. People were referred to the Department of Housing's website or the State library for copies of former documents. There were 64 attendees from municipal government and state agencies.
<i>Summary of comments received</i>	Affordable Housing Crisis: • Lack of deeply affordable units: Even with new developments, many units remain out of reach for those with extremely low incomes. • High rents and home prices: Escalating costs are creating significant barriers for renters and potential homeowners, particularly seniors and young families. • Limited rental assistance: Long waitlists and limited availability of rental assistance programs leave many struggling to secure housing. • Homelessness: Increasing homelessness, particularly among seniors, highlights the urgent need for affordable housing and support services. Unique Challenges in Eastern CT: • Seasonal employment: Tourist-dependent economies create income instability, making it difficult for residents to afford housing. • Limited transportation: Inadequate public transportation options create barriers to accessing employment, services, and affordable housing in neighboring towns. • Predatory landlords: Out-of-state companies acquiring properties and prioritizing profits over tenant well-being. Systemic Issues:

	• SSI and disability income inadequacy: SSI and disability benefits haven't kept pace with rising housing costs, leaving recipients unable to afford even basic housing. • Stringent rental requirements: Landlords requiring three times the rent in income create significant barriers for those seeking housing, especially those with low incomes or relying on benefits. • Lack of smaller units: Limited availability of studio and one-bedroom apartments restricts options for individuals and seniors seeking affordable housing. • Eviction crisis: Evictions remain a significant problem, with long-term consequences for those who experience them. Proposed Solutions and Recommendations: • Landlord incentives: Reintroduce programs to incentivize landlords to work with voucher holders and those experiencing homelessness. • Increase housing supply: Promote the development of diverse housing options, including smaller units, multi-family housing, and senior housing. • Invest in infrastructure: Address infrastructure gaps, particularly sewer and water, to facilitate housing development in underserved areas. • Support for frontline workers: Recognize the challenges faced by frontline workers in the housing and homelessness sector, including low wages and difficulty finding affordable housing. • Workforce development: Invest in workforce development programs to increase local residents' skills and earning potential, enabling them to access better jobs and afford housing. Other Important Considerations: • Public-private partnerships: Explore opportunities for public-private partnerships to increase the development of affordable housing. • Zoning reform: Encourage municipalities to adopt zoning regulations that promote diverse housing options and density. • Hotel/motel conversions: Explore programs to incentivize the conversion of underutilized hotels and motels into affordable housing.
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	• Regional collaboration: Improve regional collaboration to address housing needs and prevent individual communities from being overburdened. • Data collection: Gather more comprehensive data on homelessness and housing needs, including information on specific populations and subregions.
<i>Summary of comments not accepted and reasons</i>	Not Applicable
<i>URL (If applicable)</i>	Not Applicable

Add information here about

State Agency / Municipal Staff Roundtable Meeting	
<i>Mode of outreach</i>	State Agency / Municipal Staff Roundtable Virtual Meeting: 4/8/2025, 11:00am-12:30pm
<i>Target of outreach</i>	
<i>Summary of response/attendance</i>	
<i>Summary of comments received</i>	
<i>Summary of comments not accepted and reasons</i>	
<i>URL (If applicable)</i>	

Community Partners Public Hearing	
<i>Mode of outreach</i>	Community Partners Virtual Public Hearing: 4/9/2025, 11:00am-12:30pm
<i>Target of outreach</i>	
<i>Summary of response/attendance</i>	
<i>Summary of comments received</i>	

<i>Summary of comments not accepted and reasons</i>	
<i>URL (If applicable)</i>	

Statewide Public Hearing	
<i>Mode of outreach</i>	Statewide Virtual Public Hearing: 4/16/2025, 5:30-7:00pm
<i>Target of outreach</i>	
<i>Summary of response/attendance</i>	
<i>Summary of comments received</i>	
<i>Summary of comments not accepted and reasons</i>	
<i>URL (If applicable)</i>	

Needs Assessment

NA-05 Overview

Needs Assessment Overview

This section introduces and summarizes the key points of the Needs Assessment. These elements are described in more detail in the following sections of the Needs Assessment:

- Housing Needs Assessment
- Disproportionately Greater Need
- Public Housing
- Homeless Needs Assessment
- Non-Homeless Special Needs Assessment
- Non-Housing Community Development Needs

The Housing and Community Needs Assessment was developed utilizing various data sources and local and statewide planning studies and compiled through consultation and community engagement with stakeholders throughout the state of Connecticut, including Connecticut state agencies, service providers, affordable housing developers, community partners, and the state's residents. The Needs Assessment investigates the baseline, trends, and future housing supply and demand at the state and county levels. Housing and services for special needs populations were also examined which included the following population groups: elderly and frail elderly, homeless individuals and families, formerly incarcerated individuals, persons with HIV/AIDS, victims of domestic violence, youth aging out of the foster care system, veterans, persons with physical and cognitive disabilities, and persons with drug and/or alcohol addiction.

The Housing Needs Analysis presents statistical and demographic information about the state, its economy and residents. It includes an assessment of Connecticut's housing needs over the next five years, data on the Connecticut housing market (including data concerning supply, demand, cost, affordability and the condition of Connecticut's housing stock), information on housing construction in the state and tenant demographic information regarding the residents of federally funded and state funded housing. The Institutional Structure section of this plan identifies state, federal, and private sector resources for affordable housing programs. This section also assesses the strengths and weaknesses within the delivery system and makes suggestions for overcoming deficiencies while addressing housing needs.

Connecticut has a myriad of housing markets throughout the state, ranging from urban core areas such as Hartford, New Haven, New London, and Bridgeport, to suburban ring cities, and rural areas such as northwest and northeastern parts of the state. The housing challenges vary in these specific areas based on the circumstances. And critically, the strategies to address these housing challenges are very different based on the region of the state.

Throughout the consultation and community engagement process, the primary concern emphasized in every conversation is the ongoing crisis in housing affordability in every part of the state. For Connecticut to function at its best, there must be an adequate supply of affordable housing options in close proximity to employment, public transportation, and community facilities, such as public schools. The housing stock must include affordable and accessible owner-occupied and rental units, not only to meet social equity goals, but in order to ensure community viability. The development of a diverse and affordable housing stock must be carried out without

sacrificing sound regulations that are in place to protect the environment and public health. Recognizing the need, the state of CT has invested hundreds of millions of dollars in the development of new housing units throughout the state, and improvements to existing affordable housing.

The following is a summary of the key points in the Needs Assessment.

Housing Affordability - The cost of housing has increased significantly over the past several years throughout the state, both in terms of rental and home prices. Extremely low-, very low-, and low-income households are increasingly cost burdened. The limited amount of new housing production over the past several years has exacerbated the affordability crisis throughout the state. While the circumstances of the affordability crisis look different in different areas of the state, related to urban, suburban, and rural areas, every area of the state has been impacted by the escalation on housing costs.

Housing Rehabilitation - There are 6,415 renter households occupying substandard housing, and another 1,870 owner households occupying substandard housing. Additionally, Connecticut's large inventory of older housing stock (units built before 1980) needs ongoing rehabilitation and home maintenance that is associated with the age of the home. There are 328k renter occupied homes built before 1980 and another 632k owner-occupied homes built before 1980. Most of the oldest renter-occupied units are in New Haven, Hartford, and Fairfield counties. Typically, the most significant home repair needs among homes of this age are roof repairs and replacements, window replacement, exterior siding or painting, boilers, hot water heaters, HVAC system, etc.

Housing Modifications - Connecticut has seen a significant 28% increase in the population aged 65 and older over the past 12+ years, from 491,703 in 2010 to 629,108 in 2022. This expands the housing needs of people with a wider range of abilities, needs and disabilities. These needs range from the more typical age-related changes such as those relating to vision, hearing, and mobility that may require specific types of home modifications to accommodate these challenges. There will also be a greater demand for addressing the health needs of the growing senior population, including in-home care, assisted living, and nursing home care. It will grow increasingly important for communities to plan for and address the growing spectrum of needs for individuals who are growing older, living longer, and are interested in aging in place.

Public Housing - The demand for public housing and other types of affordable units is incredibly high. On average, the wait time can range from several months to several years depending on the circumstances of the individual or family seeking public housing or a voucher. The needs of public housing residents are no different than the population at large, particularly those of the same income level, age, and disability status. The primary needs for low-income families are affordable housing, opportunities to earn more income through higher-wage jobs, and a myriad of services required to help support those that are living in or near poverty such as food assistance, affordable childcare and afterschool programs, transportation options, financial literacy, and educational and workforce development programs for higher quality and higher-wage employment.

Homelessness - Homelessness has increased substantially in the state of CT over the past several years. There were 3,410 sheltered and unsheltered persons experiencing homelessness on the night of January 23rd, 2024. This is an overall increase of 395 (13%) from last year's count of 3,015, and a 32% increase from 2021 when homelessness was at its lowest level in CT. More and more individuals and families who have never experienced homelessness before are becoming homeless or at greater risk of homelessness, including single mothers, seniors, and the working poor. There has been a conflation of factors that have all contributed to the increase in

homelessness in CT: rapid increase in housing costs, stagnation in wages, the end of the state's eviction moratorium, the acceleration of pandemic-related home purchasing, and the ongoing commodification of rental housing by large real estate investors.

Non-Homeless Special Needs

- ***Elderly and Frail Elderly*** - Connecticut, like most of the country, has an aging population, comprising 629,108 persons, or approximately 17.4% of the total population. The total number of senior households has grown substantially over the past 10+ years, with the 65-74 population increasing 51% from 2010-2022. Among the senior population aged 65 and older, 108,685 have ambulatory difficulties, 41,957 have self-care difficulties, and 77,299 have independent living difficulties. Often, multiple disabilities manifest as people age. The total number of seniors aged 65 and over with any type of disability is 177,198. Seniors consistently highlight how they struggle to make ends meet, being financially overwhelmed due to fixed income and never-ending increases in rent, utilities, healthcare costs, transportation, food and household items.
- ***Persons with Physical or Cognitive Disabilities*** - The most common disability type is ambulatory disabilities (192,364 CT residents), followed by cognitive difficulty (166,001 CT residents), independent living difficulties (151,115 CT residents), hearing difficulties (107,895 CT residents), self-care difficulties (79,464 CT residents), and vision difficulties (73,155 CT residents). Residents that are physically or cognitively disabled have special housing needs to accommodate their specific conditions. The largest absolute number of CT residents living with a disability are adults aged 18 to 64, with 203,437 persons living with a disability (5.7% of the total population, and 17.4% of the total 18-64 population). Seniors aged 65 and older are more likely to have a disability, with 177,198 seniors having some type of disability, approximately 5% of the total population and 29.1% of the total population aged 65 and older.
- ***Persons with Alcohol or Other Drug Addiction*** - in the 2023 National Substance Use and Mental Health Services Survey for Connecticut, it was reported that there were 171 substance use treatment facilities that reported 43,470 clients in substance use treatment on March 31, 2023. Among these clients served, 1,994 were under the age of 18. The survey response rate for substance use treatment facilities in Connecticut was 90.6 percent.
- ***Victims of Domestic Violence*** - Aggregate data for the state shows that the 18 primary agencies that comprise the CT Coalition Against Domestic Violence served victims of domestic violence served 38,989 households in 2021. Shelters for this vulnerable population operated at 156 percent of their occupancy capacity, indicating a need for additional emergency shelter capacity for victims of domestic violence. Of the 3,410 unhoused individuals in Connecticut in 2024, 692, or 39%, are survivors of some form of domestic violence.
- ***Persons with HIV/AIDS*** - As of 2022, there were 10,738 people living with HIV in the state of Connecticut, equating to a prevalence rate of 286.2 per 100,000 residents. In 2022, there were 222 new cases of HIV diagnosed throughout CT, representing a rate of 6.1 per 100,000 residents. Among these, 40 individuals (18%) progressed to an AIDS diagnosis within three months of their initial HIV diagnosis. New cases are primarily concentrated in the urban core areas of Bridgeport, New Haven, Hartford, and to a lesser extent, Waterbury and Stamford. These cities also represent the primary locations of HIV infection in the state.
- ***Veterans*** - Connecticut is home to approximately 146,179 military veterans. It is worth noting that in 2016, the State of Connecticut was certified as the first state in the country to

end veteran homelessness. Since then, the total number of homeless Veterans has increased to 191 as of the 2024 PIT count. Of the 191 homeless veterans, 17 were defined as chronically homeless, and 31 were unsheltered. Most of these Veterans are single and over the age of 50. Many Veterans have co-occurring mental health and/or drug addiction issues and other mental health disorders such as anxiety, depression, or post-traumatic stress disorder (PTSD). There were 8,469 Veterans living in poverty and an additional 26,227 Veterans were experiencing financial hardship, living in households that earned above the Federal Poverty Level, but not enough to cover the essentials in their communities.

Non-Housing Community Development Needs

- ***Public Facilities*** - The State of Connecticut prioritizes community development projects aimed at benefiting low- and moderate-income individuals, with a particular emphasis on addressing the urgent need for all types of housing development, especially affordable and deeply affordable housing options. These developments will integrate supportive services into their models to better serve vulnerable populations. Housing and community development programs will directly support these efforts.
- ***Public Infrastructure*** - As a general rule, the state will adopt and employ, to the greatest extent possible, responsible growth strategies consistent with the State's Conservation and Development (C&D) Plan, including but not limited to: inter-municipal or regional collaborations; reuse, rehabilitation, and revitalization of land, property and infrastructure; urban infill development; mixed-use developments; walkable environments; transit-oriented developments; and incorporation of sustainable development standards in the implementation of all the strategies and objectives outlined in this plan.
- ***Public Services*** - Through the consultation and citizen participation processes, there were several discussions related to the need of pairing affordable housing development with the wraparound services to assist extremely low-income households in navigating the barriers to their housing stability. These include Mental Health Services; Substance Use Treatment; Healthcare Services; Life Skills Training; Employment Support; Ongoing Case Management; Legal Assistance; Transportation Services; and Affordable Childcare.

NA-10 Housing Needs Assessment - 24 CFR 91.205 (a,b,c)

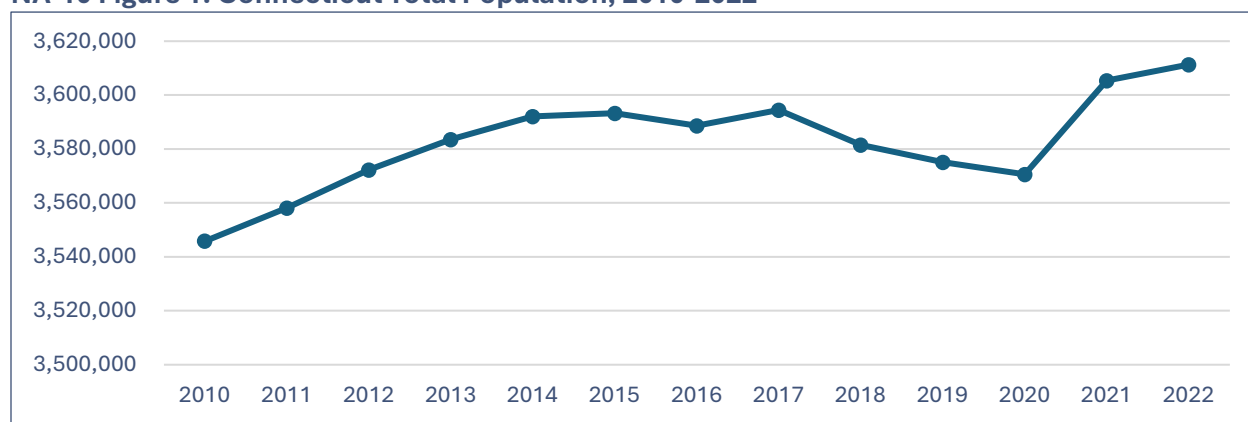
Summary of Housing Needs

This section provides a concise summary of the state's estimated housing needs projected for the 2025-2029 Plan period. The following data tables describe levels of housing need by income range, family type, and type of housing problems. It includes the following sections:

- Summary of Housing Needs
- Demographics
- Number of Households
- Housing Needs Summary
- Housing Problems 2
- Cost Burden >30 percent
- Cost Burden >50 percent
- Crowding Table (More Than One Person Per Room)
- Households With Children Present
- Additional Narratives

Stable, safe, and affordable homes are foundational to healthy and resilient communities throughout Connecticut where every resident can succeed and thrive. There are a total of 1.41 million households in the State of Connecticut for the 3.61 million residents in the state, based on the 2022 American Community Survey 5-Year Estimate. Connecticut has seen its population increase by approximately 2% between 2010 and 2022 according to the American Community Survey. This represents a growth of about 65,000 people over these twelve years. While the state's population started to decline in the mid-2010s, there was a sharp increase in population starting in 2020 correlated with the onset of the COVID-19 pandemic.

NA-10 Figure 1: Connecticut Total Population, 2010-2022

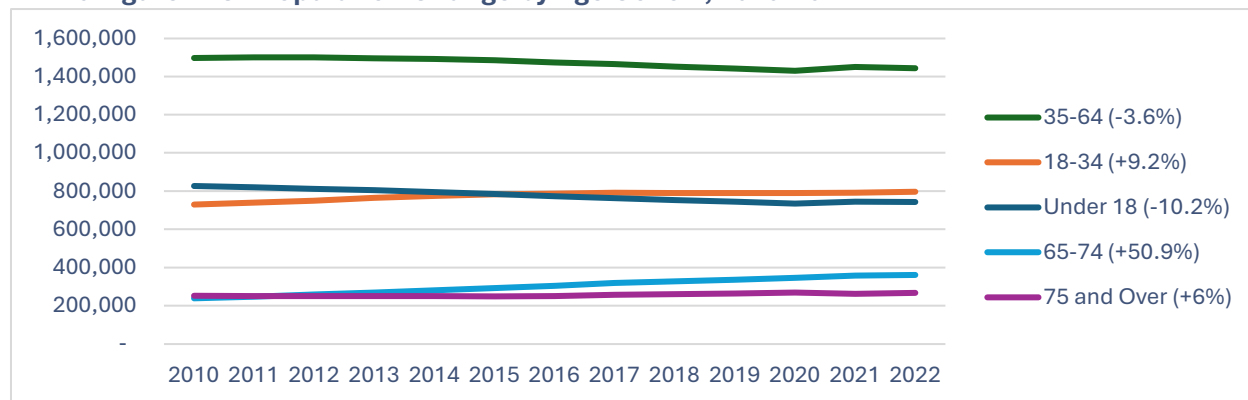


Data Source: 2010-2022 ACS5 – DP05

Connecticut has seen a significant 28% increase in the population aged 65 and older over the past 12+ years, from 491,703 in 2010 to 629,108 in 2022. At the same time, the population of children under the age of 18 has declined 10%, from 828,523 in 2010 to 724,877 in 2022. As people live longer and healthier lives, the composition and needs of the housing market change. This expands the housing needs of people with a wider range of abilities, needs and disabilities. These needs range from the more typical age-related changes such as those relating to vision, hearing, and

mobility that may require specific types of home modifications to accommodate these challenges. There will also be a greater demand for addressing the health needs of the growing senior population, including in-home care, assisted living, and nursing home care. It will grow increasingly important for communities to plan for and address the growing spectrum of needs for individuals who are growing older, living longer, and are interested in aging in place.

NA-10 Figure 2: CT Population Change by Age Cohort, 2010-2022



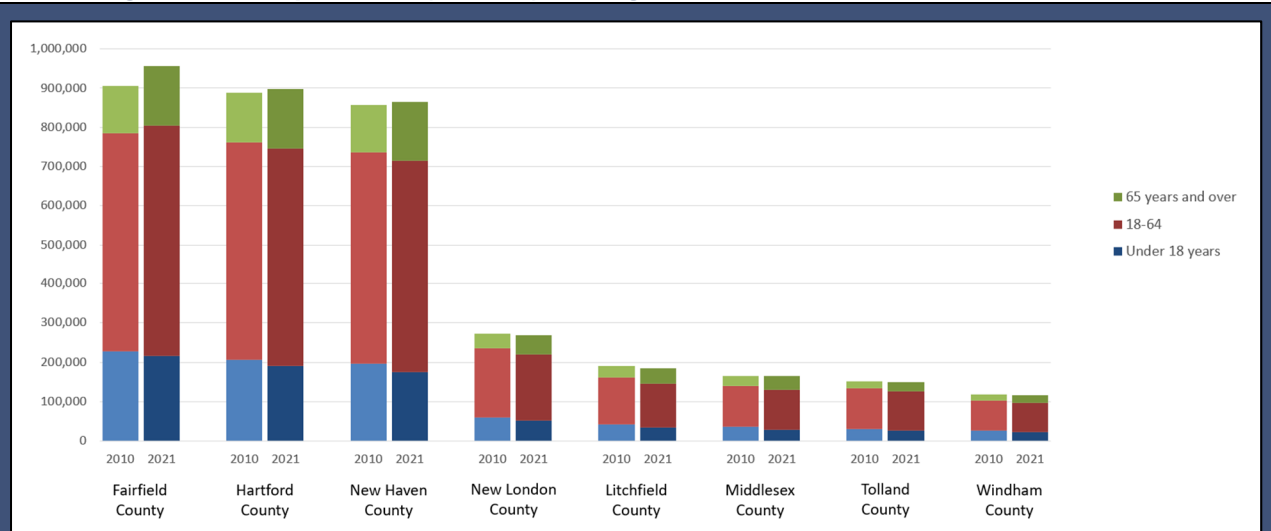
Data Source: 2010-2022 ACS5 S2501

When the data is disaggregated to the county level, there are several key themes that impact the state's housing needs. First, all the population growth that has occurred in the state is concentrated in the three largest counties: Fairfield County, Hartford County, and New Haven County. This is a manifestation of the availability of housing, the location of new housing development, as well as the concentration of employment opportunities.

Second, the traditional working age population, individuals aged 18 to 64, is the largest age cohort in every county. However, only one county in the state, Fairfield County, saw robust growth in this age cohort, increasing 6% between 2010 and 2021, or 33,348 persons aged 18 to 64. While Hartford County saw a modest gain of 2,000 people in this age cohort, every other county has seen population decline of the traditional workforce.

Third, this decline in the traditional workforce is combined with a dramatic increase of the senior population throughout the state, and in every county (discussed above). Growth rates for the population aged 65 and older range from a low of 20.3% in Hartford County to a high of 38.5% in Middlesex County. The rapid aging of the state's population will have profound impacts on the levels of care needed for its elderly population, the types of homes and services needed for those wishing to age in place, and economic development challenges as the state sees fewer working age residents. This will be discussed further in **Section NA-45**.

NA-10 Figure 3: CT Population by County and Age Cohort

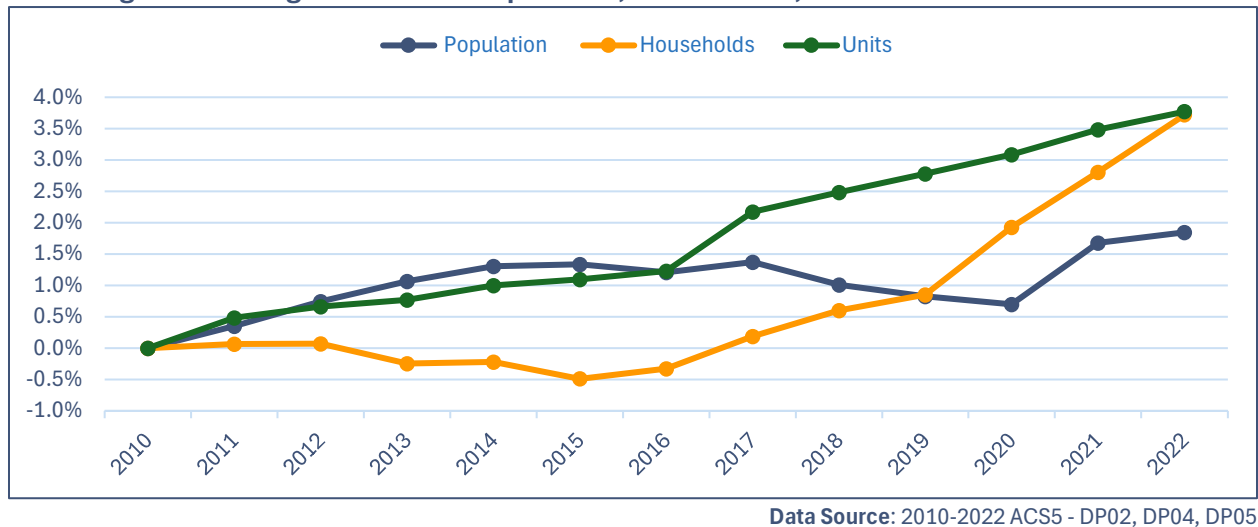


		Under 18 years	18-64	65 years and over	Total Population
Fairfield County	2010	228,146	556,785	120,410	905,342
	2021	214,928	590,133	151,385	956,446
	% Change	-5.8%	6.0%	25.7%	5.6%
Hartford County	2010	206,898	554,097	126,981	887,976
	2021	189,748	556,123	152,765	898,636
	% Change	-8.3%	0.4%	20.3%	1.2%
New Haven County	2010	196,182	539,713	120,793	856,688
	2021	175,495	539,357	149,899	864,751
	% Change	-10.5%	-0.1%	24.1%	0.9%
New London County	2010	60,464	174,583	37,313	272,360
	2021	52,604	167,169	49,358	269,131
	% Change	-13.0%	-4.2%	32.3%	-1.2%
Litchfield County	2010	42,351	118,698	28,867	189,916
	2021	33,637	111,879	39,659	185,175
	% Change	-20.6%	-5.7%	37.4%	-2.5%
Middlesex County	2010	35,756	104,631	24,387	164,774
	2021	28,878	101,917	33,773	164,568
	% Change	-19.2%	-2.6%	38.5%	-0.1%
Tolland County	2010	31,423	102,276	17,373	151,073
	2021	26,087	100,101	23,932	150,120
	% Change	-17.0%	-2.1%	37.8%	-0.6%
Windham County	2010	27,073	76,039	14,596	117,708
	2021	23,114	73,981	19,408	116,503
	% Change	-14.6%	-2.7%	33.0%	-1.0%
Total Population	2010	828,293	2,226,823	490,720	3,545,837
	2021	744,491	2,240,660	620,179	3,605,330
	% Change	-10.1%	0.6%	26.4%	1.7%

Data Source: 2010 and 2021 ACS 5-Year Estimates

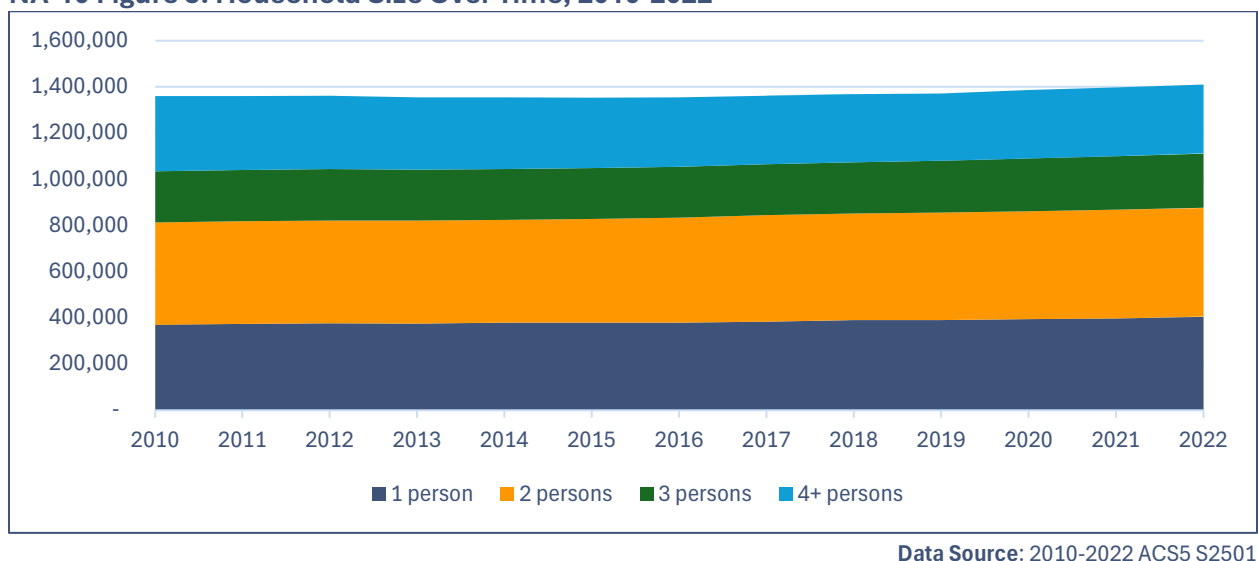
While total population in Connecticut saw approximately a 2% increase from 2010 to 2022, the total number of households saw a larger increase of 6% between the same period. The total number households in CT declined from 2010 to 2015 but then saw a sharp increase since 2016. In 2010, the average household size was 2.52 persons, while in 2022 the average household declined to 2.48 persons.

NA-10 Figure 4: Change Over Time: Population, Households, Units



The total number of households has grown by fifty thousand since 2010; however, most of that growth has been in one and two-person households. Connecticut saw increases of 9.5% and 6.4% in the number of one- and two-person households respectively, while in the same time period there was a decline of 8.2% of households with four or more persons. Three-person households saw an increase of 6.3% over this time period but is the smallest category of households. As of 2022, one- and two-person households comprise almost two-thirds of all the occupied housing units in the state.

NA-10 Figure 5: Household Size Over Time, 2010-2022



This trend towards smaller households explains why the number of households was increasing as the state experienced population decline and also explains the much more dramatic increase in the total number of households as overall population started growing again. The change in household size impacts the cost of housing. More households increase the demand for more housing. Additionally, the changing size of households in CT, with an increasing share of smaller one- and two-person households also changes the type of housing that is needed in the state, with an emphasis on smaller housing units that are better suited for smaller household sizes.

For the decade of the 2010s the number of units grew much faster than the number of households in CT. We would generally expect this to ease market pressures on rent and home prices. This was countered by the rapid growth of the number of households since 2016, to the point where both the number of households and number of housing units are 3.8% higher than they were in 2010. As population declined during the same period of time as households and housing units were growing, this explains the shift from larger 4+ person households to smaller one- and two-person households.

We see Connecticut's population rebounding post-COVID. Throughout the course of the pandemic, real estate agents indicated they saw record demand for real estate in Connecticut with many wealthy individuals and families, primarily from New York, purchasing homes for well above asking price. This influx was particularly noticeable in Fairfield County which accounts for the difference in population growth relative to the rest of the state.

Fairfield County's proximity to New York City always had an impact on local housing markets, but with the onset of work from home policies due to the COVID-19 pandemic, historically lower rental prices in cities like Stamford, Norwalk, Fairfield, Bridgeport and even New Haven attracted people who were living in New York City seeking more space, earning NYC incomes, while living in Connecticut and commuting into the city sporadically. NYC's still see significant COVID related vacancies more than 4 years into the pandemic. This contributed to the increase in rental market prices, with Connecticut now having the 6th highest rental prices with \$1,824 dollars per month being the cost of a two-bedroom apartment. In 2010, the same unit cost \$1,194 dollars per month.

In a roundtable discussion forum with frontline staff at the New Haven Community Action Agency, many of the comments received were related to the increasing affordability crisis in the area. Rents have been rising much more quickly than wages and individuals and families expressed needing to choose between medicine or rent. Many of the agency staff work an additional job to afford the rising cost of living in the area. Many utilize food pantries. And some have also experienced homelessness while they were working.

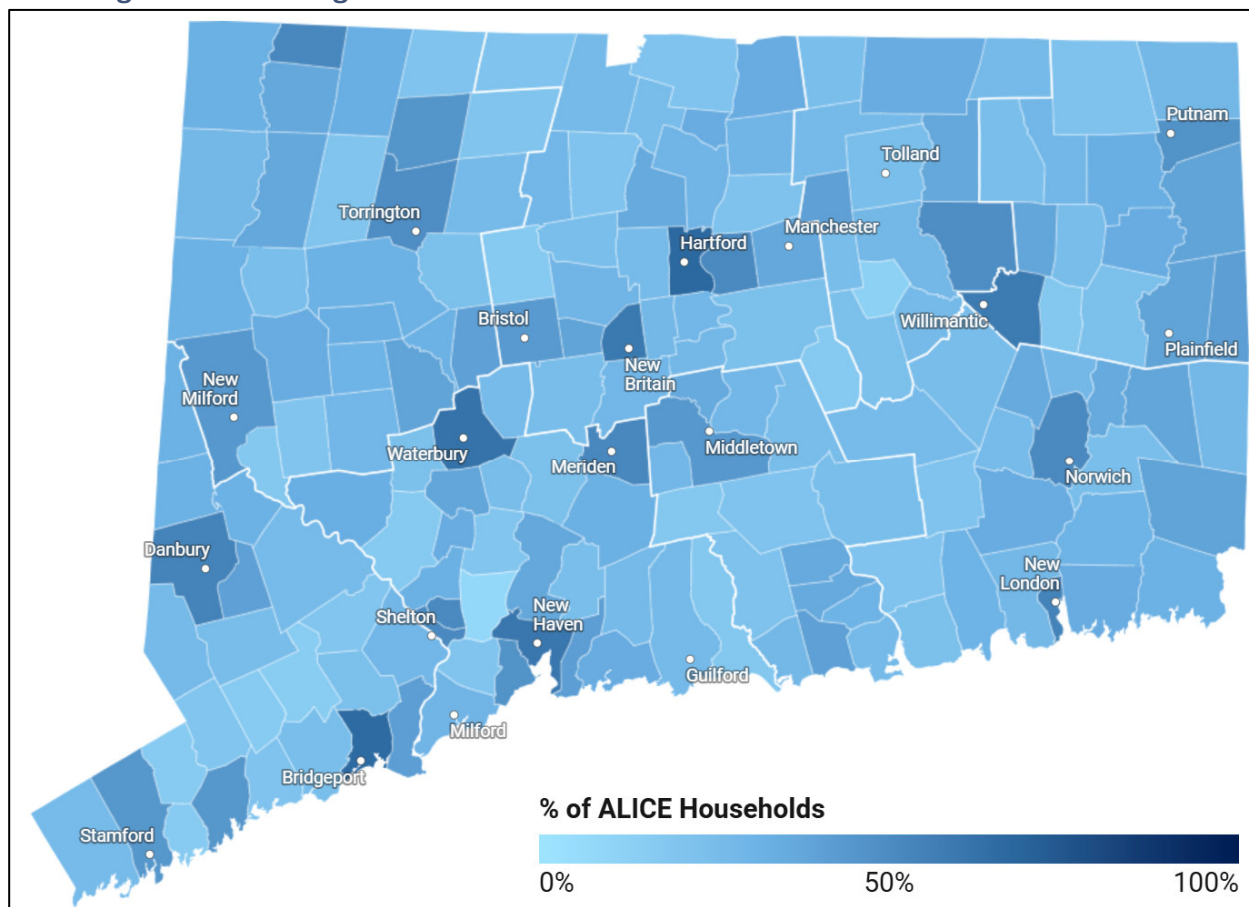
CT saw its median household income change from \$67,740 in 2010 to \$90,213 in 2022. Importantly, the data reported from the American Community Survey is inflation adjusted for the report year. When the 2010 median household income is adjusted to 2022 dollars using the U.S. Bureau of Labor Statistics CPI Inflation Calculator, the CPI adjusted median household income is equivalent to \$91,728.81, almost 2% more than the actual median household income in 2022.² This represents a **decline** in real median household income of 1.7% over the 2010-2022 period while the cost of housing has increased dramatically.

The recent update to the ALICE (Asset Limited Income Constrained Employed) data bears this out. The number of working poor households is growing. Of the 1.4 million households in Connecticut, 563,512 or 39% live below the ALICE threshold. While the federal poverty line is \$13,590, the

² https://www.bls.gov/data/inflation_calculator.htm

amount a single adult household would need to earn in order to meet the minimum costs of household necessities in Connecticut (housing, utilities, food, transportation, and healthcare) plus taxes is \$34,812. As of Jan 1, 2025, minimum wage in CT will be \$16.35 per hour. A single person working full-time at a minimum wage job, 40 hours a week, 52 weeks a year will gross \$34,008. This income is insufficient to survive in most communities throughout the state.

NA-10 Figure 6: Percentage of Households Below ALICE Threshold



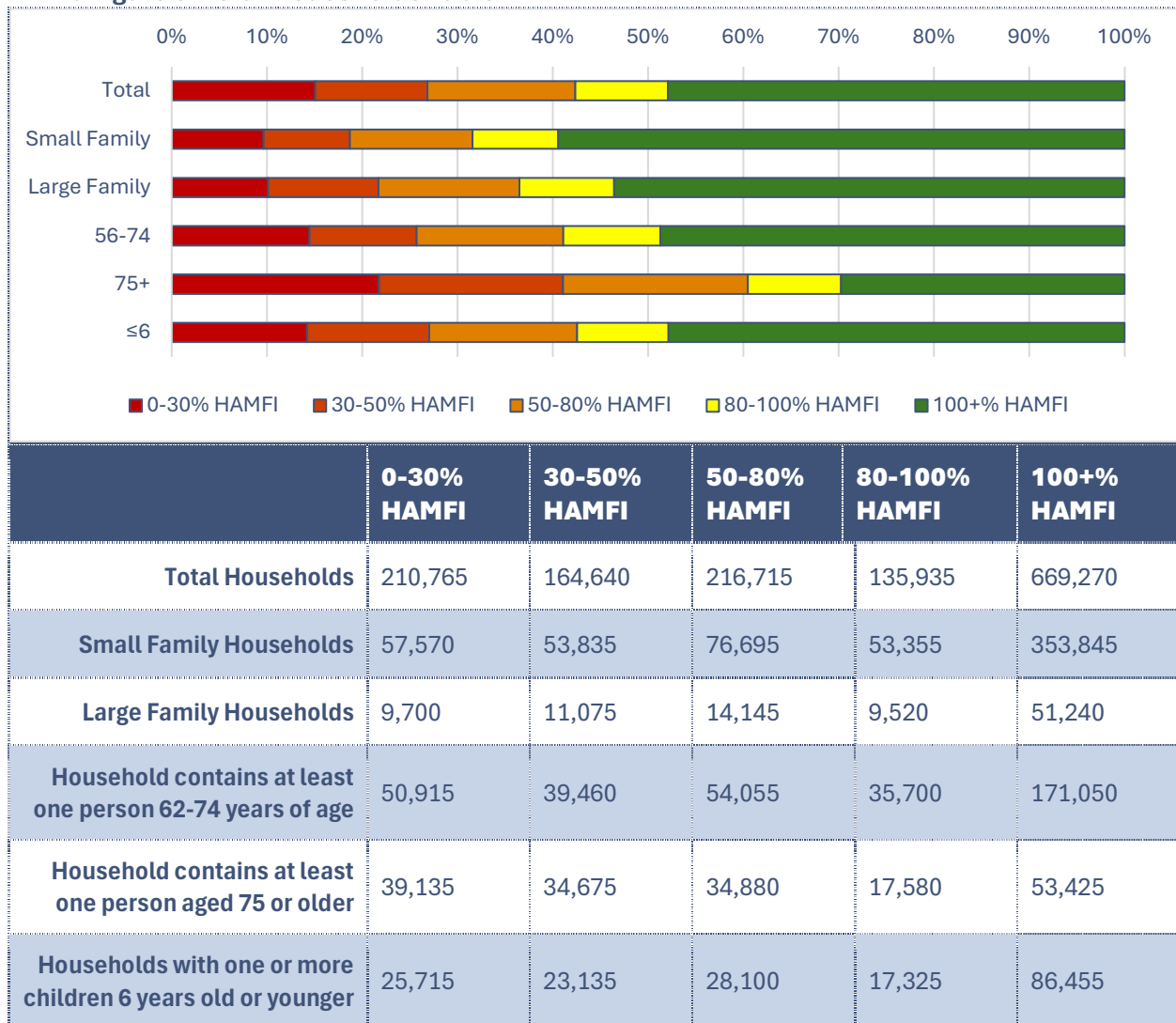
Data Source: Connecticut United Way

NA-10 Figure 7: Housing Needs Assessment Demographics

Demographic	2010	2022	% Δ
Population	3,545,837	3,611,317	1.8%
Households	1,359,218	1,409,807	3.7%
Nominal Median Income	\$67,740	\$90,213	33.2%
Median Income (2010 dollars)	\$67,740	\$66,622	-1.6%
Median Income (2022 dollars)	\$91,727	\$90,213	-1.7%

Data Source: 2010, 2022 ACS5 - DP02, DP03, DP05; BLS CPI Calculator

NA-10 Figure 8: Total Households Table

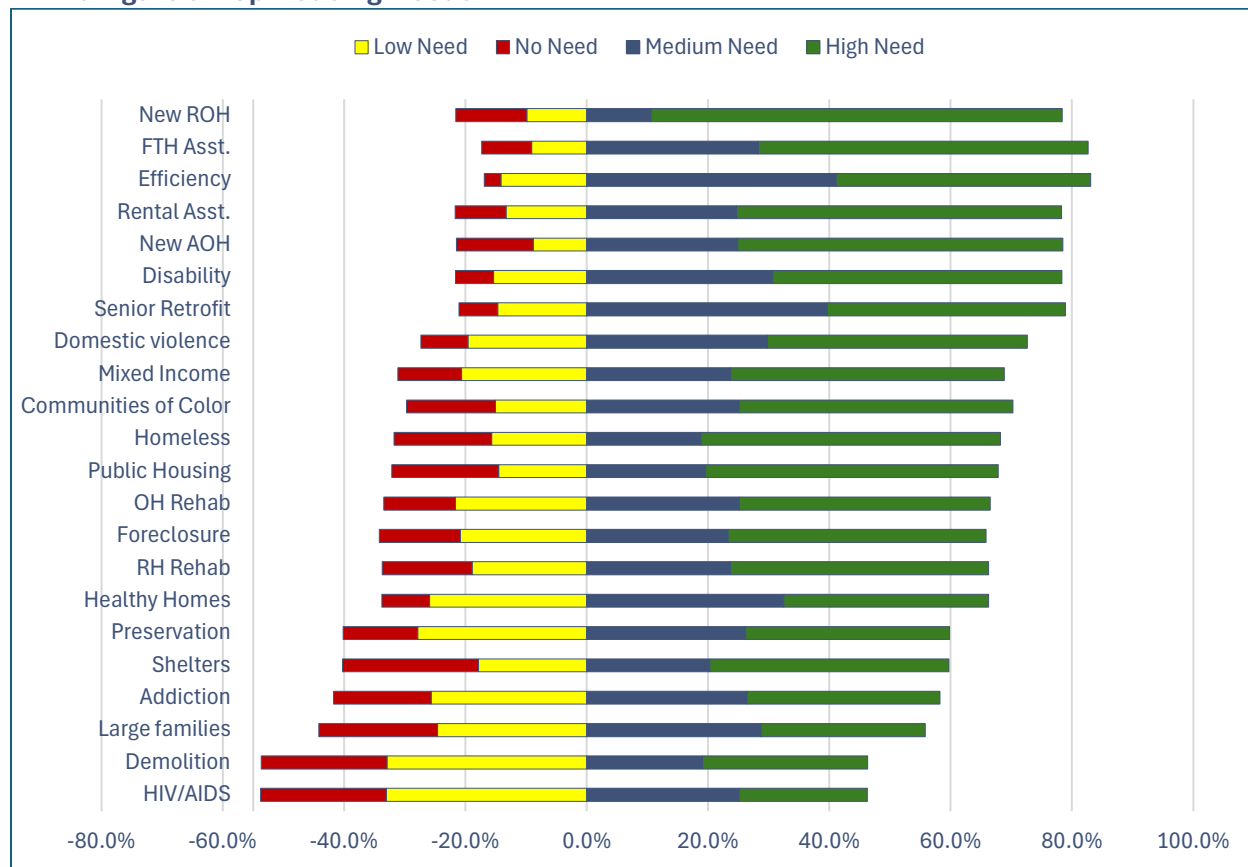


Data Source: 2017-2021 CHAS - Tables 5, 7, 13

CEW's Housing and Community Development survey asked respondents to rank several housing needs on a four-point scale: no need, low need, medium need, or high need. A weighted total score is then calculated and used to rank the needs. The top five housing needs identified by survey respondents are:

- **Construction of new affordable rental housing** was identified by 67.8% of respondents as a high need, 10.6% as a medium need, 9.8% of respondents as a low need, and 11.7% of respondents as not needed.
- **First-time homebuyer assistance** was identified by 54.3% of respondents as a high need, 28.3% as a medium need, 9.1% as a low need, and 8.3% as not needed.
- **Energy efficiency upgrades to existing buildings** was identified by 42.0% of respondents as a high need, 41.2% as a medium need, 14.1% as a low need, and 2.7% as not needed.
- **Rental and utilities assistance** was identified by 53.6% of respondents as a high need, 24.7% as a medium need, 13.3% as a low need, and 8.4% as not needed.
- **Construction of new affordable housing for sale** was identified by 53.6% of respondents as a high need, 24.9% as a medium need, 8.8% as a low need, and 12.6% as not needed.

NA-10 Figure 9: Top Housing Needs



	Definition	No Need	Low Need	Medium Need	High Need
New ROH	Construction of new affordable housing for Rent	11.7%	9.8%	10.6%	67.8%
FTH Asst.	First-time homebuyer assistance	8.3%	9.1%	28.3%	54.3%
Efficiency	Energy efficiency upgrades	2.7%	14.1%	41.2%	42.0%
Rental Asst.	Rental and utilities assistance	8.4%	13.3%	24.7%	53.6%
New AOH	Construction of new affordable housing for Sale	12.6%	8.8%	24.9%	53.6%
Disability	Supportive housing for persons with a disability	6.3%	15.4%	30.7%	47.6%
Senior Retrofit	Retrofit existing housing to meet seniors' needs	6.3%	14.7%	39.7%	39.3%
Domestic violence	Supportive housing for victims of domestic violence	7.8%	19.6%	29.8%	42.9%
Mixed Income	Mixed-income housing	10.5%	20.6%	23.7%	45.1%
Communities of Color	Homeownership in communities of color	14.6%	15.1%	25.1%	45.2%
Homeless	Supportive housing for the homeless	16.1%	15.7%	18.8%	49.4%
Public Housing	Increase in Public Housing	17.6%	14.5%	19.6%	48.2%
OH Rehab	Homeowner housing rehabilitation	11.8%	21.7%	25.2%	41.3%
Foreclosure	Foreclosure prevention	13.3%	20.8%	23.3%	42.5%
RH Rehab	Rental housing rehabilitation	14.9%	18.9%	23.7%	42.6%
Healthy Homes	Programs to address home-based health issues (lead, radon, asbestos, etc.)	7.8%	25.9%	32.5%	33.7%
Preservation	Historic Preservation	12.3%	27.9%	26.2%	33.6%
Shelters	Additional Homeless Shelters	22.4%	17.8%	20.3%	39.4%
Addiction	Recovery housing for persons with alcohol or drug addiction	16.1%	25.6%	26.4%	31.8%

	Definition	No Need	Low Need	Medium Need	High Need
Large families	Housing designed for larger families (6 or more persons living together)	19.6%	24.6%	28.8%	27.1%
Demolition	Demolition of dilapidated housing	20.7%	32.9%	19.1%	27.2%
HIV/AIDS	Housing for persons living with HIV/AIDS and their families	20.7%	33.0%	25.1%	21.1%

Data Source: CEW Advisors, Inc. Housing & Community Development Survey

Data - Severe Housing Problems

HUD defines several housing problems and severe housing problems.

The four housing problems are:

- **Substandard housing:** Lacking complete plumbing facilities
- **Substandard housing:** Lacking complete kitchen facilities
- **Overcrowding:** Having more than one but no more than 1.5 persons per room
- **Cost burdened:** Household spending more than 30% but no more than 50% of their income on housing costs

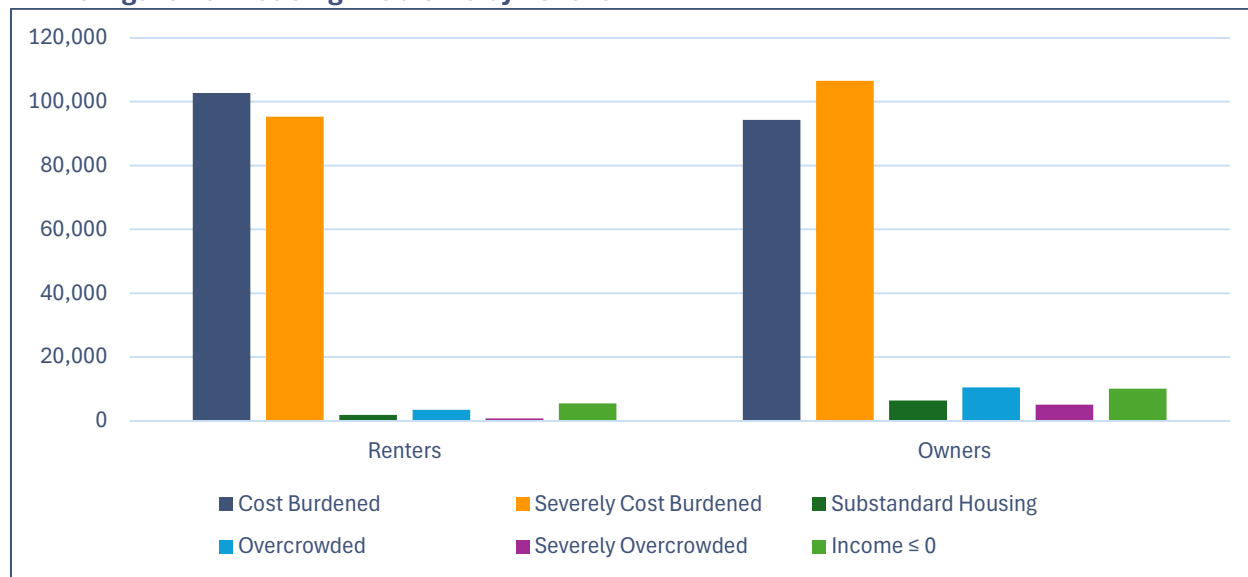
The severe housing problems are:

- **Substandard housing:** Lacking complete plumbing facilities
- **Substandard housing:** Lacking complete kitchen facilities
- **Severe overcrowding:** Having more than 1.5 persons per room
- **Severely cost burdened:** Household spending more than 50% of their income on housing costs

There is an additional data element related to **Zero/negative income**. A household with no income cannot calculate cost burden (as one cannot divide by zero). While technically this is not reported as a housing problem by HUD, we do call attention to it in our evaluation of housing problems.

We see that the main problem faced by both renters and owners is affordability. Close to 415K households are cost burdened, severely cost burdened or have nonpositive income, compared to under 30 K households with crowding or substandard housing issues. While not diminishing the importance of overcrowding and substandard housing, the magnitude of the cost burden problem is significantly greater.

NA-10 Figure 10: Housing Problems by Tenure



Data Source: 2017-2021 CHAS

NA-10 Figure 11: Housing Problems (Renters)

	0-30% AMI	30-50% AMI	50-80% AMI	80-100% AMI	Total
Substandard Housing Lacking complete plumbing or kitchen facilities	3,155	1,610	1,250	400	6,415
Severely Overcrowded With >1.51 people per room (and complete kitchen and plumbing)	2,350	1,365	900	500	5,115
Overcrowded With 1.01-1.5 people per room (and none of the above problems)	3,935	2,790	2,335	1,435	10,495
Severe Housing cost burden greater than 50% of income (and none of the above problems)	80,685	22,300	3,210	350	106,545
Housing cost burden greater than 30% of income (and none of the above problems)	19,455	40,865	29,030	5,020	94,370
Zero/negative Income (and none of the above problems)	10,125	0	0	0	10,125

Data Source: 2017-2021 CHAS - Table 3

NA-10 Figure 12: Housing Problems (Owners)

	0-30% AMI	30-50% AMI	50-80% AMI	80-100% AMI	Total
Substandard Housing Lacking complete plumbing or kitchen facilities	495	440	515	420	1,870
Severely Overcrowded With >1.51 people per room (and complete kitchen and plumbing)	70	170	300	200	740
Overcrowded With 1.01-1.5 people per room (and none of the above problems)	490	955	1,300	775	3,520
Severe Housing cost burden greater than 50% of income (and none of the above problems)	46,110	29,110	16,260	3,800	95,280
Housing cost burden greater than 30% of income (and none of the above problems)	9,385	27,365	45,145	20,895	102,790
Zero/negative Income (and none of the above problems)	5,445	0	0	0	5,445

Data Source: 2017-2021 CHAS - Table 3

Data - Severe Housing Problems

As a reminder, HUD defines severe housing problems as:

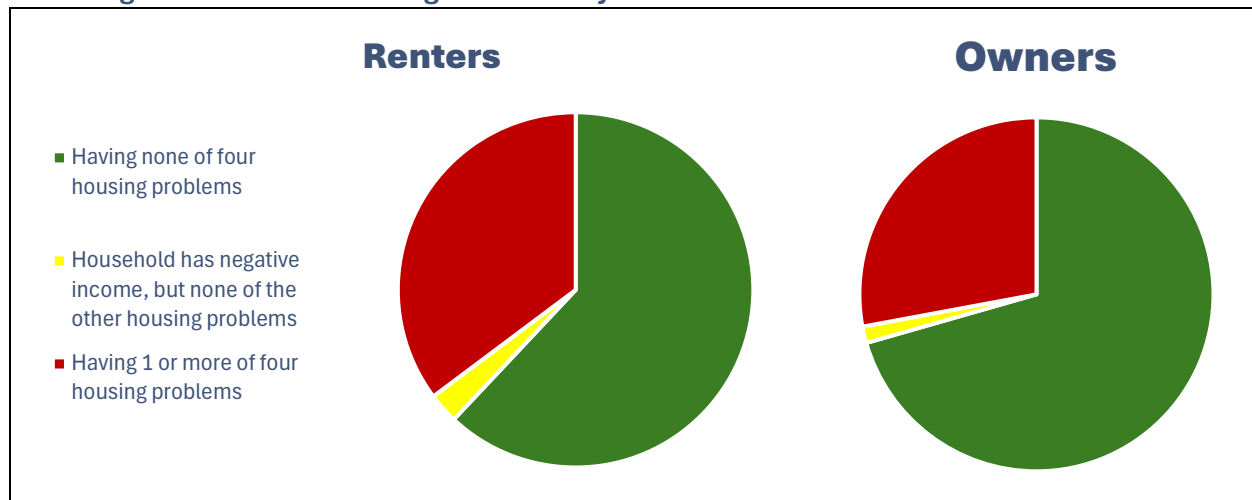
- **Substandard housing:** Lacking complete plumbing facilities
- **Substandard housing:** Lacking complete kitchen facilities
- **Severe overcrowding:** Having more than 1.5 persons per room
- **Severely cost burdened:** Household spending more than 50% of their income on housing costs

There is an additional data element related to **Zero/negative income**. A household with no income cannot calculate cost burden (as one cannot divide by zero). While technically this is not reported as a housing problem by HUD, we do call attention to it in our evaluation of housing problems.

We see in **NA-10 Figure 13** that renters are far more likely to have severe housing problems than owners. We also know from **NA-10 Figure 10** above that severe cost burden is the most common problem. Thus, we can confidently state that renters are far more likely to be severely cost burdened than owners.

Further, we see (unsurprisingly) in **NA-10 Figure 14** and **NA-10 Figure 15** that as households go up the income ladder, they have fewer severe housing problems.

NA-10 Figure 13: Severe Housing Problems by Tenure



Data Source: 2017-2021 CHAS - Tables 2, 3

NA-10 Figure 14: Severe Housing Problems (Renters)

	0-30% AMI	30-50% AMI	50-80% AMI	80-100% AMI	Total
Having 1 or more of four housing problems	90,130	28,070	7,690	2,685	128,575
Having none of four housing problems	45,625	59,560	80,880	40,240	226,305
Household has negative income, but none of the other housing problems	10,125	0	0	0	10,125

Data Source: 2017-2021 CHAS - Tables 2, 3

NA-10 Figure 15: Severe Housing Problems (Owners)

	0-30% AMI	30-50% AMI	50-80% AMI	80-100% AMI	Total
Having 1 or more of four housing problems	47,160	30,680	18,375	5,195	101,410
Having none of four housing problems	12,280	46,330	109,770	87,815	256,195
Household has negative income, but none of the other housing problems	5,445	0	0	0	5,445

Data Source: 2017-2021 CHAS - Tables 2, 3

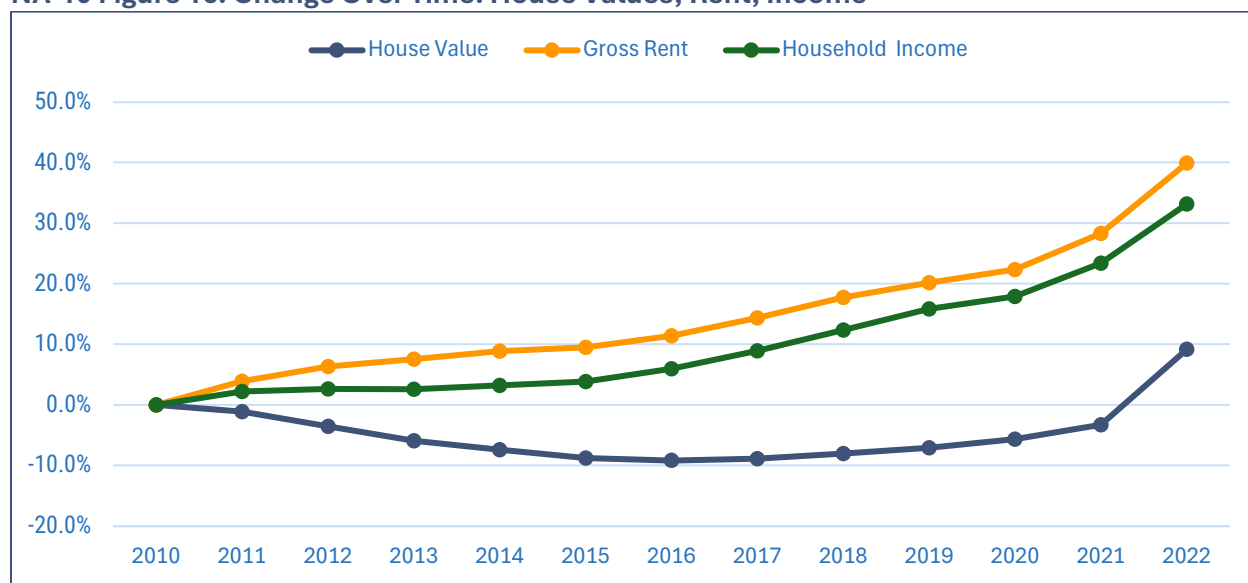
Data - Cost Burden

As discussed in previous sections, we know that cost burden is the main issue facing households in Connecticut. According to the 2022 ACS5 data, we see that Connecticut is a wealthy state. Almost half (46%) of households in the state earn more than \$100 K per year, with a little over a quarter (28%) earning more than \$150 K. However, this contributes to housing cost pressure for the 28% of the state that earns less than \$50 K per year.

Looking at growth over time we see that income has mostly kept pace with rent. This is better than many other jurisdictions where rent increases vastly outpace income increase in the post-COVID era. However, even in Connecticut renters simply cannot “get ahead” by earning more money as rents continually increase.

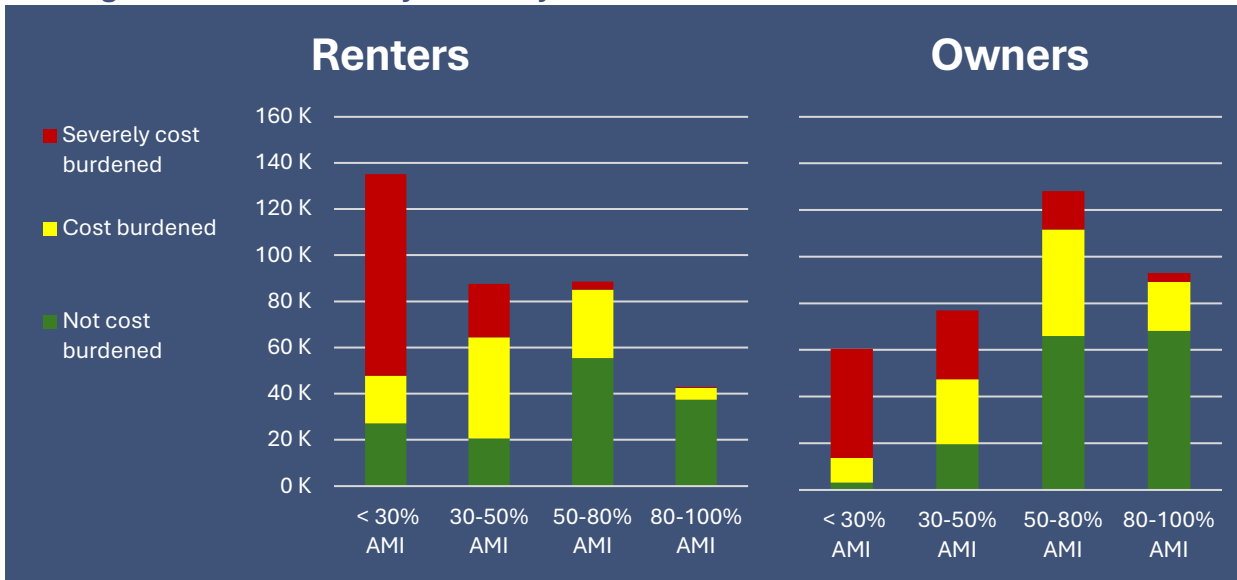
Interestingly, housing prices were still failing from the 2007-2008 financial crisis and housing market crash, declining from 2010 until they bottomed out in 2016-2017. Home prices started recovering slowly from 2017 until 2021, then spiked in 2022 as part of the nationwide housing market reshuffling that was rooted in pandemic-related purchasing. Starting only in 2022 is the home value in nominal dollars above what it was in 2010. Since then, the prices of homes throughout CT have increased dramatically.

NA-10 Figure 16: Change Over Time: House Values, Rent, Income



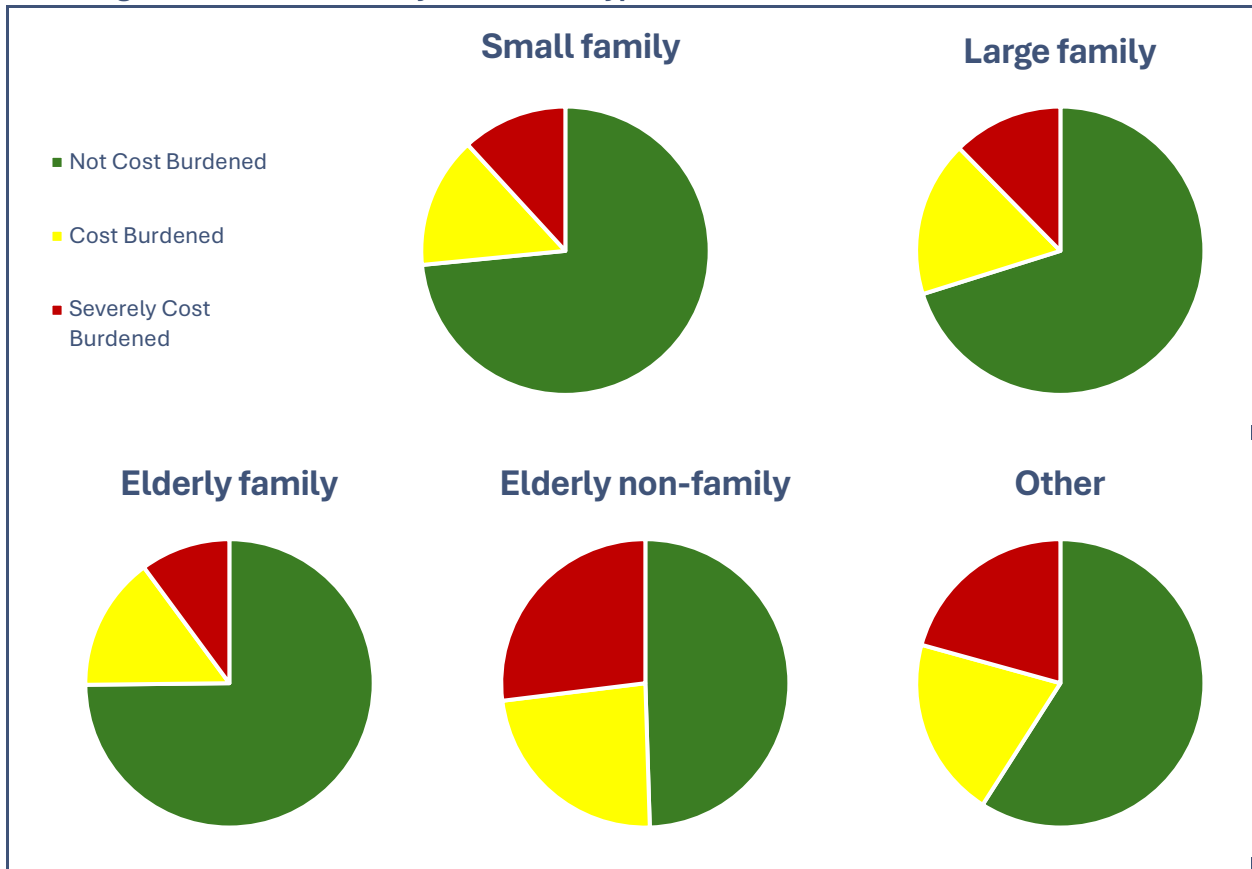
Data Source: 2010-2022 ACS5 - DP03, DP04

NA-10 Figure 17: Cost Burden by Tenure by Income



Data Source: 2017-2021 CHAS - Table 7

NA-10 Figure 18: Cost Burden by Household Type



Data Source: 2017-2021 CHAS - Table 7

NA-10 Figure 19: Cost Burden 30-50% (Renters)

	< 30% AMI	30-50% AMI	50-80% AMI	80-100% AMI	100+% AMI	Total
Small family	5,365	18,270	10,860	1,595	1,120	37,210
Large family	1,100	3,775	1,200	75	110	6,260
Elderly family	1,075	2,710	2,105	290	405	6,585
Elderly non-family	8,360	6,490	4,140	865	790	20,645
Other	4,740	12,560	11,280	2,310	1,470	32,360
Total	20,640	43,805	29,585	5,135	3,895	

Data Source: 2017-2021 CHAS - Table 7

NA-10 Figure 20: Cost Burden 30-50% (Owners)

	< 30% AMI	30-50% AMI	50-80% AMI	80-100% AMI	100+% AMI	Total
Small family	1,645	6,435	16,845	9,435	15,510	49,870
Large family	1,335	1,640	3,640	1,630	2,340	10,585
Elderly family	1,855	5,620	8,995	3,625	6,160	26,255
Elderly non-family	4,900	10,950	8,090	2,630	3,040	29,610
Other	860	3,200	8,085	3,745	4,940	20,830
Total	10,595	27,845	45,655	21,065	31,990	

Data Source: 2017-2021 CHAS - Table 7

NA-10 Figure 21: Cost Burden 50+% (Renters)

	< 30% AMI	30-50% AMI	50-80% AMI	80-100% AMI	100+% AMI	Total
Small family	31,170	8,395	985	15	100	40,665
Large family	5,775	1,290	65	0	0	7,130
Elderly family	3,170	1,235	215	100	105	4,825
Elderly non-family	18,600	4,915	1,030	140	165	24,850
Other	28,730	7,330	1,215	130	30	37,435
Total	87,445	23,165	3,510	385	400	

Data Source: 2017-2021 CHAS - Table 7

NA-10 Figure 22: Cost Burden 50+% (Owners)

	< 30% AMI	30-50% AMI	50-80% AMI	80-100% AMI	100+% AMI	Total
Small family	10,720	9,590	5,470	1,335	2,255	29,370
Large family	1,530	2,070	750	245	215	4,810
Elderly family	6,435	5,135	3,780	875	1,020	17,245
Elderly non-family	19,255	9,105	3,225	635	440	32,660
Other	8,835	3,690	3,245	740	370	16,880
Total	46,775	29,590	16,470	3,830	4,300	

Data Source: 2017-2021 CHAS - Table 7

Data - Crowding

As a reminder, HUD defines **overcrowding** as more than one but not more than 1.5 persons per room. It defines **severe overcrowding** as more than 1.5 persons per room. The tables below combine households that are either overcrowded or severely overcrowded into a single **crowding** metric.

While overall crowding is a far less prevalent problem than cost burden, we see that renters are much more likely to experience crowding than owners, and as usual this disproportionately impacts lower-income households and is typically the result of multiple low-income individuals living together.

NA-10 Figure 23: Crowding (Renters)

	0-30% AMI	30-50% AMI	50-80% AMI	80-100% AMI	100+% AMI	Total
Single family households	5,335	3,470	2,595	1,660	2,145	15,205
Multiple, unrelated family households	560	395	415	215	440	2,025
Other, non-family households	485	315	260	85	480	1,625
Total need by income	6,380	4,185	3,275	1,970	3,055	18,865

Data Source: 2017-2021 CHAS - Table 10

NA-10 Figure 24: Crowding (Owners)

	0-30% AMI	30-50% AMI	50-80% AMI	80-100% AMI	100+% AMI	Total
Single family households	470	915	1,025	775	2,880	6,065
Multiple, unrelated family households	120	255	570	200	960	2,105
Other, non-family households	0	0	10	0	40	50
Total need by income	590	1,170	1,600	975	3,880	8,215

Data Source: 2017-2021 CHAS - Table 10

NA-10 Figure 25: NA-10 Figure 18 - Crowding (Households with children aged 6 or younger)

	Renters				Owners			
	0-30% AMI	30-50% AMI	50-80% AMI	Total	0-30% AMI	30-50% AMI	50-80% AMI	Total
Lower Bound	0	0	0	0	0	0	0	0
Upper Bound	6,380	4,185	3,275	13,840	590	1,170	1,600	3,360

Data Source: 2017-2021 CHAS - Tables 10, 13

Connecticut, like most jurisdictions, does not track crowding specifically for households with children. Using the data from CHAS Table 13 (*Tenure by Year Structure Built by Household Income by Presence of Children*), used to determine the risk of lead-based paint in households with children, we can put an upper and lower bound on the possible number of overcrowded households with children by tenure and income level. We must use the definition from CHAS Table 13 of children being aged six or younger. Unfortunately, as is often the case, these ranges are not very helpful – the minimum for each category is zero and the maximum is the known number of crowded households for each tenure/income category.

Narrative

Describe the number and type of single person households in need of housing assistance.

Connecticut has 404,675 single person households, including 174,486 senior single person households. According to the 2018-2022 ACS, the median rents for Connecticut 0-, 1-, 2-, and 3-bedroom units were \$950, \$1,138, \$1,441, and \$1,642 respectively. Looking at the table below, we can see that this likely puts many single person households in the **cost burdened** or **severely cost burdened** categories depending on their age, sex, and size of the rental unit. Single women aged 65 and older, who are living alone have the lowest earnings, averaging \$32,622 annually, putting this group at the highest need for housing assistance and at the greatest risk of homelessness.

NA-10 Figure 26: Single-Person Household (Renter) Cost Burden

	#	Earnings	0 Beds	1 Bed	2 Beds	3 Beds
Single Female (<65)	111,991	\$48,145	24%	28%	36%	41%
Single Female (65+)	118,368	\$32,622	35%	42%	53%	60%
Single Male (<65)	118,198	\$54,706	21%	25%	32%	36%
Single Male (65+)	56,118	\$40,272	28%	34%	43%	49%

Data Source: 2022 ACS5 - B19215, B25031, DP02

Homelessness

According to the January 2024 Point in Time Count there were 2,301 adults comprising 2,246 households. Further, as of November 2024, there were 2,292 adults accessing homelessness services, either through street outreach or in emergency shelter, many of them are single persons in need of housing assistance. Finally, for the program year from July 1, 2023 until June 30, 2024, there were 1,096 chronically homeless adults that were served, with an average number of 606 days of experiencing homelessness, or approximately 20 months of homelessness. Of these, 173 persons exited homelessness while the remaining 923 continue to experience homelessness.

Foster Care

In Connecticut, approximately 200 children age out of the foster care system each year. This means they turn 18 without being reunited with their families or being adopted. Aging out can present significant challenges as these young adults are often unprepared to transition to independent living, including:

- Homelessness: Many young adults who age out of foster care struggle to find stable affordable housing. Studies show that between 11% and 36% of these youths experience homelessness during their transition to adulthood.
- Employment and Financial Stability: Securing and maintaining employment can be difficult due to a lack of job experience and necessary life skills. Financial independence is often a significant hurdle.
- Education: Continuity in education is often disrupted by frequent moves and instability in foster care. This can lead to lower educational attainment and limited opportunities for higher education.

- **Mental Health:** Many foster youth have experienced trauma, abuse, or neglect, which often leads to mental health issues such as depression, anxiety, and PTSD. These issues can be exacerbated by the stress of transitioning to independent living.
- **Lack of Support Networks:** Without a stable family or support system, these young adults often feel isolated and lack the guidance needed to navigate adulthood.
- **Substance Abuse:** The absence of a supportive environment can increase the risk of substance abuse as a coping mechanism for the challenges they face as they transition to independent living.

Addressing these challenges requires comprehensive support systems, including access to affordable housing, education, employment opportunities, mental health services, and mentorship programs.

Department of Corrections

When individuals are released from incarceration and reenter the community, they often have no personal housing that they own or rent due to discontinuance of apartment leases while incarcerated. While these reentering citizens are often reliant on family and friends for housing, there is often a need for transitional housing or shelters that are either provided by the state, town, or a nonprofit.

The Department of Correction (DOC) contracts with Connecticut nonprofits for more than 1,200 halfway house beds and supervises more than 3,500 additional low risk offenders in the community as a means of supporting a graduated and successful transition back to community self-sufficiency. The DOC is part of the DOC Reentry Housing Assistance, a collaborative effort between DOC, CT Coalition to End Homelessness, Coordinated Access Networks (CAN) regional providers, Court Support Services Division, and other key partners working with the reentry population. The program with DOC reentry planning staff works with clients prior to discharge to find housing options if someone has been identified as potentially homeless, however, the dramatic increase in rents throughout the state, and the lack of available affordable housing has created significant elevated risk of homelessness among individuals released or discharged from DOC.

Despite the strong efforts by DOC, of those released from incarceration between June 1, 2022 – May 31, 2023, 14% went from incarceration to immediate homelessness according to pre-release tracking by the DOC, while another 2 percent when into shelter. The number may be higher, especially if family/friend housing support is tentative or short lived.

Unfortunately, having a criminal record can limit an individual's access to education, jobs, and housing which can complicate the re-entry process and even lead to re-arrest. One of the biggest determining factors for successful reentry is whether an individual can find safe, secure, and affordable housing. Unfortunately, for anyone with a criminal record, finding housing is challenging. Formerly incarcerated individuals are ten times more likely to face homelessness than those without a criminal record. The National Inventory of Collateral Consequences of Conviction found that there are more than 1,300 barriers to housing at various levels of government related to criminal records. This combined with the state's housing crisis and widespread shortage of affordable and available housing options has increased the challenge for individuals exiting a correctional facility.

Estimate the number and type of families in need of housing assistance who are disabled or victims of domestic violence, dating violence, sexual assault and stalking.

Disabled Population

Connecticut has 107 K people with hearing difficulty, 73 K people with vision difficulty, 166 K people with cognitive difficulty, 192 K people with ambulatory difficulty 79 K people with self-care difficulty, and 151 K with independent living difficulty. It is not possible to calculate with any accuracy how many disabled individuals require housing assistance; however, given the size of the population, the need will be significant.

Victims of Domestic Violence

According to the most recent Point-in-Time Count data available, of the 3,410 unhoused individuals in Connecticut, 692, or 20 percent, are survivors of some form of domestic violence. In the calendar year 2022, the Connecticut Coalition Against Domestic Violence reported that 705 victims received rapid rehousing services. This includes 281 adults and 424 children, with efforts aimed at diverting families from entering homelessness.

These populations are discussed in more detail in **Section NA-45: Non-Homeless Special Needs Assessment**.

What are the most common housing problems?

The demand for affordable housing in CT is the most significant need and the most common housing problem for the state of CT. In every conversation, at every community meeting and in every consultation, in every part of the state, the number one problem that the state faces is housing cost burden. As **NA-10 Figure 10** illustrates above, cost burden is by far the largest problem affecting households in Connecticut. There are 414,555 households in the state that are paying more than 30% of their income in housing costs, compared to 28,155 households that are overcrowded, severely overcrowded, or live in substandard housing.

The state of Connecticut, through careful and thoughtful planning, has been able to develop approximately 4,900 units of housing in the state from 2019 until May 2024. While the addition of any amount of affordable housing should be lauded, without significantly more and continued funding, the state will not be able to meet the demand for deeply subsidized affordable housing, with embedded supportive services for the most economically marginalized households in the state. As a result, households will continue to spend more and more income on housing and a larger and larger percentage of the population will be at risk of homelessness or will fall into homelessness.

It should also be mentioned that there is a direct correlation to crowding, and income. As income levels drop the likelihood of a household crowding increases, this trend is apparent for renters and owners too.

Housing conditions are discussed in more detail in section **MA-20**.

Are any populations/household types more affected than others by these problems?

In Connecticut, there is a cross-cutting need for housing in all tenure types (ownership and rental), bedroom sizes (efficiency to 3+ bedrooms), and income ranges (extremely low-, low-, moderate- and workforce-income). These needs may vary based on specific county, region, or municipality, as well as by neighborhood and borough. However, these needs are not limited by race, ethnicity,

disability, gender, or any other characteristic among the protected classes. These needs transcend all boundaries, both geographically and demographically.

Statewide, 77% of households with incomes under 50% AMI including both renters and homeowners pay at least 30% of their income for housing. 78% of the lowest income households (households with incomes at 30% AMI or less) pay more than 30% of their income for housing.

Marginalized groups, including people of color, people with disabilities, single-parent families, and individuals with non-employment income, are particularly vulnerable to housing insecurity due to a lack of affordable housing options.

In community meetings and consultations, a common refrain is not only that the cost of monthly rent is too high for the community, but landlords, property managers, and local real estate companies are asking for 3x the monthly rent to move into an apartment. While each region in the state varies, the Fair Market Rent for a two-bedroom apartment in Connecticut is 1,824 for 2025. This means that a single female Head of Household with a child or children needs almost \$5,500 to move into a new apartment.

As discussed in the following sections, a disproportionately greater need exists when the members of racial or ethnic group at any specific income level experience housing problems at a greater rate (10 percentage points or more) than the income level as a whole. Based on the available data discussed below, there are a few instances of racial or ethnic groups that have a disproportionately greater need, including:

- Among low-income households earning between 50% and 80% of area median income, **American Indian, Alaska Native** Islander households have a higher likelihood of experiencing **one or more housing problem**.
- Among low-income households earning between 50% and 80% of area median income, **Pacific Islander** households have a higher likelihood of experiencing **one or more housing problem**.
- Among very low-income households earning between 30% and 50% of area median income, **Asian** and **American Indian, Alaska Native** households have a higher likelihood of experiencing **one or more severe housing problem**.
- Among low-income households earning between 50% and 80% of area median income, **Asian; American Indian, Alaska Native; and Pacific Islander** households have a higher likelihood of experiencing **one or more severe housing problem**.
- Among the moderate-income households earning between 80% and 100% of area median income, **Asian** households have a higher likelihood of experiencing **one or more severe housing problem**.

Describe the characteristics and needs of Low-income individuals and families with children (especially extremely low-income) who are currently housed but are at imminent risk of either residing in shelters or becoming unsheltered 91.205(c)/91.305(c)). Also discuss the needs of formerly homeless families and individuals who are receiving rapid re-housing assistance and are nearing the termination of that assistance

According to the 2017-2021 CHAS data, there are 592,120 low-income households living in Connecticut, out of a total of 1,397,325 households, about 42% of all households are low to moderate-income.

- 210,765 @ 0-30% AMI (15.1% of all households)
- 164,640 @ >30-50% AMI (11.8% of all households)
- 216,715 @ >50-80% AMI (15.5% of all households)

These low-income households are more likely to have a person aged 75 or older, particularly the Extremely Low-Income Households. Low-income individuals and families living in Connecticut are finding it increasingly more difficult to pay for housing, particularly for the lowest income households because of the lack of affordable housing for the most economically vulnerable populations. According to the 2017-2021 CHAS data, Connecticut has 239,200 households spending more than 30% of their income on housing, and an additional 215,865 households spending more than 50% of their income on housing, almost one-third of all households in the state. Critically, anyone spending more than 50% of their income on housing is in acute danger of becoming homeless as rent and home prices, utilities, property taxes, household items, home repairs, etc. continue to rise.

We see from **NA-10 Figure 18** that the household type **elderly non-family** is the most likely to be severely cost burdened. This is likely due to seniors being on a fixed income that does not keep up with rapidly rising housing costs. Many of these low-income households are spending over 30% of their income on housing and have little savings which could be used in case of an emergency. There can often be instances when low-income families have a major home repair or auto repair need, medical emergency, or become unemployed. Without sufficient savings, a large financial shock can make them late on a rental or mortgage payment and begin the painful process of being evicted or being pushed into foreclosure.

As a percentage of total households, small and large family households are less likely to be low-income compared to the total households by income range. However, there are a significant number of small and large family households that are low-income: 67,270 households at 0-30% HAMFI, 64,910 households at 30-50% HAMFI, and 90,840 households at 50-80% HAMFI.

According to the 2022 ACS, there are 88,295 “single parent” households in the state, defined as a householder with no spouse present, living with their own children. We note that this definition does not map exactly onto what people would think of as “single parent” situations. For example, it would include unmarried couples with children, but exclude a single person caring for a sibling, grandchild, or other young family member. It also

The income bands tracked by the census do not map neatly onto the income categories for extremely low (< 30% AMI), very low (30-50% AMI), low (50-80% AMI) and moderate (80-100% AMI), but we can use the data to set upper and lower bounds for the estimated number of households by income category. There is significantly higher margin-of-error with these small population slices, so the total estimates add up to more than the 88,295 number cited above.

We see that there are between 32,793 and 39,869 extremely low income single parent households, between 24,432 and 26,950 very low income single parent households, between 14,810 and 19,642 low income single parent households, and between 10,426 and 12,613 moderate income single parent households.

NA-10 Figure 27: Single Parent Households by % AMI

	< 30%	30-50%	50-80%	80-100 %	100+%
Single father lower bound	4,723	5,692	3,906	2,443	7,804
Single father upper bound	5,888	6,002	4,874	4,159	11,963
Single mother lower bound	28,070	20,740	10,904	7,983	13,416
Single mother upper bound	33,981	18,948	14,768	8,454	21,870
Total lower bound	32,793	26,432	14,810	10,426	21,220
Total upper bound	39,869	24,950	19,642	12,613	33,833

Data Source: 2018-2022 ACS – Tables DP03, B19131

According to the 2022 ACS 5-Year Estimates, there are 742,877 children under 18 living in 410,168 households in Connecticut. Among these households, 257,122 are married-couple households with children, 15,459 are with an unmarried male head of household and 72,836 are unmarried female head of household. Additionally, there are 16,707 grandparents who are taking care of their grandchildren. 236,377 children are living in single- parent households. Children living in single-parent families are more likely to live in poverty than children living in two-parent families.

In Connecticut 4% of married-couple households with children live in poverty versus 25.2% poverty rate among single-parent Connecticut households with children. Single-parent families have only one potential wage earner, compared with the two potential wage earners in two-parent families.

NA-10 Figure 28: Poverty Status of Households with Children

	In Poverty		Not In Poverty		Total
	#	%	#	%	
Married couples with children	10,796	4.0%	257,668	96.0%	268,464
Male householder, no spouse present, with related children	4,985	14.9%	28,564	85.1%	33,549
Female householders, no spouse present, with related children	29,548	28.6%	73,836	71.4%	103,384
Total householders, no spouse present, with related children	34,533	25.2%	102,400	74.8%	136,933

Data Source: 2018-2022 ACS – B17010

Homeless services providers have found that many characteristics are shared among low-income households at imminent risk of becoming homeless. Common characteristics include inability to understand English, disabilities among one or more household members, low-wage or sporadic / seasonal employment, lower levels of education, and domestic violence. Common needs of low-income households include the following: housing opportunities that are affordable to extremely low- and low-income families, access to reliable and timely transportation, childcare, employment training and legal services/support.

Availability of permanent supportive housing and long-term housing vouchers remain the highest need for households nearing termination of their rapid re-housing assistance. Extremely low-income or low-income households are typically the population that is at risk of residing in shelters or becoming unsheltered with the termination of rapid re-housing. Given the short-term nature of the rapid re-housing program, households often lack the time necessary to build their income enough to afford market rate housing. A low supply of affordable housing coupled with extremely high rent costs leave households struggling to maintain rent once their rapid re-housing assistance ends. Further, it is difficult for the rapid rehousing program to assist with every barrier in the short period of time that households are enrolled in the program. Many challenges that may have originally led to a housing crisis are left unaddressed upon termination of rapid re-housing assistance.

If a jurisdiction provides estimates of the at-risk population(s), it should also include a description of the operational definition of the at-risk group and the methodology used to generate the estimates:

DOH relies on the Point-In-Time count and the services provided by homelessness agencies to calculate its homeless population. It is not possible to provide an accurate estimate of the at-risk population in Connecticut given the size of the state, and the varied circumstances which can lead to homelessness.

Specify particular housing characteristics that have been linked with instability and an increased risk of homelessness

The threat of homelessness is strongest among the households that are experiencing extreme cost burdens of 50% or more of their income. In Connecticut, there are 215,865 households of all income levels that are extremely cost burdened, or 15.4% of all households in the state.

Other housing characteristics associated with instability and increased risk of homelessness include overcrowding and substandard housing units that lack complete plumbing or kitchen facilities. In Connecticut, there are 12,295 renter households that are overcrowded and another 6,260 renter households that are severely overcrowded. For homeowners, there are 6,485 households that are overcrowded and an additional 1,600 that are severely overcrowded. There are 7,410 renter units that lack complete plumbing and kitchen facilities and 3,060 owner households.

Another related risk factor is a common phenomenon of “doubling up,” or temporarily living with friends or families due to housing cost burden or other situation (i.e., eviction, foreclosure, loss of employment, etc.). According to The State of Homelessness in America report for 2023, living doubled up is the most common living situation prior to becoming homeless. While the total number of Connecticut households in this situation is not known, there are 1,425 non-family households where the householder does not live alone. While most of these households are likely friends and non-married partners living together, some of them could be considered doubling up. Anecdotal information from consultations with homeless service providers and community action agencies show that this has become an increasing problem for the state as rental prices increased.

Age of the housing stock is another driver of housing cost burden affecting the stability of low-income homeowners and their risk of becoming homeless. Approximately 26.1% of the state’s housing was constructed prior to 1950 with about 11.1% constructed after 2000. The vast majority, approximately 66.8% of the City’s housing units were built between 1950 and 1999. Older housing stock requires periodic maintenance and upkeep to ensure housing units are safe, warm, clean, and healthy. The cost of maintenance and rehabilitation has increased significantly over the past several years along with general housing costs. This places a significant burden on individual homeowners, especially for older adults who are on a fixed income and are increasingly less able to afford to maintain their homes themselves and require hiring others to do so.

Low-income renters, especially single-income households and those on fixed incomes, are at risk of becoming homeless and are also significantly more likely to have housing cost burdens over 50% of their income. Small interruptions of income, sudden emergencies such as an unforeseen emergency car repair, and increased household expenses have significant consequences when these households lack the savings to bear the costs of these expenses.

Discussion

The data presented above paints a clear picture of the state’s housing challenges; primary among them is the issue of affordability. The housing cost burden among low- to moderate-income residents creates significant difficulty for the households and for the state when cost burdens lead to homelessness. The lack of ongoing maintenance of some of the state’s housing stock in low- and moderate-income neighborhoods has created situations where units are of substandard quality, are unhealthy, and potentially unsafe for habitation.

The availability and affordability of housing in Connecticut is critical for sustained health and development of every municipality. Looking at the relationship between demographic trends, and

the availability and affordability of housing, there is a great shortage of affordable housing. Affordable housing is defined as households that do not spend more than 30% of their income for housing, including utilities. While housing problems impact many different demographics throughout the state, low-income households, single-person households, and elderly households are the groups that experience disproportionately high cost-burdens.

In its 2024 report, the National Low Income Housing Coalition cited that for Connecticut, the Fair Market Rent (FMR) for a two-bedroom apartment was \$1,796. In order to afford this level of rent and utilities, without paying more than 30% of income on housing, a household must earn \$5,987 monthly or \$71,840 annually. This results in an hourly wage of \$34.54, more than double the state's minimum wage.

Of great concern is housing that the market is unable or unwilling to produce, without some form of subsidy, including housing that is traditionally for those with incomes between 80% and 120% of Area Median Income. If housing that is affordable to households with incomes between 80% and 120% of AMI is not being produced, then the availability of existing housing in that price range diminishes. In keeping with the economic laws of supply and demand, scarcity increases prices.

Annually, DOH collects data in accordance with the requirements of Section 8-30g of the Connecticut General Statutes, the Affordable Housing Land Use Appeal, and publishes a list of "affordable housing" that meets the criteria set forth in that statute which includes governmentally assisted housing, deed restricted housing, and state or federal rental subsidies. These 175,548 units (Connecticut 2023 Affordable Appeals List) are monitored for affordability by a variety of local, state and federal agencies. These include: 1) The Connecticut Housing Finance Authority (CHFA) through mortgage financing, tax credit financing, or through portfolio management; 2) the Department of Housing (DOH); 3) the U.S. Department of Housing and Urban Development (HUD); 4) the U.S. Department of Agriculture's (USDA) Rural Development Agency; and 5) local municipal "Administrators."

NA-15 Disproportionately Greater Need: Housing Problems – 91.205 (b)(2)

Assess the need of any racial or ethnic group that has disproportionately greater need in comparison to the needs of that category of need as a whole

Introduction

For the purposes of HUD, a disproportionately greater need exists when the members of racial or ethnic group at any specific income level experience housing problems at a rate of 10 percentage points or more than the income level as a whole. For example, if 50% of all low-income households have a housing problem and 60% of low-income Hispanic households have a housing problem, this would be considered an instance of disproportionately greater need.

This section has four tables that capture the number of housing problems by income, race, and ethnicity. Each table provides data for a different income level (0–30%, 30–50%, 50–80%, and 80–100% AMI). As discussed above, housing problems are defined as having one of the following four living conditions:

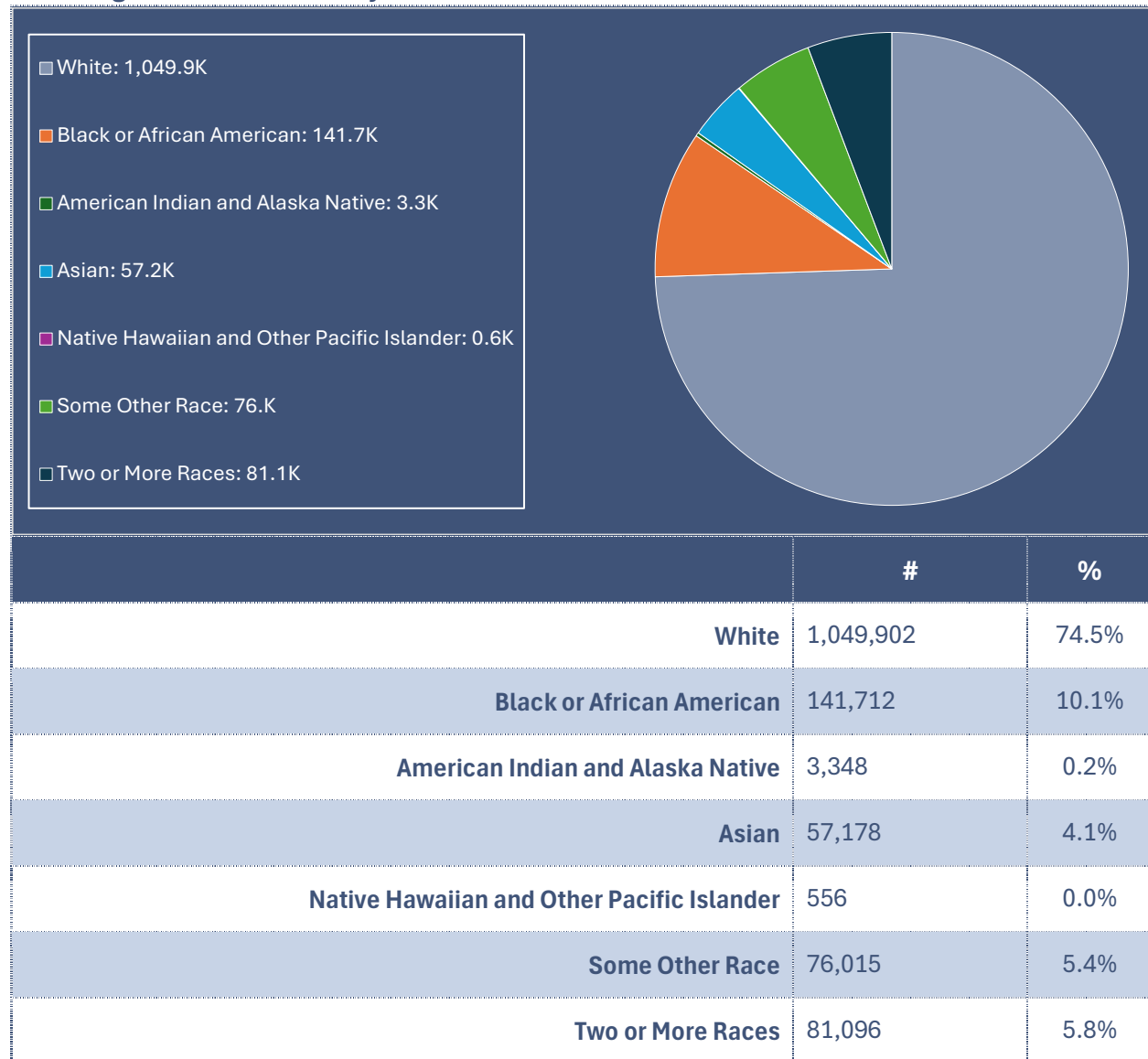
- **Substandard housing:** Lacking complete plumbing (including hot and cold running water, a flush toilet, and a bathtub or shower)
- **Substandard housing:** Lacking complete kitchen facilities (including a kitchen sink; a cooking stove, built-in burners, or a microwave oven; and a refrigerator)
- **Overcrowding:** Having more than one and no more than 1.5 persons per room (not including bathrooms, porches, foyers, halls, or half-rooms)
- **Cost burdened:** Household spending more than 30% and no more than 50% of their income on housing costs

Additionally, we analyze households with **Zero/negative income** although HUD does not classify this as a housing problem. Note, we also include households with persons aged 65-74 and 75+ using data from CHAS table 5 as they are often at disproportionate greater need.

Data - Demographics

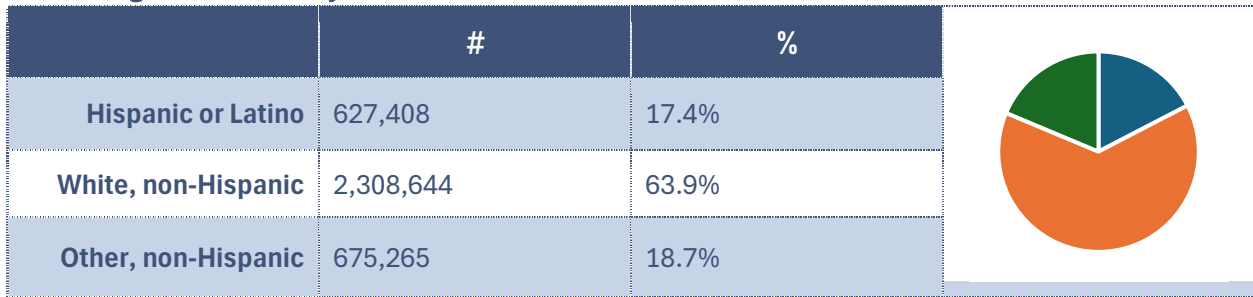
The racial, ethnic, and age distributions of Connecticut households are outlined in the following tables. About 75% of state households identify as White, 10.1% African American, 4.1% Asian, and 11.2% of CT households have a householder who identifies as multiracial or other. About 17.4% of Connecticut householders identify as Hispanic or Latino of any race. Connecticut also has small American Indian, Alaska Native, Native Hawaiian, and Pacific Islander populations. Combined these communities make up less than 0.2% of the total households in the state. While we see below that these communities have disproportionately greater need based on the HUD metric, we should note the small sample size for these populations. Further, we note that any programs that alleviate housing problems in general will also assist these populations.

NA-15 Figure 1: Households by Race of Householder



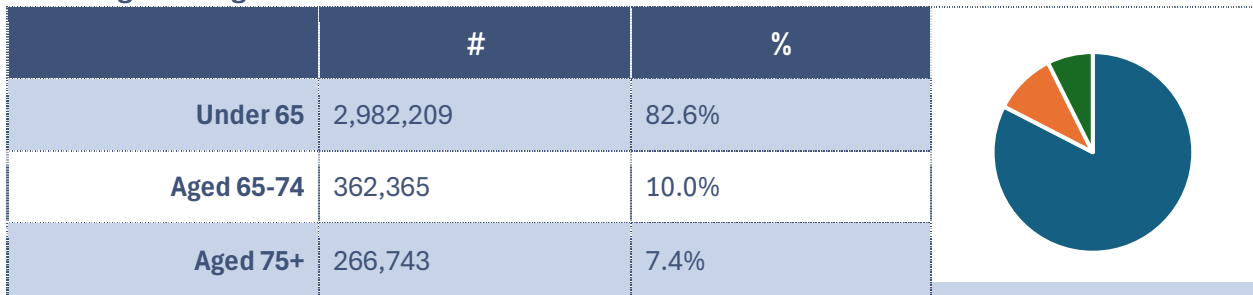
Data Source: 2022 ACS5 DP02

NA-15 Figure 2: Ethnicity



Data Source: 2018-2022 ACS - DP05

NA-15 Figure 3: Age



Data Source: 2018-2022 ACS - DP05

Data – Housing Problems

NA-15 Figure 4: Disproportionally Greater Need - Housing Problems (0 - 30% AMI)

	Has one or more of four housing problems		Has none of the four housing problems	
	#	%	#	%
Jurisdiction as a whole	166,130	78.8%	44,635	21.2%
White	86,660	80.3%	21,305	19.7%
Black / African American	25,755	77.6%	7,430	22.4%
Asian	5,080	78.3%	1,405	21.7%
American Indian, Alaska Native	395	69.3%	175	30.7%
Pacific Islander	50	40.0%	75	60.0%
Hispanic	43,050	76.7%	13,070	23.3%
Elderly	38,215	79.2%	10,030	20.8%
Frail Elderly	30,400	81.0%	7,115	19.0%

Data Source: 2017-2021 CHAS - Tables 1, 5

Of all the income levels within Connecticut, households within the 0-30% AMI category have the highest percentage of households with one or more of four housing problems. Approximately 79% of all households in this income category have one or more housing problems. As discussed in the previous section, housing cost burden is the most common housing problem, vastly surpassing every other housing problem combined. In each of these sections, when discussing housing problems, housing cost burden is the primary challenge.

As shown in the table above, when considering race, 80% of White households in this income group have one or more of four housing problems, 78% of Black/African American households, 78% of Asian households, 69% of American Indian, Alaska Native households, and 40% of Pacific Islander households in this income group have one or more of four housing problems. When considering ethnicity and this income category, 77% of Hispanic households have one or more of four housing problems. There are no instances of disproportionate greater need in this income category. It should be noted that Pacific Islander households have a much lower rate of housing problems than all other racial categories.

NA-15 Figure 5: Disproportionally Greater Need - Housing Problems (30 - 50% AMI)

	Has one or more of four housing problems		Has none of the four housing problems	
	#	%	#	%
Jurisdiction as a whole	126,980	77.1%	37,655	22.9%
White	75,235	75.4%	24,530	24.6%
Black / African American	16,625	79.7%	4,235	20.3%
Asian	4,460	80.3%	1,095	19.7%
American Indian, Alaska Native	230	79.3%	60	20.7%
Pacific Islander	0	n/a	0	n/a
Hispanic	27,350	79.4%	7,075	20.6%
Elderly	28,800	73.0%	10,660	27.0%
Frail Elderly	22,940	66.2%	11,735	33.8%

Data Source: 2017-2021 CHAS - Tables 1, 5

Of all the income levels within Connecticut, households within the 30-50% AMI category have the second-highest percentage of households with one or more of four housing problems. Approximately 77% of all households in this income category have one or more housing problems. As discussed in the previous section, housing cost burden is the most common housing problem, vastly surpassing every other housing problem combined. In each of these sections, when discussing housing problems, housing cost burden is the primary challenge.

As shown in the table above, when considering race, 75% of White households in this income group have one or more of four housing problems, 80% of Black/African American households, 80% of Asian households, and 79% of American Indian, Alaska Native households in this income group have one or more of four housing problems. When considering ethnicity in this income category, 79% of Hispanic households have one or more of four housing problems.

There are no instances of disproportionate greater need in this income category.

NA-15 Figure 6: Disproportionally Greater Need - Housing Problems (50 - 80% AMI)

	Has one or more of four housing problems		Has none of the four housing problems	
	#	%	#	%
Jurisdiction as a whole	100,240	46.3%	116,475	53.7%
White	64,335	45.3%	77,830	54.7%
Black / African American	13,405	51.5%	12,620	48.5%
Asian	3,135	51.8%	2,915	48.2%
American Indian, Alaska Native	135	67.5%	65	32.5%
Pacific Islander	10	100.0%	0	0.0%
Hispanic	16,530	45.3%	19,930	54.7%
Elderly	23,980	44.4%	30,075	55.6%
Frail Elderly	14,075	40.4%	20,805	59.6%

Data Source: 2017-2021 CHAS - Tables 1, 5

Among all households within the 50-80% AMI category, approximately 46% have one or more housing problems. As discussed in the previous section, housing cost burden is the most common housing problem, vastly surpassing every other housing problem combined. In each of these sections, when discussing housing problems, housing cost burden is the primary challenge.

As shown in the table above, when considering race, 45% of White households in this income group have one or more of four housing problems, 42% of Black/African American households, 52% of Asian households, 68% of American Indian, Alaska Native households, and 100% of Pacific Islander households in this income group have one or more of four housing problems. When considering ethnicity in this income category, 45% of Hispanic households have one or more of four housing problems.

American Indian, Alaska Native and Pacific Islander households in this income group have a disproportionate greater need. It should be noted the number of households for both of these racial groups is small and findings may be a result of sampling error. Further, we note that any programs that alleviate housing problems in general will also assist these populations.

NA-15 Figure 7: Disproportionally Greater Need: Housing Problems (80 - 100% AMI)

	Has one or more of four housing problems		Has none of the four housing problems	
	#	%	#	%
Jurisdiction as a whole	33,795	24.9%	102,140	75.1%
White	23,865	24.4%	73,955	75.6%
Black / African American	3,130	25.9%	8,950	74.1%
Asian	1,940	37.5%	3,240	62.5%
American Indian, Alaska Native	15	13.0%	100	87.0%
Pacific Islander	0	0.0%	30	100.0%
Hispanic	4,135	23.5%	13,490	76.5%
Elderly	8,005	22.4%	27,695	77.6%
Frail Elderly	3,590	20.4%	13,990	79.6%

Data Source: 2017-2021 CHAS - Tables 1, 5

Among all households within the 80-100% AMI category, approximately 25% have one or more housing problems. As discussed in the previous section, housing cost burden is the most common housing problem, vastly surpassing every other housing problem combined. In each of these sections, when discussing housing problems, housing cost burden is the primary challenge.

As shown in the table above, when considering race, 24% of White households in this income group have one or more of four housing problems, 26% of Black/African American households, 38% of Asian households, and 13% of American Indian, Alaska Native households in this income group have one or more of four housing problems. When considering ethnicity in this income category, 24% of Hispanic households have one or more of four housing problems.

Within this income group, Asian households have a disproportionate greater need.

Discussion

Reviewing all the information above, there are three instances of disproportionate greater need.

- Among low-income households earning between 50% and 80% of area median income, **American Indian, Alaska Native** Islander households have a higher likelihood of experiencing one or more housing problem.
- Among low-income households earning between 50% and 80% of area median income, **Pacific Islander** households have a higher likelihood of experiencing one or more housing problem.
- Among median-income households earning between 80% and 100% of area median income, **Asian** households have a higher likelihood of experiencing one or more housing problem.

It should be noted that these instances of disproportionate greater need represent approximately 2,000 households among the 1.41 million households in the entire state of Connecticut. Any programs that alleviate housing problems in general will also assist these populations

NA-20 Disproportionately Greater Need: Severe Housing Problems – 91.205 (b)(2)

Introduction

Assess the need of any racial or ethnic group that has disproportionately greater need in comparison to the needs of that category of need as a whole.

For the purposes of HUD, a disproportionately greater need exists when the members of racial or ethnic group at any specific income level experience housing problems at a rate of 10 percentage points or more than the income level as a whole. For example, if 50% of all low-income households have a housing problem and 60% of low-income Hispanic households have a housing problem, this would be considered an instance of disproportionately greater need.

This section has four tables that capture the number of housing problems by income, race, and ethnicity. Each table provides data for a different income level (0–30%, 30–50%, 50–80%, and 80–100% AMI). As discussed above, housing problems are defined as having one of the following four living conditions:

- **Substandard housing:** Lacking complete plumbing (including hot and cold running water, a flush toilet, and a bathtub or shower)
- **Substandard housing:** Lacking complete kitchen facilities (including a kitchen sink; a cooking stove, built-in burners, or a microwave oven; and a refrigerator)
- **Severe overcrowding:** Having more than 1.5 persons per room (not including bathrooms, porches, foyers, halls, or half-rooms)
- **Severely cost burdened:** Household spending more than 50% of their income on housing costs

Additionally, we analyze households with **Zero/negative income** although HUD does not classify this as a housing problem. Data – Severe Housing Problems

NA-20 Figure 1: Disproportionally Greater Need - Severe Housing Problems (0 - 30% AMI)

	Has one or more of four housing problems		Has none of the four housing problems	
	#	%	#	%
Jurisdiction as a whole	137,290	65.1%	73,475	34.9%
White	71,720	66.4%	36,250	33.6%
Black / African American	21,290	64.1%	11,905	35.9%
Asian	4,630	71.5%	1,850	28.5%
American Indian, Alaska Native	310	53.9%	265	46.1%
Pacific Islander	50	40.0%	75	60.0%
Hispanic	34,870	62.1%	21,260	37.9%

Data Source: 2017-2021 CHAS - Table 2

Of all the income levels within Connecticut, households within the 0-30% AMI category have the highest percentage of households with one or more of four severe housing problems. Approximately 65% of all households in this income category have one or more severe housing problems. As discussed in the previous section, housing cost burden is the most common housing problem, vastly surpassing every other housing problem combined. In each of these sections, when discussing housing problems, housing cost burden is the primary challenge.

As shown in the table above, when considering race, 66% of White households in the 0-30% AMI income group have one or more of four severe housing problems, 64% of Black/African American households, 72% of Asian households, 53% of American Indian, Alaskan Native households, and 40% of Pacific Islander households in the 0-30% AMI income group have one or more of four severe housing problems. When considering ethnicity and this income category, 62% of Hispanic households have one or more of four housing problems.

There are no instances of disproportionate greater need in this income category.

NA-20 Figure 2: Disproportionally Greater Need - Severe Housing Problems (30 - 50% AMI)

	Has one or more of four housing problems		Has none of the four housing problems	
	#	%	#	%
Jurisdiction as a whole	58,750	35.7%	105,890	64.3%
White	35,190	35.3%	64,575	64.7%
Black / African American	7,795	37.4%	13,065	62.6%
Asian	2,625	47.3%	2,930	52.7%
American Indian, Alaska Native	155	52.5%	140	47.5%
Pacific Islander	0	n/a	0	n/a
Hispanic	11,815	34.3%	22,610	65.7%

Data Source: 2017-2021 CHAS - Table 2

Of all the income levels within Connecticut, households within the 30-50% AMI category have the second-highest percentage of households with one or more of four severe housing problems. Approximately 36% of all households in this income category have one or more severe housing problems. As discussed in the previous section, housing cost burden is the most common housing problem, vastly surpassing every other housing problem combined. In each of these sections, when discussing housing problems, housing cost burden is the primary challenge.

As shown in the table above, when considering race, 35% of White households in the 30-50% AMI income group have one or more of four severe housing problems, 35% of Black/African American households, 47% of Asian households, and 52% of American Indian, Alaskan Native households in the 30-50% AMI income group have one or more of four severe housing problems. When considering ethnicity and this income category, 34% of Hispanic households have one or more of four housing problems.

Asian and American Indian, Alaska Native households in this income group have a disproportionate greater need.

NA-20 Figure 3: Disproportionally Greater Need - Severe Housing Problems (50 - 80% AMI)

	Has one or more of four housing problems		Has none of the four housing problems	
	#	%	#	%
Jurisdiction as a whole	26,065	12.0%	190,650	88.0%
White	16,855	11.9%	125,310	88.1%
Black / African American	3,310	12.7%	22,715	87.3%
Asian	1,545	25.5%	4,510	74.5%
American Indian, Alaska Native	60	29.3%	145	70.7%
Pacific Islander	10	100.0%	0	0.0%
Hispanic	3,520	9.7%	32,940	90.3%

Data Source: 2017-2021 CHAS - Table 2

Approximately 12% of all households in the 50-80% AMI income category have one or more severe housing problems. As shown in the table above, when considering race, 12% of White households in this income group have one or more of four severe housing problems, 13% of Black/African American households, 26% of Asian households, 29% of American Indian, Alaska Native households, and 100% of Pacific Islander households in this income group have one or more of four severe housing problems. When considering ethnicity in this income category, 10% of Hispanic households have one or more of four housing problems.

Asian; American Indian, Alaska Native; and Pacific Islander households in this income group have a disproportionate greater need.

NA-20 Figure 4: Disproportionally Greater Need - Severe Housing Problems (80 - 100% AMI)

	Has one or more of four housing problems		Has none of the four housing problems	
	#	%	#	%
Jurisdiction as a whole	7,880	5.8%	128,055	94.2%
White	4,795	4.9%	93,030	95.1%
Black / African American	610	5.1%	11,465	94.9%
Asian	855	16.5%	4,330	83.5%
American Indian, Alaska Native	4	3.7%	105	96.3%
Pacific Islander	0	0.0%	30	100.0%
Hispanic	1,430	8.1%	16,190	91.9%

Data Source: 2017-2021 CHAS - Table 2

Approximately 6% of all households in the 80-100% AMI income category have one or more severe housing problems. As shown in the table above, when considering race, 5% of White households in this income group have one or more of four severe housing problems, 5% of Black/African American households, 17% of Asian households, and 4% of American Indian, Alaska Native households in this income group have one or more of four severe housing problems. When considering ethnicity in this income category, 8% of Hispanic households have one or more of four housing problems.

Asian households in this income group have a disproportionate greater need.

Discussion

Reviewing all the information above, the following are instances of disproportionate greater need related to severe housing problems.

- Among very low-income households earning between 30% and 50% of area median income, Asian and American Indian, Alaska Native households have a higher likelihood of experiencing one or more severe housing problem.
- Among low-income households earning between 50% and 80% of area median income, Asian; American Indian, Alaska Native; and Pacific Islander households have a higher likelihood of experiencing one or more severe housing problem.
- Among the moderate-income households earning between 80% and 100% of area median income, Asian households have a higher likelihood of experiencing one or more severe housing problem.

NA-25 Disproportionately Greater Need: Housing Cost Burdens – 91.205 (b)(2)

Introduction

Assess the need of any racial or ethnic group that has disproportionately greater need in comparison to the needs of that category of need as a whole.

For the purposes of HUD, a disproportionately greater need exists when the members of racial or ethnic group at any specific income level experience housing problems at a rate of 10 percentage points or more than the income level as a whole. For example, if 50% of all low-income households have a housing problem and 60% of low-income Hispanic households have a housing problem, this would be considered an instance of disproportionately greater need.

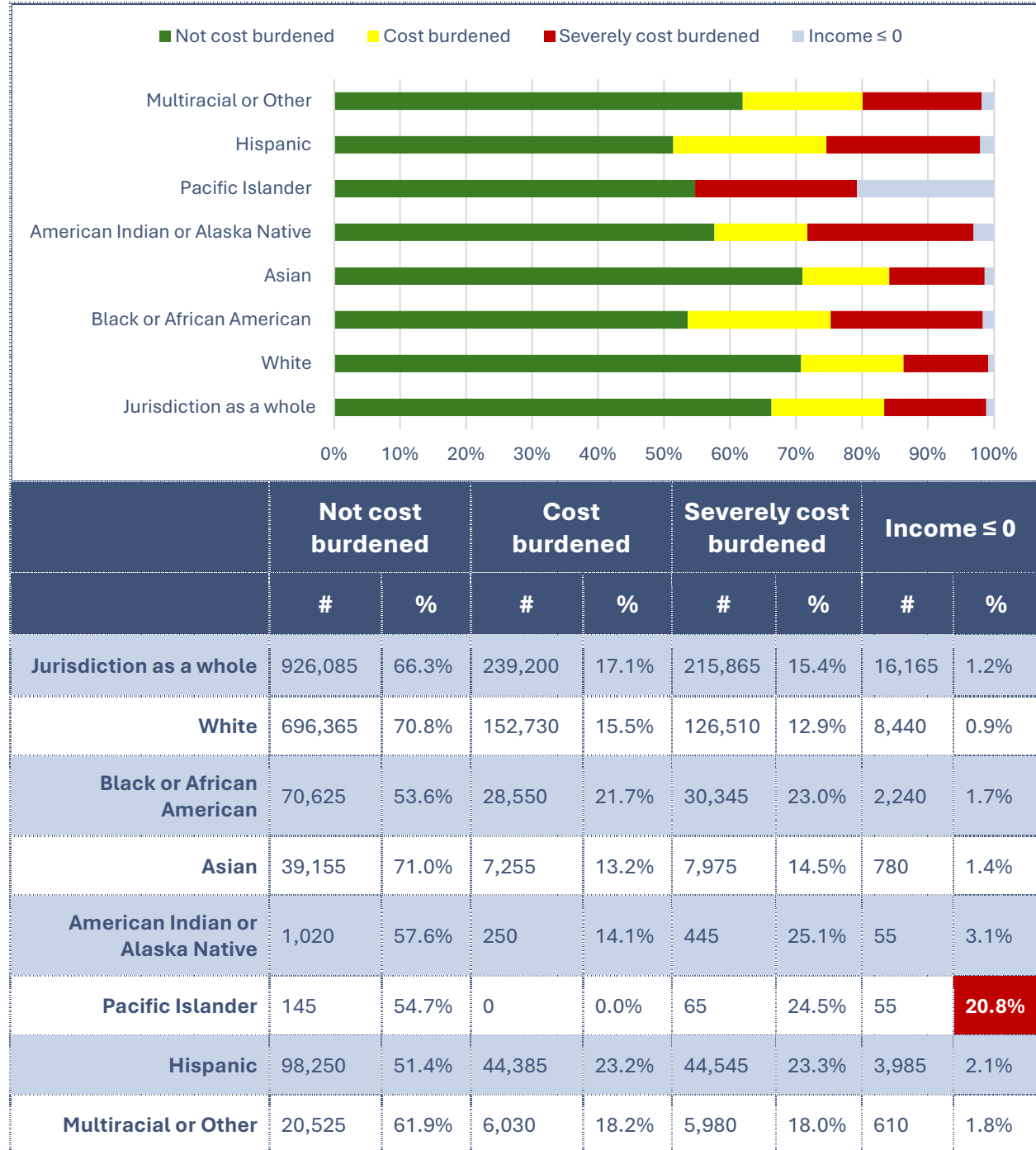
HUD defines cost burdens as:

- **Cost burdened:** Household spending more than 30% but no more than 50% of their income on housing costs
- **Severely cost burdened:** Household spending more than 50% of their income on housing costs

Additionally, we analyze households with **Zero/negative income** although HUD does not classify this as a housing problem

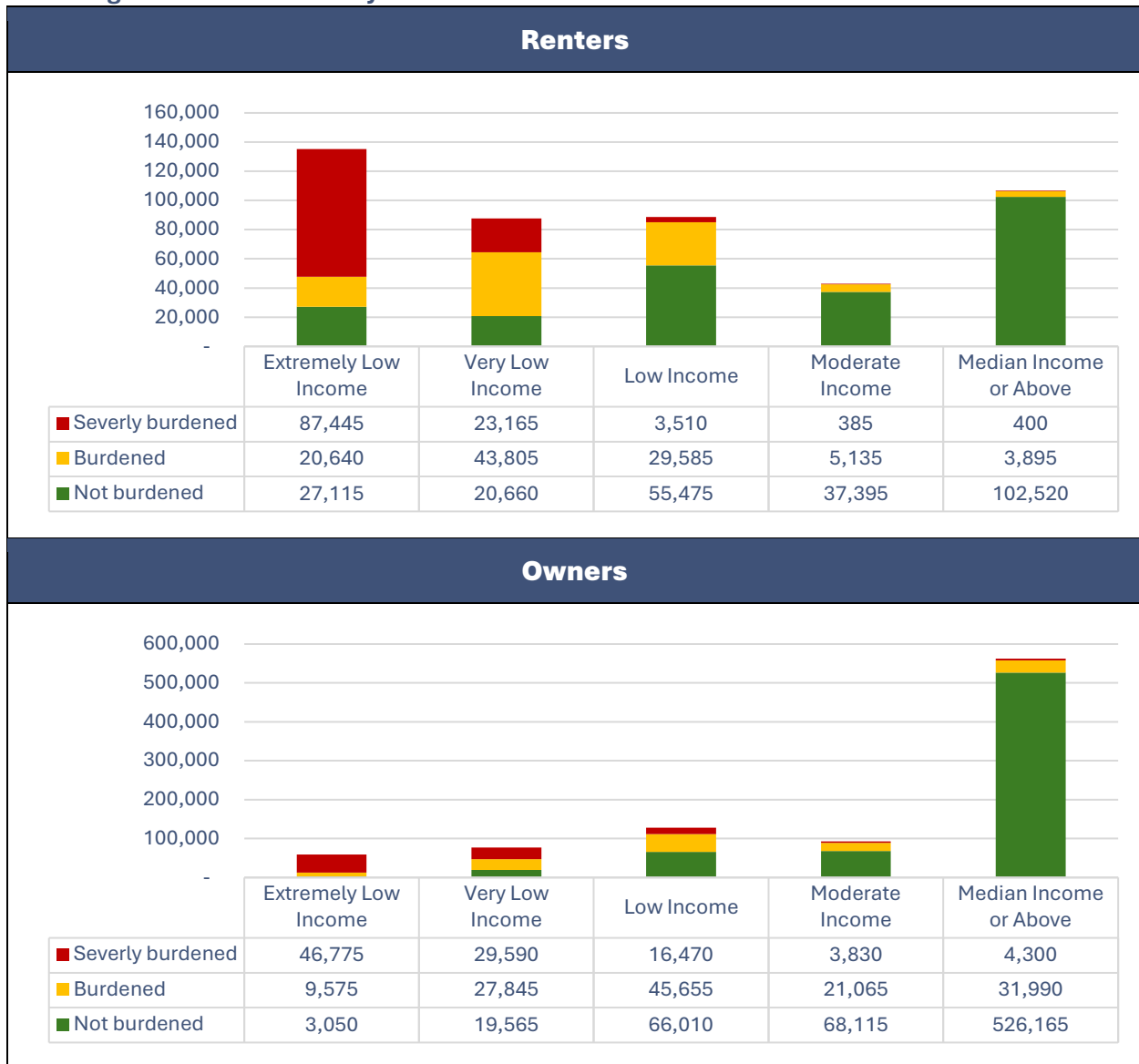
Data – Cost Burden

NA-25 Figure 1: Disproportionately Greater Need - Housing Cost Burden



Data Source: 2017-2021 CHAS - Table 9

NA-25 Figure 2: Cost Burden by Tenure and Income



Data Source: 2017-2021 CHAS – Table 7

Discussion

Based on HUD's definition, there are no racial or ethnic household types experiencing a housing cost burden at a disproportionately greater rate in Connecticut, by income category. However, it should be noted that, Hispanic / Latino households experience slightly higher rates of cost burden when compared to the state, albeit not above the 10-percentage points threshold. Similarly, Black or African American, American Indian or Alaska Native, and Pacific Islander households experience slightly higher rates of severe cost burden when compared to the state, albeit not above the 10-percentage points threshold. While this is just under the official HUD threshold of disproportionate cost burden, it is a notable finding.

The CHAS data shows us that in Connecticut, the majority of homeowner households are at or above the median household income. The renter population, however, is more evenly distributed across the lower income bands, with the largest share being extremely low income (less than 30% of median income for the state). As one might expect, we see that the issues of cost burden (housing costs being 30-50% of household income) and severe cost burden (housing costs being greater than 50% of household income) decrease as one moves up the income ladder. While the actual rates of cost burdened, severely cost burdened, and not cost burdened households are similar by income band for renters and owners, renters are far more likely to be extremely or very low income and thus are far likelier to be severely cost burdened.

We should note that CHAS data is currently only available through 2021 and therefore does not reflect the extreme run-up in home prices and rents over the past four years. This data, however, suggests a strong correlation between income and housing cost burden. Renters earning no more than 30% of the Area Median Income (AMI) are significantly more likely to be cost-burdened – four times more likely, in fact – than those with higher incomes. This disparity is due to a combination of factors, including lower incomes and the rising cost of rent. Even at 30-50% of the AMI, renters are still over three times more likely to be severely cost-burdened, meaning they spend over half their income on housing. This highlights the significant challenges faced by those with lower incomes in affording suitable housing. The trend begins to shift around 80% of the AMI, where the number of cost-burdened families is roughly equal to those who are not burdened. While not surprising, a higher income provides more protection against housing cost burdens. As income increases beyond 80% of the AMI, higher-income households, renters and owners are increasingly less likely to experience housing cost burdens.

This aligns with the general trend that lower-income households are disproportionately affected by housing affordability challenges due to the diminishing supply of housing affordable to lower-income households, the lack of sufficient production of deeply subsidized affordable housing, and the inability of wage growth to keep pace with rising housing costs. When housing costs consume a significant portion of a household's income, it creates instability and increases the risk of homelessness. This is especially true when more than half of a household's income goes towards housing, leaving little room for unexpected expenses or financial setbacks. The lack of affordable housing options further exacerbates this issue, forcing individuals and families into precarious living situations. There is a direct correlation between increasing rents and increasing rates of homelessness. Through consultations with many homeless services providers, it is clear that the increasing share of first-time homeless is a direct result of rents being increased to unsustainable levels and insufficient support for rental subsidies.

As you drill deeper into the data, at the lower income bands, there is no disproportionate difference between different racial or ethnic groups who are cost burdened or severely cost burdened. At

lower income bands in Connecticut, it seems the economic realities of living in poverty in Connecticut are so oppressive that they overshadow the historical racial and ethnic disparities. Anecdotally, at our community hearings, we repeatedly heard about single women heads of households, and elderly residents who are on fixed incomes being unable to survive, being forced into homelessness, or working multiple jobs just to stay afloat but never being able to get ahead. This suggests that while racial disparities in housing affordability may still exist, economic hardship is a universal challenge faced by low-income residents in Connecticut, regardless of their race.

The lack of affordable housing and stagnant wages disproportionately impact historically vulnerable groups like single mothers, the elderly, and the working poor, as well as racial and ethnic minorities, pushing them into dire situations and hindering their ability to achieve economic stability. The unfortunate reality is that this convergence of economic struggles that is manifested across all racial and ethnic groups isn't because racial and ethnic minorities have been pulled out of poverty and are doing better, but that the ongoing transformation of the housing market as the new frontier of investment opportunities is making everyone in lower-income groups across the state more financially insecure.

NA-30 Disproportionately Greater Need: Discussion – 91.205(b)(2)

Are there any Income categories in which a racial or ethnic group has disproportionately greater need than the needs of that income category as a whole?

As previously discussed, a disproportionately greater need exists when the members of racial or ethnic group at any specific income level experience housing problems at a greater rate (10 percentage points or more) than the income level as a whole. Based on the available data discussed above, here are a few instances of racial or ethnic groups that have a disproportionately greater need. These include the following:

- Among low-income households earning between 50% and 80% of area median income, **American Indian, Alaska Native** Islander households have a higher likelihood of experiencing **one or more housing problem**.
- Among low-income households earning between 50% and 80% of area median income, **Pacific Islander** households have a higher likelihood of experiencing **one or more housing problem**.
- Among very low-income households earning between 30% and 50% of area median income, **Asian** and **American Indian, Alaska Native** households have a higher likelihood of experiencing **one or more severe housing problem**.
- Among low-income households earning between 50% and 80% of area median income, **Asian; American Indian, Alaska Native; and Pacific Islander** households have a higher likelihood of experiencing **one or more severe housing problem**.
- Among the moderate-income households earning between 80% and 100% of area median income, **Asian** households have a higher likelihood of experiencing **one or more severe housing problem**.

Importantly, these instances of disproportionately greater need are based on very small sample sizes for the households, ranging from 2,625 at the highest and in some cases as low as 10 households in a state with 1.41 million households. It should be noted that the findings may be a result of sampling error. Aggregating every instance of disproportionate greater need equals 5,395 total households, or approximately 0.38% of all households. Further, we note that any programs that alleviate housing problems in general will also assist these populations that experience disproportionate greater need.

Based on HUD's definition, there are no racial or ethnic household types experiencing a **housing cost burden** at a disproportionately greater rate in Connecticut, by income category. However, it should be noted that, Hispanic / Latino households experience slightly higher rates of cost burden when compared to the state, albeit not above the 10-percentage points threshold. Similarly, Black or African American, American Indian or Alaska Native, and Pacific Islander households experience slightly higher rates of severe cost burden when compared to the state, albeit not above the 10-percentage points threshold. While this is just under the official HUD threshold of disproportionate cost burden, it is a notable finding.

If they have needs not identified above, what are those needs?

N/A. Needs have been identified above.

Are any of those racial or ethnic groups located in specific areas or neighborhoods in your community?

While low-income residents reside in every city and town in Connecticut, areas of low-income concentration are primarily in the larger urban core cities and other larger entitlement communities, including Hartford, New Haven, Bridgeport, etc. The more rural, non-entitlement areas of Connecticut are less densely populated and less ethnically and racially diverse. Connecticut's larger cities and entitlement communities have more diverse populations.

NA-35 Public Housing – 91.205(b)

Introduction

There are 107 Public Housing Authorities in Connecticut: 106 of them are local housing authorities throughout the State of Connecticut, and DOH serves as a statewide housing authority. Among these housing authorities, there are 45 entities that administer Housing Choice Vouchers. These include 43 local housing authorities, the City of Hartford and DOH. There are 32 local housing authorities that have federal public housing. While there used to be 44 local housing authorities that operated federal public housing, several converted their portfolios to Project Based Voucher programs. Importantly, of the 106 local housing authorities, 99 have state financed units. There are only 7 local housing authorities that operate federal units.

In total, there are 13,599 federally funded units of public housing supported by Annual Contribution Contracts. There are an additional 17,000 state-financed public housing units which are not supported at all by federal dollars but which still comprise an important element of the state's total affordable housing inventory.

The total number of Housing Choice Vouchers that have been contracted with federally funded public housing authorities equals 46,262 as of June 30, 2024. The current reported leasing of these vouchers is 40,312 as of October 2024.

Additionally, the 2023 Affordable Housing Appeals List has governmentally assisted housing units at 94,770. This will be more fully described in Section MA-25: Public and Assisted Housing.

The information contained in the accompanying tables below is specific to the vouchers that are administered by the Department of Housing.

The map below represents the federally funded housing developments in CT. The majority of these developments are clustered around the core urban areas of Hartford, New Haven, Bridgeport, Stamford, Danbury, and Waterbury.

NA-35 Figure 1: Totals in Use

	Certificate	Mod-Rehab	Public Housing	Vouchers			Special Purpose Voucher		
				Total	Project-based	Tenant-based	Veterans Affairs Supportive Housing	Family Unification Program	Disabled*
# of units vouchers in use	0	8	0	6,387	2	5,746	63	168	408

Data Source: PIC (PIH Information Center)

NA-35 Figure 2: Characteristics of Public Housing Residents

	Certificate	Mod-Rehab	Public Housing	Vouchers				
				Total	Project-based	Tenant-based	Special Purpose Voucher	
							Veterans Affairs Supportive Housing	Family Unification Program
# Homeless at admission	0	0	0	27	0	8	19	0
# of Elderly Program Participants (>62)	0	1	0	804	0	608	9	3
# of Disabled Families	0	3	0	1,346	1	1,059	19	44
# of Families requesting accessibility features	0	8	0	6,387	2	5,746	63	168
# of HIV/AIDS program participants	0	0	0	0	0	0	0	0
# of DV victims	0	0	0	0	0	0	0	0

Data Source: PIC (PIH Information Center)

NA-35 Figure 3: Race of Public Housing Residents

Race	Certificate	Mod-Rehab	Public Housing	Vouchers					
				Total	Project-based	Tenant-based	Special Purpose Voucher		
							Veterans Affairs Supportive Housing	Family Unification Program	Disabled*
White	0	7	0	3,745	0	3,313	45	106	281
Black/African American	0	1	0	2,594	2	2,387	17	62	126
Asian	0	0	0	16	0	14	1	0	1
American Indian/Alaska Native	0	0	0	21	0	21	0	0	0
Pacific Islander	0	0	0	11	0	11	0	0	0
Other	0	0	0	0	0	0	0	0	0

*includes Non-Elderly Disabled, Mainstream One-Year, Mainstream Five-year, and Nursing Home Transition

Data Source: PIC (PIH Information Center)

NA-35 Figure 4: Ethnicity of Public Housing Residents

Ethnicity	Certificate	Mod-Rehab	Public Housing	Vouchers					
				Total	Project-based	Tenant-based	Special Purpose Voucher		
							Veterans Affairs Supportive Housing	Family Unification Program	Disabled*
Hispanic	0	7	0	2,487	0	2,262	5	77	143
Not Hispanic	0	1	0	3,900	2	3,484	58	91	265

*includes Non-Elderly Disabled, Mainstream One-Year, Mainstream Five-year, and Nursing Home Transition
Data Source: PIC (PIH Information Center)

Section 504 Needs Assessment: Describe the needs of public housing tenants and applicants on the waiting list for accessible units:

Connecticut does not have a centralized waitlist for the Public Housing Authorities operating in the state. Instead, each of the 107 housing authorities manages its own waitlist. Due to these circumstances, information related to the accessibility needs of families and individuals on public housing waitlists is not available.

Public housing residents often have a variety of accessibility needs, which can include the following.

- **Mobility:** Many residents require features that accommodate mobility aids like wheelchairs, walkers, or canes. This includes no-step entries, ramps, wider doorways, and accessible bathrooms and kitchens. As public housing residents age, mobility challenges increase up until the point that a resident may need to move from public housing into assisted living or nursing care.
- **Sensory:** Residents with visual or hearing impairments may need features such as visual alarms, tactile indicators, and enhanced lighting.
- **Cognitive:** Some residents benefit from clear signage, simple layouts, and easy-to-use controls to help navigate their living spaces.
- **Health and Safety:** Features like grab bars, non-slip flooring, and emergency call systems are crucial for ensuring the safety and well-being of certain residents with independent living difficulties.

These needs highlight the importance of universal design and home modifications to improve accessibility and ensure that housing meets the diverse needs of all residents, regardless of their occupancy in public housing, rental housing, or their own home.

What are the number and type of families on the waiting lists for public housing and section 8 tenant-based rental assistance? Based on the information above, and any other information available to the jurisdiction, what are the most immediate needs of residents of public housing and Housing Choice voucher holders?

Connecticut does not have a centralized waitlist for the Public Housing Authorities operating in the state. Instead, each of the 107 housing authorities manages its own waitlist. Often, residents will apply for multiple public housing waitlists based on their individual requirements. The demand for public housing and other types of affordable units is incredibly high. On average, the wait time can range from several months to several years depending on the circumstances of the individual or family seeking public housing or a voucher. Factors that influence the wait time include:

- **Housing Demand:** Higher demand areas in the state tend to have longer waitlists. These would include larger urban areas of Hartford, New Haven, Bridgeport, and New London.
- **Housing Type:** Larger family units, senior housing, and disabled housing may have different wait times.
- **Preferences:** Some housing authorities give priority to certain groups, such as local residents, veterans, or chronically homeless.

Due to these circumstances, information related to the total number of families and individuals on the waitlist is not available.

How do these needs compare to the housing needs of the population at large

The needs of public housing residents are no different than the population at large, particularly those of the same income level, age, and disability status. The primary needs for low-income families are affordable housing, opportunities to earn more income through higher-wage jobs, and a myriad of services required to help support those that are living in or near poverty such as food assistance, affordable childcare and afterschool programs, transportation options, financial literacy, and educational and workforce development programs for higher quality and higher-wage employment. The housing and service needs of elderly and disabled public housing residents are similar to the elderly and disabled population throughout the state, particularly renovations and accommodations that will allow for continued residency for individuals in need of mobility accessibility.

Discussion

In a very real way, a significant number of households are struggling financially: 239,200 households (17.1%) are cost burdened, spending more than 30% of their income on housing; and another 215,865 households (15.4%) are severely cost burdened, spending more than 50% of their income on housing. With almost one-third of all households in Connecticut experiencing a cost burden, there is not a sufficient supply of affordable housing, or accessible housing, available in the state of Connecticut. In many communities, it takes years to receive a Section 8 voucher or be eligible to move into a public housing unit. At the same time average rents have risen in Connecticut more than 20% since 2021.

In the rare event that a voucher is received, there is no guarantee that the recipient will be able to actually find a unit in the community they prefer to live in that meets their unique accessibility requirements. At the various community meetings and focus groups with low-income residents,

there has been significant discussion about expansion of the Section 8 program, the creation of more public housing, project-based vouchers, and age restricted communities.

NA-40 Homeless Needs Assessment – 91.205(c)

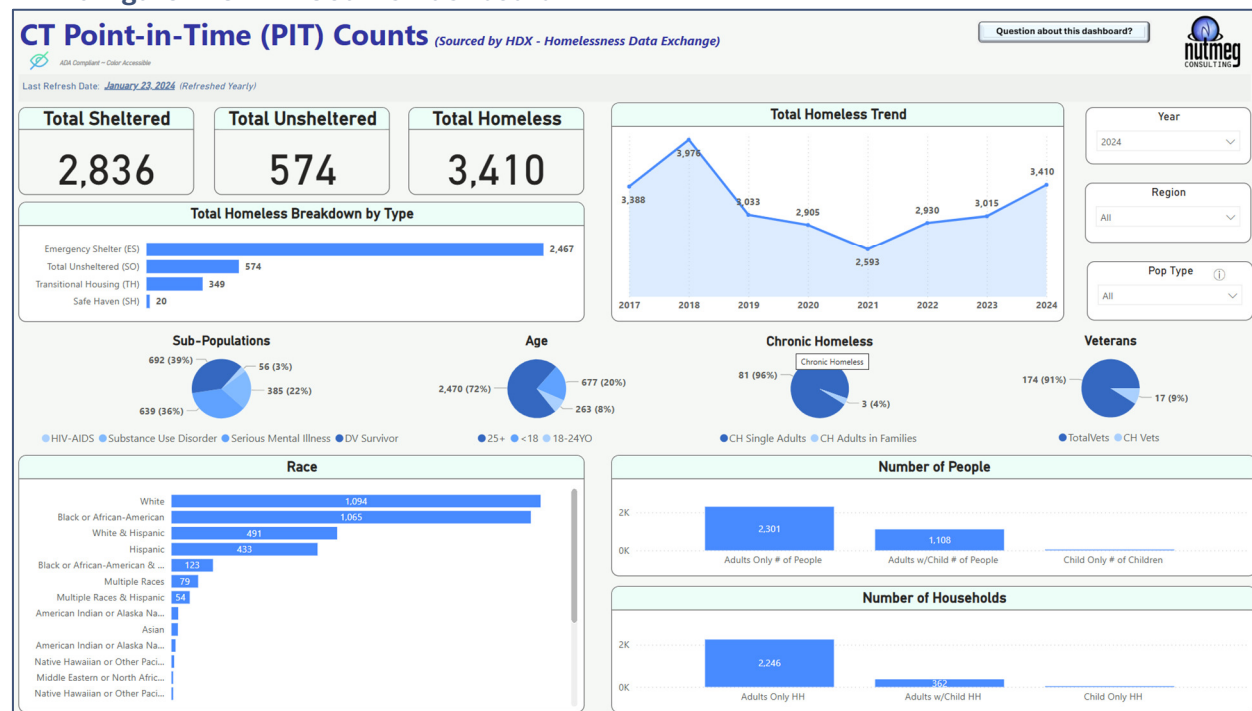
Introduction

Homelessness has increased substantially in the state of CT over the past several years, after seeing significant decline between 2018 and 2021. Critically, more and more individuals and families who have never experienced homelessness before are becoming homeless or at greater risk of homelessness, including single mothers, seniors, and the working poor. There has been a conflation of factors that have all contributed to the increase in homelessness in CT: rapid increase in housing costs, stagnation in wages, the end of the state's eviction moratorium, the acceleration of pandemic-related home purchasing, and the ongoing commodification of rental housing by large real estate investors.

Throughout the state, there are myriad examples of economic insecurity and individuals and families living on the brink of homelessness because the entire housing market has been completely transformed around them. These are the working poor who have been able to reliably pay their rent for years until the property was sold and the new owner increases their rent. These are retired seniors who have been renting the same apartment for decades and are now faced with unsustainable rent increases which are no longer affordable. As described in Section NA-10, one-third of CT households were cost burdened as of 2022. The housing costs have only escalated since then.

This has occurred across the state, in the core urban communities, suburban communities, and rural areas as well. Every region of the state is feeling the ongoing impacts of more and more residents spending more and more of their income on housing, being priced out of their homes, and falling into homelessness.

NA-40 Figure 1: CT PIT Counts Dashboard



On Tuesday, January 23, 2024, the State of Connecticut conducted its annual statewide Point-in-Time (PIT) Count of people experiencing homelessness. This includes the number of people who were in Emergency shelter, Transitional Housing and Safe Havens as well as those who were unsheltered, meaning living in places not meant for human habitation such as in cars, under bridges, or on the streets.

There were 3,410 sheltered and unsheltered persons experiencing homelessness on the night of January 23rd, 2024. This is an overall increase of 395 (13%) from last year's count of 3,015, and a 32% increase from 2021 when homelessness was at its lowest level in CT. The count of families with children has increased from 310 households in 2023 up to 362 households in 2024. These 362 family households are made up of 1,108 people of which 677 were children. In 2023 these households were made up of 965 people of which 583 were children. Across both metrics, this is an increase of about 16%.

There were 2,246 households with adults only counted in 2024, compared to 1,997 households counted in 2023. These households were made up of 2,301 people in 2024 and 2,044 people in 2023. This is an increase of about 13% across both metrics.

The state continues to increase its bed inventory to meet the needs of people experiencing homelessness. The number of Emergency Shelter (ES), Safe Haven (SH) and Transitional Housing (TH) beds has increased from 3,078 in 2023 to 3,227 in 2024, a total of 149 (5%) new beds. The number of Permanent Housing (PH) and Rapid Re-Housing (RRH) beds has increased from 9,681 in 2023 up to 9,868 in 2024 a total of 187 (2%) new beds.

However, some of the Covid funds that had been distributed starting in 2021 did end prior to the night of the 2024 count. There were 41 covid funded programs active during the 2023 count totaling 1,493 beds. These numbers dropped down to 20 covid funded programs with 1,323 beds for the 2024 count, a loss of 170 beds (11% drop). This is significant when you consider that the number of people experiencing unsheltered homelessness was 574 in 2024. Those 170 beds could have cut that number by almost one third.

The homelessness response system in Connecticut is organized through a regionalized and comprehensive Coordinated Entry System called the Coordinated Access Network (CAN). This is further described in **Section MA-30: Homeless Facilities and Services**. CAN-level data has been supplied by Nutmeg Consulting, the state's IT provider for the CT HMIS system. This data is for all individuals served from July 1, 2023 to June 30, 2024. During this program year, the New Haven CAN, the Fairfield CAN, and the Hartford CAN represented the largest populations of total homelessness. This is not terribly surprising as these CAN regions include the largest urban cares in the state. Approximately 62% of all homeless individuals received services in these three CAN regions.

NA-40 Table 1 - Homelessness by CAN Region, PY2023

	Central	Eastern	Fairfield	Hartford	New Haven	Middlesex	Northwest	Total
Persons in Households with Adult(s) and Child(ren)	153	103	408	268	424	81	288	1,725
Persons in Households	0	0	17	0	13	0	0	30

with Only Children								
Persons in Households with Only Adults	522	628	1,057	1,041	1,187	228	751	5,414
<i>Total Homeless</i>	<i>675</i>	<i>731</i>	<i>1,482</i>	<i>1,309</i>	<i>1,624</i>	<i>309</i>	<i>1,039</i>	7,169
Chronically Homeless Adult Only	83	73	167	263	315	67	128	1,096
Chronically Homeless Adults and Children	5	6	37	13	17	3	3	84
Veterans	31	33	71	116	143	14	33	441

Data Source: Nutmeg Consulting

When looking at the homelessness data, one can see that homelessness across the state has been increasing dramatically over the past four years. The largest populations of those experiencing homelessness are generally centralized in the core urban cities of New Haven, Hartford, Bridgeport, with additional sizeable populations in the Eastern and Northwest CAN regions.

The homelessness system has been over capacity for several years, placing enormous strains on service providers throughout the state. The increase in homelessness has put significant pressure on the homelessness response system, increasing wait times to access shelter and increasing average length of stay in shelter. Additionally, due to the lack of available affordable housing units and the relatively slow production on new deeply subsidized and permanent supportive housing units, individuals that are currently in shelter are not able to rapidly access affordable units. This is particularly true for individuals, families, and households that are earning between zero and 30 percent area median income and 30 to 50 percent area median income. There is a significant need for deeply subsidized affordable housing units to accommodate these households to pull them out of homelessness and transition them out of the emergency shelter system.

NA-40 Figure 2: Nature and Extent of Homelessness

	Sheltered Homeless		Unsheltered Homeless		Total Homeless		Total Population	
	#	%	#	%	#	%	#	%
Total Homeless	2,836		574		3,410		3,611,317	
Under 18	669	23.6%	8	1.4%	677	19.9%	742,877	20.6%
Age 18 to 24	214	7.5%	49	8.5%	263	7.7%	347,650	9.6%
Age 25 to 34	414	14.6%	71	12.4%	485	14.2%	449,466	12.4%

	Sheltered Homeless		Unsheltered Homeless		Total Homeless		Total Population	
	#	%	#	%	#	%	#	%
Age 35 to 44	484	17.1%	132	23.0%	616	18.1%	445,052	12.3%
Age 45 to 54	436	15.4%	140	24.4%	576	16.9%	475,109	13.2%
Age 55 to 64	445	15.7%	136	23.7%	581	17.0%	522,055	14.5%
Over 64	174	6.1%	38	6.6%	212	6.2%	629,108	17.4%
Female	1,217	42.9%	177	30.8%	1,394	40.9%	1,842,121	51.0%
Male			395	68.8%	2,000	58.7%	1,769,196	49.0%
Transgender	9	0.20%	1	0.60%	10	0.30%	n/a	n/a
Gender that is not Singularly Female or Male	3	0.10%	1	0.60%	4	0.20%	n/a	n/a
Gender Questioning	1	0.00%	0	0.00%	1	0.00%	n/a	n/a
Non-Hispanic/Non-Latin(o)(a)(x)	1,818	64.1%	472	82.2%	2,290	67.2%	2,983,909	82.6%
Hispanic/Latin(o)(a)(x)	1,018	35.9%	102	17.8%	1,120	32.8%	627,408	17.4%
White	1,260	44.4%	331	57.7%	1,591	46.7%	2,522,166	69.8%
Black, African American, or African	1,009	35.6%	179	31.2%	1,188	34.8%	385,407	10.7%
Asian or Asian American	16	0.6%	4	0.7%	20	0.6%	170,945	4.7%
American Indian, Alaska Native, or Indigenous	25	0.9%	7	1.2%	32	0.9%	9,043	0.3%
Native Hawaiian or Other Pacific Islander	9	0.3%	4	0.7%	13	0.4%	1,345	0.0%

	Sheltered Homeless		Unsheltered Homeless		Total Homeless		Total Population	
	#	%	#	%	#	%	#	%
Multiple Races	112	3.9%	21	3.7%	133	3.9%	288,485	8.0%

Data Source: 2024 PIT Count. 2018-2022 ACS – DP05

If data is not available for the categories "number of persons becoming and exiting homelessness each year," and "number of days that persons experience homelessness," describe these categories for each homeless population type (including chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth):

The information in the table below was provided by Nutmeg Consulting and shows the total number of homeless individuals and families for the period of time from July 1, 2023 to June 30, 2024.

Table 2 - Homelessness Population

Statewide	Number of persons becoming homeless	Average number of days that persons experience homelessness	Number of persons exiting homelessness each year
Persons in Households with Adults and Children	1,725	178	671
Persons in Households with Only Children	30	11	12
Persons in Households with Only Adults	5,414	307	1,319
Chronically Homeless Adult Only	1,096	606	173
Chronically Homeless Adults and Children	84	653	34
Veterans	441	249	167

Data Source: Nutmeg Consulting

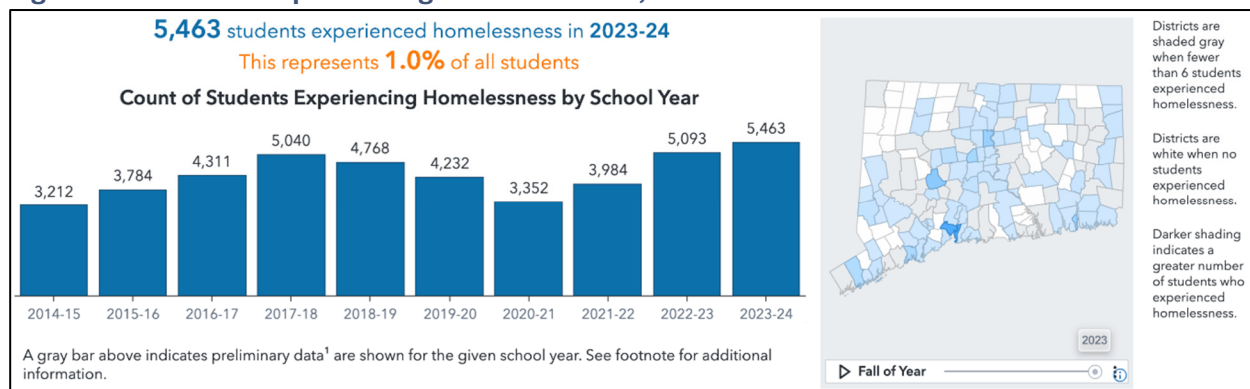
Estimate the number and type of families in need of housing assistance for families with children and the families of veterans.

Families with Children

As described above, there were 362 family households with children in 2024. These 362 family households are made up of 1,108 people of which 677 were children.

Additionally, the federal McKinney-Vento Act defines homeless children and youth as individuals who lack a fixed, regular, and adequate nighttime residence. According to the EdSight Data Dashboard, 5,463 students experienced homelessness during the 2023-24 school year, representing 1.0% of all students in the state.

Figure 2 - Students Experiencing Homelessness, 2023-2024



Data Source: EdSight, Students Experiencing Homelessness Dashboard

Veterans

According to the January 2024 PIT Count, there were 191 homeless Veterans.

- Sheltered ES Homeless Veterans, 2024 = 49
- Sheltered TH Homeless Veterans, 2024 = 90
- Sheltered SH Homeless Veterans, 2024 = 21
- Unsheltered Homeless Veterans, 2024 = 31

During the 2023-2024 program year, a total of 441 Veterans were served, with 167 exiting homelessness, with the remaining 274 Veterans reported as homeless by the end of the program year (June 30, 2024).

According to HUD's Housing Choice Voucher Data Dashboard, there are 1,129 federal VASH vouchers in use as of October 2024.

Describe the Nature and Extent of Homelessness by Racial and Ethnic Group.

According to the 2024 Point-in-Time Count, men are overrepresented in the homeless population (58.7%) compared to their share of the general population (49%). This is particularly pronounced among the unsheltered homeless population, where men make up 68.8% of the total unsheltered homeless. This highlights the need for services and interventions that address the specific needs and challenges faced by homeless men.

Black individuals are significantly overrepresented in the total homeless population (34.8%) compared to their share of the general population (10.7%). This stark disparity points to systemic inequities and racial disparities that contribute to higher rates of homelessness among Black individuals.

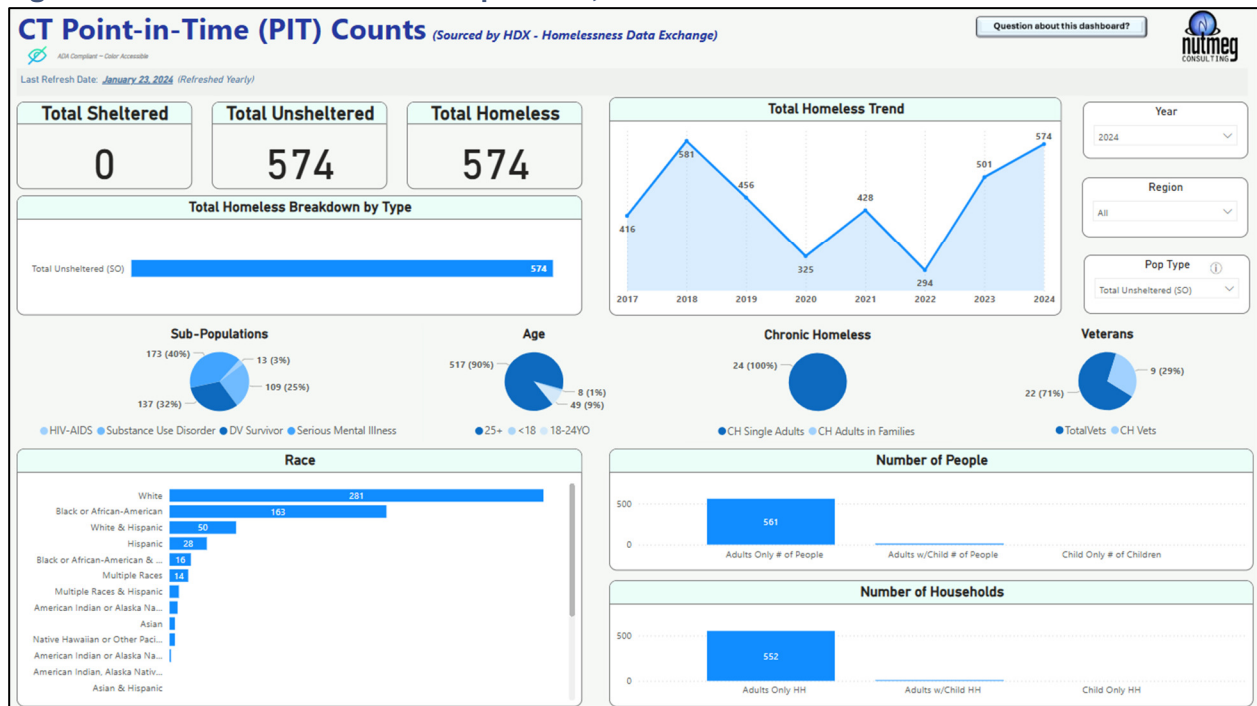
Hispanic/Latino individuals are also overrepresented in the homeless population (32.8%) compared to their share of the general population (17.4%). This suggests that Hispanic/Latino individuals may also face specific challenges that increase their risk of homelessness.

Describe the Nature and Extent of Unsheltered and Sheltered Homelessness.

Unsheltered

The total unsheltered homeless population was 574 individuals as of the January 23, 2024 Point-in-Time count. This is an increase of 14.6% from the previous year. The vast majority of unsheltered homeless are adults, with 8 of the 574 individuals under the age of 18, and 49 individuals between the ages of 18 and 24. Among the unsheltered homeless population are 31 Veterans, 24 chronically homeless adults, 13 persons living with HIV/AIDS, 109 with a substance use disorder, 137 victims of domestic violence, and 173 with a serious mental illness.

Figure 3 - Unsheltered Homeless Population, 2024



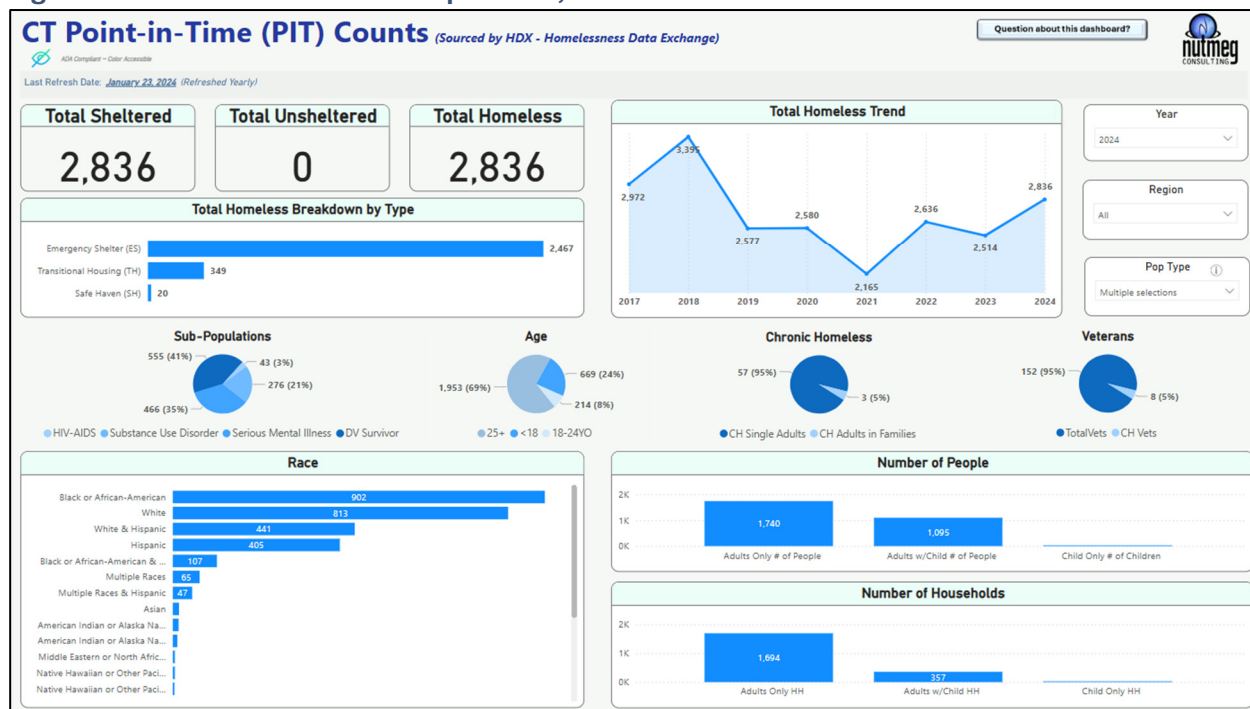
Data Source: CT HMIS

Sheltered

The total sheltered homeless population, including those in Emergency Shelters, Transitional Housing, and Safe Haven was 2,836 individuals as of the January 23, 2024 Point-in-Time count. This is an increase of 12.8% from the previous year.

The majority of sheltered homeless are adults, although 24% of the sheltered homeless are children under the age of 18. Another 8%, or 214 individuals, are young adults aged 18 to 24. Among the total sheltered homeless population are 160 Veterans, 60 chronically homeless adults, 43 persons living with HIV/AIDS, 276 with a substance use disorder, 555 victims of domestic violence, and 466 with a serious mental illness.

Figure 4 - Sheltered Homeless Population, 2024



Data Source: CT HMIS

Discussion:

The state has been witnessing a resurgence of homelessness over the past several years, increasing 31.5% from 2021 to 2024. While homelessness is down from its peak in 2018, the state's homelessness response system is critically over-capacity. There are significant wait times for individual and family shelter beds and the average number of days in shelter can often be more than 6 months in certain regions of the state. There is a desperate need of additional affordable housing units in order to more quickly transition homeless individuals and families from shelter into affordable units.

The crisis of unaffordable housing has been persistent for many years and has been exacerbated with the post-pandemic market changes. The lack of affordable housing and the limited scale of housing assistance programs contribute to the current housing crisis and increases homelessness in the state. The deficit of affordable housing has led to high rent burdens which constantly put a growing number of people at risk of becoming homeless as the cost burden for housing continually increases. Expanding affordable housing is still the most critical need facing the State of Connecticut, and without more affordable housing options combined with supportive services for individuals and families, homelessness and the risk of homelessness will continue to be an issue facing the state.

NA-45 Non-Homeless Special Needs Assessment - 91.205 (b,d)

Introduction

As part of the Consolidated Planning process, particular attention is paid to specific population groups that have been identified by HUD as Special Needs groups. The Consolidated Plan describes, to the best extent practicable, the housing and service needs of these population groups who are not homeless but require supportive housing. These groups include the following:

- Elderly (defined as 62 and older)
- Frail elderly (defined as an elderly person who requires assistance with three or more activities of daily living such as bathing, walking, and performing light housework)
- Persons with mental, physical, and/or developmental disabilities
- Persons with alcohol or other drug addiction
- Persons with HIV/AIDS and their families
- Victims of domestic violence, dating violence, sexual assault, and stalking

These groups typically face greater housing challenges than the general population due to their specific circumstances. The state's housing stock may not be suitable for households with these particular special needs. These groups may also require special attention due to additional social services required.

Describe the characteristics of special needs populations in your community:

The Special Needs population groups include the elderly and frail elderly; those living with some type of physical or cognitive disability; those living with HIV/AIDS and their families; persons with substance use disorders; and victims of domestic violence, dating violence, sexual assault, and stalking.

Elderly and Frail Elderly

Connecticut, like most of the country, has an aging population. The senior population in the state of CT has seen significant growth over the past several years. As of the 2022 5-Year ACS Estimate the population of CT aged 65 and older comprised 629,108 persons, or approximately 17.4% of the total population. The total number of senior households has grown substantially over the past 10+ years. During this time the age band with the largest increase is the 65-74 population with an increase of 51%. Among the senior population, 64.5% live in family households, 31.6% live in nonfamily households, and the remaining 3.8% live in group quarters. There are over 174,000 seniors living alone (56k men and 118k women), representing 28% of the total senior population.

As one would expect, most (77.4%) of the state's senior population is not in the labor force. Of those who are, there is a 95.3% employment rate. About 7.7% (48,446) of Connecticut's seniors had an income below the poverty level in the 2018-2022 ACS.

HUD defines frail elderly as a person aged 62 and older who requires assistance with three or more activities of daily living, such as bathing, walking, and performing light housework. DOH's Congregate Housing program has a separate definition for this population group, persons aged 62 and over who have limitations in one or more life activities. As a proxy, ACS data regarding disability status by age was used to identify individuals who are aged 65 and older that have either an ambulatory disability, a self-care disability, or an independent living disability. Among the senior population aged 65 and older, 108,685 have ambulatory difficulties, 41,957 have self-care

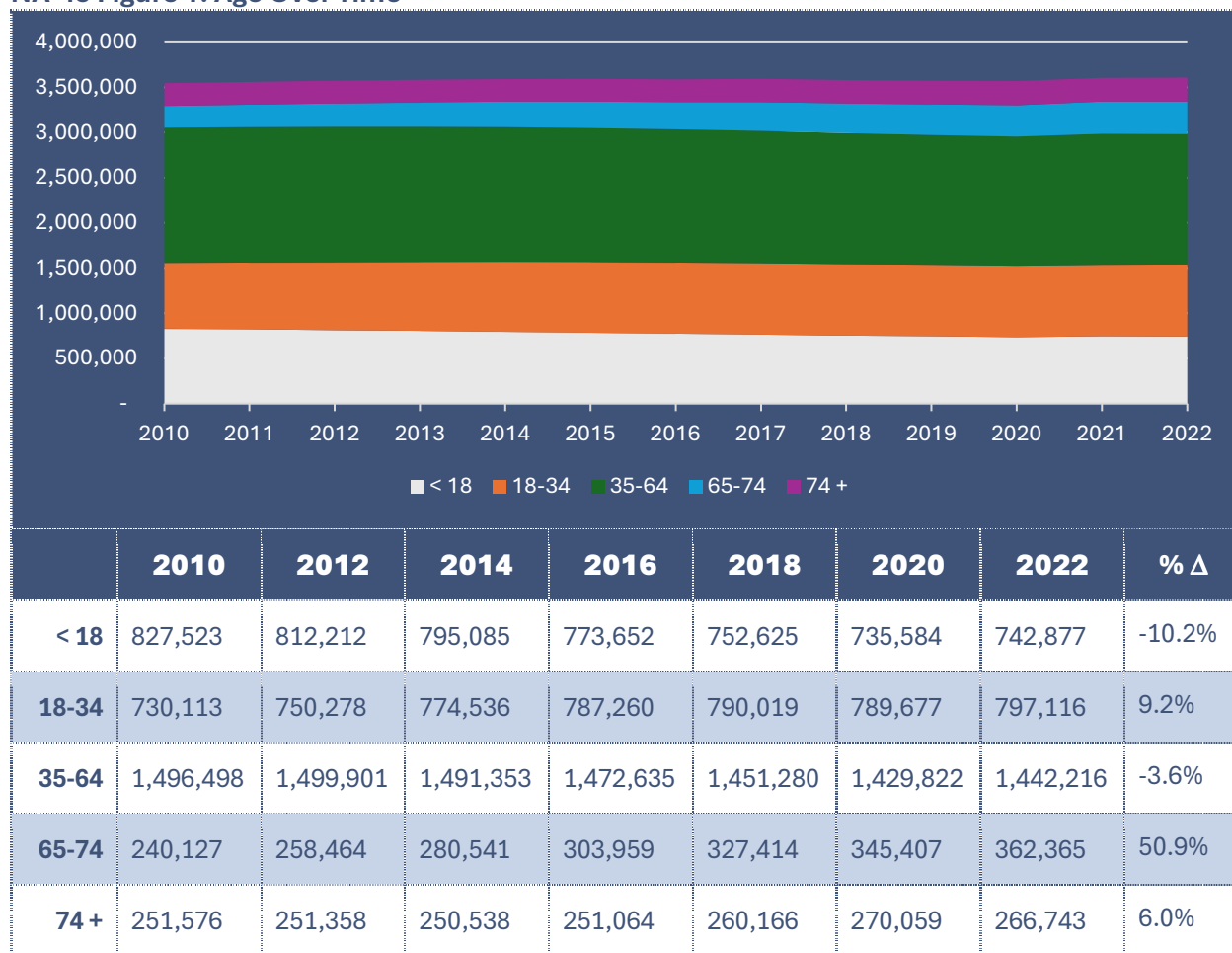
difficulties, and 77,299 have independent living difficulties. Often, multiple disabilities manifest as people age. The total number of seniors aged 65 and over with any type of disability is 177,198.

Certain disabilities increase substantially with age, particularly ambulatory and independent living challenges, which are notably higher among individuals aged 65 and older. Ambulatory difficulty presents a major challenge for older adults, impacting 17.8% of those aged 65 and above, with serious implications for mobility, independent living, and access to essential services. Hearing difficulty emerges as the most common issue for this age group, affecting 11.4%, reflecting the widespread impact of age-related hearing loss.

Independent living difficulty, which applies only to adults, sees a significant increase in prevalence among older populations, affecting 12.7%. This trend highlights the growing need for support services and accessible housing options to address the challenges faced by aging individuals.

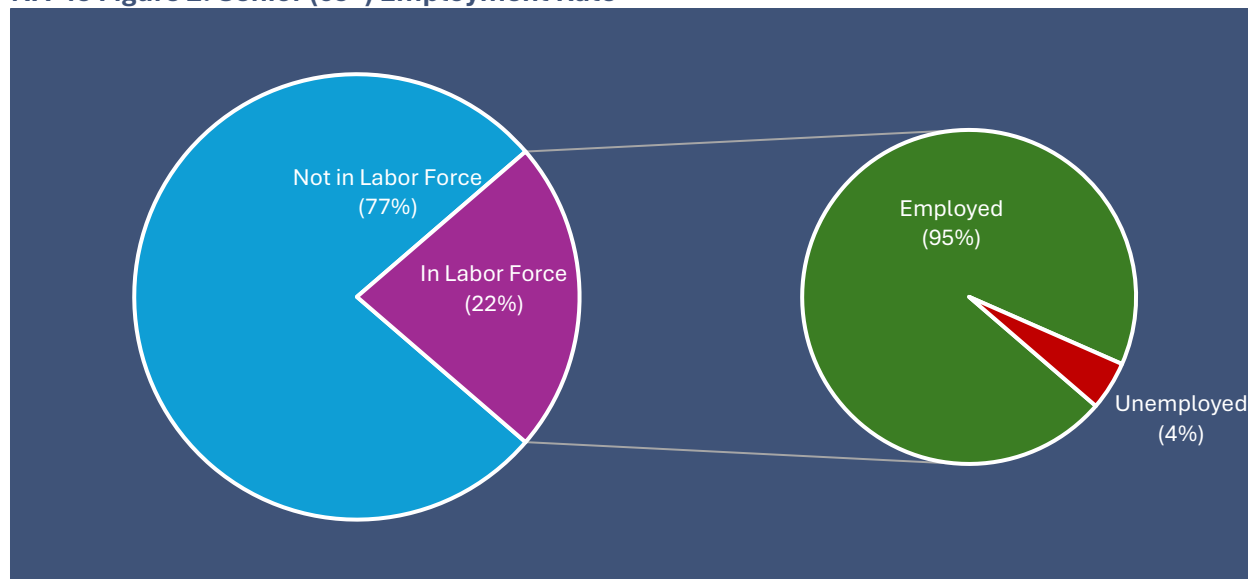
In conversations with seniors at public meetings, members of the population highlighted how they were struggling to make ends meet. There was a general feeling of being financially overwhelmed for members of the community who are receiving a fixed income.

NA-45 Figure 1: Age Over Time



Data Source: 2010-2022 ACS5 - DP05

NA-45 Figure 2: Senior (65+) Employment Rate



Data Source: 2018-2022 ACS - Table B23001

Persons with Physical or Cognitive Disability

Persons with disabilities may have one or more physical, mental, and /or developmental conditions that can often limit their possibilities for obtaining suitable housing. The disabled may require a single-level home, special equipment to aid them in carrying out daily functions, or even a regular home nurse or family member to care for them. If their special needs are not met, many may become homeless.

The largest absolute number of CT residents living with a disability are adults aged 18 to 64, with 203,437 persons living with a disability (5.7% of the total population, and 17.4% of the total 18-64 population). Seniors aged 65 and older are more likely to have a disability, with 177,198 seniors having some type of disability, approximately 5% of the total population and 29.1% of the total population aged 65 and older. Individuals aged 75 and older have a high incidence of disability, with 42.7% of the total population aged 75 and older having some type of disability, representing 107,557 persons aged 75 or older with a disability.

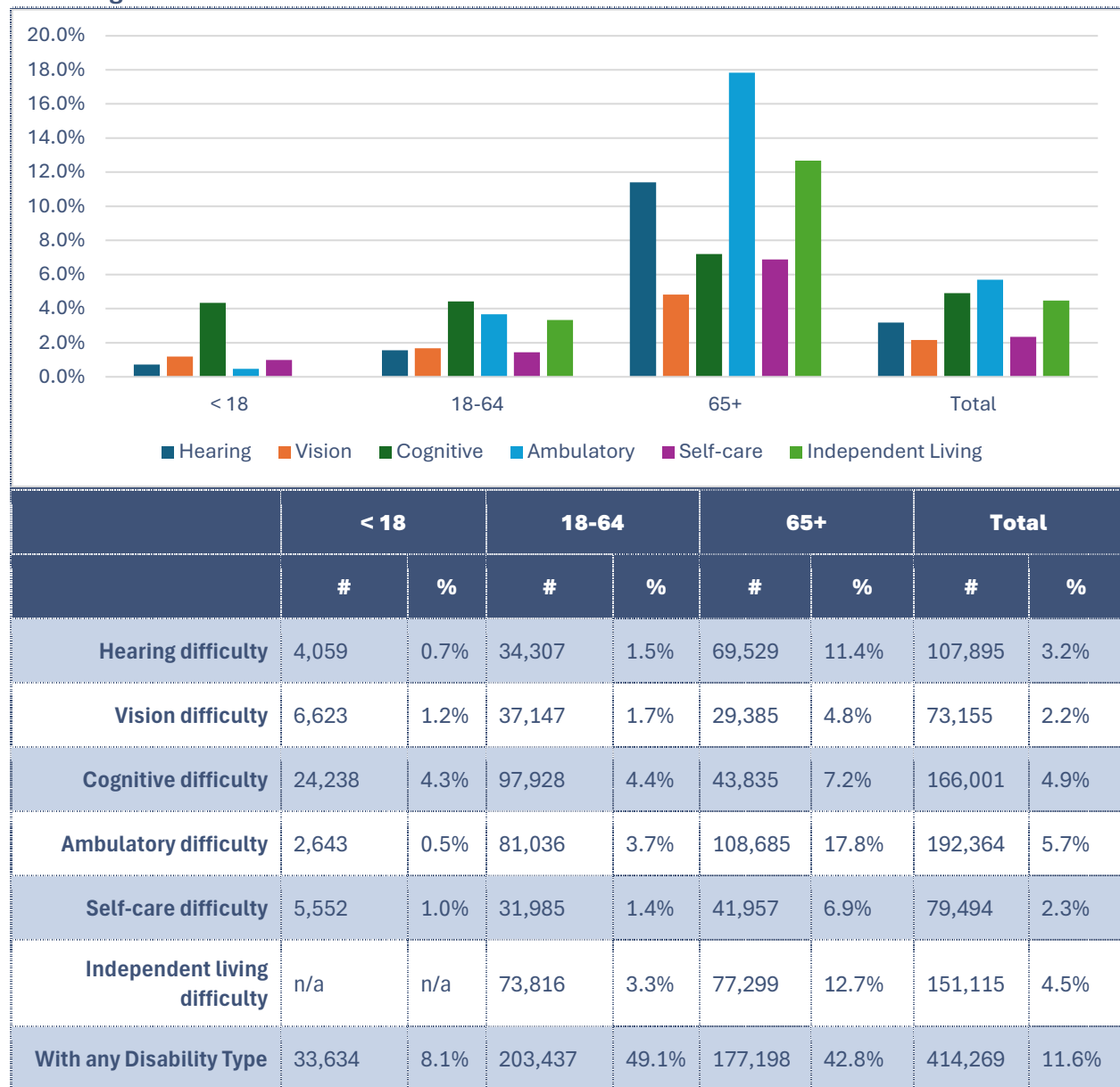
The most common disability type is ambulatory disabilities (192,364 CT residents), followed by cognitive difficulty (166,001 CT residents), independent living difficulties (151,115 CT residents), hearing difficulties (107,895 CT residents), self-care difficulties (79,464 CT residents), and vision difficulties (73,155 CT residents). Residents that are physically or cognitively disabled have special housing needs to accommodate their specific conditions.

According to the CT Council on Developmental Disabilities³, approximately 43,000 (1.2%) of Connecticut residents live with development disabilities. Developmental disabilities are defined as ones which result in substantial functional limitations in 3 or more of the following areas of major life activity: Self-care; Receptive and expressive language; Learning; Mobility; Self-direction; Capacity for independent living; or Economic self-sufficiency. Of the 1.2% of CT population with developmental disabilities, it is estimated that between 35% and 67% of them also have an

³ <https://portal.ct.gov/ctcdd/common-elements/v4-template/definition>

intellectual disability (meaning between 0.42% and 0.78% of Connecticut's have both a developmental disability and an intellectual disability).

NA-45 Figure 3: Disabilities



Data Source: 2018-2022 ACS - S1810

People living with HIV/AIDS

As of 2022, there were 10,738 people living with HIV in the state of Connecticut, equating to a prevalence rate of 286.2 per 100,000 residents. In 2022, there were 222 new cases of HIV diagnosed throughout CT, representing a rate of 6.1 per 100,000 residents. Among these, 40 individuals (18%) progressed to an AIDS diagnosis within three months of their initial HIV diagnosis. New cases are primarily concentrated in the urban core areas of Bridgeport, New Haven, Hartford, and to a lesser extent, Waterbury and Stamford. These cities also represent the primary locations of HIV infection in the state.

NA-45 Figure 4: HOPWA Data

Current HOPWA formula use:	
Cumulative cases of AIDS reported	0
Area incidence of AIDS	0
Rate per population	0
Number of new cases prior year (3 years of data)	0
Rate per population (3 years of data)	0
Current HIV surveillance data:	
Number of Persons living with HIV (PLWH)	10,738
Area Prevalence (PLWH per population)	6.1 per 100,000
Number of new HIV cases reported last year	222

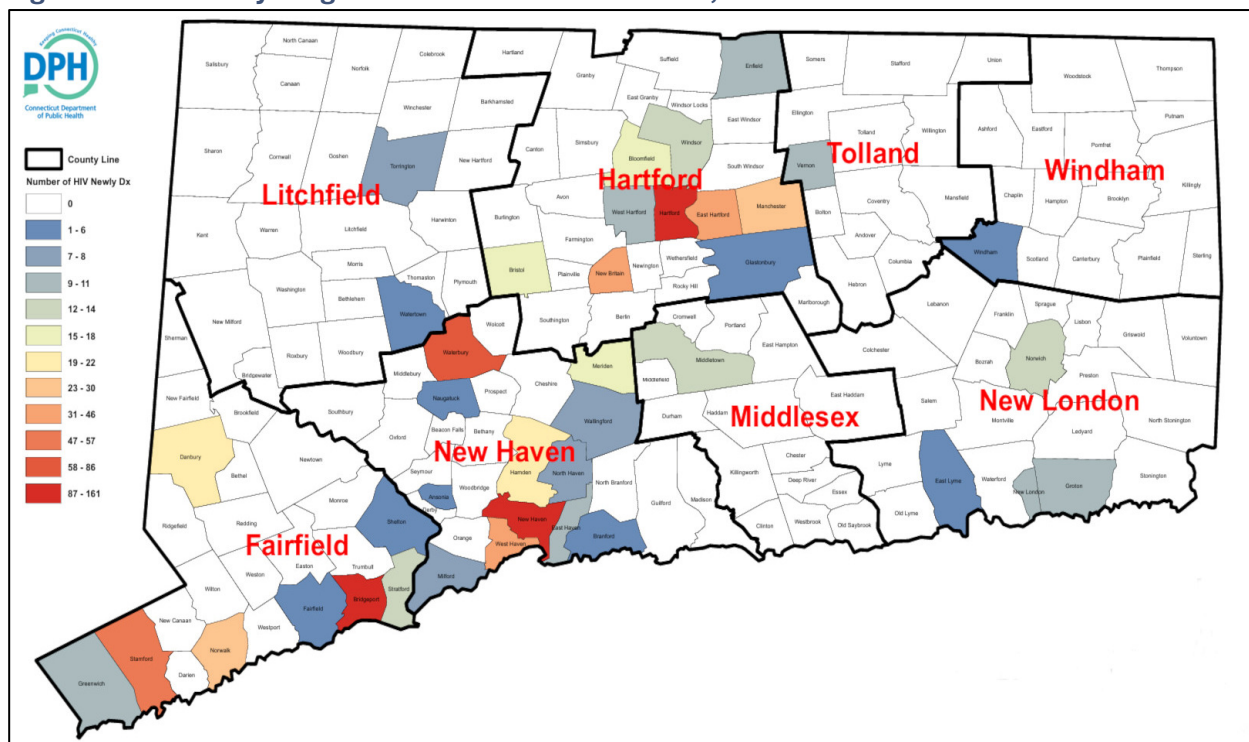
Data Source: CT Dept. of Public Health HIV Surveillance

NA-45 Figure 5: HIV Housing Need

Type of HOPWA Assistance	Estimates of Unmet Need
Tenant based rental assistance	0
Short-term Rent, Mortgage, and Utility	0
Facility Based Housing (Permanent, short-term or transitional)	0

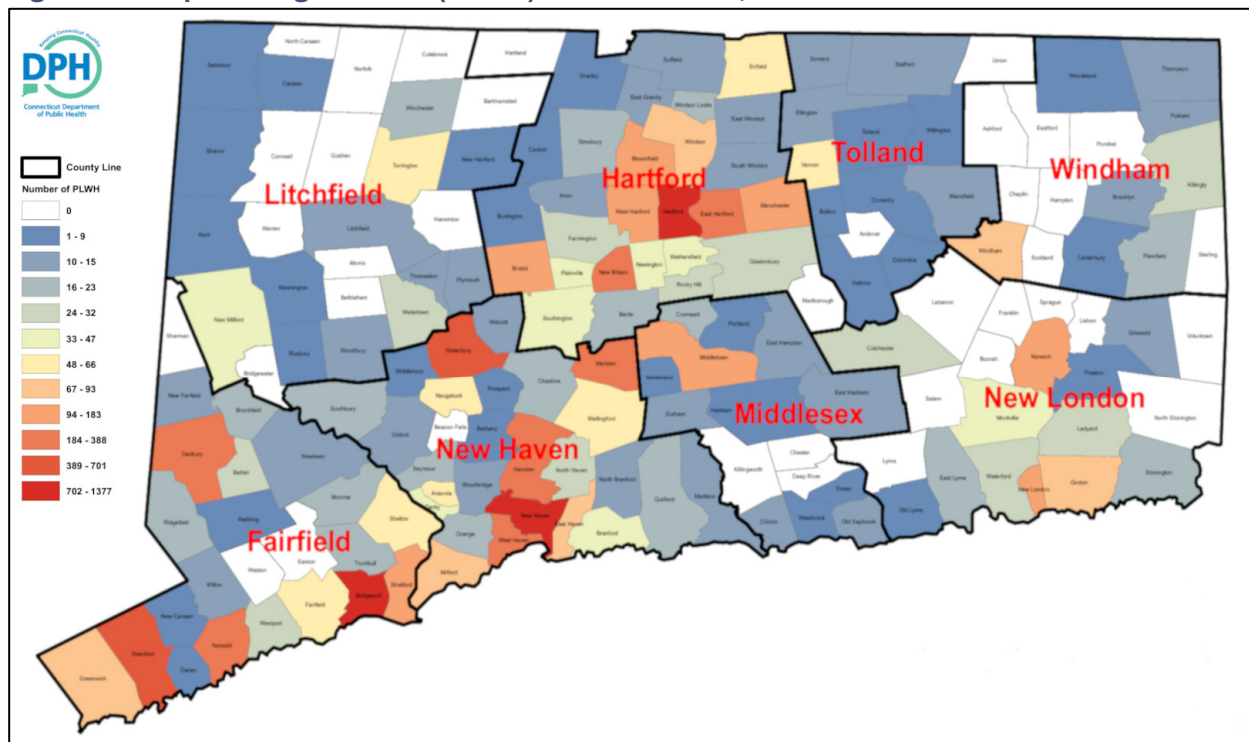
Data Source: HOPWA CAPER and HOPWA Beneficiary Verification Worksheet

Figure 5 - HIV Newly Diagnosed Cases in Connecticut, 2016-2020



Data Source: CT Dept. of Public Health

Figure 6 - People Living With HIV (PLWH) in Connecticut, 2020



Data Source: CT Dept. of Public Health

Persons with Substance Use Disorders

in the 2023 National Substance Use and Mental Health Services Survey for Connecticut, it was reported that there were 171 substance use treatment facilities that reported 43,470 clients in substance use treatment on March 31, 2023. Among these clients served, 1,994 were under the age of 18. The survey response rate for substance use treatment facilities in Connecticut was 90.6 percent.

Clients in Treatment for Substance Use Disorders								
	Clients in treatment on March 31, 2023							
	Facilities¹		All Clients²			Clients aged 18 years and older		
	N	%	N	%	Clients per 100,000 population³	N	%	Clients per 100,000 population aged 18 years and older³
Both alcohol and substances other than alcohol	135	94.4	14,655	33.9	405	13,882	33.6	480
Only alcohol	112	78.3	4,878	11.3	135	4,641	11.2	160
Only substances other than alcohol	131	91.6	23,717	54.8	656	22,734	55.1	785
Total	143		43,250	100.0	1,196	41,256	100.0	1,425

¹Numbers of facilities may sum to more than the total, and percentages may sum to more than 100 percent, because facilities may be included in more than one category.

²States report substance use disorders treated in terms of percentages of clients, from which the numbers of clients in this table are derived; their sum may not agree with the total due to rounding.

³Rate per 100,000 population and rate per 100,000 population aged 18 years and older were calculated using 2023 population estimates from the [U.S. Census Bureau](https://www.census.gov).

Victims of Domestic Violence, Dating Violence, Sexual Assault, and Stalking

Based on the information that is available, from the American Institute on Domestic violence, 85-95% of nationwide domestic violence victims were female. Those persons who are victims of domestic violence are forced to turn outside of the home for shelter, safety, and support.

There are 18 primary agencies that serve victims of domestic violence in the state of Connecticut, with the Connecticut Coalition Against Domestic Violence (CCADV) serving as the lead agency for providing rapid rehousing data. Aggregate data for the state shows that these agencies served 38,789 households with services for victims of domestic violence. Data from 2021 indicates that shelters for this vulnerable population operated at 156 percent of their occupancy capacity, indicating a need for additional emergency shelter capacity for victims of domestic violence.

According to the most recent Point-in-Time Count data available, of the 3,410 unhoused individuals in Connecticut, 692, or 39 percent, are survivors of some form of domestic violence. In the calendar year 2022, the Connecticut Coalition Against Domestic Violence reported that 705 victims received rapid rehousing services. This includes 281 adults and 424 children, with efforts aimed at diverting families from entering homelessness.

According to the 2022 Connecticut Family Violence Arrest Report, there were 15,791 family violence incidents reported in the calendar year 2022, involving 33,286 participants. Of those incidents, 5,903 involved intimate partner relationships. Children under the age of 18 were present in 1,505 of these incidents, and there were 1,924 incidents in which children were the victims.

Importantly, it must be noted that, according to the Bureau of Justice Statistics, only half of all domestic violence victimizations are reported to the police. Reporting rates are similar for intimate partner violence and violence committed by other relatives. This suggests that the actual rates of domestic violence in the state are likely much higher than those reported.

Veterans

It is worth noting that in 2016, the State of Connecticut was certified as the first state in the country to end veteran homelessness. Unfortunately, since then, the total number of homeless Veterans has increased to 191 as of the 2024 PIT count. Of the 191 homeless veterans, 17 were defined as chronically homeless, and 31 were unsheltered. Most of these Veterans are single and over the age of 50. Many Veterans have co-occurring mental health and/or drug addiction issues and other mental health disorders such as anxiety, depression, or post-traumatic stress disorder (PTSD). Combat exposure, military culture, and post-deployment challenges significantly contribute to the development of co-occurring disorders among veterans.

According to the 2022 ACS data, Connecticut was home to 146,179 military veterans. While many veterans have generally fared better economically than nonveterans, reflecting the national commitment to meet their basic needs in recognition of their service, there were 8,469 Veterans living in poverty. The 2022 United for ALICE Report reveals that an additional 26,227 Veterans were experiencing financial hardship, living in households that earned above the Federal Poverty Level, but not enough to cover the essentials in their communities.⁴ This again reflects the ongoing affordability crisis of housing in the state. In total, nearly one-quarter (23%) of Connecticut veterans lived in households with income below the ALICE Threshold of Financial Survival in 2019. This includes both households living in poverty and those classified as ALICE: Asset Limited, Income Constrained, Employed. ALICE households struggle to afford the basics needed to live and work in the modern economy, including housing, childcare, food, transportation, health care, a smartphone plan, and taxes.

⁴ <https://alice.ctunitedway.org/wp-content/uploads/2022/12/ALICE-in-Focus-Veterans-Connecticut.pdf>

NA-45 Figure 6: Veterans

	Veterans		Non-veterans	
	#	Poverty Rate	#	Poverty Rate
18-34	9,224	2.4%	782,141	11.3%
35-54	28,475	5.3%	889,881	8.4%
55-64	24,216	6.8%	497,629	9.6%
65+	84,264	8.0%	544,844	9.6%
Total	146,179	7.0%	2,714,495	9.7%

Data Source: 2018-2022 ACS - Tables B21001, B21002

NA-45 Figure 7: NA-45 Figure 5: Veteran Income

	Veteran	Non-Veteran
Male	\$56,825	\$54,908
Female	\$47,801	\$36,836
Total	\$56,298	\$44,573

Data Source: 2018-2022 ACS - B21004

What are the housing and supportive service needs of these populations and how are these needs determined?

Elderly and Frail Elderly

While over 93% of Connecticut seniors aged 65 and older are at or above the Federal Poverty Level, there are a significant number of elderly households that experience a housing cost burden. Among the elderly renters, there are 27,230 renter households paying more than 30% of their income on rent, and another 29,675 renter households paying more than 50% of their income on rent. For elderly owner households, there are 55,865 owner households paying more than 30% of their income on housing, and another 49,905 owner households paying more than 50% of their income on housing. In sum, almost 163,000 households with a person aged 62 and older are either cost burdened or severely cost burdened.

According to the 2022 American Community Survey, 29.1% of seniors ages 65 and older have some type of disability. Individuals aged 75 and older have a high incidence of disability, with 42.7% of the total population aged 75 and older having some type of disability, representing 107,557 persons aged 75 or older with a disability. The most common disabilities for the population aged 65 and older are ambulatory difficulties, independent living difficulties, and hearing difficulties. While these are the most common disabilities among the elderly population, other disabilities also greatly impact their housing options.

The limited and fixed incomes of many senior households inhibit their ability to absorb increases in rent and utilities as well as basic necessities such as food, medicine, transportation, and healthcare costs. Additionally, lack of resources also prohibits regular ongoing home maintenance and the need to make home improvements to ensure their homes meet minimum health and safety standards. It is not uncommon to see homes occupied by seniors in need of repairs, including major building components, roof and heating system replacements, and exterior paint and siding deterioration.

The elderly and frail elderly populations have additional unique challenges that come with age, including chronic and other medical conditions, higher rates of physical and mental disabilities (such as Alzheimer's and dementia), mobility challenges, and higher health care costs. Community members and agency staff expressed the need for more assistance to seniors and family caregivers to navigate the array of available services and programs, including health benefits, Medicaid and Medicare enrollment, in-home supports, affordable housing waitlists, and applications for assisted living and nursing home care. Other needs relate specifically to family caregivers, such as training, support groups, and personal time. Increased access to transportation services, particularly on weekends and evenings, would enable seniors to participate more in social activities, fitness programs and faith communities in their neighborhoods. This is incredibly important to address the epidemic of social isolation that the senior population can often experience as they age and become less mobile.

Finally, seniors are often in need of other housing types such as intermediate care facilities, nursing homes, and other housing that includes a planned service component to care for seniors when independent living, self-care, and mobility issues increasingly become a challenge. The most significant challenge to providing these services to the senior population is the lack of healthcare service staff.

Persons with Physical or Cognitive Disabilities

Persons with disabilities may have one or more physical, mental, and /or developmental conditions that constrain their possibilities for obtaining suitable housing. Ambulatory difficulty inhibits an individual's ability to walk or climb stairs. Often times, individuals with ambulatory difficulties have challenges finding accessible housing in certain communities, especially in the New England area because of the physical characteristics of the housing stock, with many split-level ranch-style homes, multi-story single family homes, and two- to four-unit homes in urban areas. Specific construction features and accessibility modifications are often required for those with mobility challenges, depending on the type and severity of these challenges (i.e., handrails, ramps, wider doorways, grab-bars, etc.).

While the state is not fully aware of the total population that struggles living in housing units that do not have all the elements and amenities required for those with mobility challenges, given the size of the population with ambulatory difficulties (192k persons) and the anecdotal information gleaned from the citizen participation and consultation process, it is estimated to be 40-50 thousand housing units. To maintain people living in their own homes longer, there is a need to make appropriate in-home modifications described above.

Stable housing for persons with mental illness is hugely beneficial regarding their mental health care because the primary location of a support network is directly linked to their residence. Those living with a mental or developmental disability can find it difficult to retain housing and often their disability prevents them from finding suitable employment or earning an adequate wage that allows for independent living. Many individuals with mental illness are dependent solely on

Supplemental Security Income as their primary source of income. Affordability issues become even more challenging for this population as there are few options in the private housing market and their disability leaves them at greater risk of homelessness and ill-equipped to navigate the public support system without substantial assistance. A common theme among social service providers was the need for permanent supportive housing with wraparound support services for those living with persistent mental illness.

Individuals with moderate to severe dementia or another cognitive impairment often require special care including supervision of up to 24 hours a day. Some may exhibit impulsive or difficult behaviors, paranoia, lack of motivation, memory problems, incontinence, poor judgment, and wandering that could be detrimental to their health and safety. Occasionally specialized communication techniques and/or devices are needed to communicate. They may need help with activities of daily living, such as bathing, eating, transferring from bed to a chair or wheelchair, toileting, or other personal care needs.

Persons Living with HIV/AIDS

As with any other population group, affordable housing options are of urgent concern for persons living with HIV/AIDS. Stable housing is required to maintain a consistent medication regime. Individuals need a place to take care of their hygiene and their immune system. No one who lives on the street or in shelters can be compliant with their medication treatment or HIV care, similarly with other medical and/or mental health or behavioral health conditions. When people have stable housing, they are better able to get the services they need.

Persons with Substance Use Disorders

In addition to diversion, specific treatment can manifest in a variety of forms depending on the specific acuity of the circumstance. A continuum of services ranging from in-patient hospitalization, residential sobriety treatment in a supportive and structured environment, long-term outpatient treatment, relapse prevention and recovery programs, regular toxicology screening, medication management, and other programs could be necessary to increase the likelihood of future abstinence from drugs and alcohol. Often times, there are contributing or concurrent conditions that result in alcohol or drug abuse which need to be addressed in order to assist the individual from dependence on alcohol or drugs. In all cases, stable housing is critical to recovery. There is also growing concern among social service providers that the trauma associated with first-time homelessness among populations that have never experienced homelessness previously is leading people to self-medicate and move towards addiction in response to the circumstances of homelessness.

Victims of Domestic Violence, Dating Violence, Sexual Assault, and Stalking

It must be noted that, according to the Bureau of Justice Statistics, only half of all domestic-violence victimizations are reported to police, with reporting rates similar for intimate-partner violence and violence committed by other relatives.

The housing and service needs for Victims of Domestic Violence are significant given the nature of the abuse. The immediate need for victims of domestic violence is stable affordable housing that allows people and their children to leave an abusive environment and become stable and independent. Additionally, there is a need for basic household items such as clothing, diapers, food, toiletries, etc. as many household items are abandoned when individuals flee an abusive relationship. Similarly, there is also a need for personal cell phones, laptops, and internet service.

Legal services are critical to obtain a protective order and custody of children. Additional legal services are crucial for families with mixed immigration status, in particular legal services related to U-Visas to strengthen the ability of law enforcement to investigate and prosecute cases of domestic violence, sexual assault, trafficking of noncitizens and other crimes, while protecting victims who have suffered substantial mental or physical abuse.

Support for children who have been impacted is also a priority. These can include support groups, parent skill building, clinical services for coping skills, medical care. Many of these supports need to be coordinated with the public school district where the child and parent / guardian live. Affordable and accessible childcare is also needed, especially as the parent gains more independence and transitions into the workforce. Another important service is workforce training to increase their economic mobility, as well as ESL classes for low-literacy adults.

Discuss the size and characteristics of the population with HIV/AIDS and their families within the Eligible Metropolitan Statistical Area:

Since 1981, over 22,000 CT residents have been reported with HIV and more than half have died. The CT Department of Public Health monitors HIV disease through a system of reporting by laboratories and providers. Information gathered through this system is used to analyze trends to determine who is at risk for infection and where services need to be provided. Each year funding from state and federal sources provides prevention services for infected people and others at high risk, HIV medications, housing support, syringe exchange, HIV testing, and other services.

According to the most recent data available through the Department of Public Health, as of 2022

- There were 10,738 people in Connecticut living with HIV. For people living with HIV, 80% received some HIV care and 74% were virally suppressed.
- There were 222 new HIV cases reported in Connecticut in 2022.
- Looking at 2022 HIV Diagnoses in Connecticut, male-to-male sexual contact represent 51.2% of all transmissions, followed by heterosexual contact at 27.9%, and persons who inject drugs at 21.2%.
- Regarding race and ethnicity categories, Hispanic of any race account for 35.1% of all transmissions, non-Hispanic Blacks account for 33.1% of all transmissions, and non-Hispanic Whites account for 28.9% of all transmissions.
- Among age categories, individuals aged 60 and older represent 35.7% of all infections, with younger age cohorts having smaller total cases of HIV infection.
- While total cases skew to older individuals, new HIV infections skew younger, with 32.9% of new HIV infections in the 20-29 age cohort, 31.5% in the 30-39 age cohort, 15.8% in the 40-49 age cohort, 11.7% in the 50-59 age cohort, and 5.9% in the 60+ age cohort. Among those younger than 20, new HIV infections represent 2.25% of the total.
- HIV cases are found disproportionately among Black/African American and Hispanic/Latino populations who make up 27% of Connecticut's population but comprise 68% of people living with HIV. Non-Hispanic Blacks and Hispanics have a higher incidence of new HIV infections, representing 20.05 and 13.66 per 100,000 in population respectively. In contrast, non-Hispanic Whites have a new infection incidence rate of 2.12 per 100,000.

New cases are primarily concentrated in the urban core areas of Bridgeport, New Haven, Hartford, and to a lesser extent, Waterbury and Stamford. These cities also represent the primary locations of HIV infection in the state.

Figure 7 - Number of People Living with HIV by Risk, Sex at Birth, Race/Ethnicity, and Age

	Transmission Category												Total	
	MSM		PWID		MSM and IDU		Heterosexual contact		Other*		Unknown			
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Total	3671	34.2	2435	22.7	261	2.4	2993	27.9	514	4.8	864	8.0	10738	100.0
Sex at Birth														
Male	3671	51.2	1520	21.2	261	3.6	976	13.6	92	1.3	652	9.1	7172	66.8
Female	0	0	915	25.7	0	0	2017	56.6	422	11.8	212	5.9	3566	33.2
Race/Ethnicity														
NH Black	791	22.2	804	22.6	60	1.7	1341	37.7	250	7.0	313	8.8	3559	33.1
Hispanic	1114	29.5	1055	28.0	96	2.5	1081	28.7	166	4.4	259	6.9	3771	35.1
NH White	1633	52.6	533	17.2	92	3.0	499	16.1	84	2.7	263	8.5	3104	28.9
Other	133	43.8	43	14.1	13	4.3	72	23.7	14	4.6	29	9.5	304	2.8
Current Age														
<20	8	32.0	0	0	0	0	**	**	10	40.0	**	**	25	0.2
20-29	373	64.9	11	1.9	9	1.6	**	**	84	14.6	**	**	575	5.4
30-39	798	57.4	58	4.2	36	2.6	283	20.3	133	9.6	83	6.0	1391	13.0
40-49	611	36.0	218	12.8	48	2.8	594	35.0	84	4.9	142	8.4	1697	15.8
50-59	941	29.3	829	25.8	83	2.6	947	29.4	113	3.5	303	9.4	3216	29.9
60+	940	24.5	1319	34.4	85	2.2	1101	28.7	90	2.3	299	7.8	3834	35.7

Date Source: CT Dept. of Public Health

If the PJ will establish a preference for a HOME TBRA activity for persons with a specific category of disabilities (e.g., persons with HIV/AIDS or chronic mental illness), describe their unmet need for housing and services needed to narrow the gap in benefits and services received by such persons. (See 24 CFR 92.209(c)(2) (ii))

Not applicable. CT does not use HOME funds for TBRA.

Discussion:

Facilities and services for populations with special needs include assisting non-homeless persons who require supportive housing. The State of Connecticut offers various types of service-enriched housing (including permanent supportive housing). Supportive housing is permanent, affordable housing linked to health, mental health, employment, and other supportive services. Supportive housing is a proven, cost-effective way to end homelessness for people with low income, as it provides chronically homeless people with a way out of expensive emergency public services and back into their own homes and communities.

The Shelter Plus Care (S+C) Program is a federally funded permanent supportive housing program that provides rental assistance to homeless individuals and families with disabilities. It links housing with supportive services to achieve housing stability for those who are seriously mentally ill, have chronic substance abuse issues, or are diagnosed with AIDS or related diseases. As of June 20, 2024, there were 2,566 units of supportive housing available as part of this program.

Numerous state programs offer service-enriched housing and supportive services for persons recovering from mental and physical health problems. The Department of Developmental Services (DDS) offers service-enriched housing to persons within the DDS system. DMHAS provides several programs that cater to this target population. The Connecticut Mental Health Center, a collaborative endeavor of DHMAS and Yale University's Department of Psychiatry, has several social integration services that are designed to foster the recovery and community re-integration of the center's patients.

The DMHAS Housing Assistance Fund Program provides rental assistance in the form of monthly housing subsidy payments to persons with psychiatric disorders on a temporary basis as they wait for permanent subsidies. DMHAS also has a General Assistance Recovery Supports Program (GA RSP), which is committed to helping State-Administered General Assistance (SAGA) recipients meet their basic needs. GA RSP promotes recovery, independence, employment, self-sufficiency, and stability by offering recovery support services including recovery housing, independent housing, bus passes, and personal care items.

NA-50 Non-Housing Community Development Needs – 91.215 (f)

Describe the jurisdiction's need for Public Facilities.

As a recipient of CDBG funds, DOH must provide a concise summary of the state's priority non-housing community development needs eligible for assistance under HUD's community development programs by CDBG eligibility category. The information contained in this section is limited to non-housing related needs, specifically the needs for public facilities, public improvements, and public services. Information related to economic development needs is collected on MA-45 Non-Housing Community Development Assets.

The State of Connecticut prioritizes community development projects aimed at benefiting low- and moderate-income individuals, with a particular emphasis on addressing the urgent need for all types of housing development, especially affordable and deeply affordable housing options. These developments will integrate supportive services into their models to better serve vulnerable populations. Housing and community development programs will directly support these efforts.

Wherever possible, the state will adopt responsible growth strategies in alignment with the State's Conservation and Development (C&D) Plan, fostering inter-municipal or regional collaborations, and emphasizing the reuse, rehabilitation, and revitalization of land, property, and infrastructure. Additional priorities include promoting urban infill and mixed-use developments, creating walkable and transit-oriented environments, and embedding sustainable development standards into the execution of all strategies and objectives outlined in this plan.

While the needs for public facilities, including senior centers, shelters, youth centers, childcare centers, neighborhood and recreation facilities, fire stations and equipment, etc. the priority for the Department of Housing is to facilitate the development of affordable housing throughout the state.

With the ongoing growth of the homeless population throughout the state, and the limited new development of deeply subsidized affordable housing units, the state's shelter capacity is being overburdened. With the limited resources available to address homelessness in the state, there is a tradeoff between increasing shelter capacity to meet the current needs, and the longer-term affordable housing needs of the homeless. Resources diverted towards increasing shelter capacity are diverted from the production of new affordable housing units.

How were these needs determined?

Non-housing community development needs for public facilities are determined on a case-by-case basis during the regular solicitation process for project funding.

Describe the jurisdiction's need for Public Improvements.

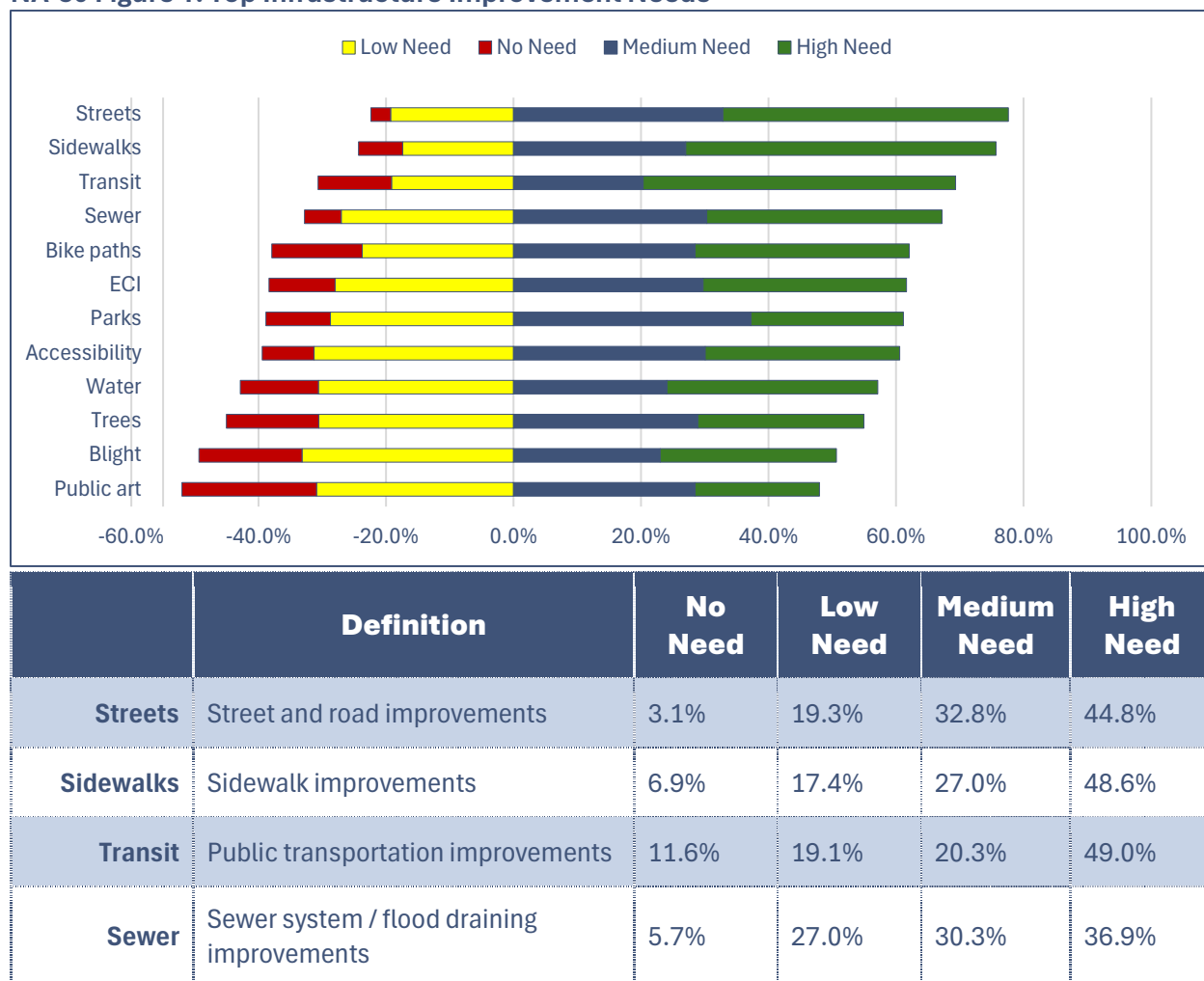
Infrastructure improvements such as streets, sidewalks, sewers, water systems, environmental remediation, catch basins for storm water runoff, and flood and erosion mitigation have significant costs associated with them. Often these types of public improvements are needed to repair aging infrastructure as well as to facilitate the development of new affordable housing construction, especially in rural and some suburban areas of the state. The DOH often funds community development infrastructure projects that are associated with the development or rehabilitation of

affordable housing; however, there is often a greater need for funding than what is possible with the resources available from the state.

As a general rule, the state will adopt and employ, to the greatest extent possible, responsible growth strategies consistent with the State's Conservation and Development (C&D) Plan, including but not limited to: inter-municipal or regional collaborations; reuse, rehabilitation, and revitalization of land, property and infrastructure; urban infill development; mixed-use developments; walkable environments; transit-oriented developments; and incorporation of sustainable development standards in the implementation of all the strategies and objectives outlined in this plan.

Additionally, as part of the online Housing & Community Development Survey, residents were asked to rank various public infrastructure improvements using a scale of no need, low need, medium need, and high need. The results of this online community needs survey listed the top five infrastructure improvements needs for the state as: (1) street and road improvements, (2) sidewalk improvements, including raised and cracked sidewalks and especially accessibility issues, (3) public transportation improvements, (4) sewer system and flood drainage improvements, and (5) bicycle and walking paths.

NA-50 Figure 1: Top Infrastructure Improvement Needs



	Definition	No Need	Low Need	Medium Need	High Need
Bike paths	Bicycle and walking paths	14.2%	23.7%	28.5%	33.6%
ECI	Environmental contamination issues	10.3%	28.0%	29.7%	31.9%
Parks	Public parks and recreation facilities	10.1%	28.7%	37.2%	23.9%
Accessibility	Handicapped accessibility for public buildings	8.1%	31.3%	30.1%	30.5%
Water	Drinking water quality improvements	12.2%	30.6%	24.1%	33.1%
Trees	Tree planting	14.5%	30.6%	28.9%	26.0%
Blight	Neighborhood blight	16.2%	33.2%	23.0%	27.7%
Public art	Public art / murals / beautification	21.1%	30.9%	28.5%	19.5%

Data Source: CEW Advisors, Inc. Housing & Community Development Survey

How were these needs determined?

As part of the consultation and citizen participation processes, CEW Advisors solicited information from community-based organizations, housing developers, social service providers, state agencies, community residents, and other stakeholders to identify the most important infrastructure improvement and neighborhood concerns.

Describe the jurisdiction's need for Public Services.

DOH will prioritize community development projects aimed at benefiting low- and moderate-income individuals, with a focus on housing and community development programs that directly benefit these LMI individuals and households.

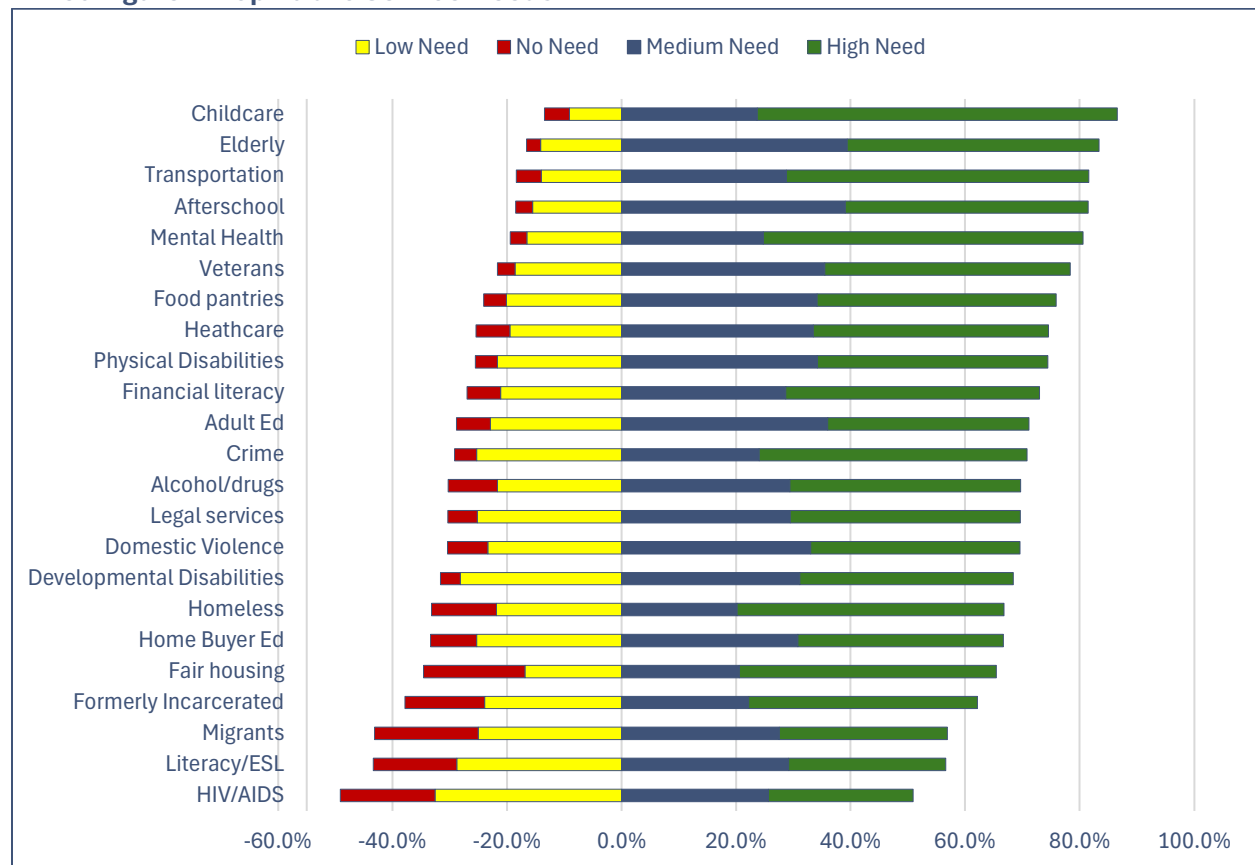
Through the consultation and citizen participation processes, there were several discussions related to the need of pairing affordable housing development with the wraparound services to assist extremely low-income households in navigating the barriers to their housing stability. These include the following issues:

- Mental Health Services
- Substance Use Treatment
- Healthcare Services
- Life Skills Training
- Employment Support
- Ongoing Case Management
- Legal Assistance
- Transportation Services
- Affordable Childcare

Additionally, as part of the online Housing & Community Development Survey, residents were asked to rank various public services using a scale of no need, low need, medium, need, and high need. The results of this online community needs survey listed the top five public service needs for the state as:

(1) Affordable childcare, (2) Programs or services for the elderly and frail elderly, (3) Transportation services, (4) Afterschool and summer recreation programs for youth and teens, and (5) Mental health services / Services for persons with mental illness.

NA-50 Figure 2: Top Public Service Needs



	Definition	No Need	Low Need	Medium Need	High Need
Childcare	Affordable childcare	4.3%	9.1%	23.7%	62.8%
Elderly	Programs or services for the elderly and frail elderly	2.5%	14.1%	39.4%	44.0%
Transportation	Transportation services	4.4%	14.0%	28.8%	52.8%
Afterschool	Afterschool and summer recreation programs for youth and teens	2.9%	15.5%	39.1%	42.4%

	Definition	No Need	Low Need	Medium Need	High Need
Mental Health	Mental health services / Services for persons with mental illness	2.9%	16.5%	24.8%	55.8%
Veterans	Programs and services for Veterans	3.0%	18.6%	35.5%	42.9%
Food pantries	Emergency food assistance / food pantries	4.0%	20.1%	34.1%	41.8%
Health care	Healthcare services	5.9%	19.5%	33.5%	41.1%
Physical Disabilities	Services for individuals with physical disabilities	3.9%	21.6%	34.2%	40.3%
Financial literacy	Financial literacy programs	5.9%	21.1%	28.7%	44.3%
Adult Ed	Adult education / workforce training classes	5.9%	22.9%	36.0%	35.2%
Crime	Crime prevention	3.9%	25.3%	24.0%	46.8%
Alcohol/drugs	Alcohol and substance abuse counseling services	8.7%	21.6%	29.4%	40.3%
Legal services	Legal services	5.1%	25.2%	29.5%	40.2%
Domestic Violence	Supportive housing for victims of domestic violence	7.0%	23.3%	33.0%	36.6%
Developmental Disabilities	Programs for individuals with developmental disabilities	3.5%	28.1%	31.2%	37.2%
Homeless	Supportive housing for the homeless	11.3%	21.8%	20.2%	46.6%
Home Buyer Ed	Homebuyer education classes	8.0%	25.3%	30.8%	35.9%
Fair housing	Fair housing programs (to uncover evidence of discrimination in housing)	17.7%	16.9%	20.6%	44.9%
Formerly Incarcerated	Services for the formerly incarcerated	13.9%	23.9%	22.2%	40.0%

	Definition	No Need	Low Need	Medium Need	High Need
Migrants	Services for immigrants	18.1%	25.0%	27.6%	29.3%
Literacy/ESL	English literacy programs	14.6%	28.8%	29.2%	27.5%
HIV/AIDS	Housing for persons living with HIV/AIDS and their families	16.5%	32.6%	25.7%	25.2%

Data Source: CEW Advisors, Inc. Housing & Community Development Survey

How were these needs determined?

As part of the consultation and citizen participation processes, CEW Advisors solicited information from community-based organizations, housing developers, social service providers, state agencies, community residents, and other stakeholders to identify the most important public service and supportive housing needs in the state.

Housing Market Analysis

MA-05 Overview

The Market Analysis overview provides a summary of the key points of each section of the Market Analysis and sets a basis for the funding priorities that are described in the Strategic Plan. Each additional section will offer additional details of the following key points.

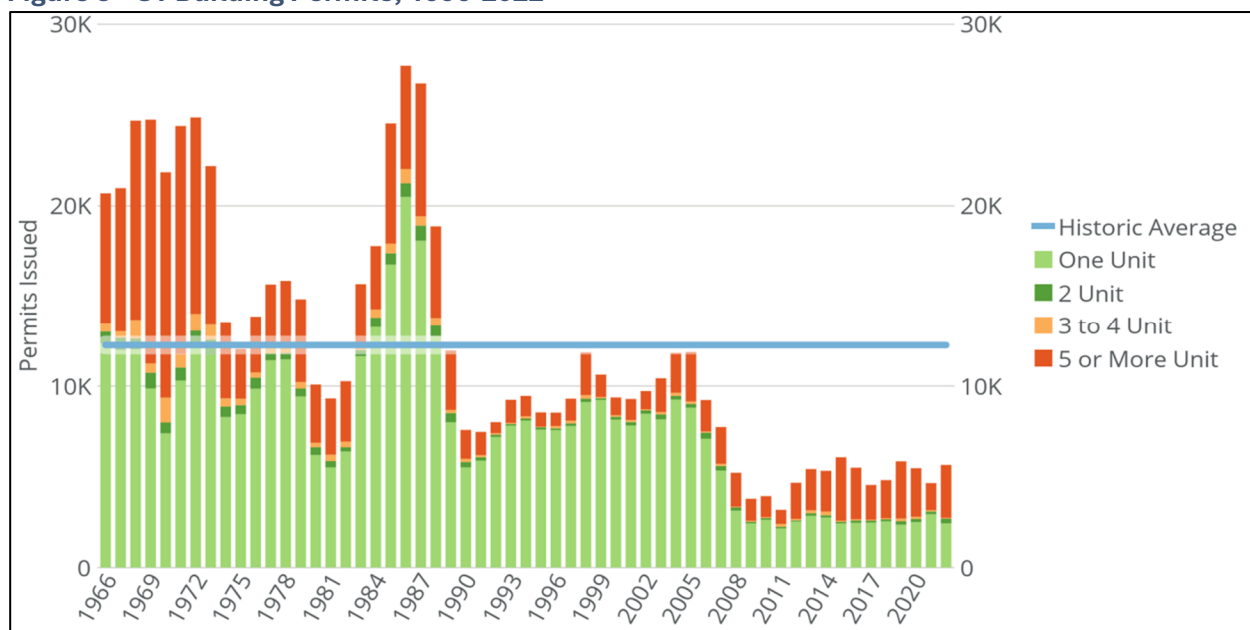
- Significant characteristics of the jurisdiction's housing market in general, including the supply, demand, and condition and cost of housing
- Housing stock available to serve persons with disabilities and other special needs
- Condition and needs of public and assisted housing
- Brief inventory of facilities, housing, and services that meet the needs of homeless persons
- Regulatory barriers to affordable housing
- Significant characteristics of the jurisdiction's economy

The housing market in the state of Connecticut is very diverse, with regional differences between urban core areas of the state, suburban ring communities, and rural areas primarily along the western and eastern edges of the state. An analysis of Connecticut's housing stock reveals its bifurcated nature. Much of the single-family residential housing in the state is in rural areas and in the suburbs, particularly along major highway corridors. Conversely, multifamily units are predominately located in the state's urban centers.

About 65% of all housing stock in the state consists of single-family residential properties. The remaining housing is multifamily with 2-4 units making up 17% and over 5+ units making up 18%. Homeownership rates follow this bifurcated nature, with owner-occupied housing markedly higher in suburban and rural areas, with the locus of single-family housing stock. It is also within suburban communities that we see lower rates of minority residents which, while not unique to Connecticut, calls attention to the racial wealth gap in the state. People of color in Connecticut are far less likely to own their own homes with households identifying as Black or African American having just a 41% homeownership rate compared to 73% for White Households.

There has been a lack of new construction over the past twenty years that has reduced Connecticut's ability to meet housing demand across all income brackets. Since the financial crisis in the late 1980's Connecticut's annual building permit numbers have not recovered. The Great Recession saw a further decline in new housing construction with the last peak in construction occurring in 2005. In 2022, Connecticut issued just 48% of the residential building permits that it did in 2005, lagging nearby states and the country as a whole. At the same time, household formation in Connecticut has been on the rise, necessitating additional housing options across all income levels.

Figure 8 - CT Building Permits, 1996-2022



Data Source: U.S. Census Bureau, Building Permit Survey

There is a strong need for additional multifamily housing. New housing can be broken down into single-family and multifamily homes that range from two-unit duplexes to large apartment buildings with hundreds of units. Although the majority of households in CT currently live in single-family homes, multifamily units have become increasingly important to the overall housing market. In 1998, Connecticut's multifamily units accounted for 23.0% of housing permits authorized, that figure increased to 33% in 2010, was almost 60% in 2019 prior to the pandemic, and accounted for over two-thirds of the total building permit units for 2023.

DOH has fully embraced the challenge of providing a variety of housing options for all income levels, tenancy and age groups in our diverse state. DOH has leveraged state, federal and private resources to identify and employ tools to develop and preserve all kinds of housing, from ownership to rental, from conventional rental to supportive housing, and from rapid to long term production.

Connecticut's housing environment is challenging. There must be an adequate supply of housing in proximity to employment, public transportation, and community facilities, such as public schools. The housing stock must include affordable and accessible units for sale and for rent, not only to meet social equity goals, but to ensure community viability. The development of a diverse and affordable housing stock must be carried out without sacrificing sound regulations that are in place to protect the environment and public health. The State of Connecticut is working toward ending chronic and family homelessness, particularly as homelessness has been on the rise since the pandemic. This requires providing opportunities for service-enhanced housing. While CT previously eliminated chronic veteran homelessness, the rental market pressure have once again led to Veterans living on the streets. DOH has worked extensively towards informed decision-making that creates housing options for all people including low- and moderate-income households, seniors, people with special needs, families and children, and the homeless in both rural and urban areas.

Overall, with people living longer and with the pronounced growth of the senior population, there will be a call to address a wider range of abilities, needs and disabilities. These needs range from

the more typical age-related changes such as those relating to vision, hearing, and mobility; to those including mental, physical and developmental health, educational and transportation needs among the many. It will grow increasingly important for our communities to plan for and address this spectrum of needs, rather than focus on just one. Health care provisions are increasingly relying on community- and home-based care rather than institutional care as detailed in the Affordable Care Act and other federal and state legislation and policies. This shift, in conjunction with financial pressures the health care industry faces, will likely give rise to new community-based housing models that better link human services and health care with residents.

Housing affordability is a key factor in assessing the housing market. Affordable housing is defined as households that do not spend more than 30% of their income for housing, including utilities.

As of 2025, the statewide average Fair Market Rent (FMR) for a two-bedroom apartment was \$1,907. Connecticut has the 7th highest rent in the country, ranging from \$1,445 for a 2-bedroom apartment in the Waterbury, CT Metro area to \$2,610 for a 2-bedroom unit in the Stamford-Norwalk, CT Metro area. In order to afford this level of rent and utilities, without paying more than 30% of income on housing, a household must earn \$4,817 monthly or \$57,800 annually. Assuming a 40-hour workweek (52 weeks per year), this level of income translates into an hourly housing wage of \$27.79 per hour. Additionally, mortgage rates increased to the highest level since 2010. According to Freddie Mac, the conventional 30-year mortgage rate on an annual average basis was 6.72% in 2024, down slightly from 6.81% in 2023. It is still far higher than previous years where it was 5.34% in 2022, 2.96% in 2021, and 3.11% in 2020.

MA-10 Number of Housing Units – 91.210(a)&(b)(2)

Introduction

In Connecticut there is a cross-cutting need for housing in all tenure types (ownership and rental), smaller bedroom sizes (efficiency and 1- to 2-bedroom units), and income ranges (especially extremely low-, low-, and moderate-income and workforce housing). These needs vary not only by county, region and municipality, but by neighborhood and borough. These needs are not limited by race, ethnicity, disability, gender, or any other characteristic among the protected classes; these needs cross all boundaries, both geographically and demographically.

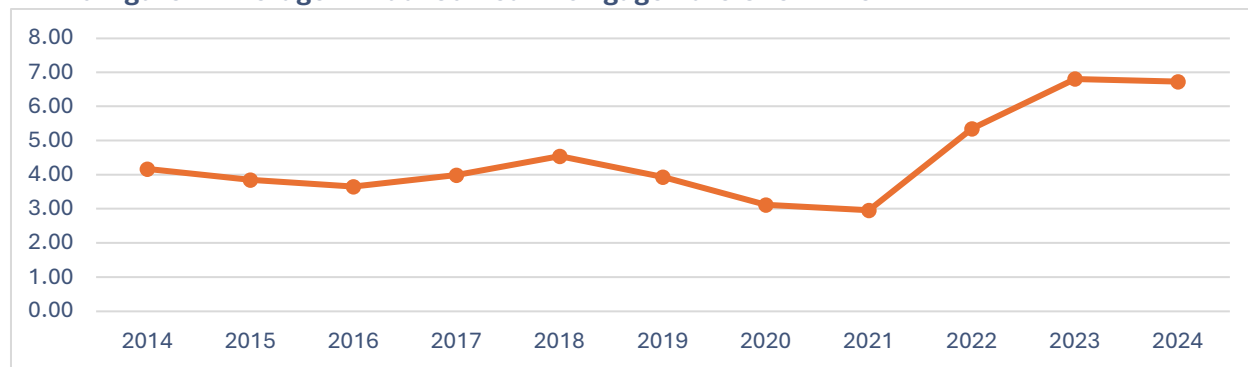
Of great concern is housing that the market is unable or unwilling to produce without some form of subsidy, including housing that is traditionally for those with incomes between 80% and 120% of Area Median Income/Median Family Income (AMI/MFI). The rapid escalation of construction materials and total development costs has skewed the new housing market towards either large single-family homes which are sold for above average sale prices, or larger multi-family developments which lowers the average per unit development cost.

Smaller-sized multi-family developments and smaller homes clustered together is recognized as the “Missing Middle” housing. “Missing middle” housing refers to a range of housing types that fill the gap between single-family homes and large apartment buildings. These housing types include duplexes, triplexes, fourplexes, townhomes, and cottage courts. They are designed to be compatible in scale with single-family homes and are typically located in walkable neighborhoods. The lack of development of these types of units is a phenomenon that has manifested across the country and is of growing concern as the tastes and preferences of new homebuyers are moving away from single-family homes built on large lots.

Many prospective homebuyers, especially younger generations, are preferring more affordable and flexible housing options, such as townhomes, condominiums, and smaller, more efficient homes. Urban living and walkable communities have become more popular over the past several years, as people prioritize proximity to work, amenities, and public transportation.

If housing that is affordable to households with incomes between 80% and 120% of AMI/MFI is not being produced, then the availability of existing housing in that price range diminishes. In keeping with the economic laws of supply and demand, scarcity increases prices. Adding to increased prices was the rising of federal interest rates four times in 2018, and inflationary pressures starting with the pandemic.

MA-10 Figure 1: Average Annual 30-Year Mortgage Rate Over Time

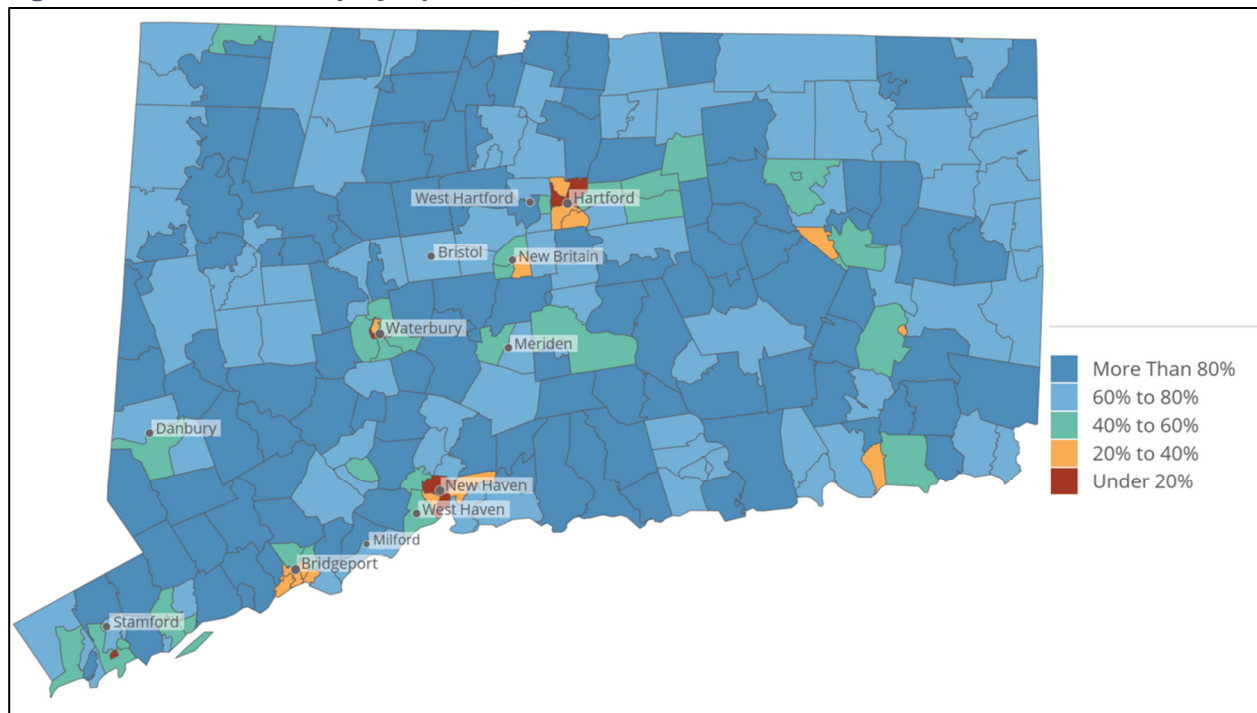


Data Source: Freddie Mac Primary Mortgage Market Survey

About two-thirds of all homes in CT are owner-occupied, although homeownership rates are highest in non-urban communities. The communities with the lowest homeownership rates are the urban centers of Hartford, New Haven, Bridgeport, Waterbury, and New London, with some neighborhoods having less than 20% homeownership rates.

Through the consultation and community meeting processes, it was found that there is a deep interest in facilitating homeownership in urban communities among residents, especially considering that these communities have some of the highest levels of poverty in the state and renters have experienced significant increases in their rental costs without any improvement to their living conditions. It's found that homeownership in urban communities offers several benefits that enhance neighborhood stability. When residents own their homes, they are able to escape what has been described as the capricious nature of unreasonable and unsustainable rent increases. Homeownership reduces turnover in communities and allows residents to live in a more financially stable and predictable situation knowing that their mortgage payment will be fixed for 30 years. They are also able to build equity and family and intergenerational wealth that has lifted many people out of poverty.

Figure 9 - Homeownership by Zip Code, 2021



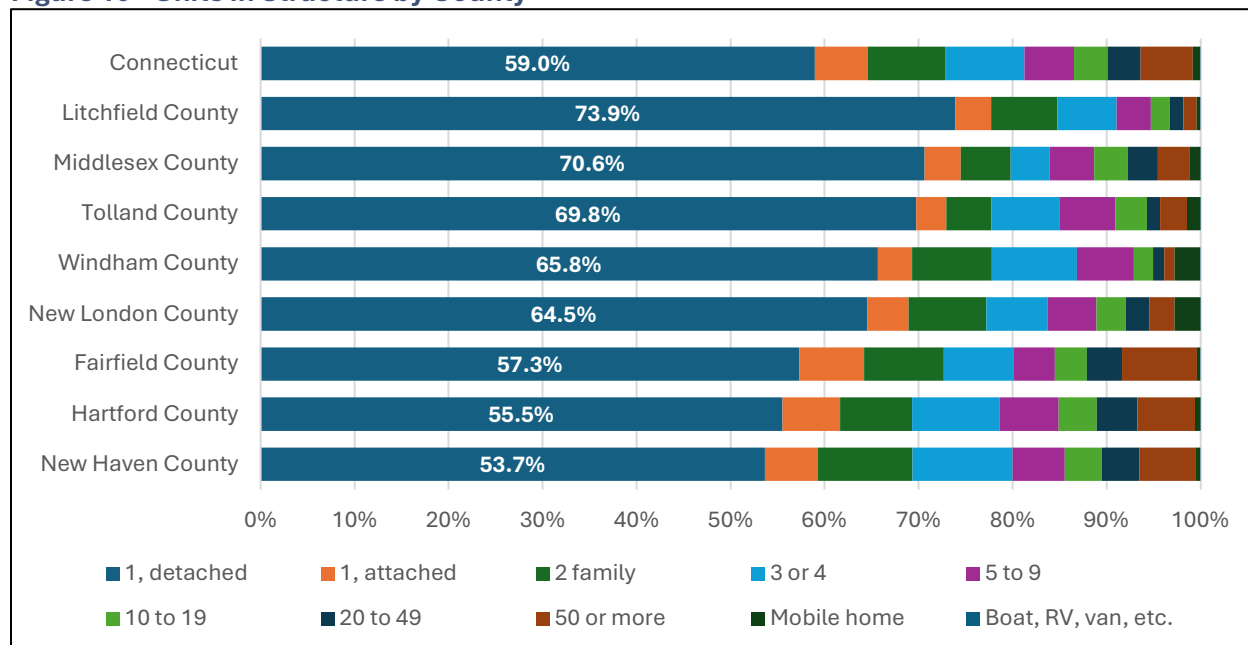
Data Source: 2021 ACS 5-Year Estimates

CT sees a very large proportion of its housing stock as larger homes with three or more bedrooms. This is not terribly surprising given the preponderance of single-family homes on large suburban or rural lots. People who own their homes are more likely to live in larger housing units, while renters are more likely to live in smaller studio apartments or one-bedroom apartments. The total number of housing units in CT equals 1.53 million units. Almost 65% of all housing units in the state are single-family detached or single-family attached homes (58.7% and 6.0% respectively).

As discussed, there is a much higher percentage of single-family homes located in the suburban and rural communities than there are multi-family homes. And larger multi-family developments are almost exclusively located in urban areas, with limited exceptions. Further, single-family

homes are most likely to be owner-occupied, with 86% of single-family detached homes being owner-occupied and 60.3% of single-family attached homes being owner-occupied. The larger the size of the housing development, the more likely it is to have a higher proportion of renters than owner-occupants.

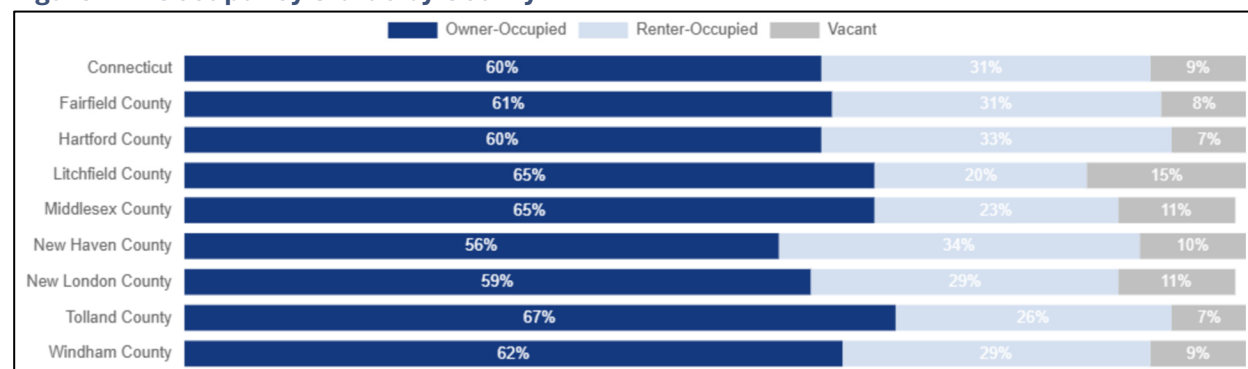
Figure 10 - Units in Structure by County



Data Source: 2020 ACS 5-Year Estimate

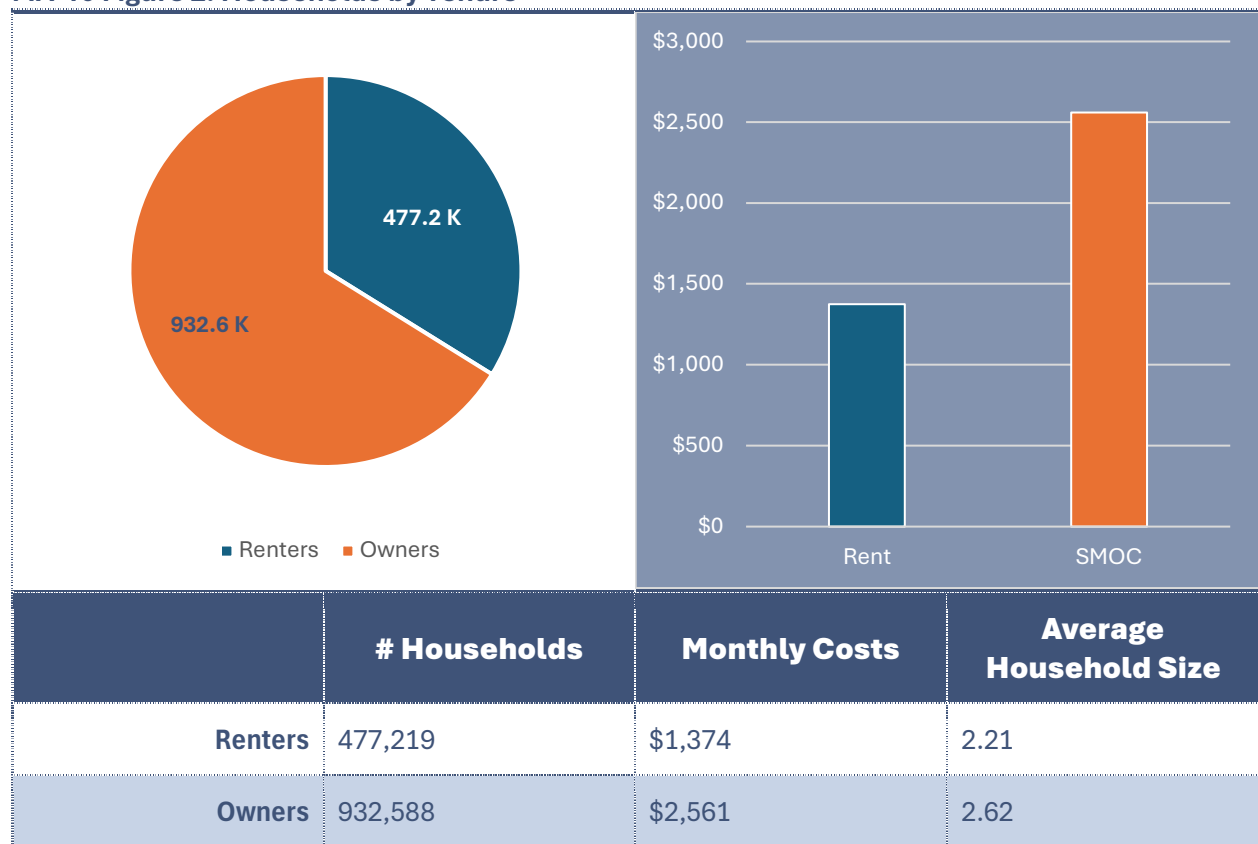
When we look at a county level breakdown, we see a slight disparity in the percentage of home ownership among certain counties, with Tolland County having 67% of all housing being owner-occupied contrasted with New Haven County with 56% owner-occupied. Some of this disparity is related to more rural and suburban areas having higher proportions of owner-occupied housing, although much of the disparity exists between the urban core cities of Hartford, New Haven, and Bridgeport, and to a lesser extent the cities of New London, Waterbury, Willimantic, and New Britain, and the rest of the state.

Figure 11 - Occupancy Status by County



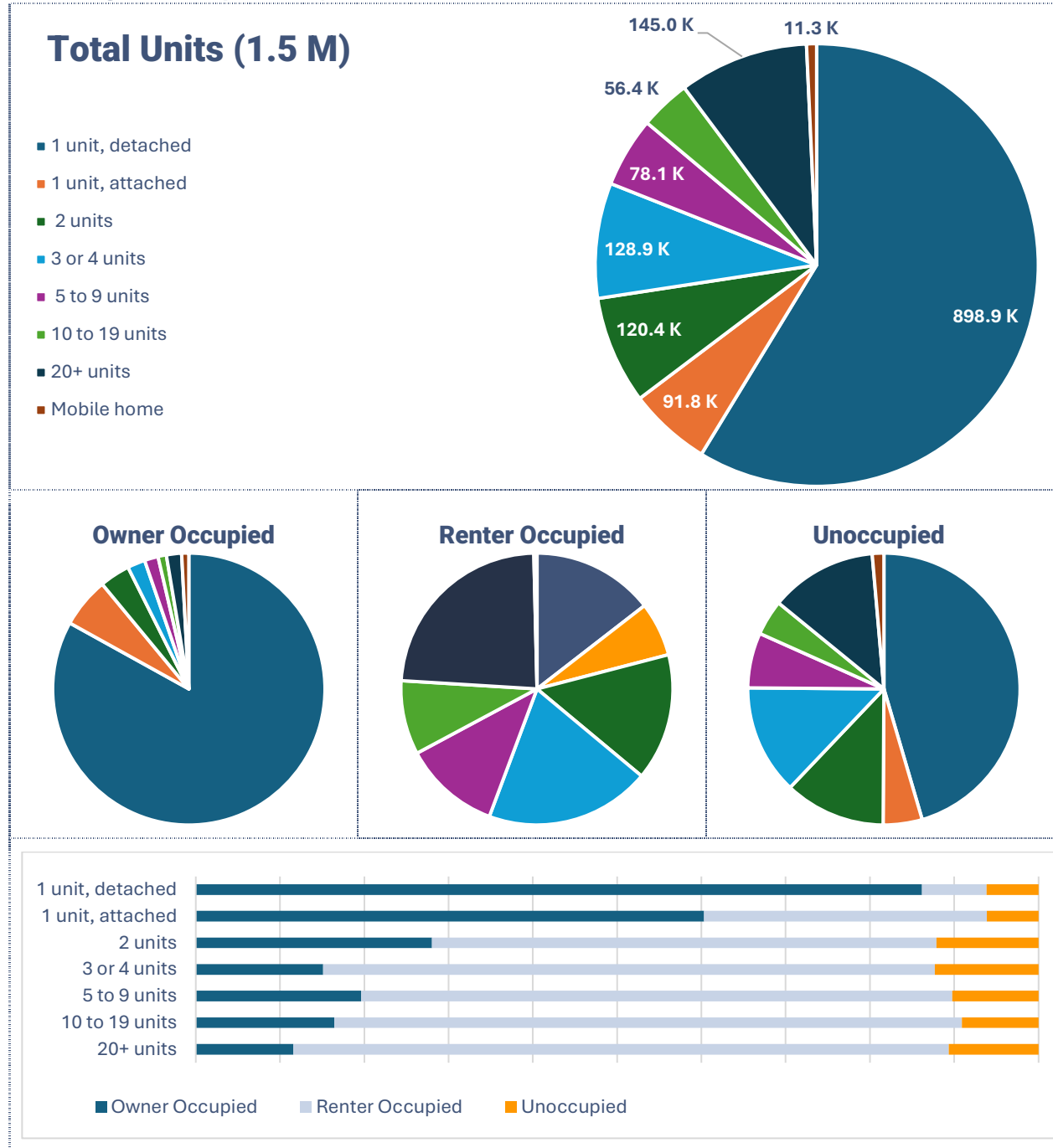
Data Source: 2020 ACS 5-Year Estimate

MA-10 Figure 2: Households by Tenure



Data Source: 2018-2022 ACS - DP04

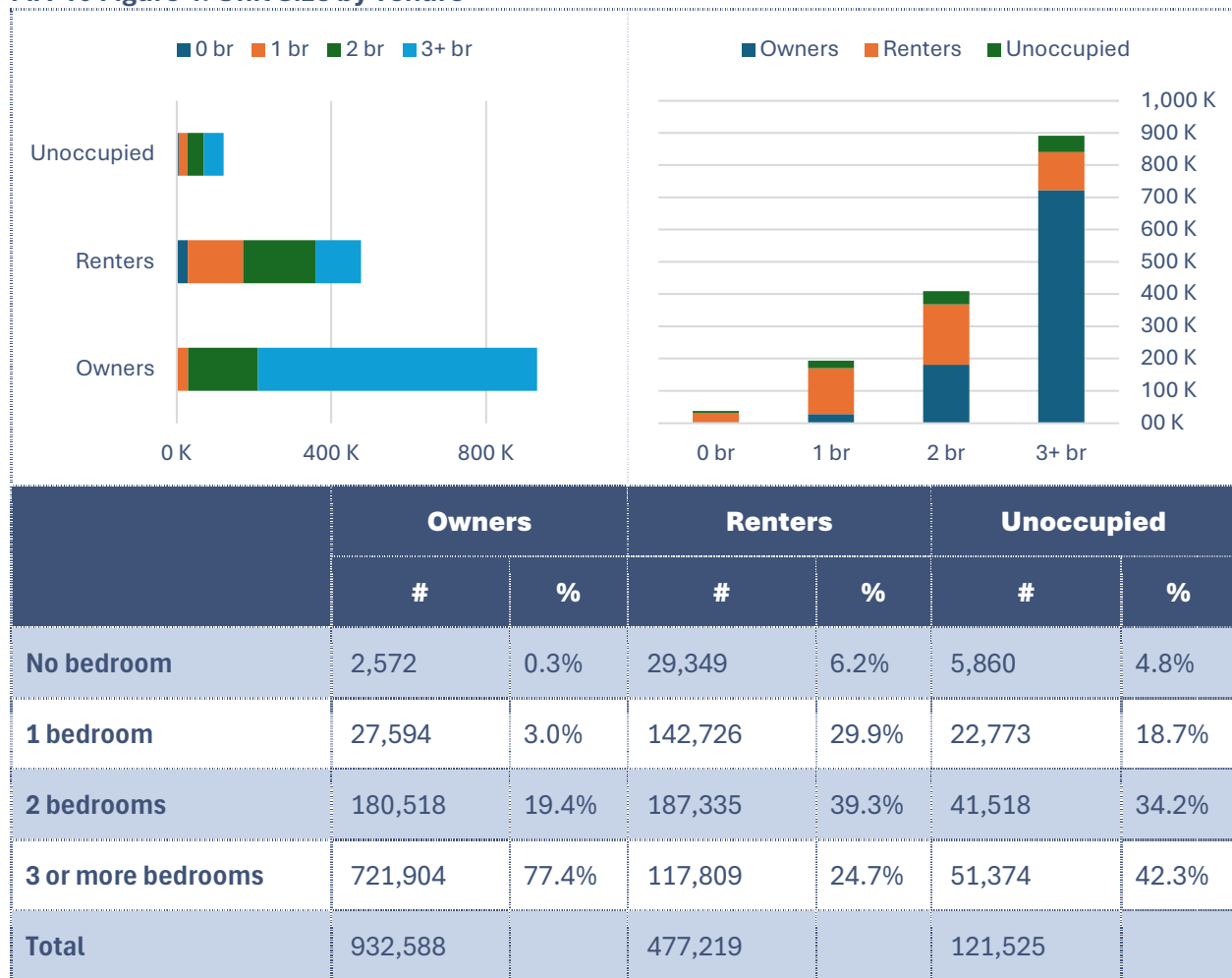
MA-10 Figure 3: Properties by Number of Units



	Owner Occupied	Renter Occupied	Unoccupied	Total
1 unit, detached	774,546	69,094	55,251	898,891
1 unit, attached	55,378	30,792	5,624	91,794
2 units	33,753	72,085	14,581	120,419
3 or 4 units	19,493	93,613	15,836	128,942
5 to 9 units	15,341	54,792	7,994	78,127
10 to 19 units	9,263	41,964	5,126	56,353
20+ units	16,785	112,812	15,428	145,025
Mobile home	7,834	1,738	1,685	11,257
Boat, RV, van, etc.	195	329	-	524

Data Source: 2018-2022 ACS - B25032, DP04

MA-10 Figure 4: Unit Size by Tenure



Data Source: 2018-2022 ACS - B25042, DP04

Describe the number and targeting (income level/type of family served) of units assisted with federal, state, and local programs.

The state of Connecticut has a significant supply of affordable and subsidized housing options for its residents and has recently produced another 13,000 affordable housing units over the past 5 years. According to the 2023 Affordable Housing Appeals List, there are a total of 175,548 assisted units throughout the state of CT, representing approximately 12.4% of the total number of housing units in the state.⁵

This is more fully described in **Section MA-25: Public and Assisted Housing**.

Provide an assessment of units expected to be lost from the affordable housing inventory for any reason, such as expiration of Section 8 contracts.

Most of the affordable housing in CT is required to remain affordable through restrictions that are put in place through mortgage financing, when receiving tax credits, or through deed restrictions. These restrictions are not perpetual and expire by their terms upon maturity of their mortgages or

⁵ <https://portal.ct.gov/doh/doh/programs/affordable-housing-appeals-listing>

other agreement. Of the 175,548 units of affordable housing in Connecticut, there are approximately 861 that will lose their obligation to remain affordable from by June 30, 2030.

As these properties age and need remediation related to physical deterioration, many are provided financing that will have additional affordable housing restrictions placed on them, usually an additional 30 years or more. Previously, CHFA, DOH, and HUD have worked to offer financing to many properties that are at risk of losing their affordability restrictions so they may remain part of the assisted housing inventory in the state. While it may not always ensure that the properties will retain their most restrictive subsidies and income limits during this period, these agencies hope their efforts will help to stabilize the affordable housing market while at the same time add new affordable units through housing development programs.

Does the availability of housing units meet the needs of the population?

No, there is and has been a dire need for additional safe, decent, affordable, and accessible housing options for individuals, families, seniors, and persons with disabilities throughout Connecticut. This is more fully discussed in the next section.

Describe the need for specific types of housing:

The most profound need in every community is to increase the supply of housing that is affordable at all income levels. This will vary depending on location since there are multiple distinct housing markets throughout the state. While the specific circumstances in rural Litchfield County will be distinct and different than those in and around New Haven or Hartford, affordability is the primary concern. The pipeline of projects currently in development is lengthy and the need for affordable units is significant. Located in every region of the state, the rental units funded through the state serve many populations, including extremely low-, low- to moderate-income families; elderly; frail elderly; homeless individuals and families; person with special needs; persons with disabilities; veterans; victims of domestic abuse; and others. These projects cover a wide range from urban revitalization projects to projects located near major transit hubs, to projects located in some of the state's most rural communities.

While the state has made great strides in the construction of new affordable housing units, the need is estimated at 100,000 additional units. Using a very rough estimate of \$200,000 as the average development cost of a unit of housing, an investment of \$20 billion will be needed to meet the needs of the state's residents. Further, if money was not a constraint (it very much is), the pace of construction would need to increase dramatically to meet the immediate needs of those struggling with housing costs now. At an average pace of 2,600 new units a year, it would take over 38 years to meet the demand of 100,000 new units. These realities have created a culture and attitude to build as much as possible, in every region of the state, every type of housing possible. Maximizing supply will in theory reduce costs, or at the very least slow down price escalation.

Additionally, there is an increasing need for supportive housing strategies that improve linkages between residents' housing, human services, and health care needs. Many communities have developed housing assistance programs that often include one or more programs specifically targeted toward meeting the housing needs of disabled individuals. Housing authorities have increasingly become an important vehicle in the development of creative strategies to support their residents as their needs evolve. Housing and service needs for an aging population that wishes to age in place will place additional burdens on a healthcare and at-home care system that are already experiencing capacity constraints. Additional strategies may include the built environment

where design promotes accessibility, visitation, private guest quarters for caretakers, and universal creativity that allow for flexible housing options such as accessory dwelling units and shared housing.

Discussion

Increasing the supply of quality affordable housing can be accomplished in multiple ways including new construction and rehabilitation of existing units. Adaptive re-use of historic structures and decommissioned properties (i.e., abandoned schools or hotels) provides multiple benefits to communities. Redevelopment lowers the ratio of poor quality or unused structures. Additionally, re-use lessens sprawl in rapidly developing areas by preserving open space/undeveloped land. Adaptive re-use is very likely to engender community support by preserving structures that have long been part of the community. Further, reuse of certain properties in suburban and rural communities alleviates the need for sewer and water connections that often impede development of newly constructed multi-family housing.

DOH focuses its available resources to achieve the creation of new high-quality affordable rental units; to achieve the creation of new affordable homeownership opportunities; to achieve the preservation of existing affordable rental housing units; and to maintain homeownership opportunities.

Program success is measured through increased rental homeowner housing opportunities that serve low- and moderate-income households in a variety of geographies.

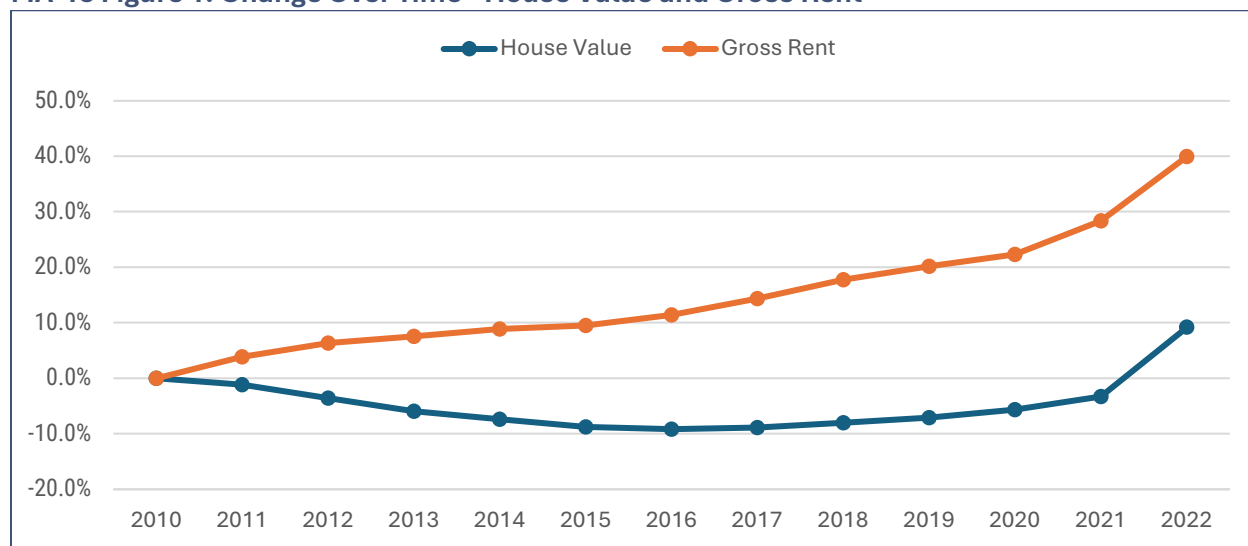
The state utilizes its federal formula grant funding, as well as its state allocations to address Connecticut's housing and community development needs through the application of Six Growth Management principles by giving funding priority to projects that address multiple needs and leverage existing infrastructure and resources, with a focus on addressing homelessness and expanding supportive housing opportunities.

MA-15 Housing Market Analysis: Cost of Housing - 91.210(a)

Introduction

This section describes the significant characteristics of the state's housing market and details the cost of housing, housing trends, fair market rents, affordability, and the housing inventory. According to the ACS data, the median home value dropped roughly 10% between 2010 to 2016. This is due in part to the ongoing housing market correction from the 2007-2008 financial crisis. Home values again started increasing in 2017, growing gradually until 2021. Since then, the cost of homes has increased dramatically.

MA-15 Figure 1: Change Over Time - House Value and Gross Rent



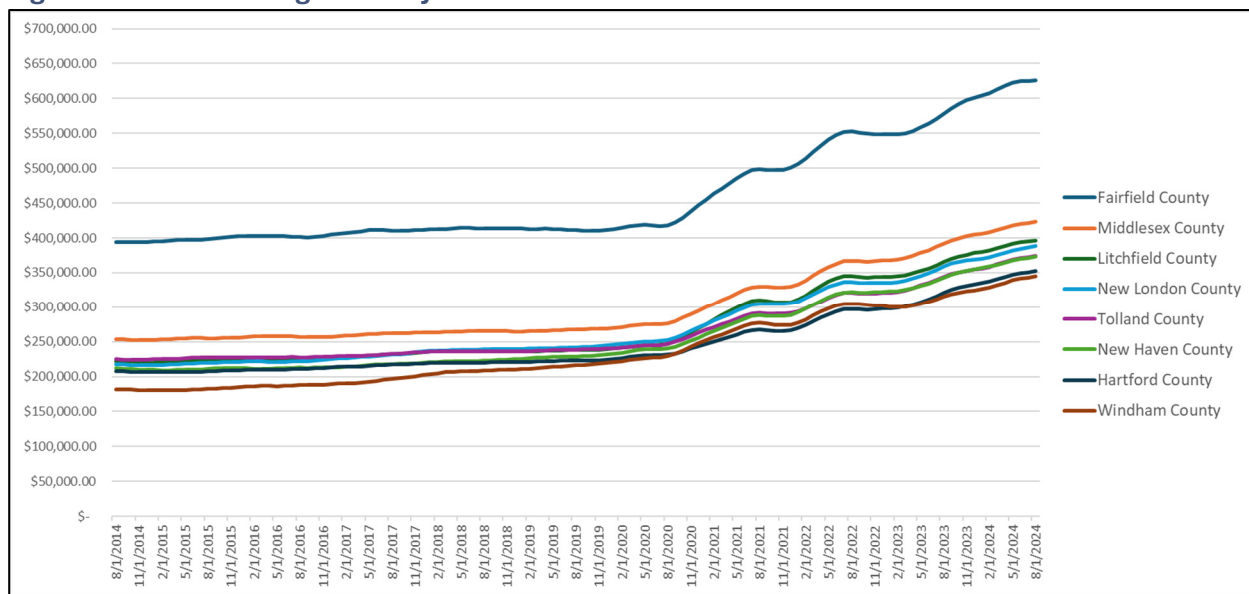
Data Source: 2010-2022 ACS5 - DP03, DP04

While the ACS data is only available until 2022, home sale data from Zillow and Redfin show ongoing price escalation of homes, a dramatic contraction in the inventory of homes for sale, and an increase in the pace of homes moved from listing to pending to closing. All these factors continue to put ongoing pressure on the housing market. A Zillow study from December 2024 ranked four Connecticut cities in the top 10 housing markets in the country in 2024: Stamford, Bridgeport, New Haven, and Waterbury.⁶

An analysis of median single-family home and condo prices through Zillow's Home Value Index shows that the price of a median home in CT increased 56.7% from January 2020 (prior to the pandemic) to August 2024. CT saw a higher price increase than Massachusetts or Rhode Island or the country as a whole. Prices increased in every county in Connecticut, ranging from a low of 51.9% in Fairfield County to a high of 64.8% in Litchfield County.

⁶ <https://zillow.mediaroom.com/2024-12-17-The-Northeast-is-home-to-Zillows-most-popular-market-for-the-second-year-running>

Figure 12 - Median Single-Family and Condo Prices 2014-2024



Data Source: Zillow Home Value Index

Similarly, rental prices have also seen dramatic increases. According to the ACS data, median gross rent has increased from \$982 in 2010 to \$1,374 in 2022, a 40% increase. When rent is tracked based on specific price categories, we see a dramatic reduction of the number of renters in apartments priced between \$500-\$1,000 per month, and a corresponding increase in rental costs of over \$1,500 per month. Affordable units priced under \$500 have been fairly stable; however, much of this represents the subsidized units in the state. Overall, housing affordability for renters has also been steadily declining. A similar review of Zillow's Observed Rent Index shows rent increases of 40-60% between January 2020 and August 2024, depending on the county.

County	% Increase, Jan 2020 – Aug 2024	County	% Increase, Jan 2020 – Aug 2024
Litchfield County	64.8%	Litchfield County	65.3%
New Haven County	60.3%	Tolland County	51.2%
New London County	58.1%	New London County	48.1%
Connecticut	56.7%	New Haven County	46.7%
Hartford County	56.6%	Middlesex County	41.6%
Middlesex County	56.5%	Hartford County	41.4%
Windham County	56.2%	Fairfield County	37.9%
Tolland County	55.4%	Windham County	29.1%*
Fairfield County	51.9%	Note: Windham County % Increase is based on available data from Jan. 2022 to Aug. 2024.	
United States	45.1%		
Massachusetts	45.8%		
Rhode Island	55.1%		

MA-15 Figure 2: Cost of Housing

Nominal Dollars	2010	2022	% Δ
Median Home Value	\$296,500	\$323,700	9%
Median Gross Rent	\$982	\$1,374	40%
2010 Dollars	2010	2022	% Δ
Median Home Value	\$296,500	\$239,085	-19%
Median Gross Rent	\$982	\$1,015	3%
2022 Dollars	2010	2022	% Δ
Median Home Value	\$401,461	\$323,700	-19%
Median Gross Rent	\$1,330	\$1,374	3%

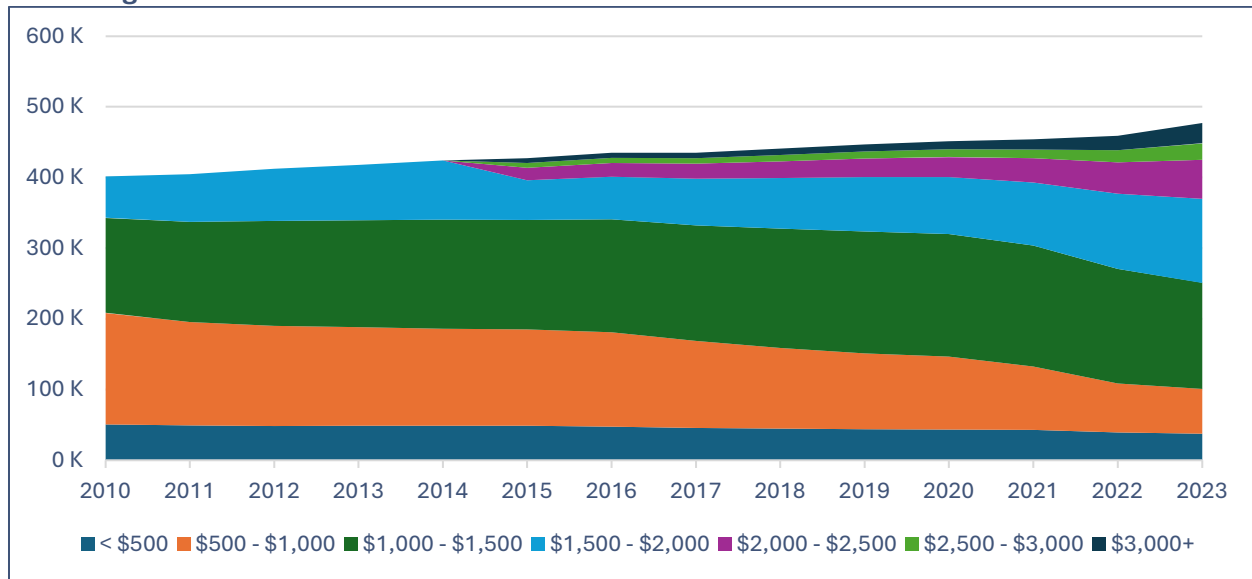
Data Source: 2018-2022 ACS - DP04

MA-15 Figure 3: Rent Paid

	#	%
Less than \$500	39,211	8.5%
\$500-999	69,334	15.1%
\$1,000-1,499	162,163	35.3%
\$1,500-1,999	106,201	23.1%
\$2,000 or more	81,955	17.9%
Total Renter Occupied Units	458,864	

Data Source: 2018-2022 ACS - DP04

MA-15 Figure 4: Rent Over Time



Data Source: 2010-2022 AC5 - DP02; 2023 ACS1 - DP02

MA-15 Figure 5: Number of Affordable Units by % HAMFI

Number of Units affordable to Households earning	Renter	Owner
30% HAMFI	53,130	No Data
50% HAMFI	156,420	52,140
80% HAMFI	303,185	162,100
100% HAMFI	No Data	269,420
Total	512,735	483,660

Data Source: 2016-2020 CHAS

MA-15 Figure 6: Monthly Fair Market Rent

	0 Br	1 BR	2 BR	3 BR	4 BR	5 BR	6 BR
Bridgeport, CT HUD Metro FMR Area							
L ow HOME Rent	\$1,027	\$1,101	\$1,321	\$1,526	\$1,702	\$1,878	\$2,054
High HOME Rent	\$1,316	\$1,411	\$1,696	\$1,950	\$2,156	\$2,361	\$2,565
Fair Market Rent	\$1,333	\$1,591	\$1,967	\$2,489	\$2,932	\$3,372	\$3,812
Danbury, CT HUD Metro FMR Area							
L ow HOME Rent	\$1,292	\$1,385	\$1,662	\$1,920	\$2,142	\$2,363	\$2,584
High HOME Rent	\$1,505	\$1,780	\$2,138	\$2,462	\$2,728	\$2,991	\$3,254
Fair Market Rent	\$1,505	\$1,825	\$2,221	\$2,838	\$2,997	\$3,447	\$3,896
Stamford-Norwalk, CT HUD Metro FMR Area							
L ow HOME Rent	\$1,580	\$1,692	\$2,031	\$2,346	\$2,617	\$2,888	\$3,158
High HOME Rent	\$1,724	\$1,848	\$2,219	\$2,556	\$2,831	\$3,106	\$3,380
Fair Market Rent	\$1,781	\$2,173	\$2,628	\$3,202	\$3,500	\$4,025	\$4,550
Hartford-West Hartford-East Hartford, CT HUD Metro FMR Area							
L ow HOME Rent	\$1,066	\$1,142	\$1,371	\$1,583	\$1,766	\$1,949	\$2,131
High HOME Rent	\$1,121	\$1,319	\$1,654	\$2,000	\$2,239	\$2,451	\$2,664
Fair Market Rent	\$1,121	\$1,319	\$1,654	\$2,000	\$2,425	\$2,789	\$3,153
Southern Middlesex County, CT HUD Metro FMR Area							
L ow HOME Rent	\$1,190	\$1,328	\$1,636	\$1,890	\$2,108	\$2,326	\$2,544
High HOME Rent	\$1,190	\$1,328	\$1,713	\$2,322	\$2,684	\$2,942	\$3,202
Fair Market Rent	\$1,190	\$1,328	\$1,713	\$2,322	\$2,907	\$3,343	\$3,779

	0 Br	1 BR	2 BR	3 BR	4 BR	5 BR	6 BR
Milford-Ansonia-Seymour, CT HUD Metro FMR Area							
L ow HOME Rent	\$1,141	\$1,222	\$1,466	\$1,694	\$1,890	\$2,085	\$2,280
High HOME Rent	\$1,194	\$1,499	\$1,762	\$2,130	\$2,400	\$2,629	\$2,859
Fair Market Rent	\$1,194	\$1,499	\$1,762	\$2,130	\$2,990	\$3,439	\$3,887
New Haven-Meriden, CT HUD Metro FMR Area							
L ow HOME Rent	\$1,016	\$1,088	\$1,306	\$1,509	\$1,683	\$1,858	\$2,031
High HOME Rent	\$1,251	\$1,374	\$1,676	\$1,928	\$2,131	\$2,333	\$2,535
Fair Market Rent	\$1,251	\$1,374	\$1,676	\$2,062	\$2,348	\$2,700	\$3,052
Waterbury, CT HUD Metro FMR Area							
L ow HOME Rent	\$961	\$1,075	\$1,291	\$1,491	\$1,663	\$1,836	\$2,007
High HOME Rent	\$961	\$1,155	\$1,418	\$1,829	\$2,105	\$2,304	\$2,503
Fair Market Rent	\$961	\$1,155	\$1,418	\$1,829	\$2,256	\$2,594	\$2,933
Norwich-New London, CT HUD Metro FMR Area							
L ow HOME Rent	\$1,003	\$1,075	\$1,291	\$1,491	\$1,663	\$1,836	\$2,007
High HOME Rent	\$1,055	\$1,263	\$1,556	\$1,905	\$2,105	\$2,304	\$2,503
Fair Market Rent	\$1,055	\$1,263	\$1,556	\$2,030	\$2,625	\$3,019	\$3,413
Colchester-Lebanon, CT HUD Metro FMR Area							
L ow HOME Rent	\$1,150	\$1,291	\$1,671	\$1,930	\$2,153	\$2,376	\$2,598
High HOME Rent	\$1,150	\$1,291	\$1,696	\$2,239	\$2,743	\$3,008	\$3,273
Fair Market Rent	\$1,150	\$1,291	\$1,696	\$2,239	\$2,856	\$3,284	\$3,713

	0 Br	1 BR	2 BR	3 BR	4 BR	5 BR	6 BR
Windham County, CT HUD Metro FMR Area							
L ow HOME Rent	\$1,003	\$1,075	\$1,291	\$1,491	\$1,663	\$1,836	\$2,007
High HOME Rent	\$1,186	\$1,194	\$1,569	\$1,905	\$2,105	\$2,304	\$2,503
Fair Market Rent	\$1,186	\$1,194	\$1,569	\$1,921	\$2,380	\$2,737	\$3,094
Litchfield County, CT							
L ow HOME Rent	\$1,003	\$1,075	\$1,291	\$1,491	\$1,663	\$1,836	\$2,007
High HOME Rent	\$1,006	\$1,160	\$1,484	\$1,819	\$2,024	\$2,304	\$2,503
Fair Market Rent	\$1,006	\$1,160	\$1,484	\$1,819	\$2,024	\$2,328	\$2,631

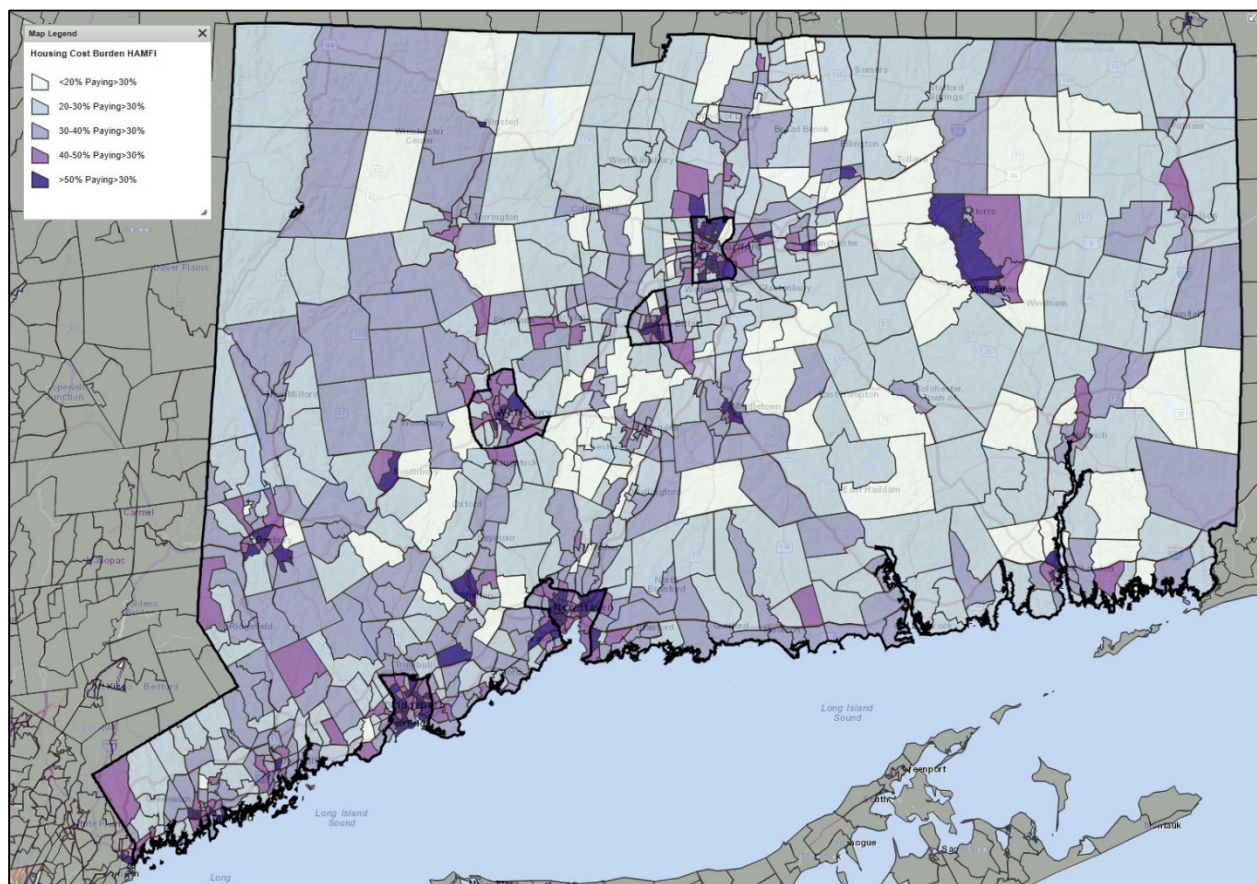
Data Source: 2025 HUD HOME Rents

Discussion

Is there sufficient housing for households at all income levels?

No. There is a significant shortage of safe, decent, affordable and accessible housing at all income levels in Connecticut. Affordable housing is defined as households that do not spend more than 30% of their income on housing, including utilities. In Connecticut, the Fair Market Rent (FMR) for an average two-bedroom apartment is \$1,796. In order to afford this level of rent and utilities, without paying more than 30% of income on housing, a household must earn \$5,986 monthly or \$71,837 annually. Assuming a 40-hour work week, 52 weeks per year, this level of income translates into an hourly Housing Wage of \$34.54. By comparison, the minimum wage in CT increased to \$16.35 as of January 1, 2025, roughly 47% of what is needed to comfortably afford a standard two-bedroom apartment in CT.

The map below shows the percentage of households in each Census Tract that have a housing cost burden. In several areas throughout the state, there are Census Tracts where over 40% of households or more than 50% of households are cost burdened. These areas are typically the urban cores of the state: Hartford, New Haven, Bridgeport, as well as Danbury, Waterbury, New London, and Willimantic.



The last five years have seen relatively steady numbers of new housing permits issued in Connecticut, hovering between about 5,500 and 6,500 each year, but housing experts say this is only a fraction of what's needed to meet the demand for housing in the state. The lack of houses available, inclusive of the slow pace of new construction by historical standards, puts significant

pressure on the real estate market. When those who can't find a home to buy have to stay in rental housing, it puts pressure on the rental market. And a lack of available rental units means that those who have the least are the most likely to get pushed out of their homes and into homelessness, in turn putting pressure on the shelter system.

Connecticut, like many other states in the country, has a shortage of “starter homes.” These are smaller, lower priced homes that help first-time homebuyer access homeownership. This means that first-time homebuyers who are looking for smaller and less expensive homes to buy are staying in the rental market longer.

Similarly, the state's aging population includes many older seniors who are living in houses that are much bigger than they can comfortably occupy. Seniors are staying in those houses longer which eliminates them from the market for new families, particularly because there is a lack of options for seniors to downsize or to move into smaller apartments.

Many multi-family construction projects are slowed or halted by what experts say are restrictive local zoning ordinances. These types of zoning ordinances have been a politically contentious issue for many years in Connecticut.

DOH's housing programs focus on creating housing options for all people including low- and moderate- income households, seniors, people with special needs, families and children, and the homeless in both rural and urban areas. The state is working toward ending chronic and family homelessness, providing opportunities for service-enhanced housing and has already eliminated chronic veteran homelessness.

How is affordability of housing likely to change considering changes to home values and/or rents?

After a rapid escalation of home prices and rental increases over the past 4 years, it is unlikely that prices will decrease in any meaningful way anytime soon unless there is another housing market crash. However, the economic conditions today are different from 2008, although high mortgage rates and the threat of a recession are worrisome. It does seem that home prices have peaked, and the inventory of homes to be purchased remains limited. In the current environment, more homeowners have solid credit, large amounts of home equity, and mortgage rates that are fixed rather than adjustable. This is stabilizing the prices and values of homes and keeping housing costs elevated.

There is insufficient new construction of market rate and subsidized units to offset the elevated housing costs. Even with the significant amounts of funds invested in the production of new units, the state does not have adequate resources to invest in deeply subsidized construction of new affordable housing units to the degree that it is needed.

To reiterate, there is a need for approximately 100,000 housing units for extremely low-income and very low-income households. There are 239k households that are cost burdened and another 216k households that are severely cost burdened, accounting for almost one-third of all households in the state. Extremely low-income renters are the most likely to have a severe housing cost burden, with approximately 87,445 households in this situation. Additionally, there are another 20,640 extremely low-income households that have a cost burden of 30-50% of AMI.

Looking at just this population, there are 108k extremely low-income households that struggle to survive. To produce 100,000 deeply subsidized low-cost rental units, with an average per unit

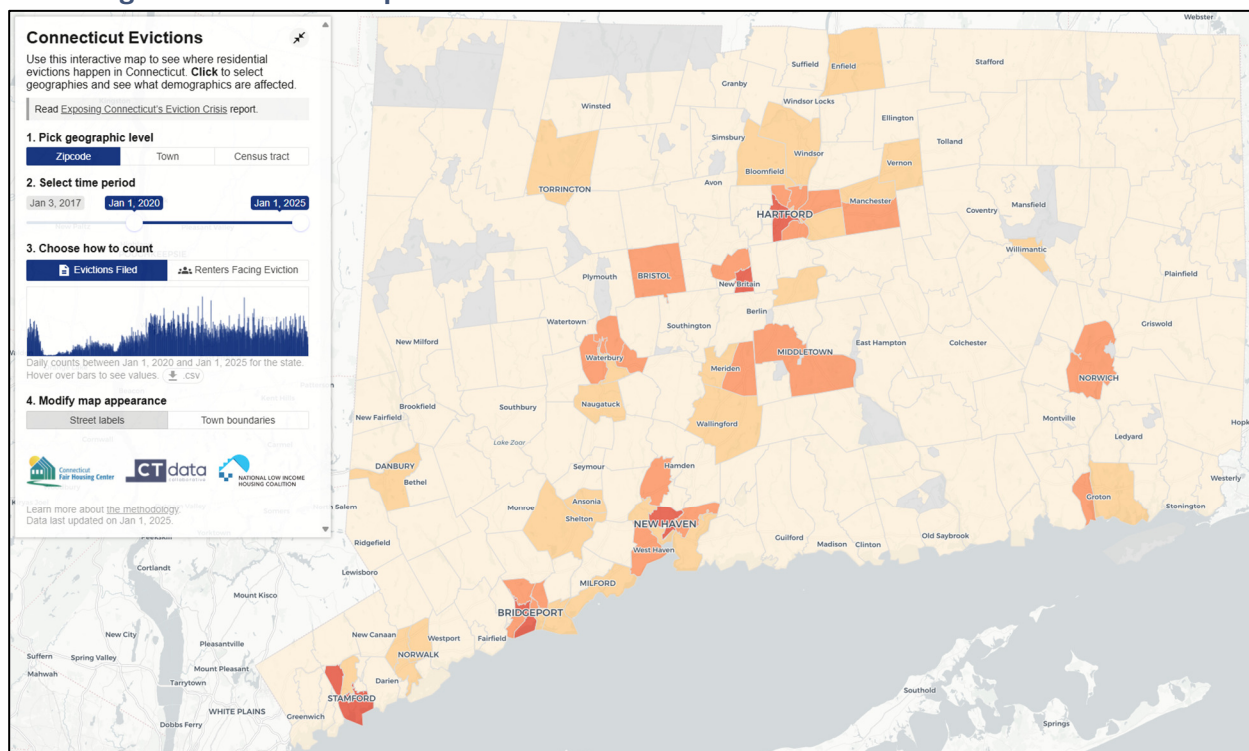
development cost of \$200,000, would cost \$20 billion. It is unreasonable to think this level of investment would ever be realized.

Over the course of the COVID-19 pandemic, the governor issued numerous executive orders impacting summary process procedure in the state. Among other things, these executive orders generally established an eviction moratorium that expired on June 30, 2021. An executive order issued on the same day established a modified eviction procedure that remained in effect through February 15, 2022. The legislature enacted two special acts extending this modified procedure through June 30, 2022.⁷

Aligned with these executive orders and legislation, the pace of evictions dramatically slowed during 2021 and the earlier part of 2022. As of early March 2022, there was a significant increase in evictions. On any given day during the 2024 calendar year, there were on average 56 evictions occurring. This is similar to 2023, but slightly lower than 2022.

As seen in the map below, evictions are primarily concentrated in the urban core cities of Hartford, New Haven, Bridgeport, Stamford, and to a lesser extent New Britain, New London, Waterbury, and Norwich. These, of course, are the locus of rental properties and the areas of the state where a disproportionate amount of racial and ethnic minorities live.

MA-15 Figure 7: Evictions Map



Data Source: <https://evictionmap.ctdata.org>

According to CT Data's Exposing Connecticut's Eviction Crisis Report, Black and Hispanic/Latino renters experienced the highest rate of eviction case filings across all years from 2017 to 2021. During this time, Black renters were over three times more likely than white renters to have an

⁷ <https://cga.ct.gov/2023/rpt/pdf/2023-R-0220.pdf>

eviction case filed against them, and Hispanic/Latino renters were over two times more likely than white renters.

Before the pandemic, eviction filing rates remained relatively consistent for all race and ethnicity categories. In 2020, the first year of the pandemic, all groups saw a 66-68% relative decrease in the rates of eviction cases filed against them due to the moratorium, before the rates started ticking back up in 2021.

How do HOME rents / Fair Market Rent compare to Area Median Rent? How might this impact your strategy to produce or preserve affordable housing?

In most communities throughout CT, the Area Median Rent is approximately the same amount as the Fair Market Rent and the High HOME Rent, with some limited variability. A significant exception is the New Haven-Meriden Metro Area. In this area of the state, Area Median Rents are higher than Fair Market Rents, signifying a challenge for Housing Choice Voucher holders. In our community meeting in New Haven, a substantial part of the discussion was on the challenges of finding a rental unit that would accept a housing choice voucher because the rents they can charge in the private market were higher than the payment standard for the housing authority. A similar albeit less extreme situation exists in the Norwich-New London Metro area as well. Correspondingly, the discussions with the community in New London highlighted the challenge of finding a unit in New London that was priced accordingly for holders of Housing Choice Vouchers.

In several communities, the High HOME Rents are lower, and in some cases substantially lower, than the Fair Market Rent and the Area Median Rent. In these areas, occupants of HOME Assisted units have a more affordable unit than what would be available normally in the community or what could be secured with a housing choice voucher. However, affordable housing developers may face challenges in making affordable housing projects financially viable if the rents they can charge based on HOME limits are significantly lower than market rents and don't bring in sufficient operating revenue for ongoing property maintenance and repairs. Often these types of projects are not possible without a deeper level of subsidy for them to be sustainable for the period of affordability, and any additional cost increases that occur during development risks the financial viability and sustainability of the project. This is the greatest challenge for affordable housing targeting incredibly low-income households, particularly the homeless, individuals with significant mental illness or developmental disabilities, or other households that are not able to receive enough income to pay more than just a nominal amount of rent.

Discussion

The primary takeaway from data research and analysis, community feedback, and the consultation process is that the state is in critically short supply of affordable housing. Home values and rental prices have grown considerably over the past several years since the housing market decline of the late 2000s and early 2010s. This escalation in housing costs came without a corresponding increase in income levels for most residents and households in the state. Household incomes for many families remain far below what the median or average owner or renter can afford.

High home sale prices and a lack of available inventory at all income levels have kept many entry-level buyers out of the market or forcing them to buy homes that create a housing cost burden for them. Housing affordability is still the major concern throughout the state. If a recession does materialize, households will once again experience an increase in unemployment, foreclosures, bankruptcy, and potential homelessness.

Furthermore, as the state's housing stock continues to age and deteriorate, housing costs rise due to ongoing maintenance costs. Federal funds can be leveraged to address housing deterioration and neighborhood revitalization concerns. The state must also pursue a strategy of preserving long-term affordable housing that already exists and supporting the production of new affordable housing units to increase the supply for low- to moderate-income families to help reduce housing cost burdens for all Connecticut households.

MA-20 Housing Market Analysis: Condition of Housing – 91.210(a)

Introduction

This section describes the significant characteristics of the existing housing supply, including age and condition, the number of vacant and abandoned units, and the risk posed by lead-based paint. Connecticut has a large inventory of older housing. Almost 55% of CT's existing housing stock was built before 1950, and 68% was built prior to 1980. Only about 11% of the total housing units have been built since 2000, excluding the recent new developments that are currently occurring in the state (discussed in **Section MA-10**). The city's housing stock is significantly aged, and the construction of new multi-family units has languished, only recently resuming after many years of stagnant new housing production. This can be problematic for statewide housing conditions; the oldest housing stock may not have the improvements and amenities expected in today's market. Nor will these units have been designed to accommodate the increasing accessibility needs for the growing senior population and others with mobility challenges or other disabilities.

This section describes the significant characteristics of the existing housing supply, including housing problems, age and condition, the number of vacant and abandoned units, and the risk posed by lead-based paint.

Describe the jurisdiction's definition of "standard condition" and "substandard condition but suitable for rehabilitation":

For this Consolidated Plan, the State of Connecticut uses the following definitions for this section:

- “Standard condition” – A housing unit that meets HUD Housing Quality Standards (HQS) and all applicable state and local building codes.
- “Substandard condition but suitable for rehabilitation” – A housing unit that contains one or more housing conditions as described in NA-10, contains a lead-based paint hazard, is potentially endangering the health and safety of the occupant, and/or is condemned as unfit for human habitation but is both structurally and financially feasible to rehabilitate.
- “Substandard condition not suitable for rehabilitation” – A housing unit that contains one or more housing conditions as described in NA-10, contains a lead-based paint hazard, is potentially endangering the health and safety of the occupant, and/or is condemned as unfit for human habitation and is not structurally or financially feasible to rehabilitate.

MA-20 Figure 1: Condition of Units

	Owner-Occupied		Renter-Occupied	
	#	%	#	%
With one selected Condition	241,399	25.9%	218,979	45.9%
With two selected Conditions	3,266	0.4%	12,875	2.7%
With three selected Conditions	482	0.1%	1,206	0.3%
With four selected Conditions	30	0.0%	11	0.0%
No selected Conditions	687,411	73.7%	244,148	51.2%
Total	932,588	100.0%	477,219	100.0%

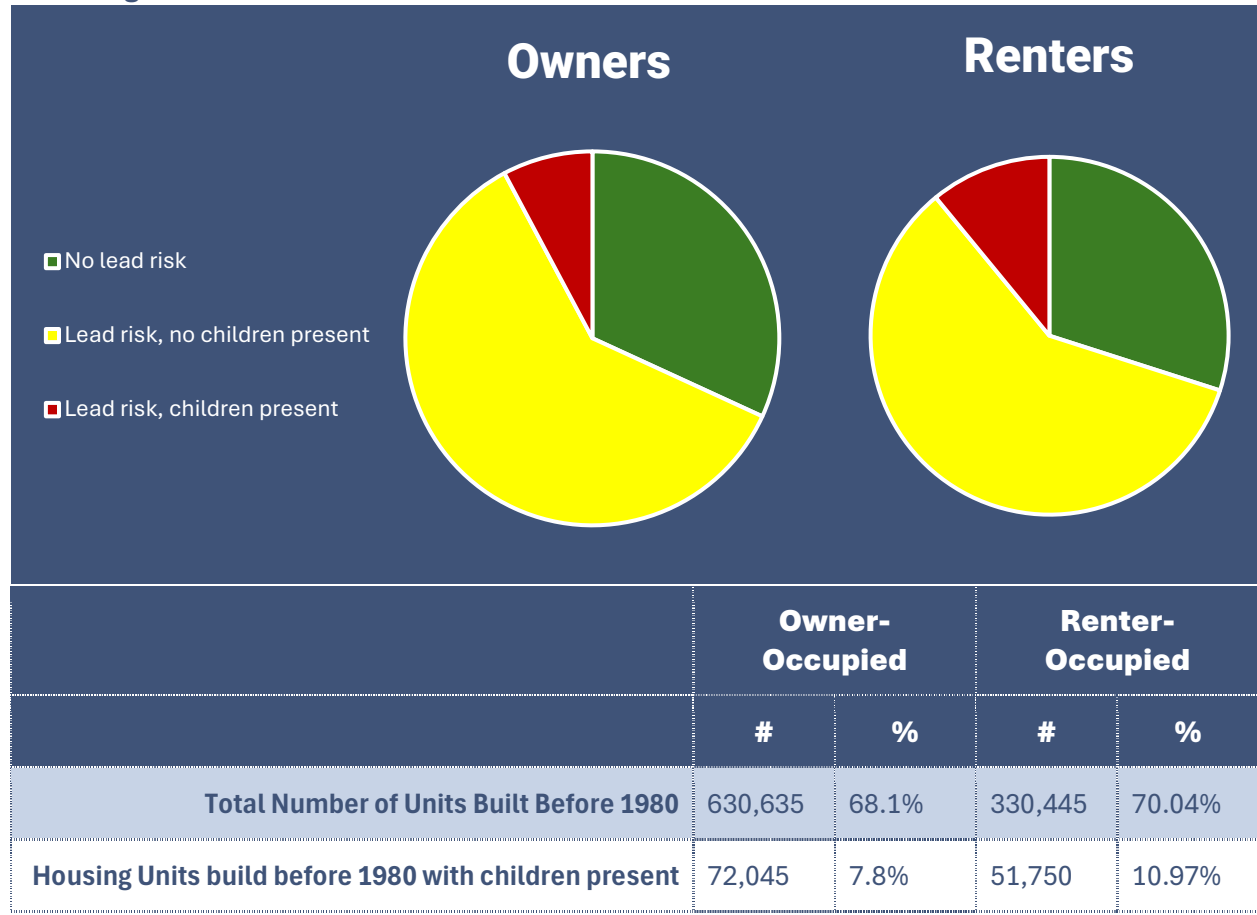
Data Source: 2018-2022 ACS - B25123

MA-20 Figure 2: Year Unit Built

	Owner-Occupied		Renter-Occupied		Total	
	#	%	#	%	#	%
2000 or later	99,962	10.7%	57,184	12.0%	157,146	11.1%
1980-1999	200,891	21.5%	92,054	19.3%	292,945	20.8%
1950-1979	412,003	44.2%	180,086	37.7%	592,089	42.0%
Before 1950	219,732	23.6%	147,895	31.0%	367,627	26.1%
Total	932,588	100.0%	477,219	100.0%	1,409,807	100.0%

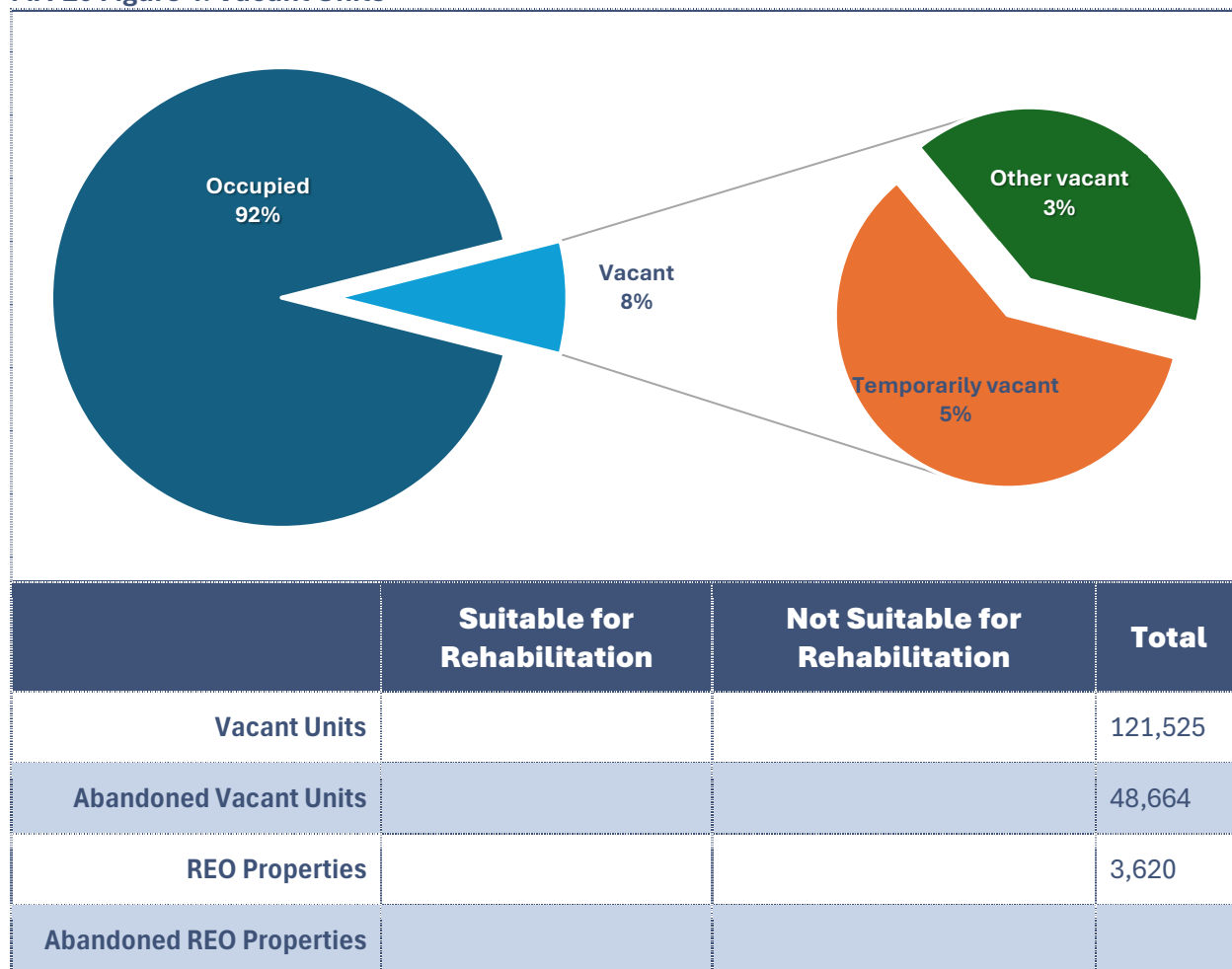
Data Source: 2018-2022 ACS - B25036

MA-20 Figure 3: Risk of Lead-Based Paint Hazard



Data Source: 2017-2021 CHAS - Table 13

MA-20 Figure 4: Vacant Units



Data Source: 2018-2022 ACS - B25002, B25004

Need for Owner and Rental Rehabilitation

Reviewing the information contained in the previous Needs Assessment, there are 6,415 renter households occupying substandard housing, and another 1,870 owner households occupying substandard housing. These are the most critical rehabilitation needs as this implies these households may not have functioning kitchens or bathrooms.

In addition to these critical needs, Connecticut's large inventory of older housing stock (units built before 1980) needs ongoing rehabilitation and home maintenance that is associated with the age of the home. There are 328k renter occupied homes built before 1980 and another 632k owner-occupied homes built before 1980. These units will need more frequent and possibly more expensive maintenance and repairs in the coming years. Most of the oldest renter-occupied units are in New Haven, Hartford, and Fairfield counties. Typically, the most significant home repair needs among homes of this age are roofing repairs and replacements, especially considering that roof repairs are not easily or practically deferred when the house could receive continued damage if not repaired. Additional repair needs include window replacement, and exterior siding or painting. There are also important repair needs for boilers, hot water heaters, HVAC system, etc. These types of repairs are universal for owner-occupied and rental housing. Unfortunately, the total

number of homes in need of repair is not available; however, it is likely in the hundreds of thousands.

Vacancy is another component that could indicate a home repair need. Census data shows that the overall vacancy rate is 7.9%, with 4.8% of units vacant for one of the following reasons:

- For rent.
- Rented, not occupied.
- For sale only.
- Sold, not occupied.
- For seasonal, recreational, or occasional use.
- For migrant workers.

For analysis, we group these as “temporarily vacant”. The census also shows us that 3.2% of properties in Connecticut are “other vacant”, which *may* indicate abandonment or disinvestment. We list these units in the table above as Abandoned Vacant Units.

The pace with which foreclosed homes are purchased is rapid and the total numbers of real estate owned property can change quickly. These estimates are as of December 2024. We see that there are approximately 3,620 real estate owned properties throughout all of Connecticut, representing a very small number of all property in the state. It is not known how many total units are included in this real estate owned property. We use the figure 3,620 in the table above but that is the minimum number of units possible.

Table 3 - Number of Foreclosed Homes in CT by County, December 2024

County	Real Estate Owned
New Haven County	1,008
Hartford County	978
Fairfield County	784
New London County	234
Litchfield County	193
Windham County	146
Middlesex County	143
Tolland County	134
Total	3,620

Data Source: Foreclosures.com

Estimated Number of Housing Units Occupied by Low or Moderate Income Families with LBP Hazards

Of all the conditions of housing affecting Connecticut residents, the most medically significant is that of deteriorated lead-based paint (peeling, chipping, chalking, cracking, or damaged paint) which is a hazard that needs immediate attention. Lead-based paint may also be a hazard when found on surfaces that children can chew or that get a lot of wear and tear, such as on windows and windowsills; doors and door frames; and stairs, railings, banisters, and porches. Lead-based paint is usually not a hazard if it is in good condition and if it is not on an impact or friction surface like a window.

Lead is especially dangerous to children under the age of 6. Children can easily ingest chipped lead-based paint and toxic dust particles through normal hand-to-mouth contact. Excess lead in a child's body is very harmful to both physical and mental development. Infants, toddlers, and preschool-age children are most susceptible to the toxic effects of lead poisoning because they absorb lead more readily than adults and have inherent vulnerability due to developing central nervous systems. Lead exposure, even at very low levels, can cause irreversible damage, including slowed growth and development, learning disabilities, behavioral problems, and neurological damage. Lead-based paint was banned for residential use in the United States in 1978 by the U.S. Consumer Product Safety Commission.

In the state of CT, approximately 68% of all owner-occupied housing units were built before 1980, and 69% of renter-occupied units were built before 1980 (note: 1980 is the closest year available for analysis due to the way federal data aggregates housing units by year built). Among these units, there are likely to be 72,045 homeownership units built before 1980 with children present and another 51,750 renter units.

In Connecticut, the most detailed statistics concerning the prevalence of lead-based paint hazards come from the Department of Public Health (DPH) Annual Disease Surveillance Report on Childhood Lead Poisoning Prevention and Control, which annually publishes the results from confirmed blood lead-level tests of children under age six by town. According to the most recently available data, there were 61,723 children under the age of 6 who were tested for lead in 2020. Among them, 1,024 (17 per 1,000) children were tested with elevated blood lead levels of ≥ 5 $\mu\text{g}/\text{dL}$, the CDC reference value. The prevalence rate (existing cases) did not significantly decrease from 2019 however it did statistically significantly decline from 2018 with a 23% reduction in the number of cases.

Of the 1,024 children tested with elevated blood lead levels, 649 (63.4%) were new cases. The incidence rate (new cases) of blood lead tests ≥ 5 $\mu\text{g}/\text{dL}$ did not significantly decrease from 2019 or 2018 however it did statistically significantly decline from 1.4% in 2017 to 1.1% 2020. The overall 5 year risk reduction was 42%.

The incidence rate of Non-Hispanic Blacks, Non-Hispanic Asians and Hispanics was 1.8%, 1.4%, and 1.5% as compared to 0.7% among Non-Hispanic Whites. This translates into significant elevated risks of by at least two-fold for all groups as compared to Non-Hispanic Whites.

Discussion

N/A

MA-25 Public and Assisted Housing – 91.210(b)

Introduction:

The Connecticut Department of Housing (DOH) is the state agency that works in partnership with HUD and with local municipal leaders, public agencies, community groups, local housing authorities, and other housing developers in the planning and development of affordable homeownership and rental housing units, the preservation of existing multi-family housing developments, community revitalization and financial and other support for Connecticut's most vulnerable residents through funding and technical support programs.

The Connecticut Housing Finance Authority (CHFA) is a quasi-public organization that works very closely with DOH, leveraging partnerships with public and private investors to expand affordable housing and homeownership in the state. Currently, CHFA lends more than \$500 million dollars each year to help alleviate the shortage of housing for low- to moderate-income families and persons in this state and, when appropriate, to promote or maintain the economic development of this state through employer-assisted housing efforts.⁸

The state of Connecticut has a significant supply of affordable and subsidized housing options for its residents and has recently produced a significant number of new affordable housing units through the coordination of these two entities, facilitated by significant funding from the state and federal government. According to the 2023 Affordable Housing Appeals List, there are a total of 175,548 assisted units throughout the state of CT, representing approximately 12.4% of the total number of housing units in the state.⁹

There are 107 Public Housing Authorities in Connecticut: 106 of them are local housing authorities throughout the State of Connecticut, and DOH serves as a statewide housing authority. Among these housing authorities, there are 45 entities that administer Housing Choice Vouchers. These include 43 local housing authorities, the City of Hartford and DOH. There are 32 local housing authorities that have federal public housing. While there used to be 44 local housing authorities that operated federal public housing, several converted their portfolios to Project Based Voucher programs. In total, there are 13,599 federally funded units of public housing supported by Annual Contribution Contracts. There are an additional 17,000 state-financed public housing units which are not supported at all by federal dollars but which still comprise an important element of the state's total affordable housing inventory.

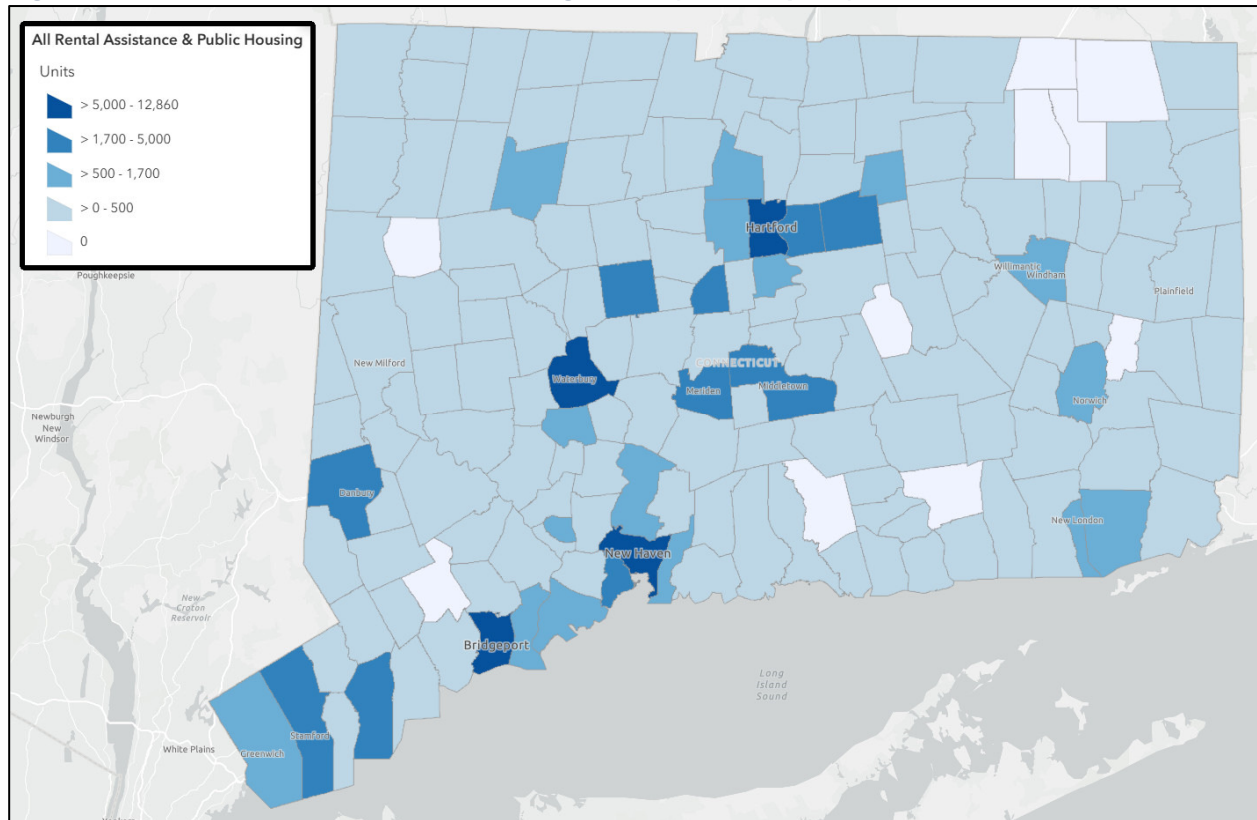
The total number of Housing Choice Vouchers that have been contracted with federally funded public housing authorities equals 46,262 as of June 30, 2024. The current reported leasing of these vouchers is 40,312 as of October 2024.

The range of affordable housing units within each of the state's 169 communities varies drastically, from less than 1% in certain communities to over 20% in Windham, New London, Groton, Middletown, Waterbury, and Bridgeport, over 30% in New Haven, and almost 40% in Hartford. In community meetings, there were several comments made regarding the disproportionate burden that certain communities bear with regard to the provision of affordable housing.

⁸ <https://www.chfa.org/about-us/>

⁹ <https://portal.ct.gov/doh/doh/programs/affordable-housing-appeals-listing>

Figure 13 - Affordable / Subsidized Housing Units by Municipality



Data Source: CT Housing Story Map

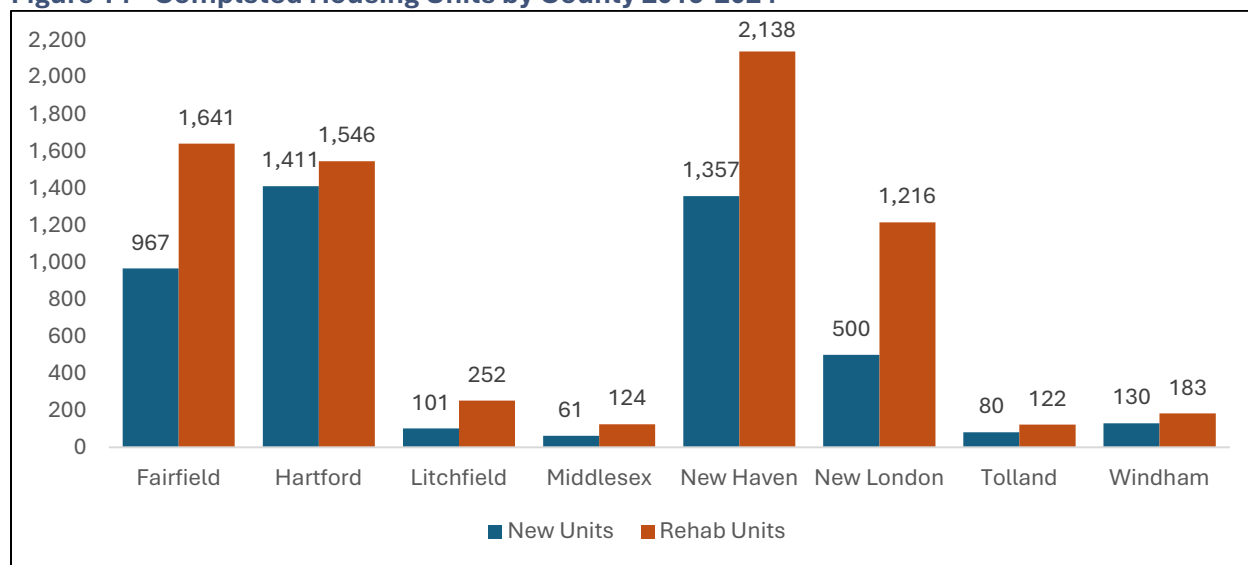
Since 2019, there have been 321 state-financed developments that were completed. These new construction and rehabilitation projects increased the supply of affordable housing by almost 4,900 housing units.

Table 4 - CT Affordable Housing Projects Completed by Year, 2019-2024

Year	# of Projects	New Units	Rehab Units	Total Units	DOH Investment	CHFA + Other Investment	Total Development Cost
2024	42	560	611	1,171	\$82,394,730	\$258,284,935	\$340,679,665
2023	41	538	1,444	1,982	\$97,169,304	\$402,679,344	\$499,848,648
2022	45	665	1,334	1,999	\$118,439,836	\$460,576,923	\$579,016,759
2021	51	738	1,311	2,049	\$112,569,995	\$430,322,444	\$542,892,439
2020	46	938	1,072	2,010	\$108,649,528	\$443,137,879	\$551,787,407
2019	55	1,168	1,450	2,618	\$135,380,504	\$465,390,067	\$600,770,571
Total	280	4,607	7,222	11,829	\$654,603,897	\$2,460,391,592	\$3,114,995,488

Data Source: CT Dept. of Housing

Figure 14 - Completed Housing Units by County 2019-2024



Data Source: CT Dept. of Housing

Additionally, there are 104 additional projects that are actively under construction or have received funding but are not yet under construction. These projects will produce an additional 6,397 units when completed, including 2,457 rehab units and 3,940 new units.

Even with the total amount of affordable housing available throughout the state and the significant expansion of new development, there is a great need for more development of every housing type, at every income level, to alleviate the cost burden crisis that exists in every part of the state. Estimates suggest that the state needs between 90,000 to 170,000 new or rehabilitated affordable housing units to meet the current demand, based on evaluations of household income and the current housing stock affordable to low-income families and households.

In conversation with housing developers, state agencies, nonprofit service providers, and community residents, the state needs every type of housing, in every community throughout the state. This includes transit-oriented housing near trains and bus lines, supportive housing for the developmentally disabled, senior housing for the rapidly growing senior population, workforce housing near employment centers, first-time homebuyer programs so people can afford to live where they work. The need for affordable housing expands into suburban and rural communities as well, as no community in the state is immune to the unsustainable escalation of housing costs.

The lack of housing production over the last several decades, and especially affordable housing, has coalesced with an increasing housing market, and demographic changes that prevent the efficient movement of households from one unit to another. With the lack of unit supply, new families are not able to purchase their starter home, older seniors are not able to downgrade from a larger home into a smaller rental unit, college graduates are not able to find housing near where they prefer to work.

There are several different programs and project types that comprise the entire portfolio of CT's affordable and subsidized housing, utilizing a myriad of funding streams for different population types at different income levels. These include the following.

HUD Public Housing, Housing Choice Vouchers (Section 8), and CT Rental Assistance Program

HUD's Office of Public and Indian Housing (PIH) operates numerous programs that assist with providing affordable housing and rental assistance. Some of the most commonly known include Housing Choice Vouchers (previously Section 8 Vouchers) and Public Housing. The majority of PIH programs are administered by local Public Housing Authorities (PHAs) which also includes a branch of the State Department of Housing (DOH) that operates as a statewide PHA. Key programs include:

- **Housing Choice Vouchers (HCV) / Section 8:** The HCV program provides rental assistance in the form of vouchers that allow recipients to find their own rental housing in the private market. Rather than limiting these households to subsidized housing projects, the aim of this program is to allow flexibility and choice in the location and type of housing appropriate for each family. However, the housing must meet certain requirements of the program and the landlord must agree to rent under the HCV program.
- **Project Based Vouchers (PBV) (also known as Project Based Section 8):** PBVs are different from tenant-based vouchers in that they are tied to a specific unit or group of units in a development. This ensures that affordable housing stock is preserved and available for the next household in need.
- **Public Housing:** Public Housing is rental housing that is owned by a Public Housing Authority (PHA). There are 32 Housing Authorities in CT that own federally-funded public housing developments.
- **Special Purpose Vouchers:** A type of HCV that target rental assistance resources to specific populations, including:
 - **Family Unification Program (FUP):** Targeted to assist child welfare involved families who lack adequate housing, to prevent the out-of-home placement of their child or children, or to facilitate family reunification.
 - **Non-Elderly Disabled (NED) Vouchers:** Targeted to assist non-elderly persons with disabilities or households with a member with disabilities, including persons leaving institutional care for community-based housing and services.
 - **Mainstream Vouchers:** Targeted to assist non-elderly persons with disabilities or households with a member with disabilities (similar to NED above).
 - **Veterans Affairs Supportive Housing (VASH):** The VASH program combines HCVs for homeless Veteran households with case management and clinical services provided by the U.S. Department of Veterans Affairs Medical Centers.
- **202 & 811 Project Rental Assistance Contracts (PRAC):** 202 & 811 PRAC programs provide housing and supportive services through a capital advance combined with a project rental assistance contract (or PRAC). The PRAC is a contract between the housing owners and HUD that requires units to be rented at affordable rates to low-income households for the term of the contract. Section 202 was created in 1959 to support housing for elderly or disabled people. In 1990, Section 811 PRAC was created solely for providing housing for the persons with disabilities.
- **State Rental Assistance Program (RAP):** The State Rental Assistance Program (RAP) is the major state-supported program for assisting very-low-income families to afford decent,

safe, and sanitary housing in the private market. Participants find their own housing and are free to choose any private rental housing that meets the requirements of the program and will accept vouchers. RAP operates similar to HUD's Housing Choice Voucher / Section 8 program.

- **Shelter Plus Care:** The Shelter Plus Care Program is a HUD-funded rental assistance program designed to provide housing and supportive services to people who are homeless and disabled. This may include "hard-to-serve" homeless persons with disabilities (and their families), such as those who are seriously mentally ill, have chronic problems with alcohol, drugs, or both, or have acquired immunodeficiency syndrome (AIDS) and related diseases. These are funded through the Continuum of Care annual application process.

Multi-Family Development

Numerous federal and state programs subsidize the development and maintenance of multi-family affordable housing developments. The following summarize key Multi-Family Housing Development Programs:

DOH Multifamily Portfolio

- **PRIME (Private Rental Investment Mortgage and Equity):** The PRIME program provides loans and grants to developers in exchange for guarantees of not less than 15 years that a share of housing units developed would be set aside for low-income residents. The subsidy covered the difference in a unit's rent, utility, and a portion of the tenant's income and was received by developers in exchange for an equity interest in the property.
- **Moderate Rental:** The Moderate Rental program provides low-interest loans and/or grants to developers and owners of low- and moderate-income rental housing.
- **Limited Equity Cooperative or Mutual Housing Program:** Limited Equity Cooperatives (LECs) are a unique form of homeownership where, unlike condominium units, homeowners purchase shares in a housing development rather than the unit itself with requirements upon resale. The Mutual Housing Program provides low-interest loans and/or grants to developers and owners of low- to moderate-income rental housing.

HUD Multifamily Portfolio

- **Loan Management Set Aside (LMSA):** The LMSA program assists multi-family rental housing projects that have HUD-insured and HUD-held mortgages that have immediate or potentially serious financial problems. LMSA provides Section 8 rental assistance to the project which makes it possible for the owner to receive higher unit rents, which helps improve financial stability. To qualify for the program, owners must demonstrate how LMSA assistance will enable them to address the financial problems that the project has been experiencing.
- **Preservation (Section 236):** HUD's Section 236 Preservation program preserves the affordability of rental housing units originally developed through the Section 236 mortgage program.
- **Below Market Interest Rate Mortgage and Insurance (BMIR):** The BMIR program is an insurance or interest rate reduction program that allows owners to get more cost-effective loans or FHA insurance on bank loans

- **202 & 811 for Elderly / Disabled:** The Section 202 & 811 programs provide capital to fund the development of units for the elderly and/or disabled. Section 202 was created in 1959 to support housing for elderly or disabled people. In 1990 Section 811, was authorized and fully began in 1992. The program was created solely for providing supportive housing for the elderly and those who are living with disabilities. The difference between these programs and the 202 & 811 PRAC programs is these programs only provide rental assistance.
- **Rural Housing Programs:** Under the Rural Housing program, the USDA makes direct loans to developers to finance affordable multifamily rental housing for very low-income, low-income, and moderate-income families, for elderly people, and for persons with disabilities in rural areas
- **RAD Public Housing Conversion:** RAD enables PHAs to enter into long-term contracts that facilitate the financing of improvements to public housing and other HUD-assisted housing by leveraging housing choice vouchers and Section 8 Project-Based Rental Assistance.
- **New Construction and Substantial Rehabilitation:** The New Construction and Substantial Rehabilitation Programs provide rental assistance in connection with the development of newly constructed or substantially rehabilitated privately owned rental housing financed with any type of construction or permanent financing.
- **HOME Investment Partnerships:** Block grant which provides funding to states and local jurisdictions to implement affordable housing activities that benefit low- and moderate-income households. Several Entitlement Communities throughout the state receive these funds as well as DOH.
- **National Housing Trust Fund (HTF):** Funds to provide affordable housing for extremely low-income and very low-income households. Designed to increase and preserve the supply of rental housing, as well as support homeownership opportunities for those who face the greatest barriers in securing adequate housing.

CHFA Programs

The Connecticut Housing Finance Authority (CHFA) is a quasi-public organization that leverages partnerships with public and private investors to facilitate affordable housing development. The following programs fall under the responsibility of CHFA but can often be financed in partnership with DOH.

Low Income Housing Tax Credit (LIHTC)

The Federal LIHTC program provides financing for the construction, rehabilitation, and preservation of affordable housing for lower-income households. The Program leverages private investment by providing a tax credit in the form of a dollar-for-dollar reduction in federal taxes owed on other income in accordance with the Internal Revenue Code. While the Program stems from the federal government, the CHFA maintains purview over the allocation of Connecticut's share of the federal housing tax credits.

CHFA Multi-family (MF) Housing Development Programs

- **HUD Section 8:** CHFA MF program helps subsidize development of housing utilized by HUD Section 8 participants (details about the HUD HCV/Section 8 program are provided above)

- **State Rental Assistance Program (RAP):** The CHFA MF program funded rehabilitation work on units primarily utilized by RAP recipients (details about the RAP program are provided above)
- **All Other CHFA MF Programs:** All Other CHFA MF Programs were grouped together for display purposes on the map below. Other CHFA MF programs include 80/20 Bond, CO-OP or Mutual Housing, Group Homes, HUD Program (Non-Sect 8), Market Rate Conversion, Restrictive Covenants, Supportive Housing, and SURP.
- **State Housing Tax Credit Contribution (HTCC):** The State HTCC program operates similar to the Federal LIHTC program but focuses on assisting nonprofit developers build affordable housing in Connecticut.

CHFA Mortgage / Homeownership Programs

- **CHFA First Mortgage Loans:** CHFA's first-time homebuyer program helps borrowers save on insurance costs and access CHFA's below-market interest rate home mortgages.
- **CHFA Downpayment Loans:** CHFA's downpayment loan programs are available to qualifying borrowers to help finance down payments on CHFA home mortgage loans. The downpayment loans maintain the same low interest rate as the primary home mortgage loan financed through CHFA.
- **CHFA 203K or Other Home Repair Loans:** CHFA 203K or Other Home Repair Loans Programs provide first-time homebuyers with below-market interest rate loans that cover costs of purchasing and making full or limited home renovations.

Other CT Funded Housing Development Programs

Connecticut is one of four states in the nation that uses its own resources to support affordable housing including housing development and provision of subsidized housing. Following is a list of key Connecticut funded housing programs:

- **State Financed Congregate Housing:** The State Financed Congregate Housing program provides grants, interim loans, permanent loans, deferred loans or any combination thereof for the development of congregate housing for frail elderly persons. Additionally, subject to available appropriations, the Commissioner may provide financial assistance to offset the cost of congregate services in state-financed congregate housing for frail elderly persons. Congregate services include one main meal a day, housekeeping services, and a 24-hour emergency service to enable semi-independent living in a residential setting
- **Affordable Housing Program (also known as FLEX):** The FLEX program provides grants, loans, loan guarantees, deferred loans or any combination thereof for the development and preservation of affordable housing; FLEX has contributed to the capital stack of most project-based affordable developments in Connecticut since 2001
- **CT Supportive Housing Demonstration Program:** The Supportive Housing Demonstration Program provides decent, safe, and affordable permanent community-based housing targeted to vulnerable very low-income households with serious and long-term disabilities that is linked with an array of voluntary and flexible services to support successful tenancies

- **CT Elderly Housing Program:** The Elderly Rental Assistance Program provided rental assistance to low-income elderly persons residing in state-assisted rental housing for the elderly
- **Housing for the Homeless:** Housing for the Homeless programs and services help individuals and families that are homeless or at risk of homelessness.

CT Renters' Rebate Program

Connecticut reimburses renters who are elderly or totally disabled, and whose incomes do not exceed certain limits. The Renters' Rebate program is an entitlement program in Connecticut, with over 30,000 recipients in 2020.

MA-25 Figure 2: Total Number of Units by Program Type

	Certificate	Mod-Rehab	Public Housing	Total	Project-based	Tenant-based	Vouchers		
							Special Purpose Voucher		
							Veterans Affairs Supportive Housing	Family Unification Program	Disabled *
# of units vouchers available			1,087	686			0	0	662
# of accessible units									

Data Source: PIC (PIH Information Center)

Describe the number and physical condition of public housing units in the jurisdiction, including those that are participating in an approved Public Housing Agency Plan:

In Connecticut, there are approximately 30,600 public housing units. Of that number 13,600 are federal housing units, those units supported by Annual Contribution Contracts, and 17,000 are state-financed housing units, which are not supported at all by federal dollars. Connecticut is one of only four states in the country with state-financed public housing. Connecticut's first state-financed units were occupied in 1948, and these public housing units are among the oldest in the state. Additionally, there are 50 housing authorities throughout CT that receive federal funding. The state-financed public housing units are managed primarily by local housing authorities and do not receive any federal support for maintenance or rehabilitation.

Since 2019, HUD has been working on developing and implementing a new physical inspection protocol for all of its housing programs, switching from the Uniform Physical Conditions Standard (UPCS) to a new methodology called NSPIRE, the National Standards for the Physical Inspection of Real Estate.¹⁰ Among the reasons for the change are the following:

- **Increase Focus on Health and Safety:** The UPCS system had been criticized for not adequately prioritizing health and safety issues. The NSPIRE system addresses this by emphasizing defects that directly impact residents' well-being.

¹⁰ National Standards for the Physical Inspection of Real Estate and Associated Protocols, Scoring Notice: <https://www.federalregister.gov/documents/2023/07/07/2023-14362/national-standards-for-the-physical-inspection-of-real-estate-and-associated-protocols-scoring>

- **Simplification and Clarity:** The UPCS scoring system was complex and often difficult to interpret and understand. NSPIRE simplifies the scoring process, making it easier for housing agencies to understand and address deficiencies.
- **Consistency Across Programs:** NSPIRE aims to align inspection standards across various HUD programs to ensure a consistent approach in the evaluation of housing conditions regardless of the program.
- **Improved Maintenance Practices:** NSPIRE also encourages year-round maintenance rather than periodic fixes, promoting better long-term property management.

As of October 2023, NSPIRE inspections have been fully implemented for most HUD programs, with some exceptions delayed until 2024 or 2025.¹¹ The initial data from HUD that was collected during the NSPIRE pilot period inspections indicate that the new system is much more effective at identifying and addressing significant deficiencies within the units that were inspected using the new methodology. As the new standards are fully implemented, there will be a transition period during which properties that were inspected using the UPCS method will be reinspected using the new NSPIRE methodology based on reinspection requirements.

The below table compiles all available data from the U.S. Department of Housing and Urban Development related to the inspection scores of all federally funded public housing in the state. The current physical inspection data for the federal public housing properties in Connecticut include the former UPCS scores and the NSPIRE scores for those properties that have been inspected using the new methodology. In both cases, UPCS and NSPIRE, a score less than 60 represents that the project fails to meet the minimum requirements of the HUD program.

According to the UPCS methodology, about half of the federal public housing in CT is of high quality, scoring above 80 points. About 20% of the federal public housing scored between 70 to 79 points indicating there were several areas of concern and will be inspected annually. Another 12% scored between 60 and 70 points indicating it is at risk of failure, and approximately 19% of the federal public housing scored less than 60, indicating they are failing projects in immediate need for rehabilitation.

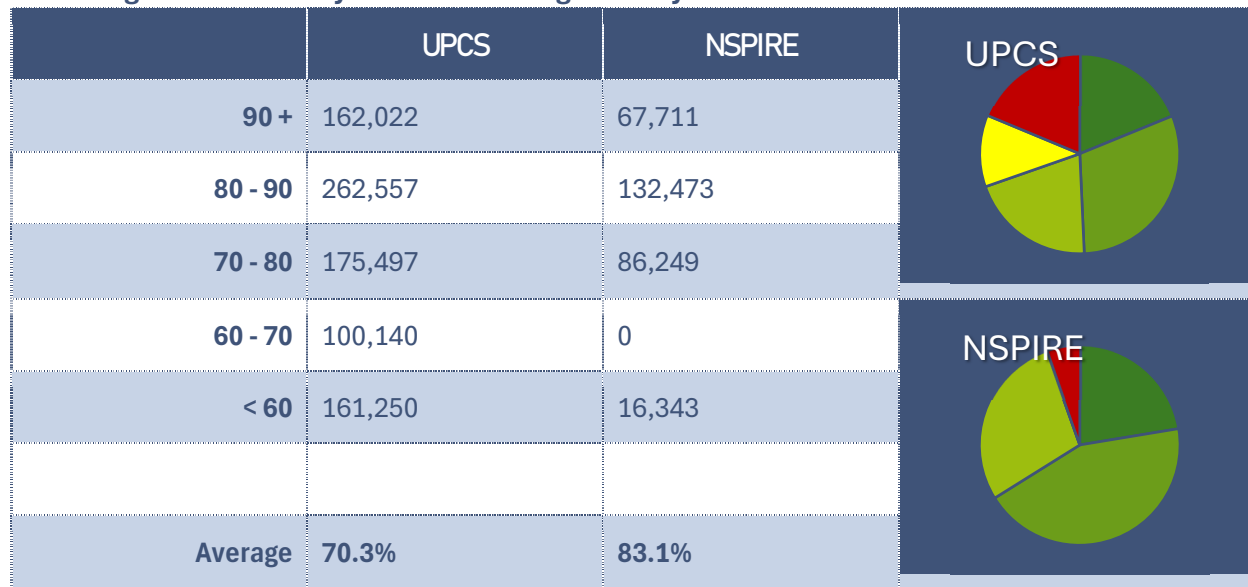
Among the limited number of projects that have been inspected using the NSPIRE methodology, only 5% of the federal public housing developments are assessed as failing. Note, properties that score under 60 are required to perform additional follow up and may be referred to HUD for administrative review under current regulations. Further, there are developments that were inspected using UPCS and were reinspected using NSPIRE which skew the data. As an example, the Cambridge Park development was inspected in 2022 using the UPCS and scored a 46c, indicating that the property was in significant need of rehabilitation. On April 5, 2024, the development was reinspected using NSPIRE and scored a 76. The UPCS data below does not reflect this improvement.

Through consultations with public housing agencies, there is a dramatic need for additional maintenance funding to ensure that properties are well-maintained. Due to the nature of public housing, with many very low-income residents and tenants, the overall operating revenue generated from rental income is typically insufficient to finance the ongoing maintenance needs of the properties. Regular and increased federal subsidies are required to ensure that all properties

¹¹ NSPIRE Official Notices and Proposed Rules:
https://www.hud.gov/program_offices/public_indian_housing/reac/nspire/notices

are maintained at a high level for residents and to ensure there are funds available to perform rehabilitation and modification necessary to meet the ongoing accommodation needs of residents.

MA-25 Figure 3: Summary - Public Housing Units by Score



Data Source: HUD – REAC

MA-25 Figure 4: Public Housing Condition - Inspection Scores

	# Units	UPCS		NSPIRE	
		Date	Score	Date	Score
P.T. BARNUM APTS.	360	4/6/22	41c*	6/5/24	79
CHARLES F. GREENE HOMES	270	4/13/22	45c	3/14/24	85
FIRESIDE APTS. EXT 2	272	4/4/22	71c*		
HARBOR VIEW TOWERS	240	3/2/22	78a		
TRUMBULL GARDENS TOWNHOUSES	414	4/12/22	37c*	6/3/24	76
MAPLEWOOD SCHOOL MIXED FINANCE	8	9/7/22	91c		
MASTER CONTRACT - CREATIVE CHOICE	233	3/28/22	74c*		
BOSTON COMMONS	309	1/19/22	65c*		
Park City - Elderly	35	3/22/22	97b		

		UPCS		NSPIRE	
	# Units	Date	Score	Date	Score
Park City - Supportive	24	4/7/22	85c		
Presidential Village	19	4/5/22	46c	3/21/24	86
Albion Street	35	4/11/22	77b		
716-720 Pembroke Street	2	4/5/22	68b		
Windward One	5	2/28/23	96b		
SAMUEL ROODNER COURT	218	6/2/22	78b		
SENIOR COURT	60	6/8/22	84b		
IRVING FREESE	100	5/17/22	80c		
20 WEST AVENUE	103	6/30/22	89b		
MEADOW GARDENS	146	6/3/22	87b		
KING KENNEDY HOMES	90	6/15/22	73c*		
Soundview Landing Phase 1	40	3/25/22	97a		
Soundview Landing Phase 2	21	3/23/22	98a		
Soundview Landing Phase 3	28	3/25/22	97b		
NELTON COURT	62	9/20/22	43c*		
PERCIVAL C. SMITH TOWERS	479	10/6/22	73c	2/27/24	87
HARTFORD SCATTERED SITE I	168	8/8/22	63c		
New Communities/Mary Shephard Place	242	9/13/22	56c*	4/10/24	86
WESTVILLE MANOR	89	8/3/22	44c*	4/2/24	59
Crawford Manor	109	9/23/22	60c*		
ROBERT T. WOLFE APARTMENT	93	8/22/22	47c	3/5/24	73

		UPCS		NSPIRE	
	# Units	Date	Score	Date	Score
Quinnipiac Terrace Phase I	58	8/5/22	84c		
Quinnipiac Terrace Phase II	56	3/21/22	83c*		
Quinnipiac Terrace Phase III	17	6/13/22	82c		
ESSEX TOWNHOUSES	35	4/12/22	60c*		
ST. ANTHONY II	96	9/8/22	34c*		
SCATTERED SITES-II	23	7/20/22	64c*		
SCATTERED SITES - III	52	9/29/22	46c*	4/9/24	75
WT Rowe	46	6/27/22	86b		
Brookside Phase I	50	2/3/22	99a*		
Brookside Phase II	50	1/27/22	99a*		
Rockview Phase 1 Rental	30	1/6/22	98a		
Val Macri	17	6/13/22	73c*		
MOUNT PLEASANT	188	9/7/22	33c*	4/17/24	59
OVAL GROVE APARTMENTS	160	9/8/22	32c		
Elderly and Bond Street	455	10/5/22	68c		
BERKELEY HEIGHTS	254	9/3/19	92b		
AUSTIN RD & S END TURNKY	161	8/28/19	91b		
TRUMAN APTS	244	9/4/19	88b		
Franklin D. Roosevelt Apartments	48	9/4/19	99a		
William Kelly Apartments	30	9/4/19	98b		
STAMFORD MANOR	215	8/29/22	84c		

		UPCS		NSPIRE	
	# Units	Date	Score	Date	Score
URSULA PARK TOWNHOUSES	32	8/5/22	86b		
Taylor Street	6	3/24/22	93b		
Post House	10	6/3/22	99a		
Palmer Square	9	6/3/22	90c		
Greenfield	4	6/3/22	81c		
Park 215	5	6/3/22	92c		
SBONA TOWERS	247	12/20/22	89b		
JOHN J. ASHTON TOWER	250	6/10/22	41c*	4/23/24	90
COMMUNITY TOWERS	221	10/14/22	46c	3/12/24	91
HOCKANUM PARK	311	9/9/22	80c		
MEADOW HILL APARTMENTS	306	8/4/22	84b		
RIVERSIDE APARTMENTS	108	1/24/23	87b		
OAKWOOD KNOLL	177	6/9/22	98b*		
WILBUR PECK COURT	110	10/14/22	76b*	2/12/24	88
QUARRY KNOLL	50	11/29/22	84b		
AGNES MORLEY HEIGHTS	150	10/20/22	82b		
SCATTERED SITES	3	2/28/20	67c		
LAUREL GARDENS	80	2/28/20	62c		
WOOSTER MANOR	152	2/21/20	58c	3/7/24	87
EDEN DRIVE	81	2/26/20	66c*		
Crosby Manor	50	4/11/18	96b*		

		UPCS		NSPIRE	
	# Units	Date	Score	Date	Score
Beckerle and Forest Ave	2	3/15/19	95b		
3 Eighth Av	3	6/21/22	93b		
Williams Park	99	11/28/22	73c		
CAMBRIDGE PARK	206	6/7/22	46c*	4/5/24	76
BONNIE ACRES	140	6/22/22	89c		
GAYLORD TOWER	200	4/29/22	82c	6/4/24	92
HAMPSHIRE HEIGHTS	124	6/9/22	87c*		
CHESTNUT GROVE APTS	80	5/6/22	87b		
Greenwoods Garden	26	5/6/22	93b		
MAYFAIR GARDENS	92	9/7/22	65c		
WESTHILL GARDENS ANNEX	203	9/8/22	55c		
HEARTHSTONE APARTMENTS	101	1/10/18	97c*		
RAYMOND E. BALDWIN	200	1/26/18	93c		
COURT TOWERS	145	1/9/23	63c*		
Franklin Park East	40	9/30/22	91b		
Windermere Court	40	10/21/22	96b		
MORRISSEY MANOR	159	6/7/22	85b		
SPRING HEIGHTS	99	6/6/22	87c*		
Alan Jepson Manor	44	6/21/19	78c*		
Catherine McKeen Village	50	8/20/18	94c		
Foran Towers	43	7/12/19	70c		

		UPCS		NSPIRE	
	# Units	Date	Score	Date	Score
Island View Park	110	7/9/19	86c*		
DeMaio Gardens	65	7/5/19	84c		
Family Scattered Sites	18	7/5/19	62c*		
TORRINGTON TOWERS	200	10/13/22	41c	1/4/24	97
MICHAEL R. KOURY TERRACE	100	10/28/22	62c	1/3/24	98
Laurel Acres	56	4/25/23	89b		
Thompson Heights	35	10/17/22	82c		
Willow Gardens	39	10/27/22	85b		
CHESTNUT HILL / OAK GROVE TERRACE APTS	76	6/17/22	76b		
REV ALBERT A. CALLAHAN	80	9/21/22	96b		
Norman Ray House	40	11/28/22	98b		
CHATHAM COURT	48	6/8/22	84c*		
WELLES VILLAGE	199	6/8/22	50c*		
GEORGE B. LEWIS II	104	12/21/22	96b		
Lewis Circle Apartments	32	9/22/22	90c		
SCATTERED SITE	15	8/10/22	65c		
Scattered Site II	1	6/8/22	71a		
SCATTERED SITES	11	7/11/22	92c		

Data Source: HUD – REAC

Describe the restoration and revitalization needs of public housing units in the jurisdiction:

The rehabilitation needs of these state and federal public housing units are similar to other developments of similar size and age in the state. Many of the large-scale developments need ongoing maintenance and rehabilitation related to new doors, window replacements, roof

replacements, HVAC components, common area maintenance, hallway flooring and carpeting, and repaving of driveways and parking lots. This is in addition to any specific ADA room modifications or rehabilitation needs when the rooms are vacated by tenants and rehabilitated prior to a new tenant moving in. It has been determined that the most immediate threat to the state's public housing units, mostly due to the age of the stock and its level of deferred maintenance, is its preservation.

Describe the public housing agency's strategy for improving the living environment of low- and moderate-income families residing in public housing:

DOH focuses on two specific strategies.

- **Preservation:** the state will identify opportunities for the potential loss of public housing units due to expiring contracts or owner choice to preserve existing public housing, and work with those owners and prospective developers/investors to leverage a variety of resources targeted at the preservation of these units so they are not lost from the total affordable housing inventory for the state.
- **Replacement:** The state will identify opportunities for the potential replacement of public housing units due to obsolescence or other environmental concerns, and work with the owners and prospective developers/investors to leverage a variety of resources targeted at the replacement of these units so they are not lost from the total affordable housing inventory for the state.

Discussion

Importantly, different housing programs and/or vouchers may be stacked and braided together to subsidize the same unit or to subsidize different units within the same development. One of the primary challenges with funding affordable housing developments is the time it takes to assemble the different funding to complete the capital stack for the full development cost. Notably, LISC Connecticut and the Partnership for Strong Communities, with support from the Connecticut Project, created a comprehensive list of state and federal resources available for housing development in Connecticut, particularly affordable housing.¹²

To address the housing needs of residents of public housing through preservation of existing housing units, the creation of replacement units and additional rent subsidies, the state anticipates accomplishing the following:

- Preserve or replace state or federally assisted housing units annually by working with current owners and prospective developers/purchasers of these projects to retain them in service to low-income households over the long-term with a focus on projects nearing the end of their current mortgage service periods and those in need of capital reinvestment to provide quality rental housing through a new extended use period.
- Invest in the maintenance/rehabilitation/modernization of existing publicly-assisted rental housing units annually to preserve them as a long-term resource.
- Encourage local public housing authorities and DOH to respond to all notices of funding availability from HUD.

¹² <https://pschousing.org/affordable-housing-development-resources/>

- Increase the supply of state and federal Housing Choice Vouchers.

The state is also working with HUD on efforts to provide support services in addition to rental certificates when working with our special needs populations.

MA-30 Homeless Facilities and Services – 91.210(c)

Introduction

The homelessness response system in Connecticut is organized through a regionalized and comprehensive Coordinated Entry System called the Coordinated Access Network (CAN). Through a review of the homelessness population and where they primarily access services, the state has been organized into seven distinct CAN regions to assist with outreach, identification, screening, and enrollment into services for the state's homeless population. This regional approach has been coupled with the use of CT's 2-1-1 call center to implement a uniform access, assessment, prioritization, and referral processes to determine the most appropriate response to each individual's and family's immediate housing needs.

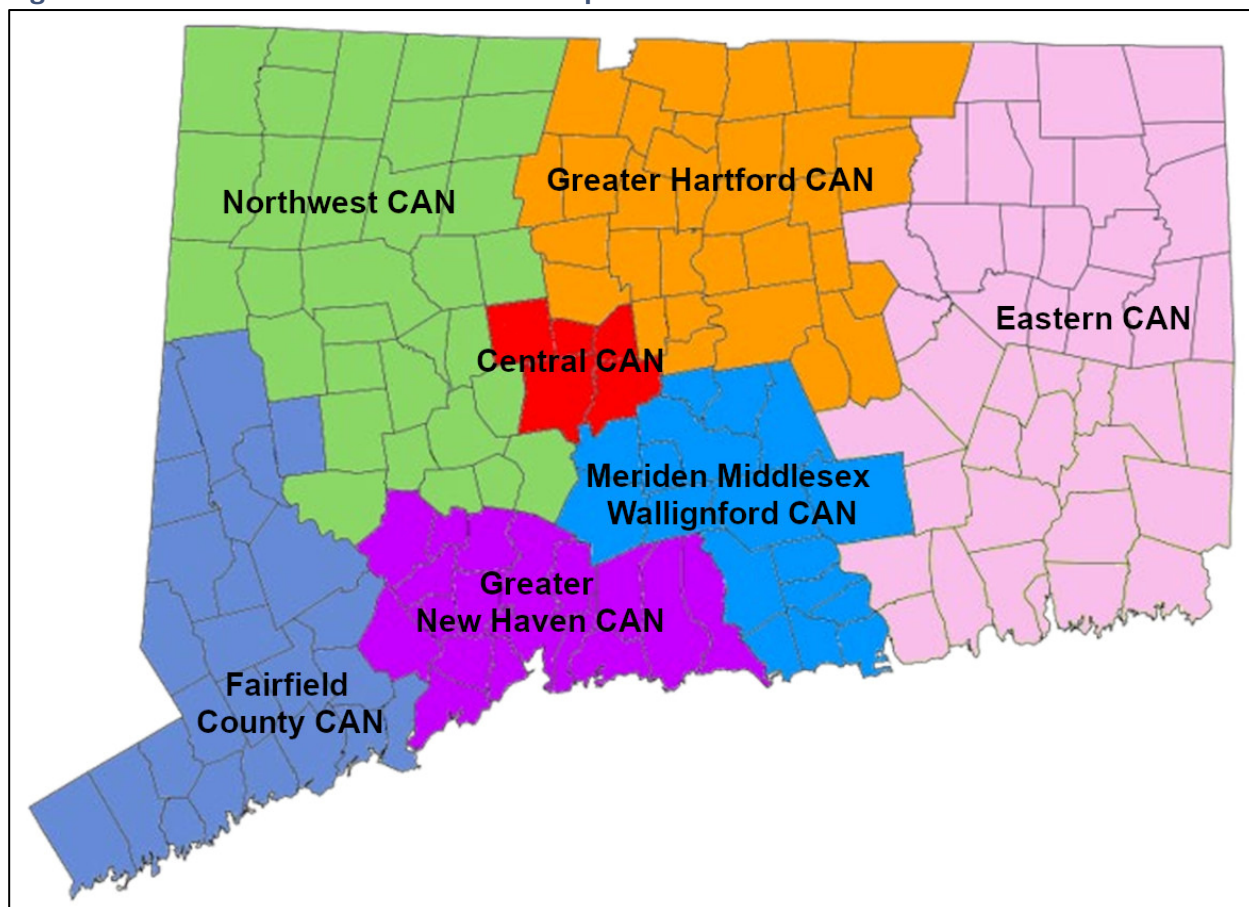
All projects receiving CoC, ESG or State of CT funding in Connecticut, including Street Outreach, Emergency Shelter, Transitional Housing, Rapid Re-housing, and Permanent Supportive Housing, must participate in coordinated access. Privately funded homeless projects are encouraged to participate. This includes using the CANs common assessment/intake forms, following the CANs agreed upon referral process, and everything else as appropriate. The seven CAN regions appear in the map below and include the following.

- Central CT CAN
- Eastern CT CAN
- Fairfield County CAN
- Greater Hartford CAN
- Greater New Haven CAN
- Meriden, Middlesex, Wallingford CAN
- Northwest CAN

Six of the seven CAN regions are part of the Balance of State CoC. The Fairfield County CAN is part of the Opening Doors Fairfield County CoC.

Importantly, most emergency shelter beds are located in the large urban cores of the state. There is a need for emergency shelters in these communities because of the population density; however, the lack of emergency shelters and homelessness services in other areas of the state draws people from the broader region into key, service-rich locations, creating concentrations of need in specific urban areas. As an example, 93% of the shelter beds for Hartford County, a county with a population of approximately 900,000 people, are located in the city of Hartford, a city with a population of about 121,000.

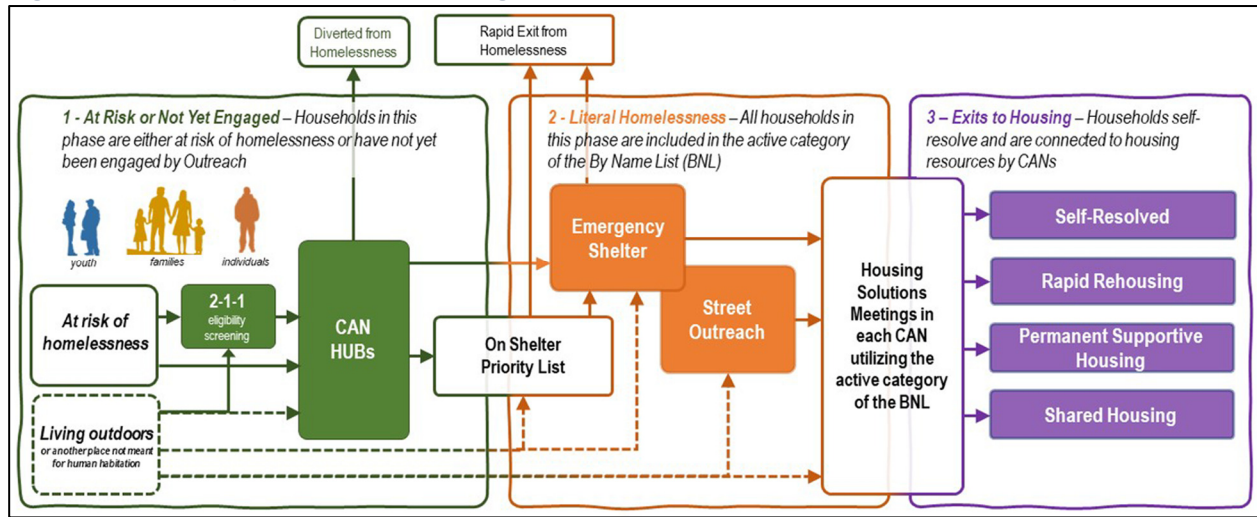
Figure 15 - Coordinated Access Network Map



Through competitive procurement, DOH awards shelters funding for families and individuals. As needs are identified in the communities, DOH examines its current financial capability to determine if there is financial and program support for new shelters. In addition to ESG funded shelters, DOH also funds an additional 30+ shelters utilizing state and federal funds. The figure below provides an overview of the CAN system.

CT CAN policies apply to Street Outreach (SO), Emergency Shelter (ES), Transitional Housing (TH), and Rapid Rehousing (RRH), and Permanent Supportive Housing (PSH) programs funded with HUD's CoC, State DOH and DMHAS funds, and ESG Funds in the CT BOS CoC and ODFC CoC jurisdictions. The aim is to set statewide standards but allow for CAN level or sub-CoC level customization and tailoring to local circumstances.

Figure 16 - CAN System Overview Diagram



MA-30 Figure 1: Facilities and Housing Targeted to Homeless Individuals

	Emergency Shelter Beds		Transitional Housing Beds	Permanent Supportive Housing Beds	
	Year Round Beds (Current & New)	Voucher / Seasonal / Overflow Beds	Current & New	Current & New	Under Development
Households with Adult(s) and Child(ren)	861	18	164	2,398	
Households with Only Adults	1,170	113	258	5,245	
Chronically Homeless Households				1,594	
Veterans	95		115	1,449	
Unaccompanied Youth	10		0	78	

Data Source: 2024 HIC

Describe mainstream services, such as health, mental health, and employment services to the extent those services are used to complement services targeted to homeless persons

Housing stabilization case managers with the CT Rapid Re-Housing Program provide housing as well as housing support services to assisting families who are homeless/leaving emergency shelters to achieve housing stability. Households will be helped to find placement/rental assistance as needed with up to 12 months of in-home housing stabilization case management.

ESG funds/state funds/other federal funds, through a competitive procurement process, award agencies and shelters funding for the housing relocation, stabilization services and in-home case management. These agencies often receive referrals for services and financial assistance through their local Coordinated Access Network.

Core services include the following: intake, needs assessment and case management services; educational and vocational services; health/mental health services; shelter and housing assistance; substance abuse counseling; rapid re-housing; transportation/provision of bus tokens; outreach; and workshops on life skills, budgeting, parenting, skills, nutrition, etc. Other related services provided by certain service providers include health care, consumable supplies, food and meal services, employment assistance, client support and childcare.

The Connecticut Housing Engagement and Support Services (CHESS) Initiative is a new program that combines Medicaid health coverage with a range of housing services for residents struggling with homelessness and chronic health issues. CHESS is a program administered by the Department of Social Services that provides supportive housing benefits funded through Medicaid. CHESS is aimed at managing the difficulties that are often part of homelessness, including access to health care and handling chronic health issues, with the overall goal of promoting health and well-being by coordinating targeted healthcare with housing. CHESS pools the efforts of state agencies and non-profit partners to bring coordinated healthcare and housing services to individuals with mental health, substance use and other serious health conditions. The CHESS benefit is embedded in the Coordinated Access Network and housing subsidy programs administered by the Department of Housing (DOH); supportive housing programs administered by the Department of Mental Health and Addiction Services (DMHAS); and the 'Money Follows the Person' program administered by the Department of Social Services (DSS, administering agency for Medicaid). Unfortunately, housing subsidies are not covered under Medicaid and must be provided through DOH. The level of need for housing subsidies is significant.

There is a network of 94 Community Health Centers (CHC) located throughout the state of CT. These CHCs provide a series of health and mental health services to all individuals regardless of income and are accessible by the homeless population. Some of these services include:¹³

- Pediatric/Well Child Care; Immunizations
- Internal Medicine/Geriatric Services
- Obstetrics/Prenatal & Perinatal Services
- Gynecology/Family Planning
- Emergency & Preventive Dental Services
- Diagnostic Laboratory & Radiology Services
- Screening for:

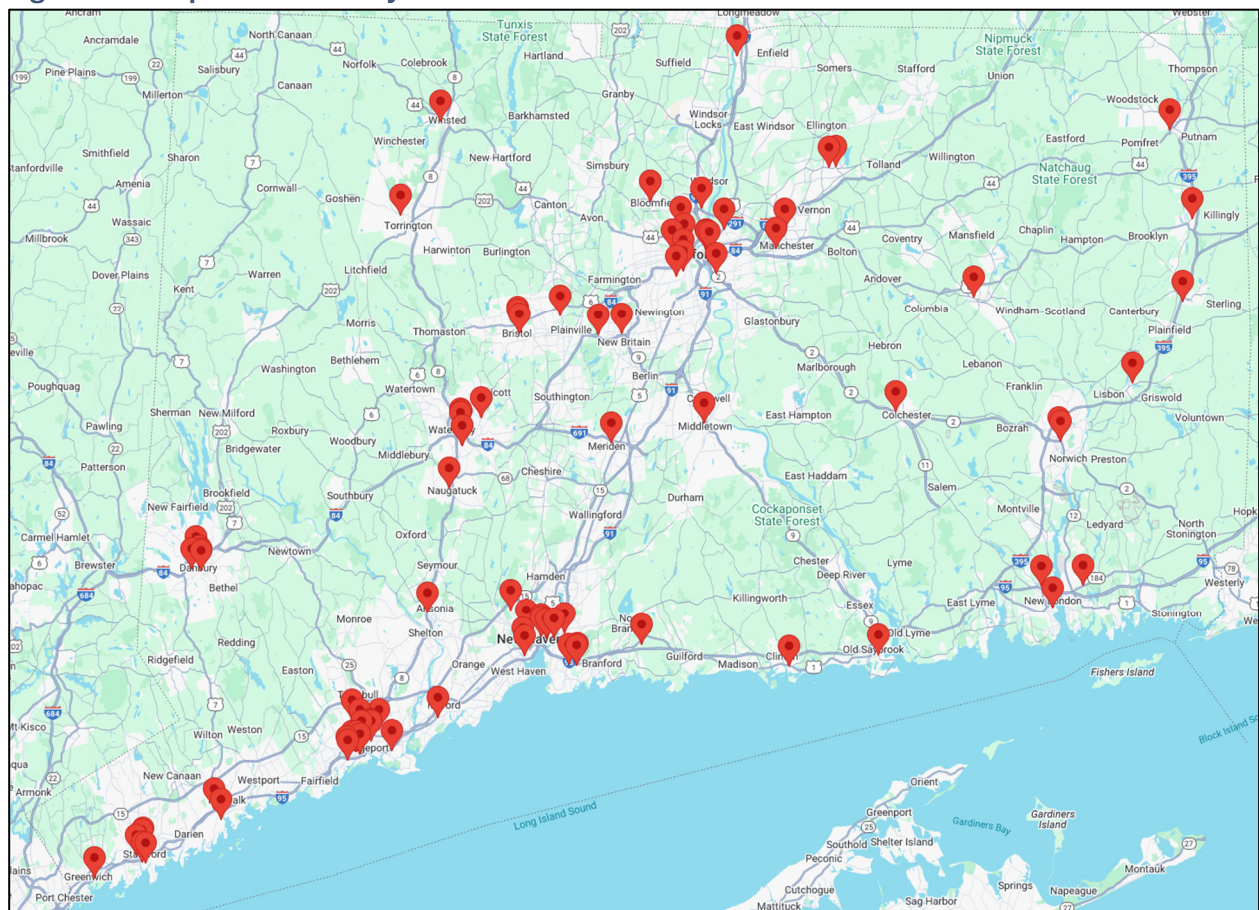
¹³ Required Primary Health Services

<https://portal.ct.gov/dph/family-health/community-health-centers/community-health-center-programs--services>

- Elevated blood lead levels
- Communicable disease & cholesterol
- Hypertension
- Social Services/Case Management
- Patient Education & Outreach
- Patient Transportation
- Interpretive Services
- Medicaid Eligibility Services
- Substance Abuse & Mental Health Services**

**Programs receiving funding to serve homeless individuals and families also must provide substance abuse services. Substance abuse services include treatment for alcohol and/or drug abuse and may use a variety of treatment modalities such as: non-hospital and social detoxification, non-hospital residential treatment and case management and counseling support in the community. While these service requirements are specific to programs receiving funding for this special population, all health centers are encouraged to ensure access to these services for all their patients.

Figure 17 - Map of Community Health Centers



Data Source: Community Health Center Association of Connecticut

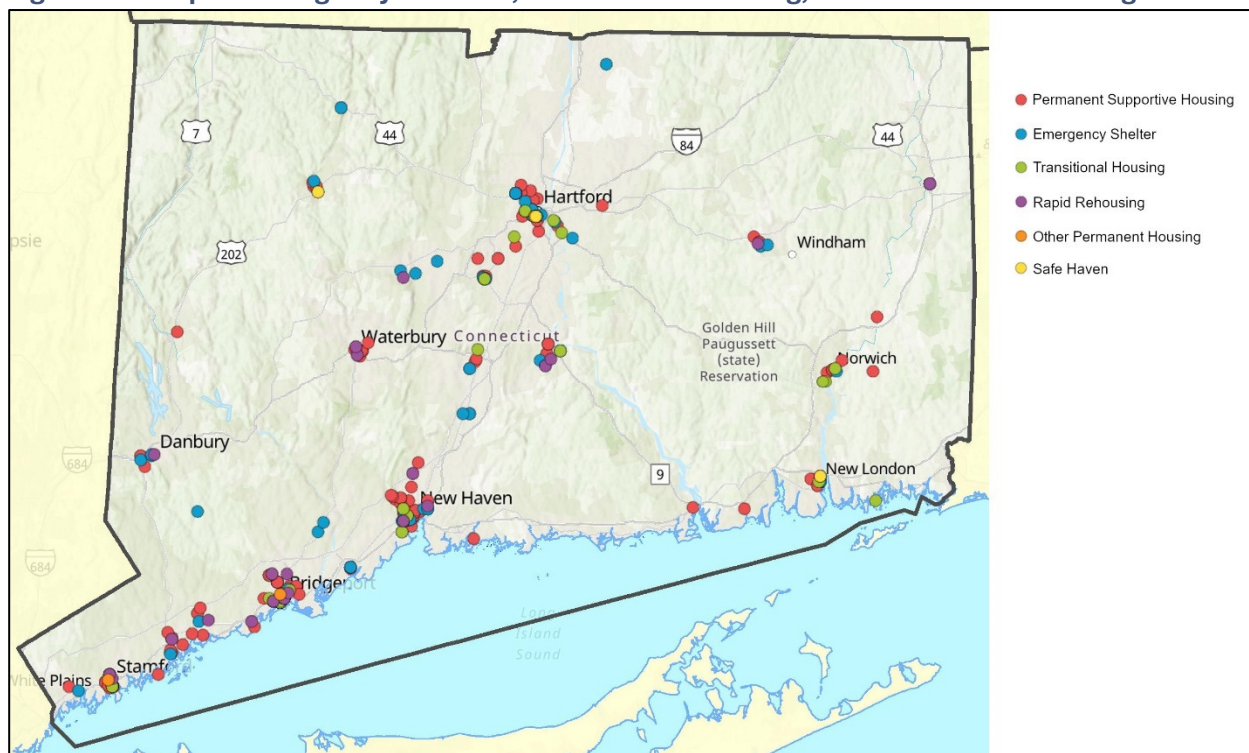
Recognizing the importance of earned income for the homeless population in permanent supportive housing, many homeless services agencies offer or refer to other programs for pre-employment services, adult education, GED preparation, vocational service programs, financial literacy programs, job search and placement, career counseling, and resume preparation.

List and describe services and facilities that meet the needs of homeless persons, particularly chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth. If the services and facilities are listed on screen SP-40 Institutional Delivery Structure or screen MA-35 Special Needs Facilities and Services, describe how these facilities and services specifically address the needs of these populations.

Throughout the state of CT, there is an extensive network of homelessness service providers, shelters, and housing options for individuals and families who are currently homeless or at risk of homelessness. However, while the existing system has been effective at reducing homelessness in previous years, it is experiencing significant capacity strain due to the increase in homelessness over the past several years. Pandemic-related funding was made available which allowed the homelessness response system to increase its capacity for the short-term. These supplemental funding streams have since expired, but the levels of homelessness are still increasing throughout the state due to the dramatic increase in the costs of housing and the limited production of new affordable housing units.

The most critical need for the homeless is stable and affordable housing, with wraparound support services to help individuals and families navigate the unique circumstances that have led them into homelessness. The map below shows the locations of emergency shelters, transitional housing, and permanent housing throughout CT. According to the 2024 Housing Inventory Count available from HUD, there are 519 federally funded shelters and various housing types for homeless individuals and families with a total of 13,801, of which 131 are seasonal beds.

Figure 18 - Map of Emergency Shelters, Transitional Housing, and Permanent Housing



Data Source: HUD 2024 Housing Inventory Count

Anyone in CT that is homeless or at risk of homelessness can access services by calling CT's 2-1-1 system. The system is comprised of 4,100 agencies throughout CT, providing a wide variety of programs and services. As homeless individuals are enrolled into services, specific providers of services often access this comprehensive dataset for information related to programs and services needed based on the unique circumstances of the homeless individual or family.

Clients will attain alternative housing and/or access to social and/or treatment services. Alternative housing includes, but is not limited to, transitional housing, residential treatment programs, supportive and permanent housing. Social services include but are not limited to domestic violence abuse counseling, family counseling, educational and employment and financial counseling, childcare, security deposit and rental assistance programs. Treatment services include, but are not limited to, residential, outpatient mental health, substance abuse treatment, and medical treatment.

In a very general sense, it is not the availability of programs and services that is an issue, but the lack of affordable housing units to accommodate those that have fallen into homelessness. Individuals and families are not able to quickly move out of the shelter system because of the ongoing lack of affordable housing available for extremely low-income households. This creates a bottleneck with the shelter system, extending average stays in shelter, and preventing additional households from quickly accessing the shelter system.

Projects for Assistance in Transition from Homelessness (PATH) is a federally funded program of the CT Department of Mental Health and Addiction Services (DMHAS). Using funding through the Substance Abuse and Mental Health Services Administration (SAMHSA), PATH programs provide outreach and engagement into services to persons who are homeless or at risk of homelessness

and have serious mental health needs or who have mental health needs with a co-occurring substance use disorder.

CT's SSI/SSDI Outreach, Access, and Recovery (SOAR) Initiative is led by the State Department of Mental Health and Addiction Services (DMHAS). SOAR is a model used to complete the SSI/SSDI application to assist clients in gaining access to the disability income benefit programs administered by the Social Security Administration (SSA). The SOAR model is used for eligible adults who are experiencing homelessness or who are at risk of experiencing homelessness and have a mental illness and/or a co-occurring substance use disorder.

For youth, DOH provides funding for the youth transitional living program for the provision of multi-family or single room residency living arrangement. A variety of support services are provided to these individuals during their stay in the program. Stays can range from a period of six months to two years. The goal is to have these youth gain self-sufficiency and permanent housing.

Housing options for offenders coming out of incarceration continues to be one of the more significant challenges for the Department of Correction, and their continued participation in the Interagency Committee on supportive Housing and Homelessness continues to provide opportunities to address this challenge such as contracts with some of the shelters to provide beds for persons being released from prisons as well as for the provision of case management services; and for rental subsidies and wrap-around services they may need in order to become self-sufficient.

The Connecticut Coalition Against Domestic Violence shelters almost 2,000 persons per year through their Safe Home Service. Safe home or emergency shelter services are provided to female, male, and child victims in serious physical danger who have no other safe housing options

In an effort to address homelessness at CT Rail and FasTrak stations, the Connecticut Department of Transportation (DOT) has partnered with DMHAS and the Department of Emergency Services and Public Protection (DESPP) to provide an outreach program to engage, support and connect people who may be unstably housed, or who may have challenges with mental health or substance use, to community resources. Connecticut Harm Reduction Alliance (CTHRA) outreach workers will be available to transit stations in the evening hours, between 10PM and 1AM. These outreach workers will assist individuals with getting into shelter or onto the shelter waitlist; making housing plans; seeking treatment for mental health or substance use issues, and linking people to other services as needed.

MA-35 Special Needs Facilities and Services – 91.210(d)

Introduction

Creating decent housing, a suitable living environment, and economic opportunities for low- and moderate-income persons with special needs is a major goal for Connecticut. Connecticut will achieve this goal by improving coordination of the efforts of state agencies and quasi-public entities involved in the development of affordable housing and the provision of social services to persons with special needs. These special needs populations include the elderly and frail elderly; persons with disabilities (mental, physical, developmental); persons with alcohol or other drug addictions; persons with HIV/AIDS and their families; public housing residents; and victims of domestic violence.

DOH's focus is primarily facilitating the development of housing. Connecticut supports and promotes the coordination of multi-agency resources and inter-agency cooperation that will lead to providing permanent housing, employment and support services, and rental subsidies to meet the needs of everyone by providing appropriate services to ensure long-term housing stability and independence. Often, the coordination of wraparound services tied to housing assistance, either through the development or preservation of deeply subsidized units, or the provision of rental subsidies, is needed to truly provide the support that special needs populations require.

MA-35 Figure 1: HOPWA Assistance Baseline

Type of HOPWA Assistance	Number of Units Designated or Available for People with HIV/AIDS and their families
TBRA	20
PH in facilities	199
STRMU	0
ST or TH facilities	10
PH placement	0

Data Source: HOPWA CAPER and HOPWA Beneficiary Verification Worksheet

To the extent information is available, describe the facilities and services that assist persons who are not homeless but who require supportive housing, and programs for ensuring that persons returning from mental and physical health institutions receive appropriate supportive housing

According to the 2024 Housing Inventory Count, there are 297 federally funded Permanent Supportive Housing programs, providing 8,070 supportive housing beds. Among these, 1,183 are for single Veteran households, and another 289 are for Veteran families with children. Another 1,130 are for chronically homeless adults. Funding providing to the state of CT through both Continuums of Care provide 2,566 permanent supportive housing beds made available to Special Populations, including those living with HIV, Youth at risk of homelessness, domestic violence survivors, and individuals with severe mental illness.

Connecticut will continue to support the Homeless Prevention Rapid Re-Housing Program services to identify and address housing and supportive service needs of special needs populations in the

state. The goal is to identify the reoccurrence of homelessness and provide support to reduce reoccurrence and quickly transition those experiencing homelessness into permanent housing.

Housing stabilization case managers with the CT Rapid Re-housing Program will be utilized to provide housing as well as housing support services that will help to reduce the reoccurrence of homelessness by assisting families who are homeless/leaving emergency shelters to achieve housing stability. Households will be helped to find placement/rental assistance as needed with up to 12 months of in-home housing stabilization case management. ESG funds/state funds/other federal funds, through a competitive procurement process, award agencies and shelters funding for the housing relocation, stabilization services and in-home case management.

These agencies often receive referrals for services and financial assistance through their local Coordinated Access Network. Core services include the following: intake, needs assessment and case management services; educational and vocational services; health/mental health services; shelter and housing assistance; substance abuse counseling; rapid re-housing; transportation/provision of bus tokens; outreach; and workshops on life skills, budgeting, parenting, skills, nutrition, etc. Other related services provided by certain service providers include health care, consumable supplies, food and meal services, employment assistance, client support and childcare.

Most HOPWA dollars received by the state are allocated directly from HUD to agencies serving the Eligible Metropolitan Statistical Areas of Bridgeport, Hartford, New Haven and their surrounding areas. DOH receives a small amount of Balance of State dollars. DOH anticipates conducting a competitive procurement process for HOPWA services to ensure statewide coverage for the balance of state catchment area: Windham County, New London County, Middlesex County and Litchfield County.

Describe programs for ensuring that persons returning from mental and physical health institutions receive appropriate supportive housing

Permanent supportive housing is strongly supported in Connecticut. In January 2002, a Memorandum of Understanding (MOU) was entered into by several state agencies including the Office of Policy and Management (OPM), DOH, the Department of Mental Health and Addiction Services (DMHAS), the Department of Social Services (DSS), the Connecticut Housing Finance Authority (CHFA) and the Corporation of Supportive Housing (CSH). This MOU supported the statewide PILOTS Supportive Housing Initiative. The purpose was to increase service rich affordable housing for people with mental illness or substance abuse problems who face homelessness. DOH devotes both Section 8 and State Rental Assistance to project-based programs developed as part of this initiative. DOH actively participates in the Balance of State Continuum of Care Steering Committee and HMIS Steering Committee Meetings. DOH was also a member of the Reaching Home Steering Committee.

Since 2019, Connecticut has seen investments of over \$1 billion and created almost 4,900 units of housing, including an additional 225 units of Permanent Supportive Housing, leveraging over \$270 million in DOH state general and bond funds for these units. Numerous state programs offer service-enriched housing and supportive services for persons recovering from mental and physical health problems:

- DMHAS provides several programs that cater to the special needs population. The Connecticut Mental Health Center, a collaborative endeavor of DMHAS and Yale University's Department of Psychiatry, is an urban community mental health center serving

individuals with serious mental illness and/or addiction. Each year over 4,000 people receive a variety of recovery-oriented services at CMHC and its satellite clinics.

- Funding providing to the state of CT through both Continuums of Care provide 2,566 permanent supportive housing beds made available to Special Populations, including those living with HIV, Youth at risk of homelessness, domestic violence survivors, and individuals with severe mental illness.
- DMHAS developed the Housing Stabilization Services (HSS) Program to assist participants in securing or maintaining safe, decent, and affordable housing as part of their recovery. Administered by Advanced Behavioral Health, Inc., payments are issued on behalf of eligible clients to include Security Deposit and Utility Assistance.
- The DMHAS Housing Assistance Fund Program provides rental assistance in the form of monthly housing subsidy payments to persons with psychiatric disorders on a temporary basis as they wait for permanent subsidies.
- The CT Block Grant Recovery Programs grant provides funding to assist clients involved with any DMHAS funded provider, in accessing Recovery Support Resources (RSR). Temporary sober recovery housing will be covered by the CT Block Grant Recovery Program for eligible individuals. Each voucher will be issued for thirty (30) days and individuals will be eligible for up to two (2) vouchers per year, or a total of sixty (60) days.
- DMHAS has a General Assistance Recovery Supports Program (GA RSP), which is committed to helping State-Administered General Assistance (SAGA) recipients meet their basic needs. GA RSP promotes recovery, independence, employment, self-sufficiency, and stability by offering recovery support services including recovery housing, independent housing, bus passes, and personal care items

The state of Connecticut has a significant supply of affordable and subsidized housing options for its residents and has recently produced a significant number of new affordable housing units through the coordination of these two entities, facilitated by significant funding from the state and federal government. According to the 2023 Affordable Housing Appeals List, there are a total of 175,548 assisted units throughout the state of CT, representing approximately 12.4% of the total number of housing units in the state.¹⁴ Further, the state has financed the development of an additional 4,900 housing units since 2019. Over 90% of these units are deed restricted affordable at different income levels. Additionally, 225 of these units are designated as supportive housing units.

Specify the activities that the jurisdiction plans to undertake during the next year to address the housing and supportive services needs identified in accordance with 91.215(e) with respect to persons who are not homeless but have other special needs. Link to one-year goals. 91.315(e)

Pursuant to the Qualified Allocation Plan, new construction projects are scored and ranked in accordance with a total of 100 points to support priority for housing development proposals.¹⁵ Additional points are awarded to Permanent Supportive Housing Units that serve households at or below 30% AMI or between 30% and 50% AMI.

The Department of Housing in collaboration with the Connecticut Housing Finance Authority invites any Developer/Owner that is looking to apply for funding and/or other resources from DOH

¹⁴ <https://portal.ct.gov/doh/doh/programs/affordable-housing-appeals-listing>

¹⁵ https://www.chfa.org/assets/1/19/2024_and_2025_QAP_Draft-clean.pdf?12460

and/or CHFA for the new construction, substantial rehabilitation, and/or preservation of affordable housing each calendar year to participate in a new *Developer Engagement Process*. This process is intended to identify and to create a pipeline of potential activity for future funding opportunities including but not limited to new construction, substantial rehabilitation and/or preservation of affordable and supportive housing.

Developers/applicants complete the *DOH/CHFA Development Engagement Profile* that describes the project, development or concept as it currently stands. There is no requirement to engage a consultant, prepare any formal documentation, obtain any approvals or expend any funds in order to complete and submit the *DOH/CHFA Development Engagement Profile*. Upon receipt of a *DOH/CHFA Development Engagement Profile*, developers/applicants will be contacted by DOH to schedule a virtual meeting with DOH and CHFA staff to discuss the proposed activity outlined. When funding is available, including HOME, NHTF, and state bond funds, projects in the pipeline will be invited to make an application.

For CDBG and RHP funding opportunities, communities participate in a competitive application process at least annually for CDBG funds to implement their proposed community and economic development projects. For ESG and HOPWA funding, the state holds a competitive RFP for services every three years.

For entitlement/consortia grantees: Specify the activities that the jurisdiction plans to undertake during the next year to address the housing and supportive services needs identified in accordance with 91.215(e) with respect to persons who are not homeless but have other special needs. Link to one-year goals. (91.220(2))

See above.

MA-40 Barriers to Affordable Housing – 91.210(e)

Negative Effects of Public Policies on Affordable Housing and Residential Investment

Housing is a basic need for every person and family regardless of age, race, or income level. The lack of housing choices for all citizens affects the state's fiscal condition, the quality of life, and the vitality of the state, and its cities, towns and neighborhoods. The availability and quality of housing choices have substantial impacts on economic competitiveness, responsible growth, and the cost of infrastructure, not just roads and bridges, but also the cost of municipal services and local schools.

As is the case nationwide, decades of public and private policies and practices have resulted in high levels of segregation within many Connecticut communities. Demographic and geographic data indicate that several groups including people of color, people with lawful sources of income other than employment, people with disabilities, and single-parent households are particularly concentrated in the state's lowest income communities.

Connecticut's housing crisis is deeply embedded in a legacy of discriminatory practices and a tangled web of land use regulations. Fifty-two percent of Connecticut renters are cost-burdened, according to the 2022 American Community Survey 5-year estimates, and opportunities to rent are largely concentrated in urban areas with existing multifamily housing and where affordable housing units are often clustered. Limited rental housing drives up rent prices and puts more renters at risk of eviction.

As part of a 5-part series published in the CT Mirror, issues surrounding Connecticut's affordable housing needs were detailed.¹⁶ The primary problem related to the development of affordable housing in CT is that the power to permit or deny housing development has been delegated to each municipality. Zoning is administered at the local level, and if a local government does not grant permission to build, typically development does not proceed. Modern day zoning in CT is a legacy of racially motivated segregationist policy from the 1920s. While fair housing laws prohibit the most egregious practices, local zoning ordinances are used to exclude and segregate. Municipalities often cite concerns about preserving the character of a town, traffic congestion, or declining property values as objections to affordable housing, especially multi-family development. While everyone understands the need for affordable housing, it seems developments are supported so long as they are built somewhere else.

The Affordable Housing Land Use Appeals Procedure (§8-30g) allows housing developers, seeking to build "set aside" housing with long-term affordability for low- and moderate-income households, to challenge a town's adverse decision associated with a proposed affordable housing development, even when it does not meet local zoning regulations. This procedure applies to all municipalities that do not yet have 10% or more of their housing units designated as assisted. Thirty-one municipalities are exempt from the Appeals Procedure, due to having met the 10% threshold of qualified, affordable units in the municipality (this Appeals List is administered by DOH). While more than 8,500 housing units with long-term affordability restrictions have been created through the Appeals Procedure since its enactment in 1990, there are many projects that do not move forward. In recent years, developers have prevailed in about 75% of these cases.

¹⁶ <https://ctmirror.org/2024/09/27/actions-the-ct-legislature-can-take-to-promote-more-affordable-housing/>

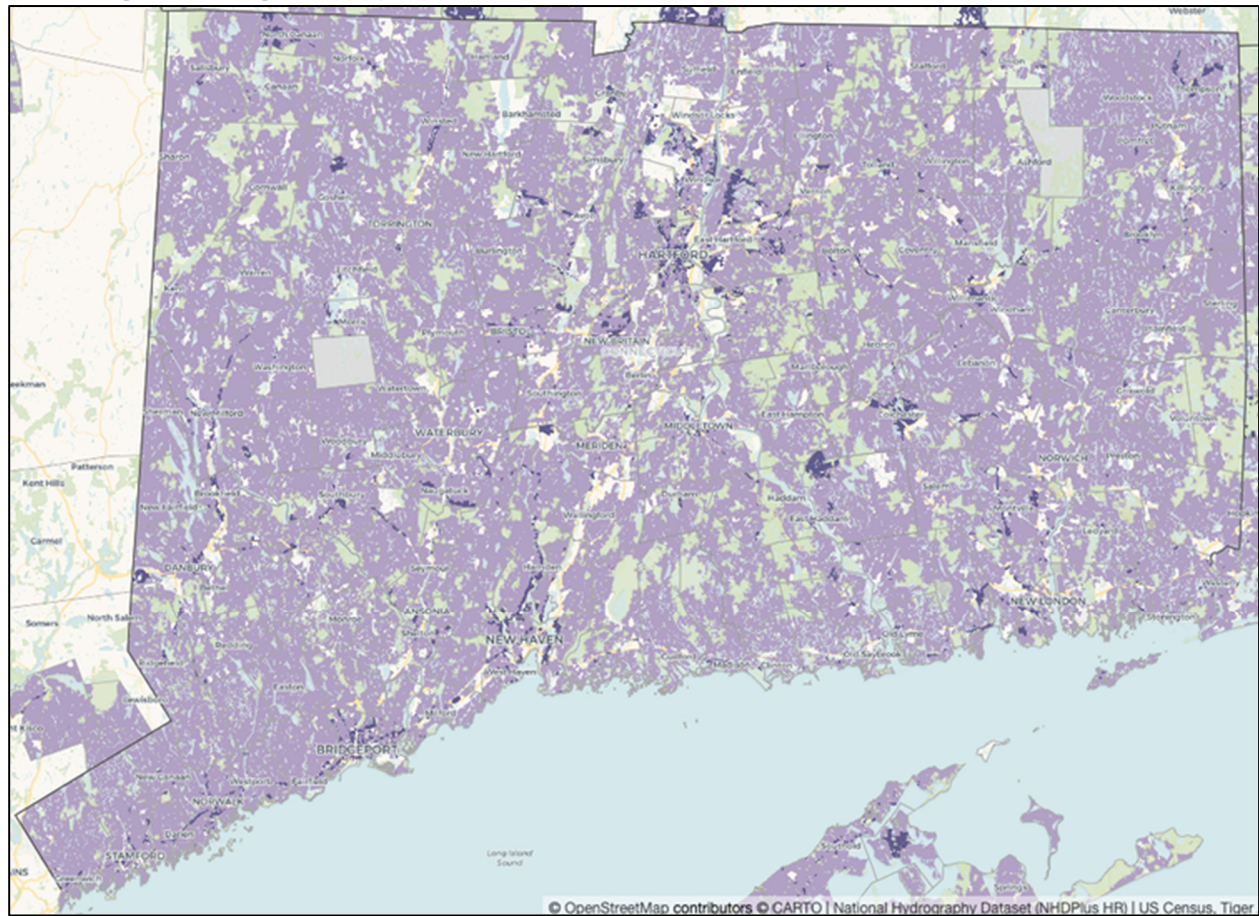
While new housing units are needed throughout CT to alleviate the high cost of housing, most of Connecticut does not allow for two or more housing units on one lot. This results in renters having limited housing options outside of the large urban areas in the state. The strong local control over zoning ordinances allows most towns to limit the types of new housing allowed by right. Much of Connecticut allows only single-family housing as-of-right. Development of new multifamily buildings is severely limited, and developers can face a time-consuming and often costly special permitting process with local land use authorities.

The maps below were created through the National Zoning Atlas, which compiles local zoning regulations into one database.¹⁷ The first map shows areas where new single-family housing is permitted, the second map shows where new two-family housing is permitted, and the third map shows where new four-plus unit structures are permitted without requiring a special permit. These maps represent the clearest picture of the limitations related to building multi-family housing throughout Connecticut. Connecticut residents in areas that allow mostly single-family housing were found more likely to be white, to have high household incomes, and to own their homes.

While local zoning regulations and NIMBYism are key barriers to affordable housing development, additional barriers include the availability and acquisition cost of land, the cost of infrastructure needed for new housing development (particularly for suburban and rural development), permitting and fees, building codes, environmental remediation, assembly of financing, labor shortages of construction labor, rising interest rates, and shortages and cost of construction materials.

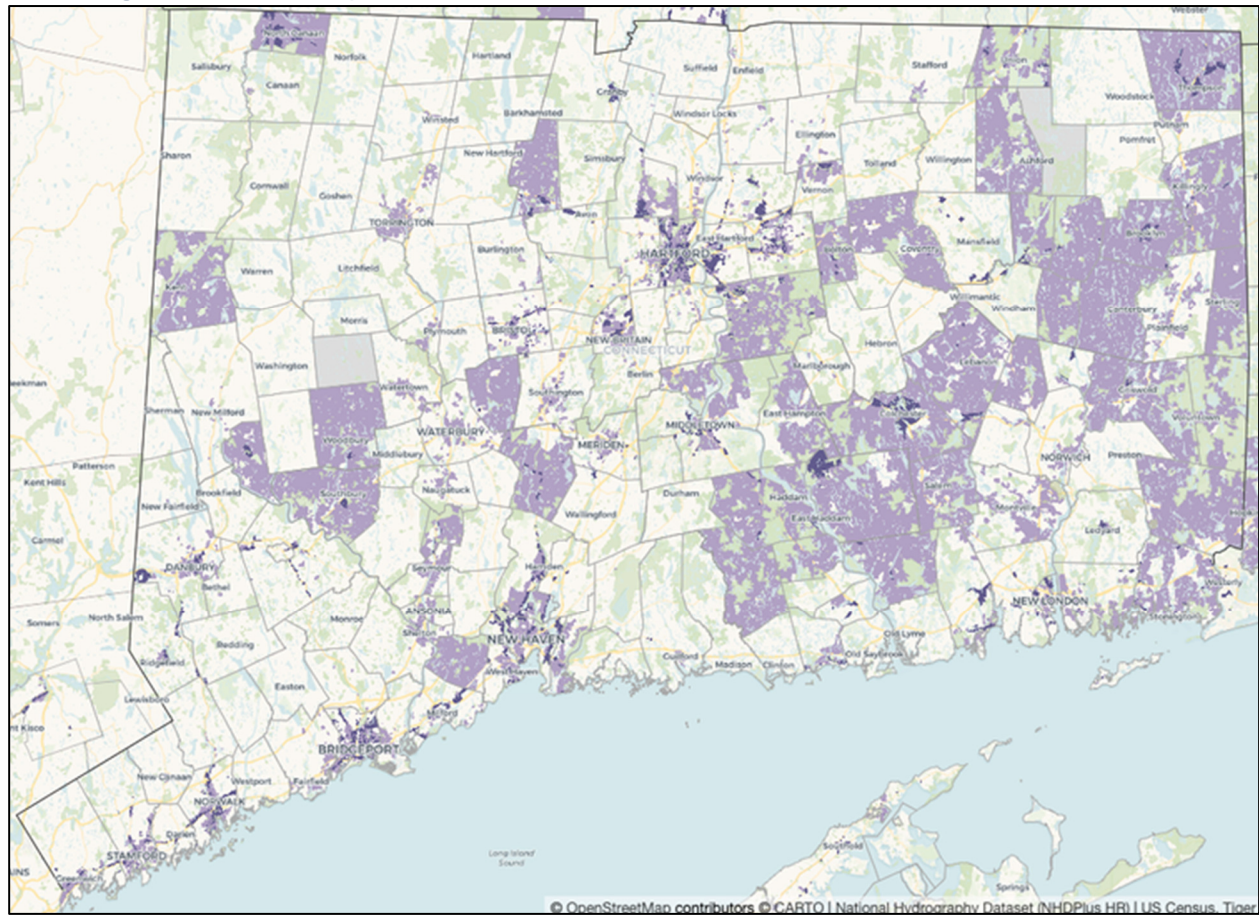
¹⁷ <https://www.zoningatlas.org/atlas>

MA-40 Figure 1: Single Family Homes Allowed



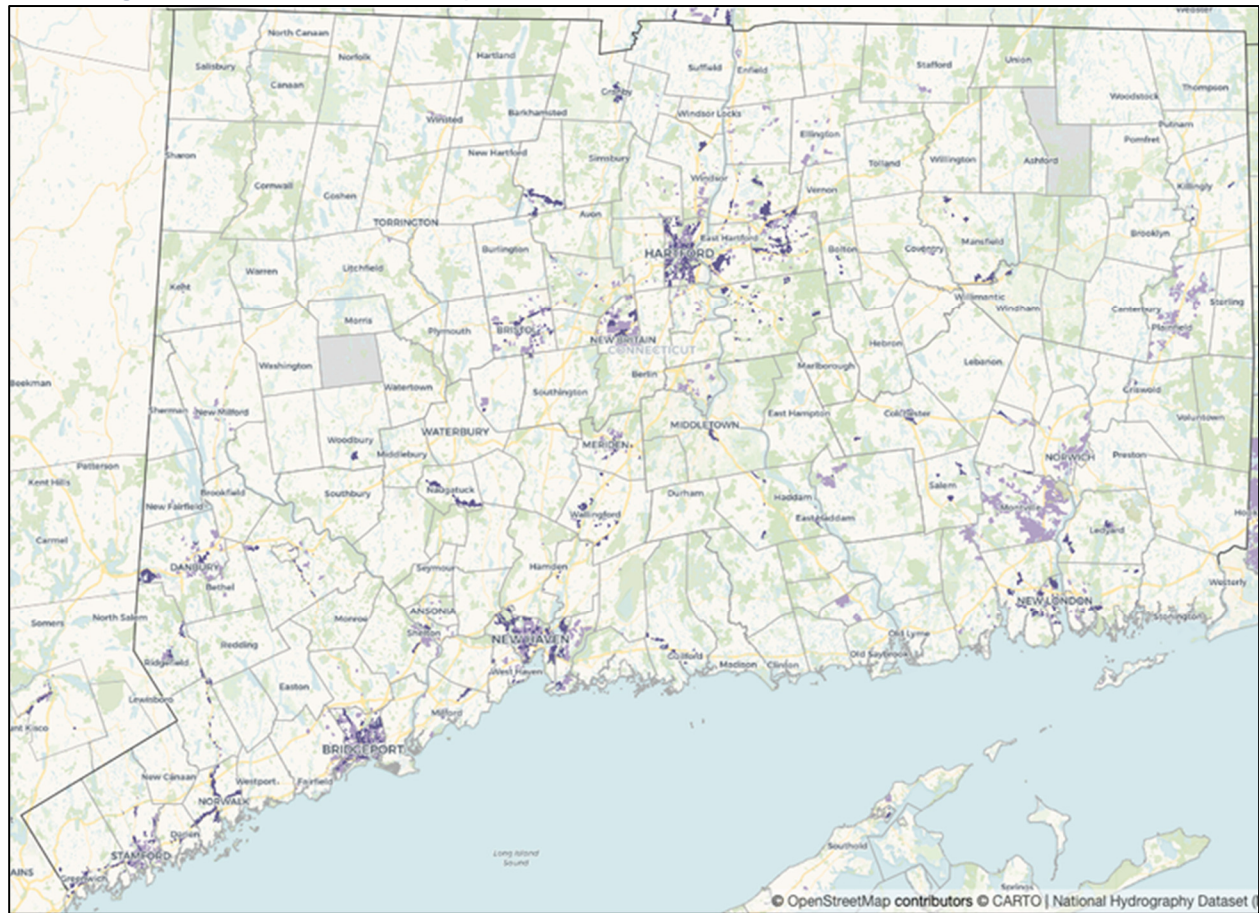
Data Source: National Zoning Atlas

MA-40 Figure 2: Two Family Homes Allowed



Data Source: National Zoning Atlas

MA-40 Figure 3: Four or More Family Homes Allowed



Data Source: National Zoning Atlas

MA-45 Non-Housing Community Development Assets – 91.215 (f)

Introduction

The information contained in this section describes the state's community and economic development assets, as well as data related to the economic conditions of the state and compares the ability of the workforce to satisfy the needs of the business community. This provides important intelligence relevant to understanding the housing market demand.

The state will promote community development projects that are targeted to low-and moderate-income individuals and households and will on the housing and community development programs that directly benefit these individuals. As a general rule, the state will adopt and employ, to the greatest extent possible, responsible growth strategies consistent with the State's Conservation and Development Plan (C&D) Plan. These include inter-municipal or regional collaborations; reuse, rehabilitation, and revitalization of land, property and infrastructure; urban infill development; mixed-use developments; walkable environments; transit-oriented developments; and incorporation of sustainable development standards in the implementation of the strategies and objectives outlined in this plan.

The state will encourage the maximization of existing infrastructure and resources and the re-use of blighted and brownfield properties through the application of responsible growth principles and strategies and livability principles and provide incentives for community revitalization efforts as per the state's responsible growth strategies and the growth management policies specified in the current C&D Plan as well as in concert with the federal government's Sustainable Communities Initiative.

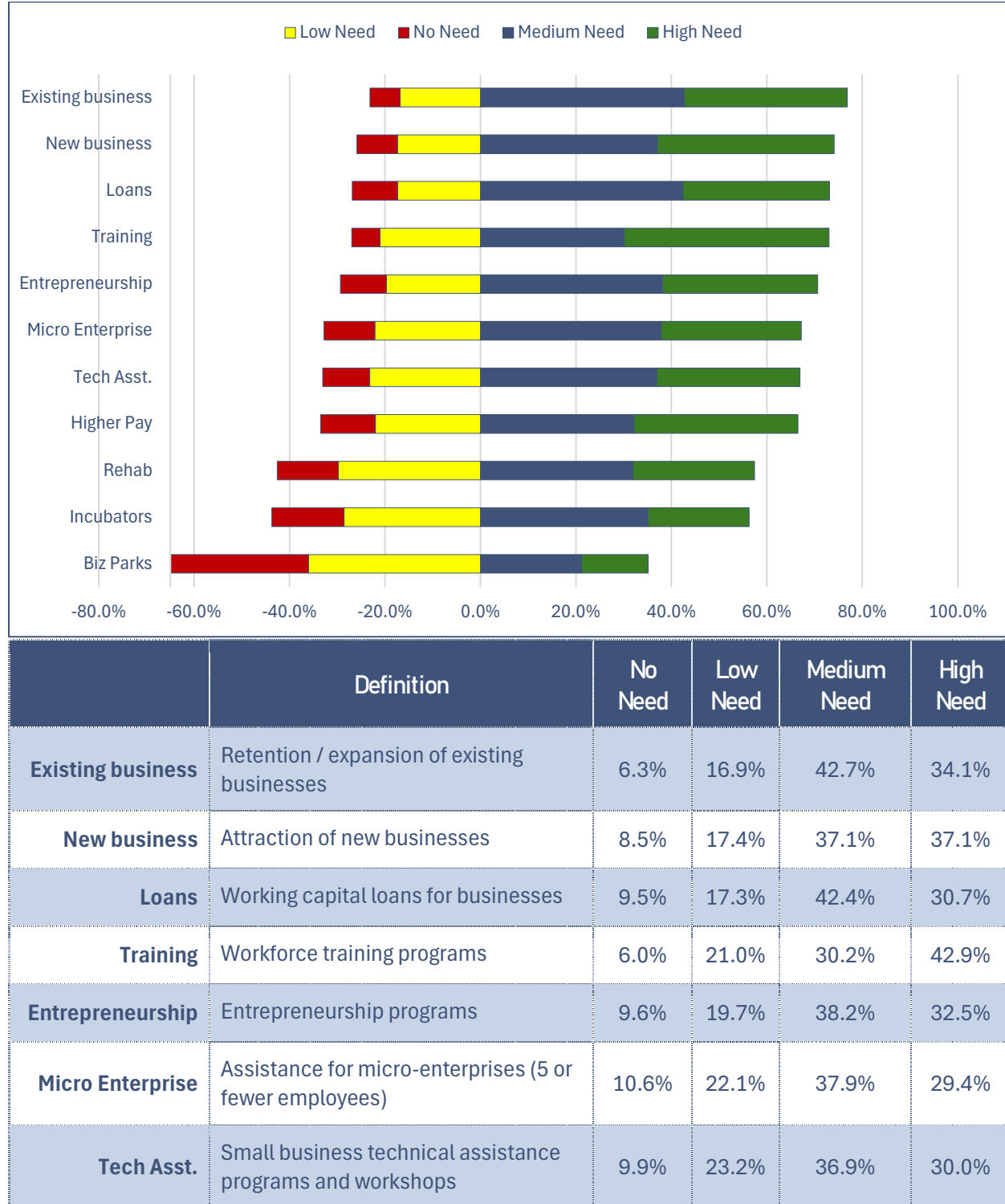
With specific regard to the Small Cities SC/CDBG program, the state will provide assistance to help undertake community infrastructure, facility and service projects (public facilities) affecting public health, safety and welfare.

As part of CEW Advisors Housing and Community Development Survey, respondents were asked about the key Economic Development priorities for the state. This survey asked respondents to rank several economic development needs on a four-point scale: no need, low need, medium need, or high need. A weighted total score is then calculated and used to rank the needs. The top five economic development needs identified by survey respondents are:

- **Retention / expansion of existing businesses** was identified by 34.1% of respondents as a high need, 42.7% of respondents as a medium need, 16.9% of respondents as a low need, and 6.3% of respondents as not needed.
- **Attraction of new businesses** was identified by 37.1% of respondents as a high need, 37.1% of respondents as a medium need, 17.4% of respondents as a low need, and 8.5% of respondents as not needed.
- **Working capital loans for businesses** was identified by 30.7% of respondents as a high need, 42.4% of respondents as a medium need, 17.3% of respondents as a low need, and 9.5% of respondents as not needed.
- **Workforce training programs** was identified by 42.9% of respondents as a high need, 30.2% of respondents as a medium need, 21.0% of respondents as a low need, and 6.0% of respondents as not needed.

- **Workforce training programs** was identified by 32.5% of respondents as a high need, 38.2% of respondents as a medium need, 19.7% of respondents as a low need, and 9.6% of respondents as not needed.

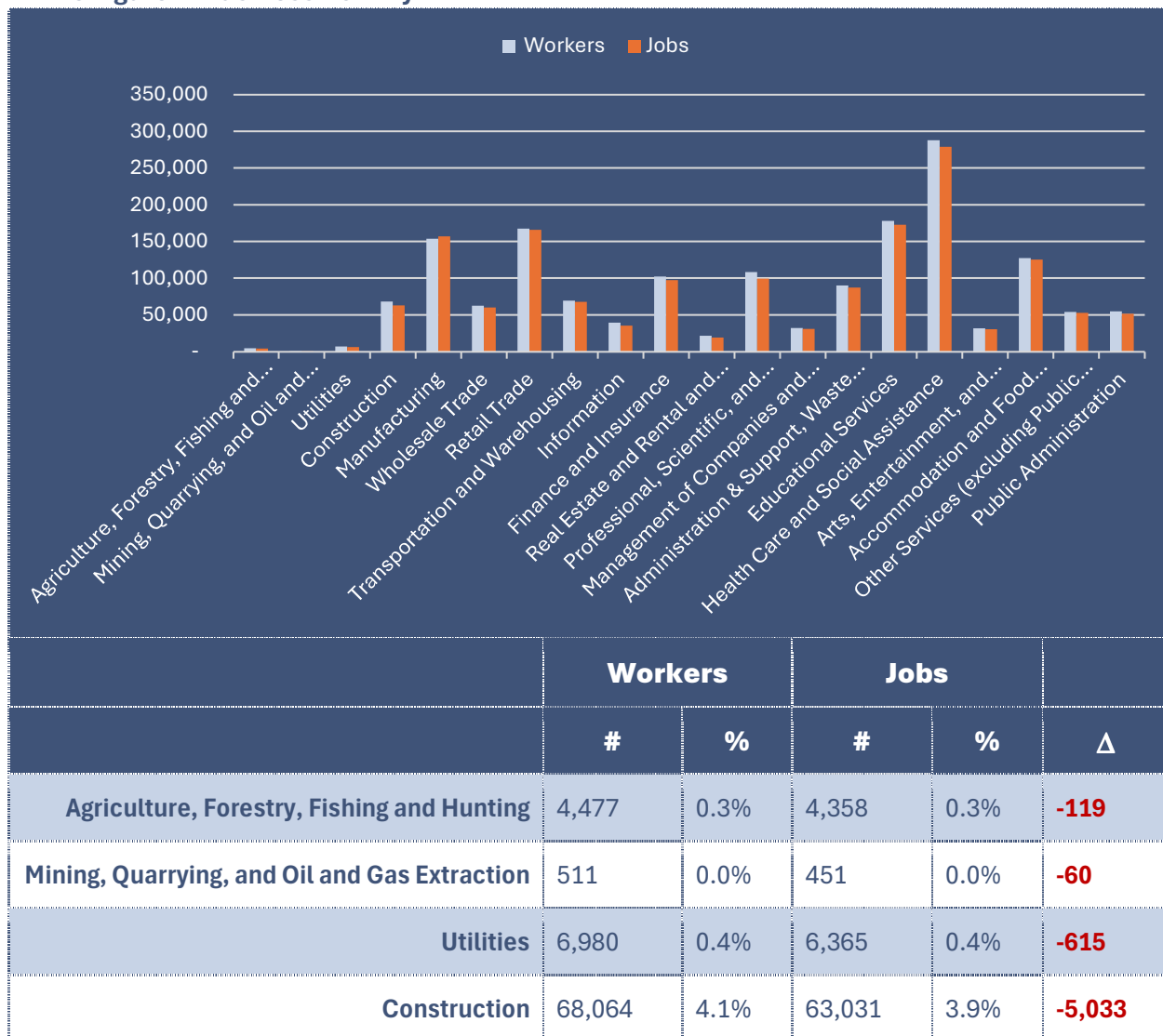
MA-45 Figure 1: Top Economic Development Needs



	Definition	No Need	Low Need	Medium Need	High Need
Higher Pay	Business incentives for higher paying jobs	11.4%	22.0%	32.2%	34.3%
Rehab	Façade improvement / building rehabilitation / signage	12.8%	29.8%	31.9%	25.5%
Incubators	Business incubators / coworking space	15.2%	28.6%	35.1%	21.2%
Biz Parks	Development of business parks	28.8%	36.0%	21.2%	14.0%

Data Source: CEW Advisors, Inc. Housing & Community Development Survey

MA-45 Figure 2: Business Activity



Manufacturing	153,569	9.2%	156,830	9.8%	3,261
Wholesale Trade	62,639	3.8%	60,167	3.7%	-2,472
Retail Trade	167,614	10.1%	165,838	10.3%	-1,776
Transportation and Warehousing	69,486	4.2%	67,972	4.2%	-1,514
Information	39,233	2.4%	35,341	2.2%	-3,892
Finance and Insurance	102,191	6.2%	97,332	6.1%	-4,859
Real Estate and Rental and Leasing	21,757	1.3%	19,319	1.2%	-2,438
Professional, Scientific, and Technical Services	108,466	6.5%	99,329	6.2%	-9,137
Management of Companies and Enterprises	31,945	1.9%	31,035	1.9%	-910
Administration & Support, Waste Management and Remediation	90,151	5.4%	87,025	5.4%	-3,126
Educational Services	177,990	10.7%	172,640	10.8%	-5,350
Health Care and Social Assistance	287,758	17.3%	278,648	17.4%	-9,110
Arts, Entertainment, and Recreation	31,773	1.9%	30,499	1.9%	-1,274
Accommodation and Food Services	127,145	7.7%	125,177	7.8%	-1,968
Other Services (excluding Public Administration)	53,975	3.3%	52,632	3.3%	-1,343
Public Administration	54,966	3.3%	51,687	3.2%	-3,279

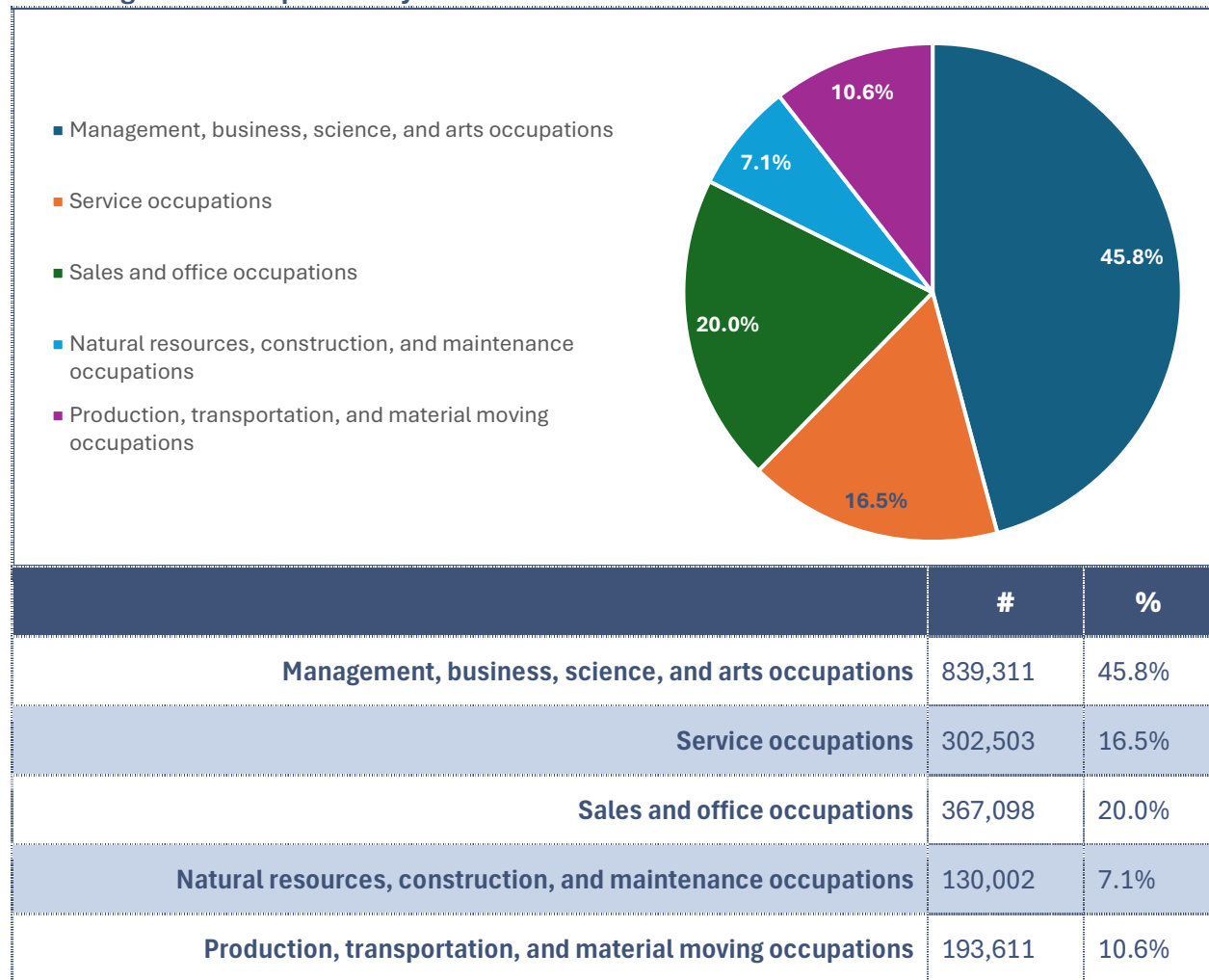
Data Source: 2022 LEHD

MA-45 Figure 3: Labor Force

Total Working-Age Population (16-64)	
Civilian Labor Force	1,805,283
Civilian Employed Population	1,696,963
Unemployment Rate	6.0%
Population Ages 16-24	
Civilian Labor Force	256,662
Civilian Employed Population	226,288
Unemployment Rate	11.8%
Population Ages 25-64	
Civilian Labor Force	1,548,621
Civilian Employed Population	1,470,675
Unemployment Rate	5.0%

Data Source: 2018-2022 ACS - B23001

MA-45 Figure 4: Occupations by Sector



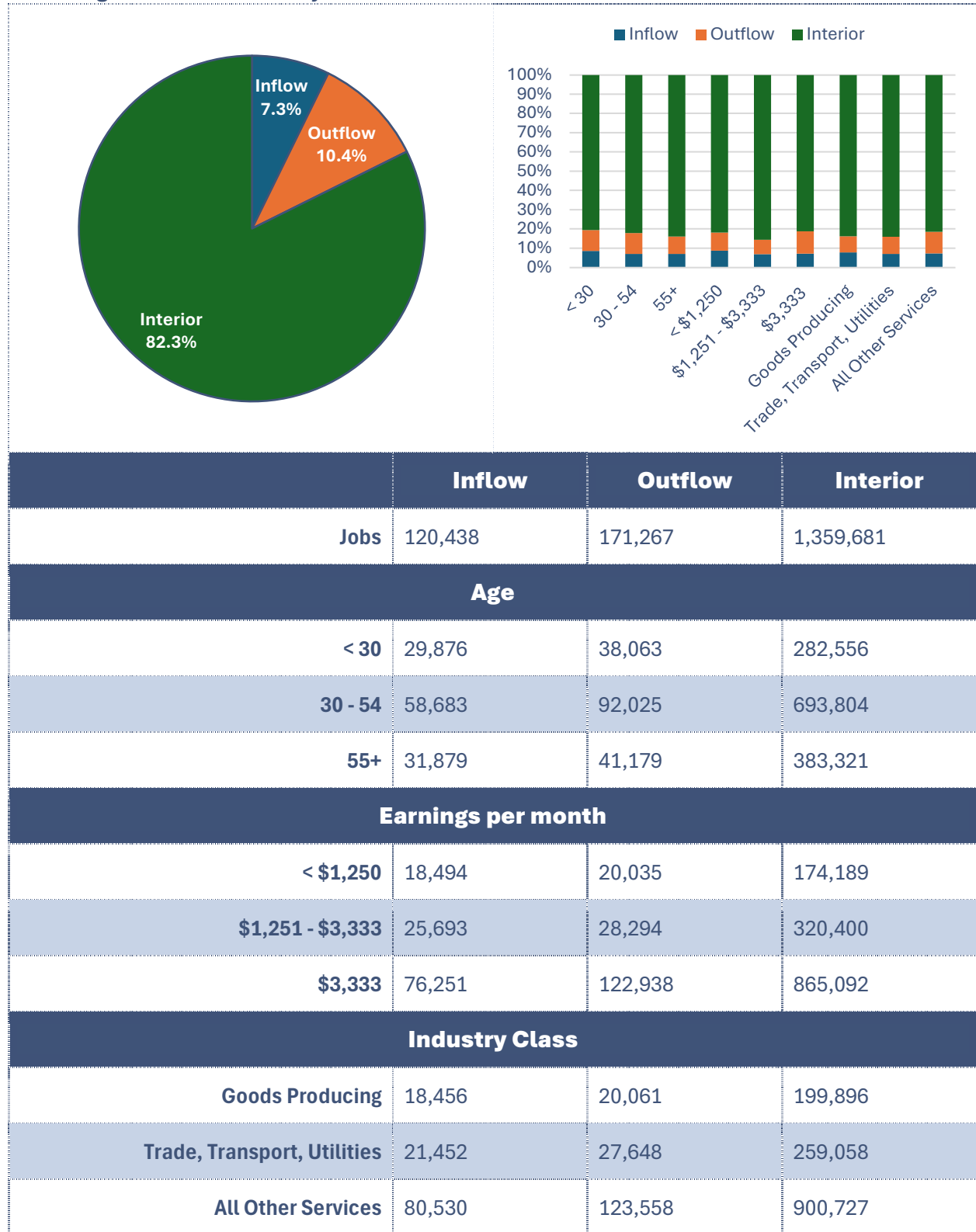
Data Source: 2018-2022 ACS - DP03

MA-45 Figure 5: Travel Time

	#	%
< 30 Minutes	1,017,200	64.7%
30-59 Minutes	415,853	26.5%
60 or More Minutes	138,474	8.8%
Total	1,571,527	100.0%

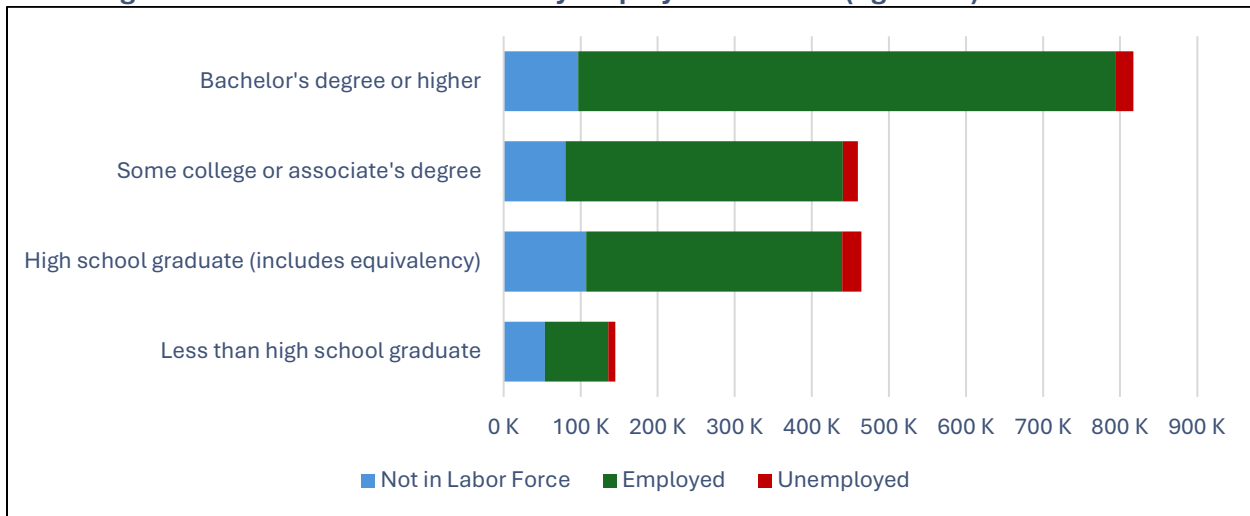
Data Source: 2018-2022 ACS - B08303

MA-45 Figure 6: Job Flow Analysis



Data Source: LEHD

MA-45 Figure 7: Educational Attainment by Employment Status (Ages 16+)



	Median Salary	Not in Labor Force	Employed	Unemployed	Unemp. Rate
Less than high school graduate	\$29,911	53,537	82,279	9,269	10.1%
High school graduate (includes equivalency)	\$42,224	107,350	331,841	25,092	7.0%
Some college or associate's degree	\$48,256	80,304	359,758	19,839	5.2%
Bachelor's degree or higher	\$74,929	96,721	696,797	23,746	3.3%

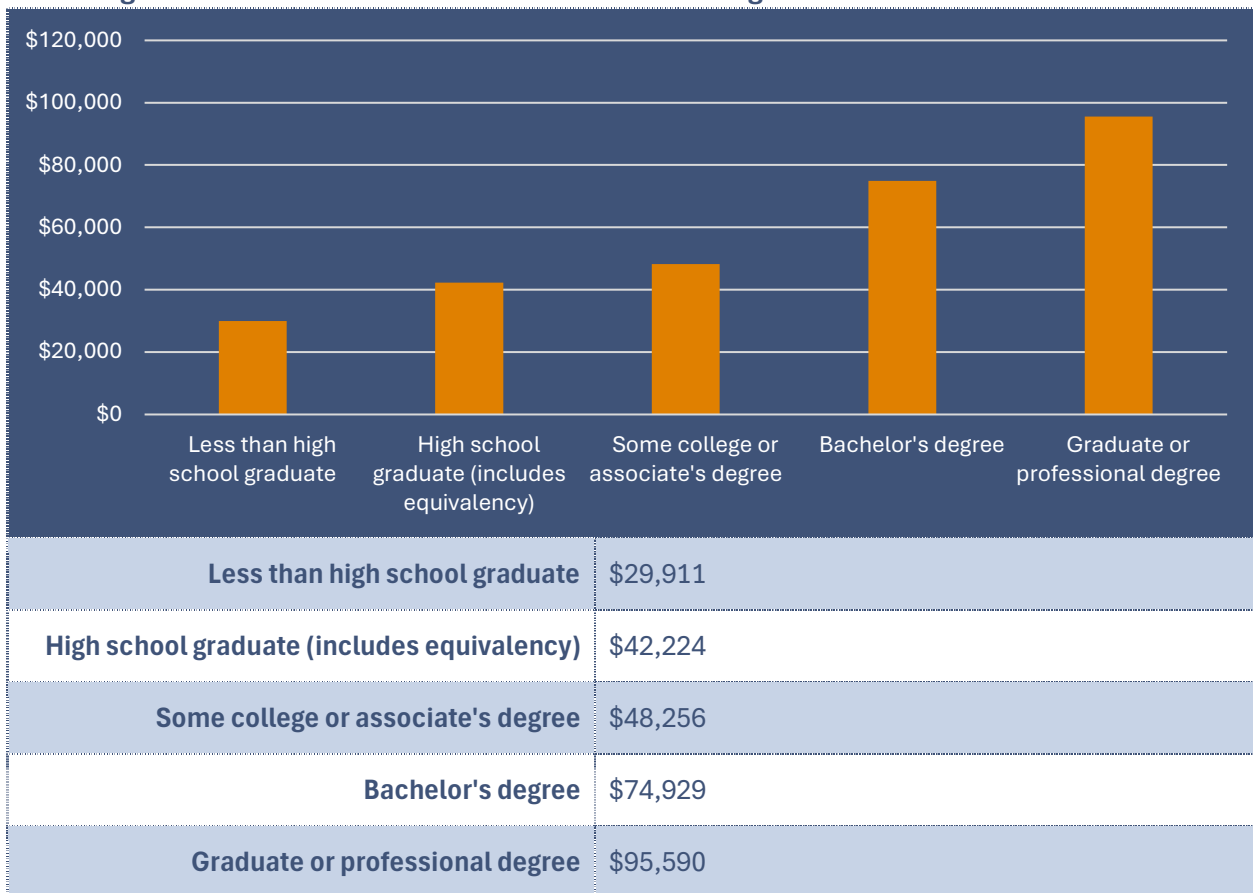
Data Source: 2018-2022 ACS - B23006

MA-45 Figure 8: Educational Attainment by Age

	18–24	25–34	35–44	45–65	65+
Less than 9th grade	3,830	10,288	15,996	35,083	40,453
9th to 12th grade, no diploma	27,443	16,171	19,361	48,186	34,538
High school graduate, GED, or alternative	103,577	105,112	96,392	263,460	185,824
Some college, no degree	137,641	81,834	72,837	162,074	97,788
Associate's degree	13,357	31,295	30,814	83,730	46,328
Bachelor's degree	55,773	132,566	111,922	222,550	106,879
Graduate or professional degree	6,029	72,200	97,730	182,081	117,298

Data Source: 2018-2022 ACS - B15001

MA-45 Figure 9: Educational Attainment – Median Earnings in the Past 12 Months



Data Source: 2018-2022 ACS - B20004

Based on the Business Activity table above, what are the major employment sectors within your jurisdiction?

According to the data above, the major employment sectors are Health Care and Social Assistance, Educational Services, Retail Trade, and Manufacturing. These four industries account for almost half of all the available jobs in CT.

The next five largest industries account for 30% of the total number of jobs in the state. These include Accommodation and Food Services; Professional, Scientific, and Technical Services; Finance and Insurance; Administration & Support, Waste Management and Remediation; and Transportation and Warehousing.

CT is home to approximately 1.606 million jobs while 1.661 million of its residents are in the workforce. Approximately 120,400 non-CT workers commute to CT for work, and approximately 171,300 CT residents leave the state for work. The primary employment hubs for CT workers leaving the state include the NYC area, Springfield, MA, Worcester, MA, Boston, MA, Westerly, RI, and the Greater Providence area. There are similar geographic concentrations among those who live outside of CT but work in the state.

Describe the workforce and infrastructure needs of the business community:

Connecticut is the home of a highly educated and professional workforce, the fourth most educated workforce in the country.¹⁸ A significant portion of Connecticut's workforce holds higher education degrees. Approximately 80% of the population is 18 years old or older, and approximately 41% of adults aged 25 and older have a bachelor's degree or higher. The state also has a strong presence of individuals aged 25 and older with associate degrees and vocational training, supporting various technical and skilled trades, representing 24% of the total population in this age range.

Workforce needs are addressed primarily through the CT Hires program of the CT Dept. of Labor.¹⁹ As part of the Workforce Innovation and Opportunity Act, programs and services are made available through American Job Centers. CT Hires career centers help workers find jobs through job search assistance, careers development support, development of resumes and cover letters, and interview preparation. Programs are also available for training and reemployment for dislocated workers. The full complement of programs and services available through the public workforce system are available in the State of Connecticut WIOA State Plan for 2024-2027.²⁰ These programs include:

- WIOA Adult Program (WIOA Title I)
- Dislocated Worker Program (WIOA Title I)
- WIOA Youth Program (WIOA Title I)
- Adult Education and Family Literacy Act program (WIOA Title II)
- Wagner-Peyser Act Employment Service Program (authorized under the Wagner Peyser Act, as amended by WIOA Title III)
- Vocational Rehabilitation Program (authorized under Title I of the Rehabilitation Act of 1973, as amended by WIOA Title IV).

¹⁸ <https://wallethub.com/edu/e/most-educated-states/31075>

¹⁹ <https://www.cthires.com/>

²⁰ <https://portal.ct.gov/gwc/wioa>

Notwithstanding traditional infrastructure needs of roads, highways, sidewalks, water and sewer, rail and transit, it is understood that the cost and location of housing is an important factor in Connecticut's ability to effectively attract and retain employees and businesses. Housing prices nationwide have increased dramatically over the past several years. Several factors have contributed to the rising prices as discussed in Sections NA-10 and MA-15.

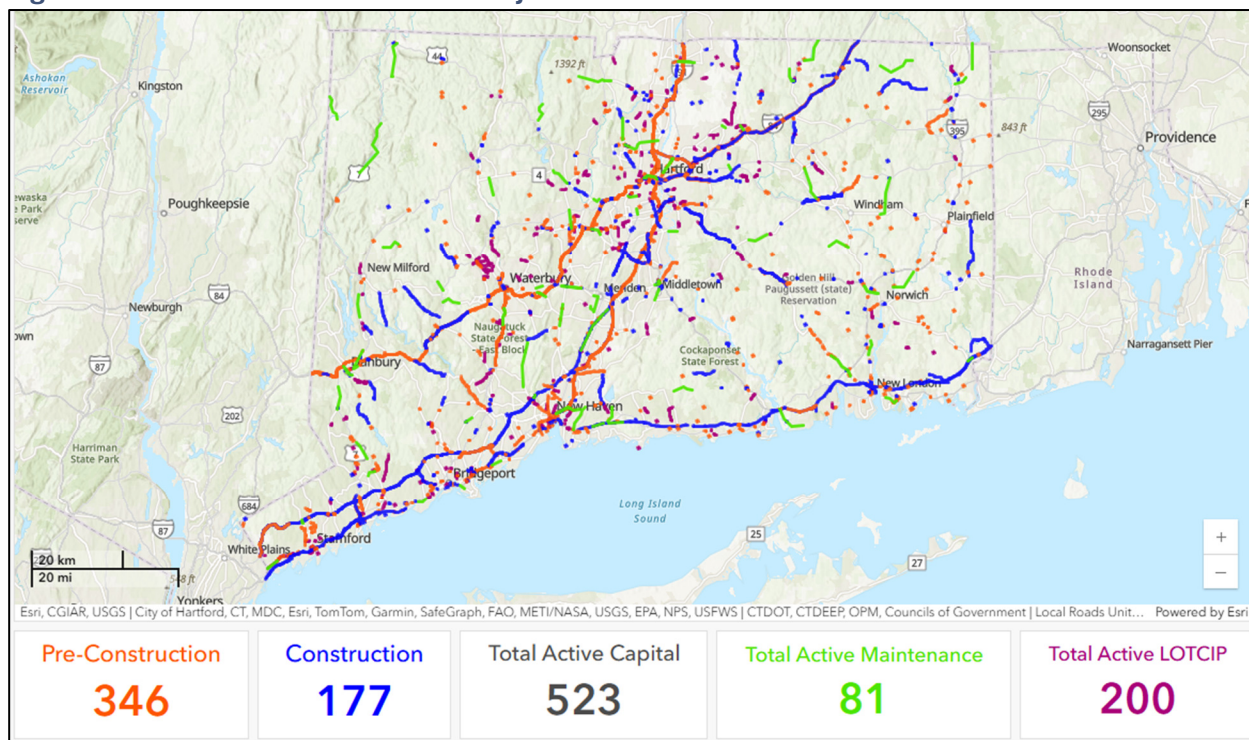
The availability of workforce housing, both ownership and rental, plays an important role in growing and sustaining the state's economic future. It is recognized by many in the business and governmental sectors that barriers to the creation of a full range of housing choices exist on both the state and local levels. Improved integration of housing, zoning, and land use policies with economic development and transportation policies will strengthen the state's ability to compete in the global economy.

In addition to housing, the state also suffers from an older infrastructure in many areas, requiring expensive upgrades to maintain economic competitiveness. Many roads and bridges are in need of repair, mass transit needs capital investment, and cities and towns have aging utility/sewer systems. Also of concern are sidewalk and other infrastructure components that are not yet fully accessible and in compliance with the Americans with Disabilities Act. Connecticut also needs to invest in 21st century technology and telecommunications infrastructure in order to stay competitive.

Connecticut DOT hosts an Active Projects Dashboard which displays the current infrastructure improvement projects managed by the state of by CT's Council of Governments through the Local Transportation Capital Improvement Program.²¹ A significant portion of the current active construction projects are a direct result of the \$5.4 billion received by the state of CT through the Infrastructure Investment and Jobs Act.

²¹ <https://ctdot.maps.arcgis.com/apps/MapSeries/index.html?appid=497d9f93de1247378faceff72434b8a6>

Figure 19 - CT Active Infrastructure Projects



Data Source: CTDOT Active Projects Story Map

Describe any major changes that may have an economic impact, such as planned local or regional public or private sector investments or initiatives that have affected or may affect job and business growth opportunities during the planning period. Describe any needs for workforce development, business support or infrastructure these changes may create.

CT is home to two Fortune 100 companies, fifteen Fortune 500 and twenty-five Fortune 1000 companies and is considered the Insurance Capital of the World.

Connecticut's Economic Action Plan, September 2021, identifies four pillars that will drive the state's plan for inclusive growth:

- **Workforce:** Broaden the base of skilled workers to meet increasing industry demand
- **Communities:** Attract and retain talent by investing in vibrant and affordable communities for all
- **Innovation:** Support growth and generate inclusive economic opportunity within CT's most innovative and specialized industries
- **Business Environment:** Improve CT's environment and reputation for starting and growing businesses

The plan identifies 16 initiatives which are projected to create approximately 83K jobs at a cost of \$824M over five years. The costs include \$345M in ARPA related funds (including SSBCI), \$164M in tax credits/grants, and \$315M in total bond funds.

Key elements of this action plan may have an impact on the state's employment and business growth opportunities. These include:

- **Innovation Corridor:** Public and private matching funds to seed transformational, placemaking projects to drive job opportunities, innovation, and business formation in the state's largest cities.
- **Greentech Fund:** Advance nascent specialization in clean energy technology by investing in capital improvements and place-based development in greentech hubs.
- **Targeted Small Business Support:** Public and private matching funds to support Connecticut's small businesses, creating/ retaining 14,000 jobs via loans and grants, with at least 50% targeting underbanked and underrepresented business owners.
- **JobsCT:** Support business attraction and expansion; reward employers that locate and grow in CT, creating 19,000 jobs over five years.

How do the skills and education of the current workforce correspond to employment opportunities in the jurisdiction?

The workforce in the state of CT is the fourth most educated workforce in the country. There is a direct positive correlation between one's education level and one's income. As an individual's education level increases, the average wage increases.

When we look at the traditional working age population, individuals aged 18 to 64, we see that this is the largest age cohort in the state and in every county. However, only one county in the state, Fairfield County, saw robust growth in this age cohort, increasing 6% between 2010 and 2021, or 33,348 persons aged 18 to 64. While Hartford County saw a modest gain of 2,000 people in this age cohort, every other county has seen population decline of the traditional workforce. This decline in the traditional workforce is combined with a dramatic increase of the senior population throughout the state and in every county. Further, the state is seeing a dramatic decline of the under 18 population of 10.2% over the 2010-2021 time period.

These dynamics can be detrimental to the future economic conditions in the state. As the current workforce retires there will be increased workforce shortages without either (1) increased labor force participation among those who are choosing not to work, including older workers working into their 60s and 70s, (2) domestic or foreign migration into the state, or (3) higher birth rates which is unlikely to happen given the demographic trends in the country.

Additionally, CT faces workforce challenges that include the mismatch between job seekers and job demand observed without enough qualified workers. Examples of this include healthcare occupations, computer related occupations, advanced manufacturing, etc. There are limited granular and actionable data to inform decision making to fully understand the demand for skills among the CT business community, or to evaluate the return on investment of training programs or higher education. The state also suffers from poor completion rates across 2-year and apprenticeship programs.

With the economic growth strategies of the state, the economy can only grow if there is a continued increase in workers, and a continual development of workers. The state is addressing immediate skills challenges, disparities in educational attainment and long-term demographic changes that will impact our workforce. Additionally, with the increasingly technical nature of jobs across all sectors, many Connecticut organizations are evaluating how best to attract and retain individuals with the necessary technical skills and capabilities.

The state recognizes that a multi-tiered approach to developing a workforce and providing the skills needed to meet the market demand is required. A strong partnership amongst education

organizations, the training delivery system, and industry-led hiring is essential. CT's Economic Action Plan seeks to address the state's workforce needs through a four-pronged strategy.

- **Business Leadership:** Implement business led strategies that reinvigorate Connecticut's demand-driven approach to workforce development
- **Career and Education Building:** Align training and education with occupational demand and career opportunities
- **Equity and Access:** Address persistent barriers that undermine access to sustainable work and training arrangements
- **Data and Accountability:** Use technology to increase jobseeker accessibility and better understand program outcomes

Describe any current workforce training initiatives, including those supported by Workforce Investment Boards, community colleges and other organizations. Describe how these efforts will support the jurisdiction's Consolidated Plan.

The Governor's Workforce Council, the state's Workforce Development Board, was established in October 2019, with a mission to build a more coordinated and effective approach to workforce development. In 2020, Connecticut established the Office of Workforce Strategy as an independent agency to serve as the staff to the Governor's Workforce Council and to provide strategic guidance on workforce initiatives and investments across the state.

An important strategy taken during the pandemic was the investment of federal dollars from the CARES Act and the American Rescue Plan Act to launch Career ConneCT. This initiative represents the largest investment in the state's workforce development system and is well on its way to training 6,000 individuals by the end of 2025.

Connecticut also received \$23.9M from the federal Economic Development Administration's Good Jobs Challenge, the largest grant in the nation, to invest in industry-driven regional sector partnerships and train and place 2,000 individuals in high-quality jobs.

Over the past 4 years, the state has focused on industry engagement through the development of 14 Regional Sector Partnerships, with more than 450 businesses working with workforce boards, education institutions, training organizations and community-based organizations, to enhance career pathways for youth and adults.

Importantly, the state is working to build a workforce system that provides equitable access to high-quality jobs and reflects the diversity of its population through key strategies, including the elimination of barriers to participation in education and training by reducing benefits cliffs and providing supports that include childcare, transportation, and housing supports for individuals seeking skills training. The state is also working to close the basic skills gap to ensure that all individuals have the foundational academic, digital, and professional skills required for work.

Additionally, there is an ongoing focus on Career Pathways training. This will allow all students, regardless of their postsecondary education plans, to access career pathways aligned to their interests and the needs of Connecticut's industries. This is done by providing all students with seamless pathways from K-12 to college and career through dual and concurrent enrollment opportunities. Additionally, by expanding career pathways programs leading to industry-recognized credentials, students will be given opportunities for early exposure and access to employment in high growth industries. Importantly, the state will work towards building higher education and industry partnerships aligned to industry needs.

Does your jurisdiction participate in a Comprehensive Economic Development Strategy (CEDS)?

If so, what economic development initiatives are you undertaking that may be coordinated with the Consolidated Plan? If not, describe other local/regional plans or initiatives that impact economic growth.

N/A

Discussion

CT is positioned within 500 miles of 30% of the total U.S. population and two-thirds of the total Canadian population. This proximity is optimized by the state's multi-modal, multi-billion-dollar transportation infrastructure investment strategy, which is working to improve highways, bridges, airports, rail and bus systems, freight and ports.

While having the fourth most educated workforce in the country, CT is experiencing a contraction of its working wage population in many areas of the state. The state must ensure that any future economic growth creates opportunities which are shared among all the state's residents, especially low- to moderate-income residents. The increase in cost burden and the limited production of new affordable housing in the state limits the state's ability to attract new talent for the workforce needs of the business community.

Balancing economic growth opportunities with the corresponding inflationary pressure of housing costs in and around communities which experience business growth will be of critical importance for the state. Preserving affordable housing for residents is integral to this if rising housing prices occur along with economic growth.

MA-50 Needs and Market Analysis Discussion

Are there areas where households with multiple housing problems are concentrated? (include a definition of "concentration")

The information contained in this section summarizes key points from the Needs Assessment and Market Analysis. Additionally, the Consolidated Plan regulations require the state to define the terms “area of low-income concentration” and “area of minority concentration” and to identify and describe any areas that meet such definitions. For this section, the state is defining “concentration” to mean any area of the state where residents experience any housing problem(s) at a rate of 10 percentage points or more than the rate of the state as a whole.

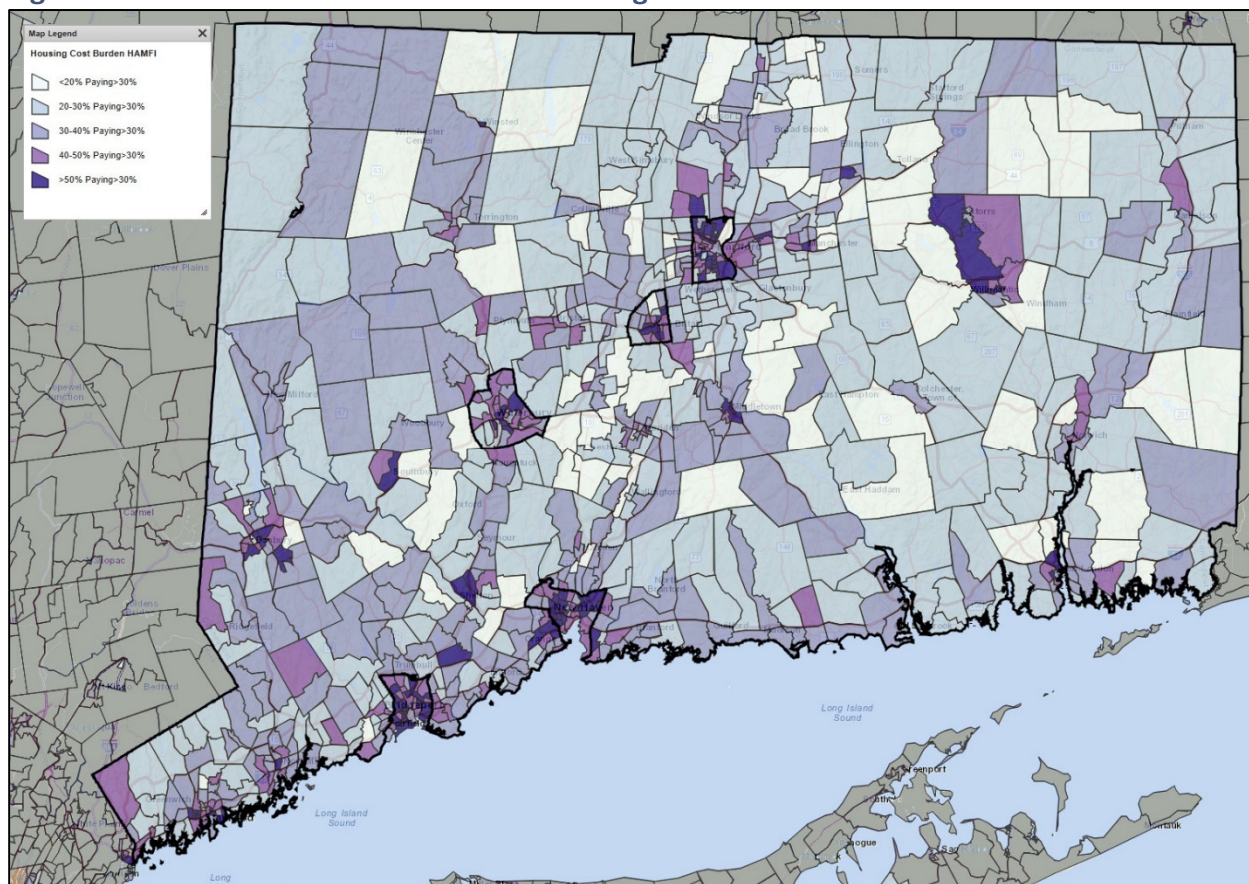
Data shows that the incidence and prevalence of housing problems correlate to income. Statewide, 78% of households with incomes under 50% AMI including both renters and homeowners have at least one housing problem, significantly higher than the overall state average of 34%. As household income increased, the likelihood of housing problems decreases, with 25% of households between 80 and 100% AMI having at least one housing problem, and 7.4% of households over 100% area median income having at least one housing problem.

To reiterate, the main problem faced by both renters and owners is affordability. Close to 415K households are cost burdened, severely cost burdened or have nonpositive income, compared to under 30 K households with crowding or substandard housing issues. While not diminishing the importance of overcrowding and substandard housing, the magnitude of the cost burden problem is significantly greater. When “housing problems” are discussed, housing “affordability” is the chief concern.

Among the lowest income households (households with incomes at 30% AMI or less), 78% are cost burdened and 64% are severely cost burdened (paying more than 30% or 50% of their income for housing, respectively). For households between 30% and 50% of area median income, 76% are cost burdened and 32% are severely cost burdened. This is significantly higher than the state average of 32.6% cost burdened households and 15.4% severely cost burdened households.

The map below shows the share of households with a housing cost burden. There are several key areas of the state with concentrations of cost burdened households more than 10 percentage points higher than the state average of 32.6%. Unsurprisingly, the concentrations of cost burdened households are primarily found in the state's urban core areas of Hartford, New Haven, Bridgeport, Norwalk, Stamford, New London, Groton, Norwich, New Britain, and Waterbury. However, there are many additional Census Tracts with higher proportions of cost burdened households than the state average – these areas are highlighted in purple. While not meeting the definition of concentration, it is noteworthy that significant portions of Western and Northwestern CT have incidences of cost burden greater than the state average. The cost burden and the related rise of homelessness was noted in several consultations among agency providers in this area of the state.

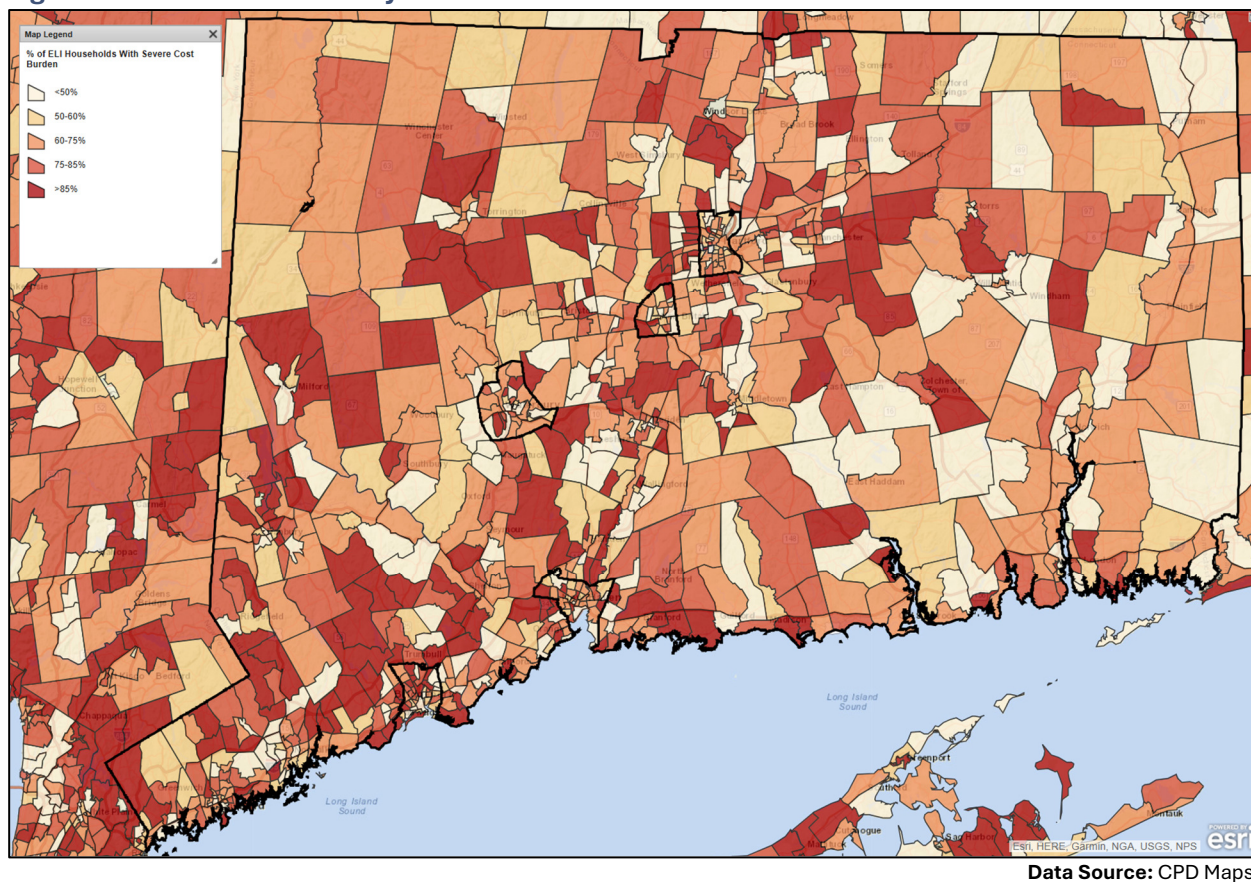
Figure 20 - Share of All Households with Housing Cost Burden



Data Source: CPD Maps

When we look exclusively at the most economically vulnerable households in the state, those with household incomes between 0 and 30% of the area median, there are very few areas of the state where less than 50% of these households are cost burdened. Throughout most of the state there are areas where 60%, 75%, 85% or more extremely low-income households are severely cost burdened, paying more than half of their income on housing. In total, there are 134,215 extremely low-income households that are severely cost burdened. This is the most critical housing need in the state as these 134k households are most at risk of homelessness. Without significant new production in deeply subsidized affordable housing, and a stabilization and reduction of rental prices, the state could witness homelessness of unprecedented proportions.

Figure 21 - Share of Extremely Low-Income Households with Severe Cost Burden



Are there any areas in the jurisdiction where racial or ethnic minorities or low-income families are concentrated? (include a definition of "concentration")

Yes. For the purposes of this analysis, concentration is defined as a census tract where there is a racial or ethnic group that has more than 10 percentage points or higher than the state as a whole.

All racial and ethnic groups experience proportionately fewer housing problems as they move up the economic ladder. However, there tend to be larger concentrations of ethnic minorities and low-income families in the state's more populated urban areas. Significant disparities in income and poverty are evident for several groups in Connecticut. The 2023 Analysis of Impediments to Fair Housing Choice indicates that as a result of these income and wealth disparities, non-Hispanic Blacks, Hispanics, women, single parent families, people with disabilities under the age of 65, and people with a source of income other than employment have a disproportionate need for affordable housing. Increasing the supply of affordable housing and locating it in communities throughout the state will promote integration.

In order to map the concentrations of racial and ethnic groups in Connecticut, the following chart shows the total percentage of the population of each racial and ethnic group. In the subsequent maps, racial and ethnic groups will be highlighted as follows:

- Census Block Groups with zero people within the racial or ethnic group
- Census Block Groups with at least one person in the racial or ethnic group, but no more than the statewide average for that racial or ethnic group

- Census Block Groups with more than the state average for the racial or ethnic group, but no more than 10 percentage points higher than the state as a whole
- Census Block Groups with concentrations of racial or ethnic group more than 10 percentage points higher than the state as a whole

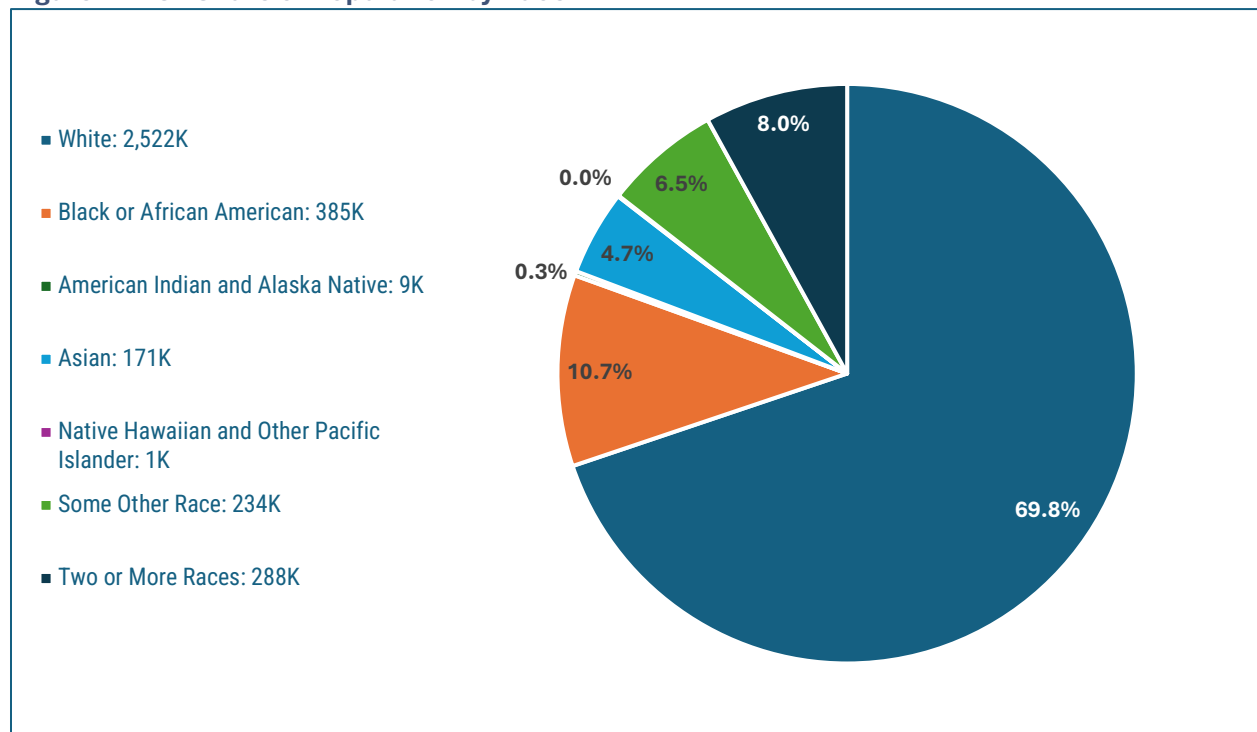
Among the racial and ethnic groups, the following have specific Census Tracts with concentrations of more than 10 percentage points or higher than the state as a whole.

- Black or African American
- Asian
- Hispanic or Latino

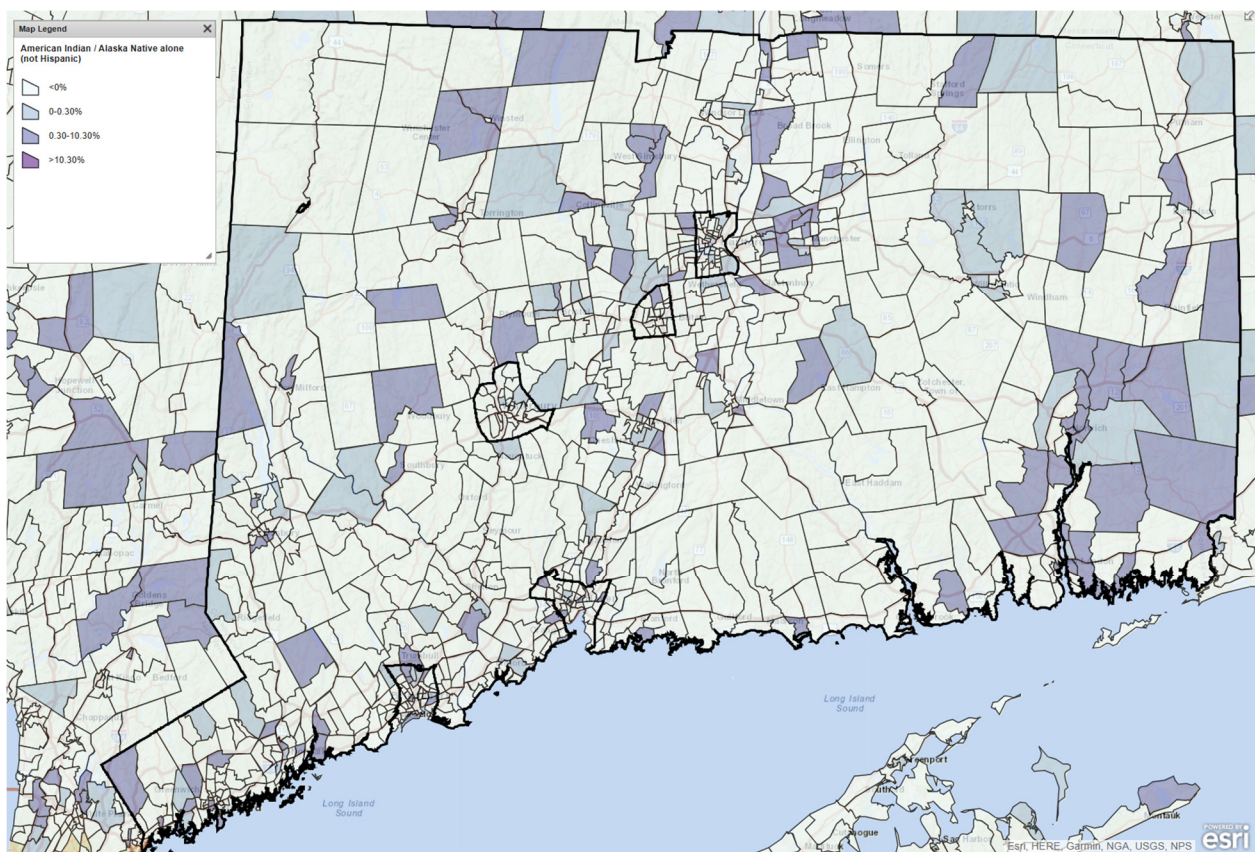
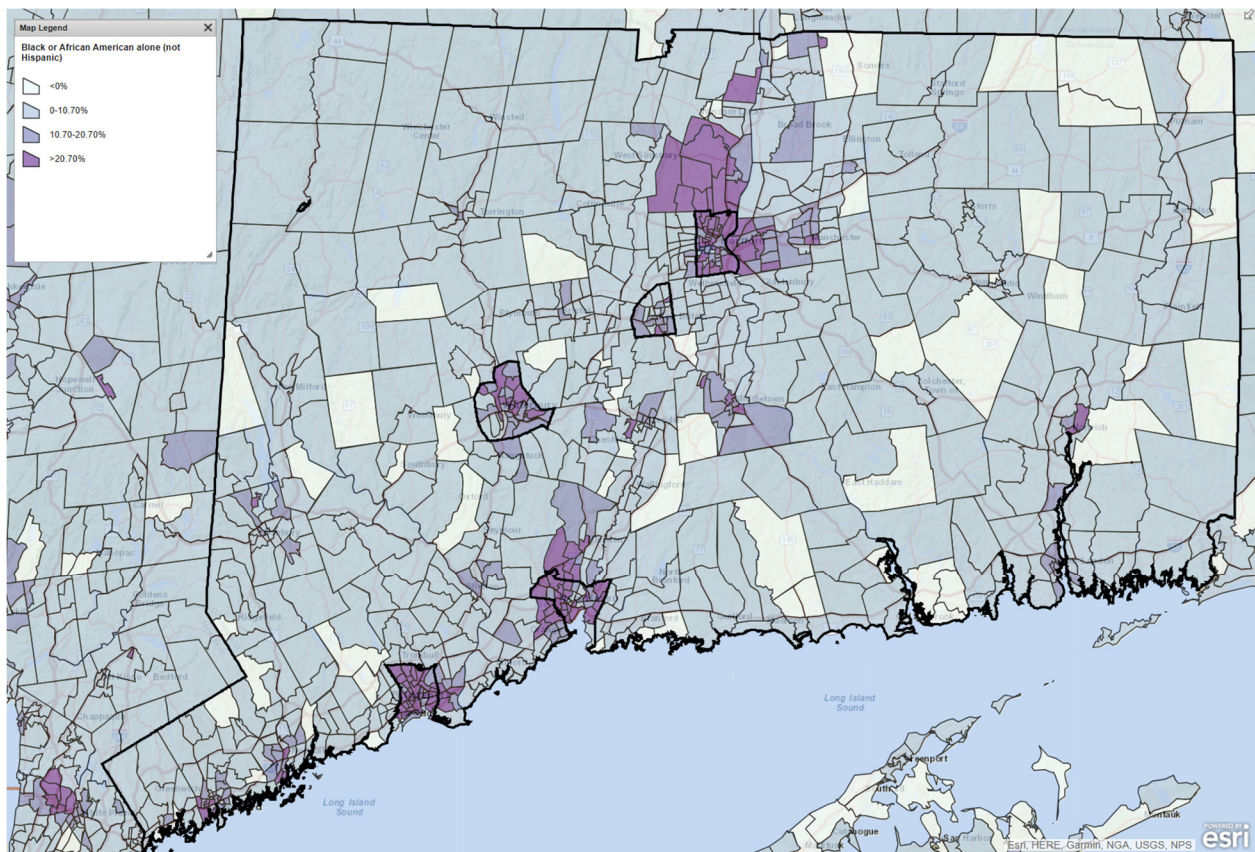
As a point of contrast, the map of the White non-Hispanic population shows the inverse of the Black or African American map. Virtually every Census Tract that has a concentration of Black or African American individuals has a corresponding under-representation of White non-Hispanic individuals, with limited exceptions.

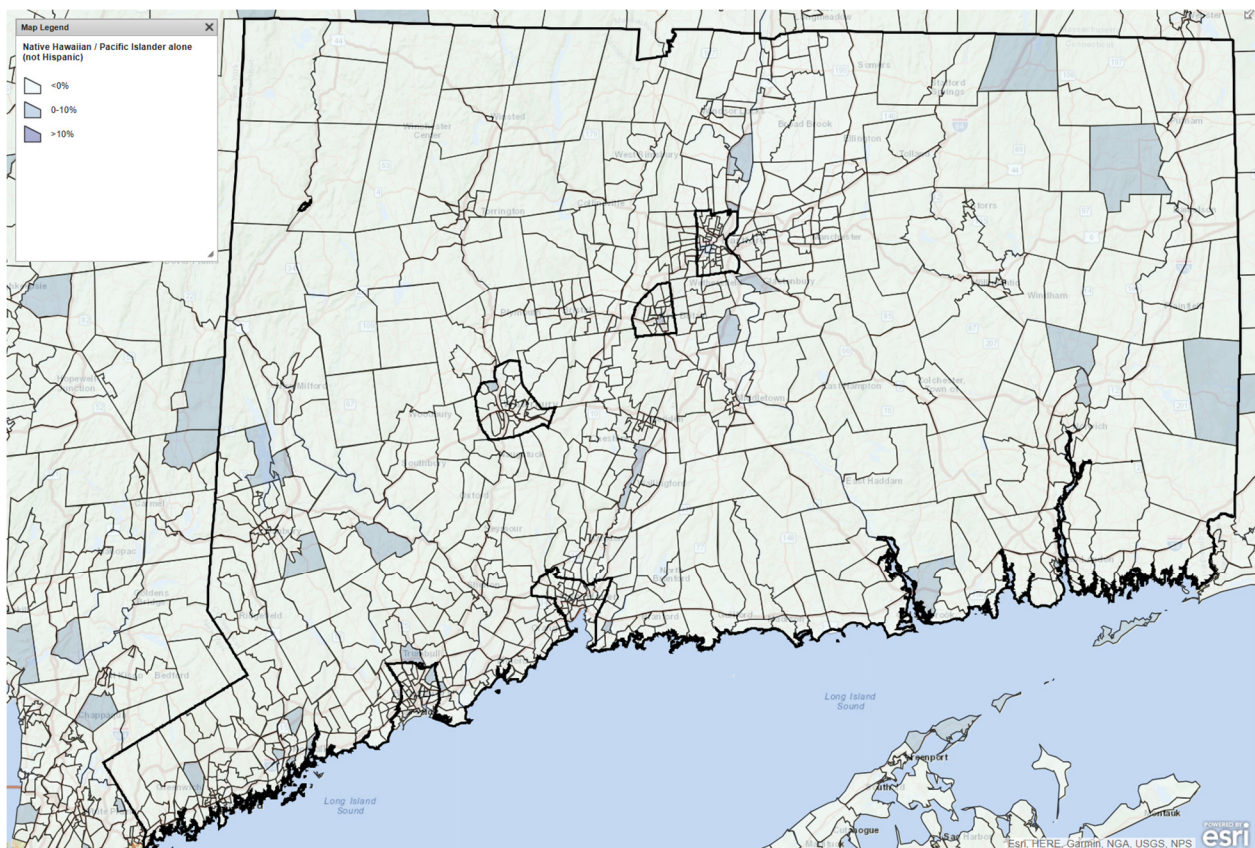
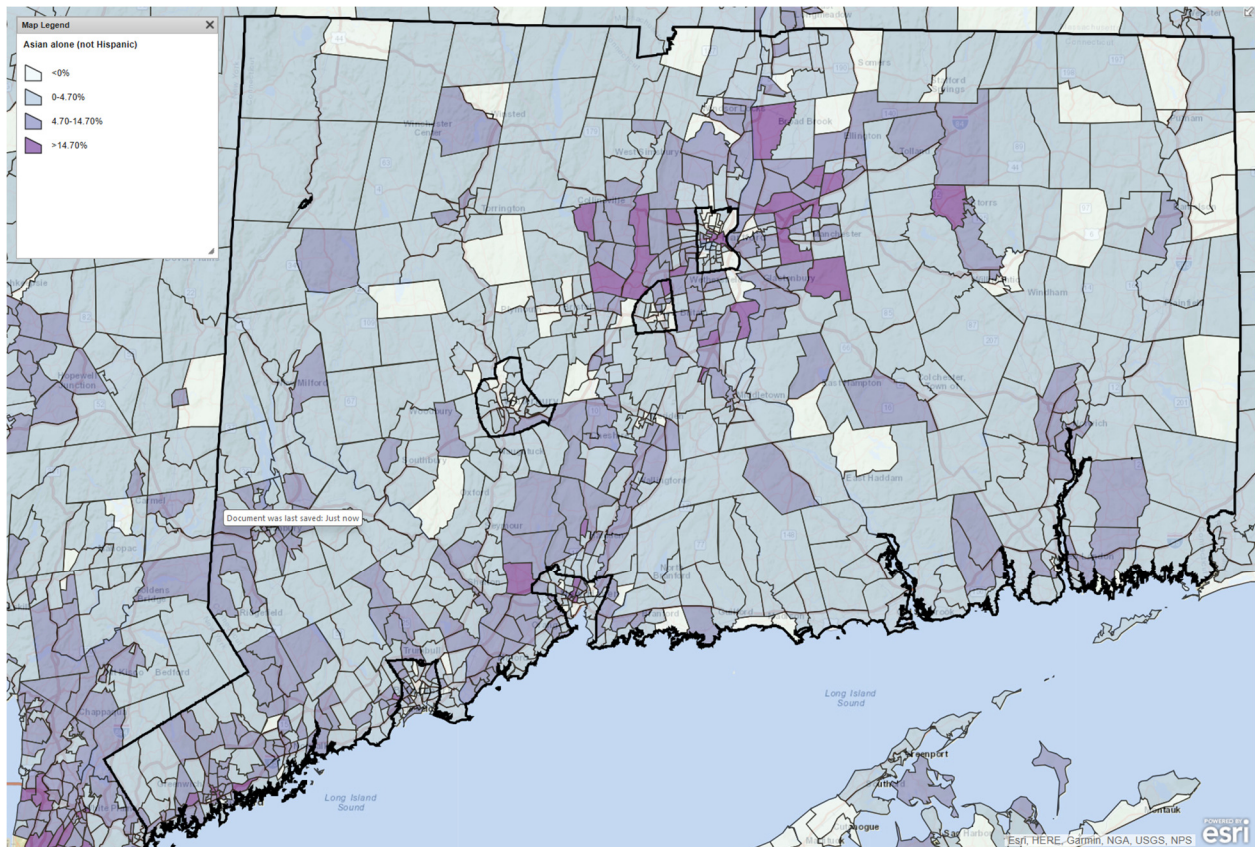
As previously discussed, the Census Tracts with concentrations of Black or African American, Asian, and Hispanic or Latino people are primarily located in and around the urban core areas of Hartford, New Haven, Bridgeport, Waterbury, Norwich, Middletown, Stamford, and Norwalk. These are also the communities with the highest percentage of rental units and the lowest percentage of homeownership units.

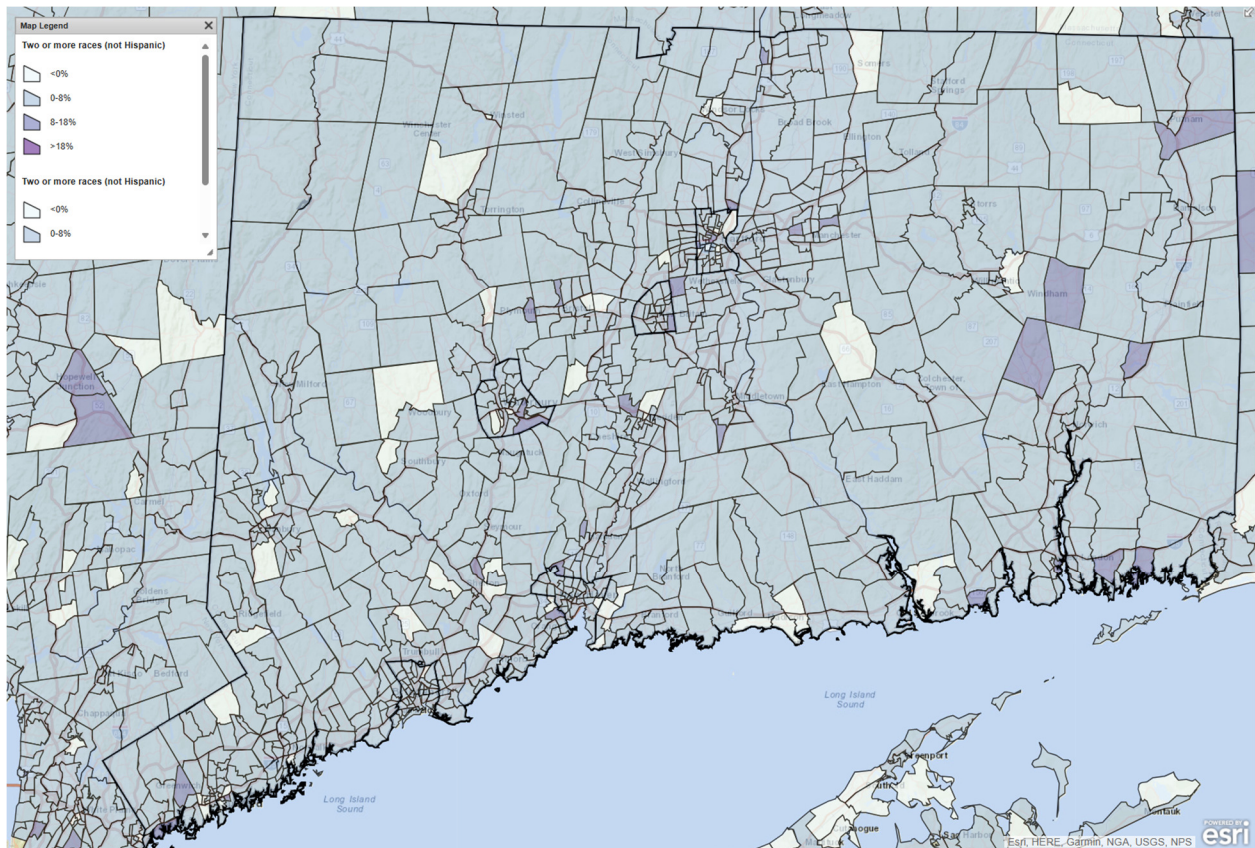
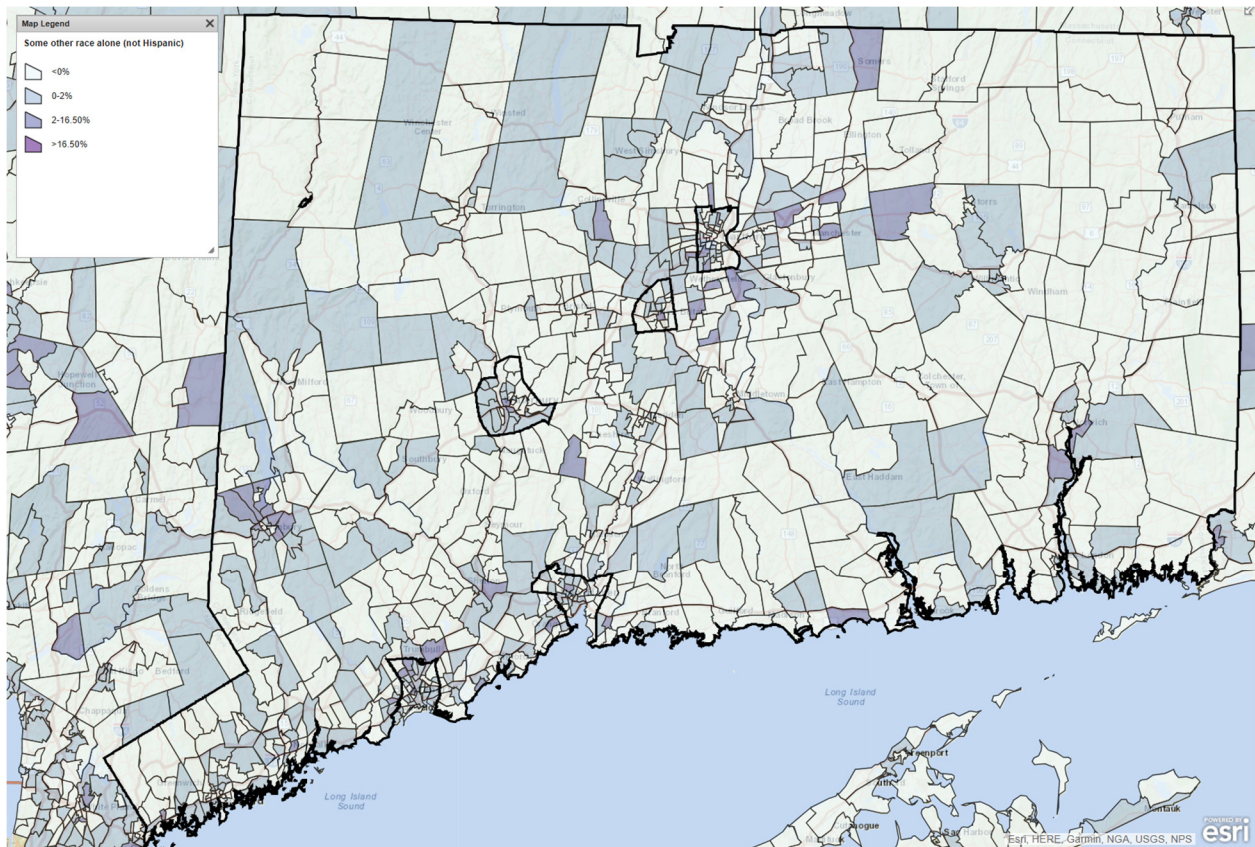
Figure 22 - CT Share of Population by Race

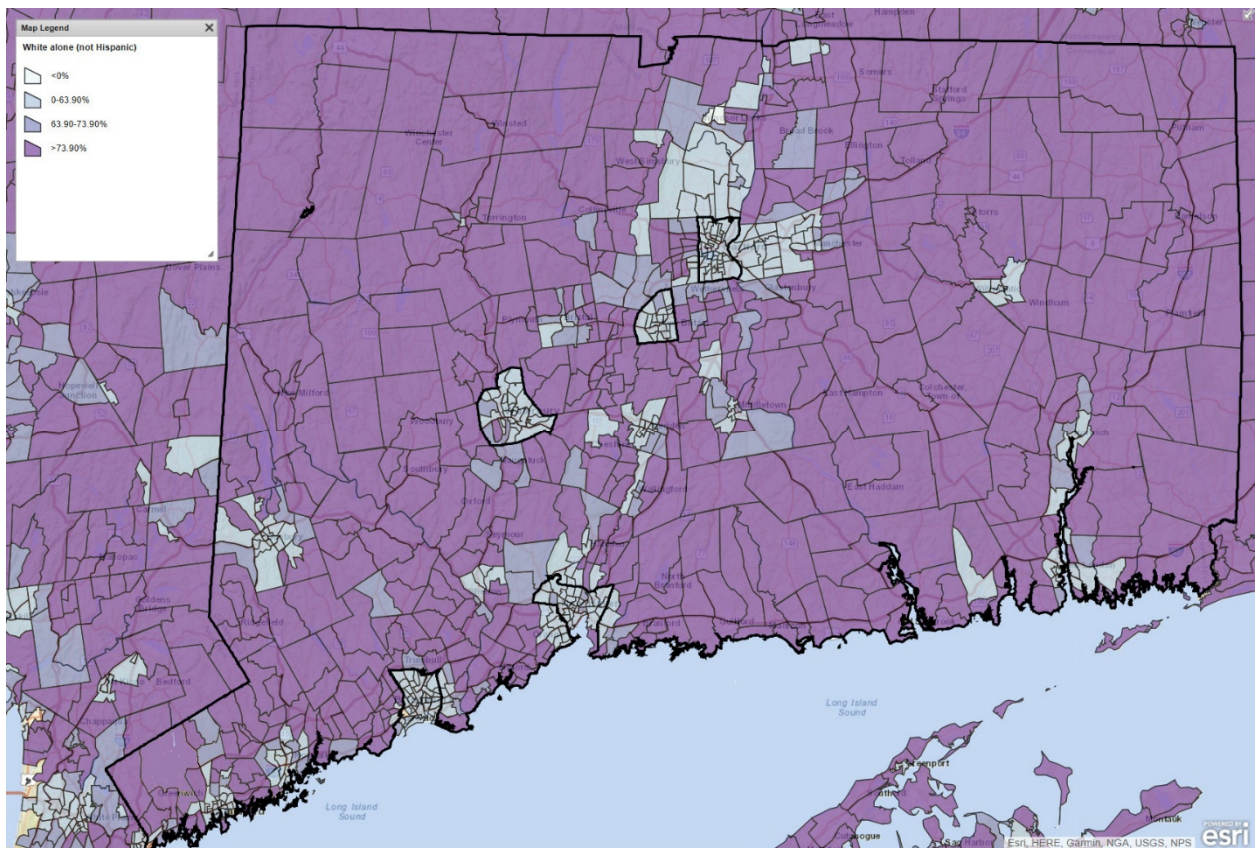
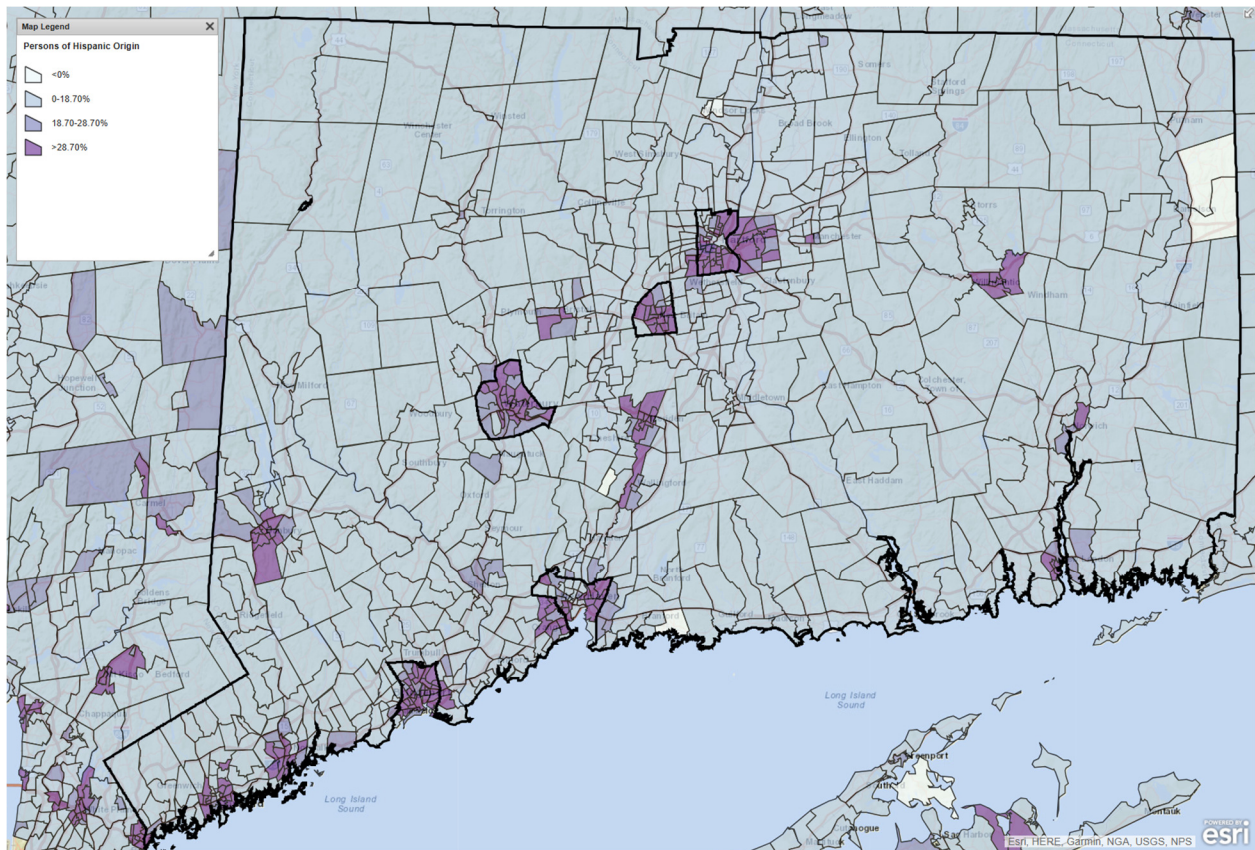


Data Source: ACS 2022 5-Year Estimate









What are the characteristics of the market in these areas/neighborhoods?

Typically, Connecticut's urban housing market conditions include lower home values, older housing stock, and housing quality issues. The rural housing market conditions can include a lack of housing type (not as many multi-family units), lower home values and prices, and issues with housing quality. Additionally, with the older housing stock, there are housing accessibility issues for persons with disabilities.

Are there any community assets in these areas/neighborhoods?

Community assets are not currently detailed in the Opportunity Mapping. However, there is a push to allocate and leverage resources in transit-oriented development areas where there is existing infrastructure and resources; access to housing; and availability of jobs and amenities like grocery stores/pharmacies/shops.

Are there other strategic opportunities in any of these areas?

This would be determined on a case-by-case basis. Please see opportunity mapping on the Department of Housing website for details on these areas.

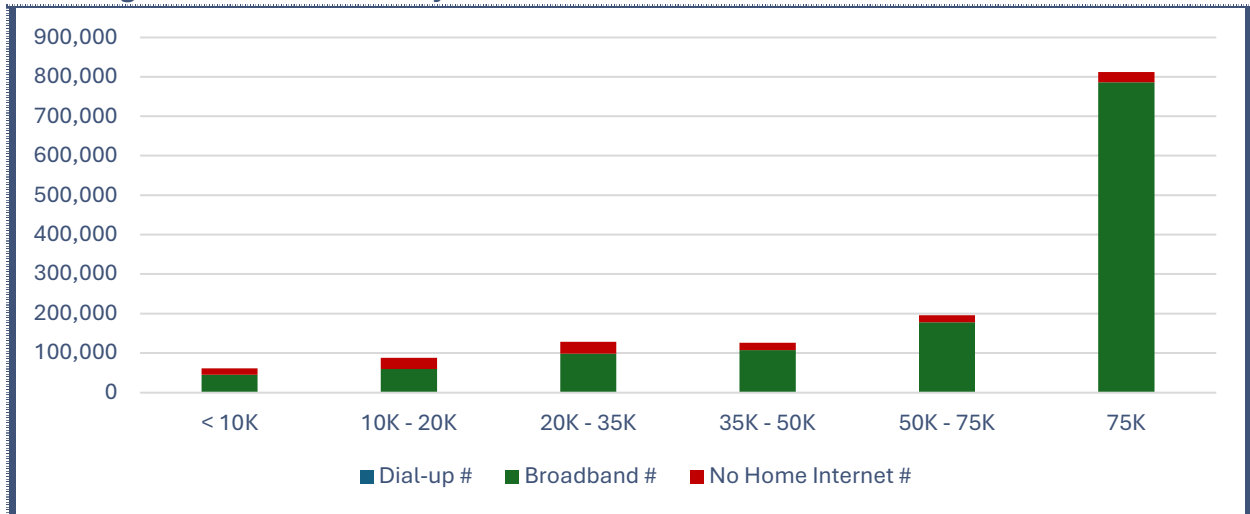
MA-60 Broadband Needs of Housing occupied by Low- and Moderate-Income Households - 91.210(a)(4), 91.310(a)(2)

Describe the need for broadband wiring and connections for households, including low- and moderate-income households and neighborhoods.

Starting in 2019, HUD is asking recipients to consider gaps in broadband or “high-speed” internet access for low- and moderate-income residents and where there are few providers, if any, that compete to provide broadband internet within the jurisdiction. This is a recognition that broadband internet is increasingly necessary to fully participate in the 21st century. It enables access to education and employment, healthcare, news and entertainment, facilitates economic development, and allows people to better connect with family and friends. More and more essential services are transitioning to exclusively online enrollment portals. Increasingly, without access to high-speed internet, individuals are not able to fully participate in society or access programs, services, and information only available online.

According to the 2022 ACS 5-Year Estimates, among the 1.41 million households in CT, there are 1,272,555 with an internet subscription of any type, slightly over 90% of households in Connecticut have an internet connection of some type. There are 2,700 households that are still using dial-up internet, and almost 30,000 households do not have an internet subscription.

MA-60 Figure 1: Home Internet by Household Income



	Dial-up		Broadband		No Home Internet	
	#	%	#	%	#	%
< 10K	166	0.3%	44,389	73.2%	16,118	26.6%
10K - 20K	213	0.2%	59,068	67.2%	28,647	32.6%
20K - 35K	447	0.3%	97,897	76.3%	29,925	23.3%
35K - 50K	293	0.2%	106,894	85.0%	18,544	14.7%
50K - 75K	478	0.2%	176,962	90.5%	18,106	9.3%
75K	1,103	0.1%	784,645	96.7%	25,912	3.2%

Data Source: 2018-2022 ACS - B28004

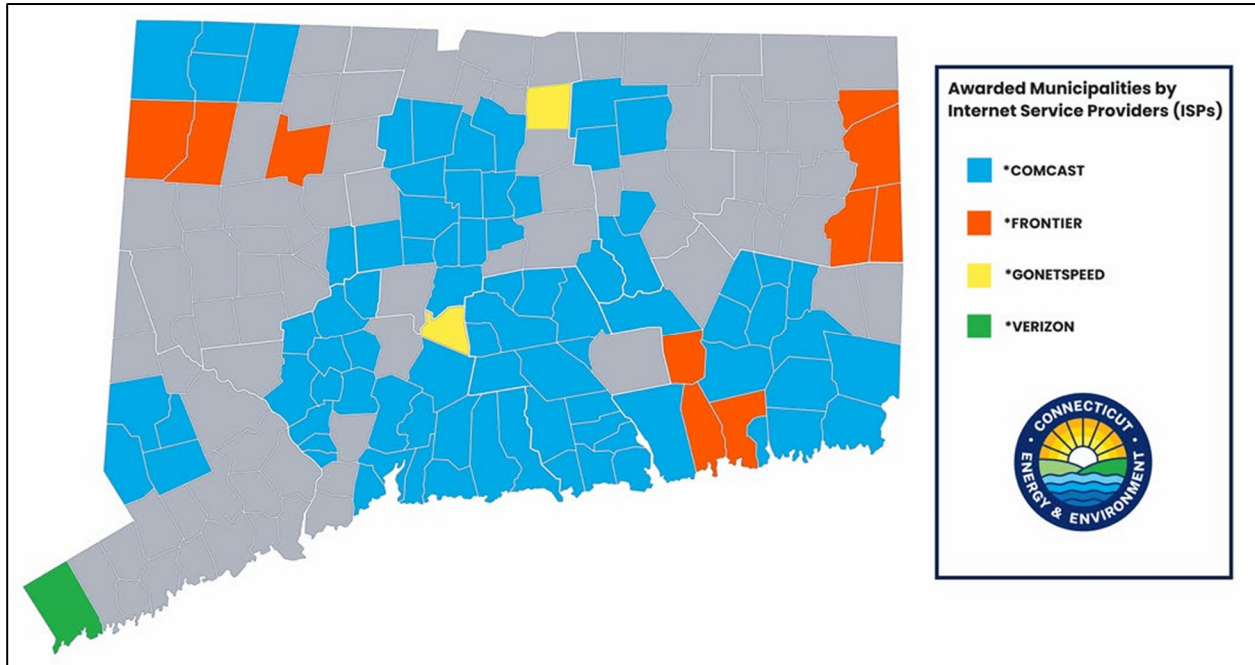
MA-60 Figure 2: Types of Internet Subscriptions

	Number	As % of Total
Total Households:	1,409,807	100.0%
With an Internet subscription	1,272,555	90.3%
Dial-up with no other type of Internet subscription	2,700	0.2%
Broadband of any type	1,269,855	90.1%
Cellular data plan	1,142,873	81.1%
Cellular data plan with no other type of Internet subscription	133,019	9.4%
Broadband such as cable, fiber optic or DSL	1,112,601	78.9%
Broadband such as cable, fiber optic or DSL with no other type of Internet subscription	118,466	8.4%
Satellite Internet service	48,639	3.5%
Satellite Internet service with no other type of Internet subscription	3,139	0.2%
Other service with no other type of Internet subscription	829	0.1%
Internet access without a subscription	29,921	2.1%
No Internet access	107,331	7.6%

Data Source: 2022 ACS 5-Year Estimate

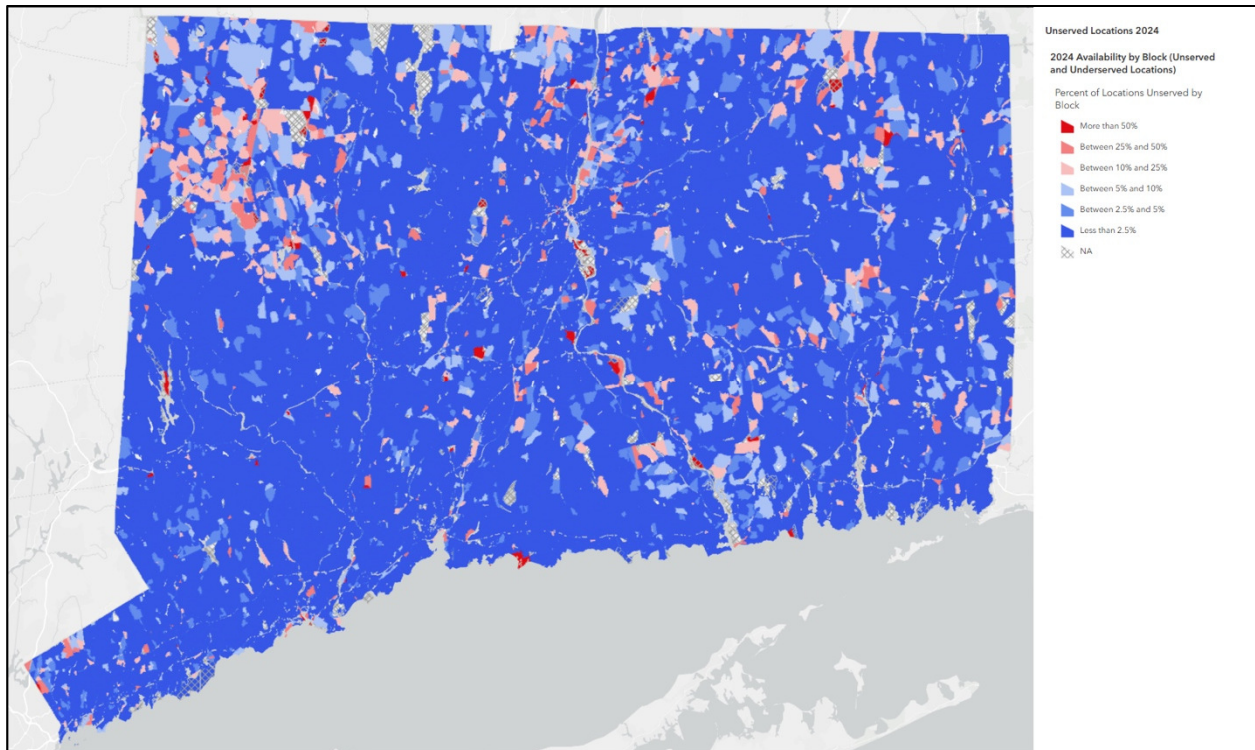
The state of Connecticut recognizes the digital divide and is committed to ensuring universal, high-speed internet access for all residents. In October of 2024, \$28 million in grants was awarded through the ConneCTed Community Grant Program to expand broadband access across the state and extend broadband service to over 3,000 unserved and underserved locations. Concurrently, a second round of grant applications is underway. A total of 88 cities and towns in the state, including 26 on the state's Distressed Municipalities list, will benefit from the grants under the initial round. The second round of funding under this program is expected to distribute another \$12.8 million in grants. The application period for the second round opened on October 1, 2024, and applications are accepted on a rolling basis until funds are expended in advance of the December 2026 ARPA funding deadline. The second round will continue to support infrastructure buildouts and will also include support service in multi-dwelling units in Distressed Municipalities.

MA-60 Figure 3: Awarded Municipalities by Internet Service Providers



Data Source: Connecticut Broadband Report

MA-60 Figure 4: 2024 State Broadband Map



Data Source: CT Broadband Mapping Hub

Towns with the lowest levels of adoption are those with lower levels of availability, and towns with high poverty levels. Of the 10 towns with the lowest levels of adoption, Union, Scotland, and

Cornwall are all also in the top 10 towns for unserved locations. Where service quality is poor or nonexistent, residents may choose not to adopt or may often adopt alternative technologies. High-poverty towns are still significantly overrepresented in low subscription towns and approximately 45% of statistical variance across towns can be accounted for by variation in incomes across the state. While this is still of significance, it has come down from 60% in 2022, suggesting that efforts to increase adoption in low-income neighborhoods have had some success. Still, large cities with high rates of poverty, such as Hartford (67%), New Haven (76%), and New Britain (76%) are all still in the bottom 20 towns when it comes to adoption despite having service available at over 99% of locations within their borders.

Low-income households are most like to cite affordability constraints as a substantial barrier to in-home broadband adoption. The Affordable Connectivity Program stopped accepting new applications and enrollments on February 8, 2024 and April 2024 was the last month enrolled households will receive the full benefit. It is likely that many of these households that were enrolled in the Affordable Connectivity Program may need to discontinue their broadband internet service due to the increase in cost.

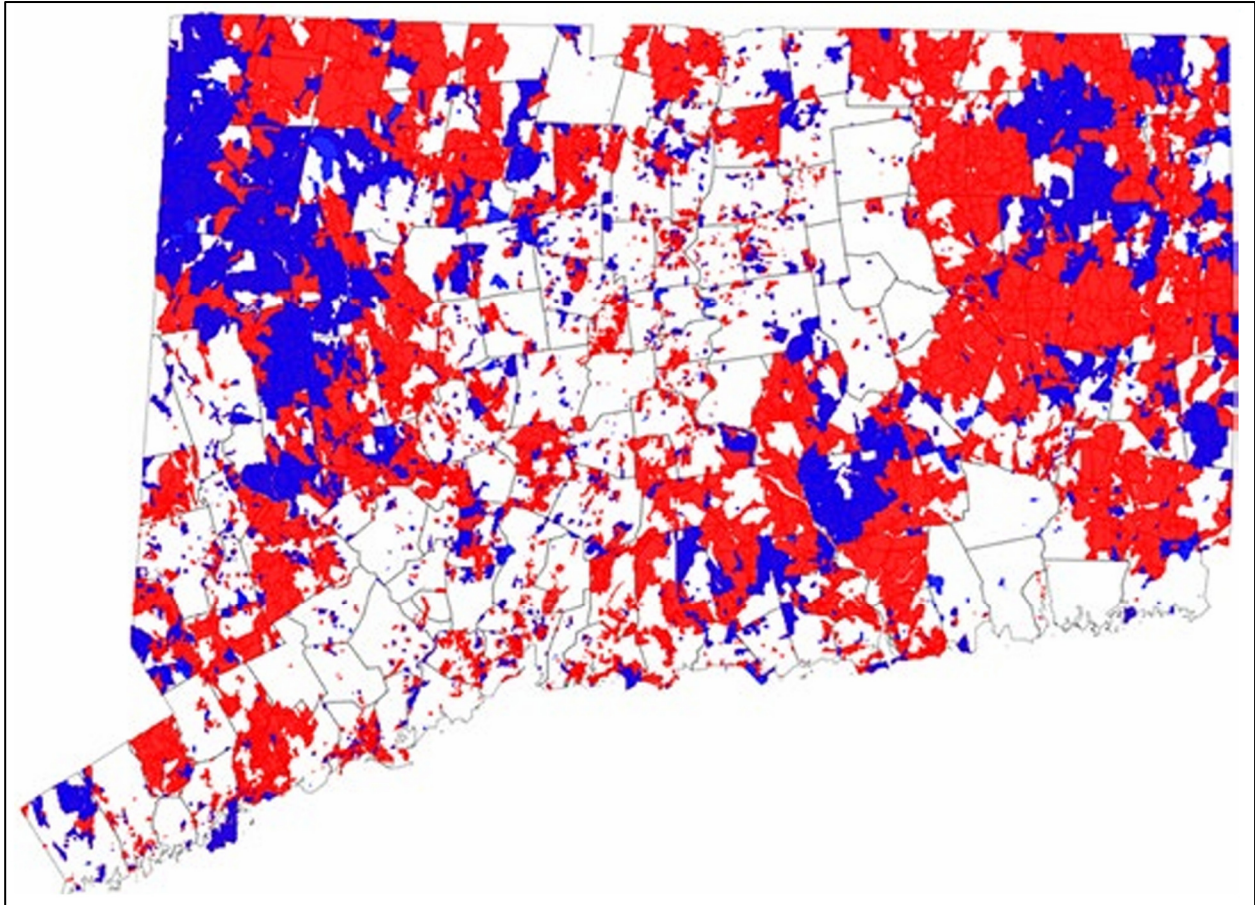
The Broadband Equity, Access, and Deployment (BEAD) Program was allocated \$42.45 billion by the Infrastructure Investment and Jobs Act (also known as the Bipartisan Infrastructure Law) to expand high-speed internet access across the country by funding broadband planning, deployment, mapping, equity, and adoption projects and activities. As part of this federal grant program, Connecticut will receive \$144 million to enhance broadband in the state. This competitive grant program will fund the deployment of broadband service to unserved and underserved locations. After all locations have been served, any remaining funds will be used to support deployment of gigabit connections to community anchor institutions and digital equity related projects.

Describe the need for increased competition by having more than one broadband Internet service provider serve the jurisdiction.

There is a need for increased competition by having more than one broadband Internet service provider in jurisdictions for healthy economic competition with the hope that competition would drive costs down and help make Internet access more affordable, especially to extremely low- and low-income households. Build-out efforts over the past two years in CT have resulted in increased competition throughout the state, with the number of locations with only one provider offering qualifying broadband (100 Mbps/20 Mbps or higher) decreasing significantly. The number of locations with only one provider available dropped from just over 500,000 as of June 30, 2022, to 197,103 in the most recent filing as of June 30, 2024.

The map below shows the changing geography in CT of areas with only one qualifying provider of high-speed internet. The Census Block Groups highlighted in red represent blocks with only one provider as of June 30, 2022, while blue represent census blocks with only one provider as of June 30, 2024. There has been a significant increase in areas of the state with more than one broadband internet service provider.

MA-60 Figure 5: Areas with Only One Qualifying Provider, 2022 and 2024



Data Source: Connecticut Broadband Report

MA-65 Hazard Mitigation - 91.210(a)(5), 91.310(a)(3)

Describe the jurisdiction's increased natural hazard risks associated with climate change.

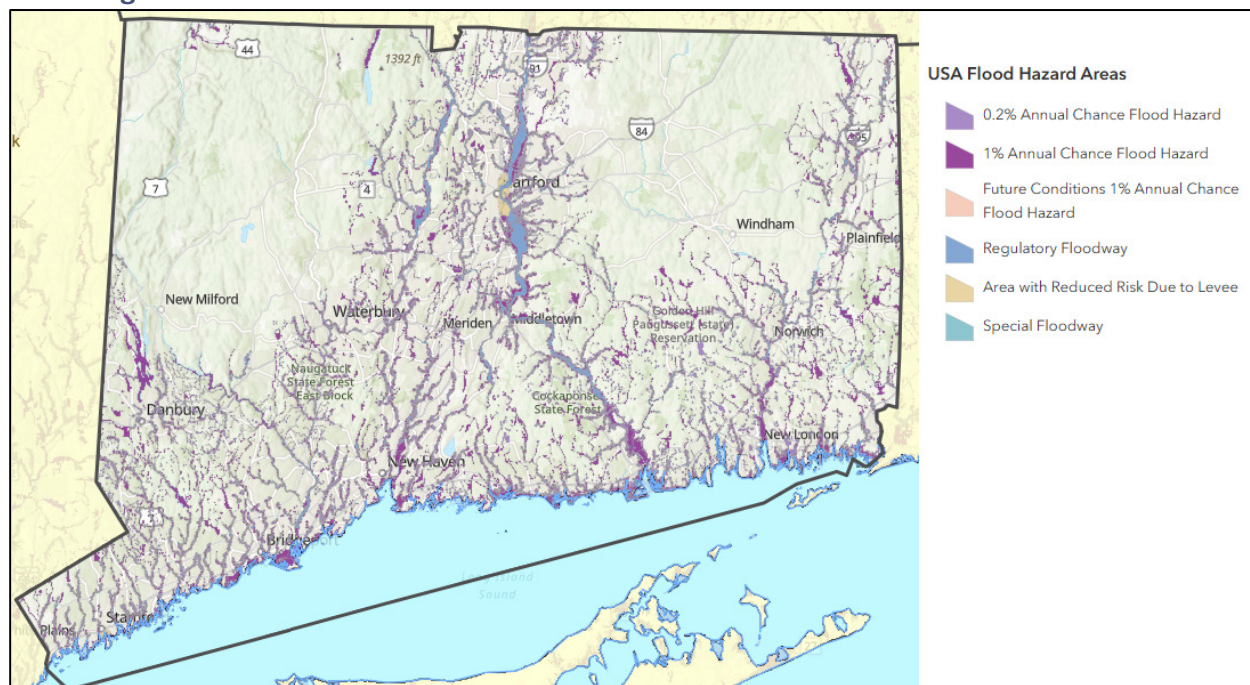
This section analyzes and describes any low- and moderate- income communities at risk from natural hazards, including those that are expected to increase due to climate change. Information about the state's increased natural hazard risks associated with climate change came from multiple sources, including CT's Hazard Mitigation Plan, CT's Statewide Historic Preservation Plan, the Governor's Council on Climate Change 2021 Taking Action on Climate Change and Building a More Resilient CT for All report, and the November 2024 draft of the Connecticut Conservation & Development Policies Plan 2025-2030.

Climate change related severe weather events are increasing throughout Connecticut. Climate change acts as an amplifier of existing hazards and extreme weather events have become more frequent and more severe over the past 40 to 50 years. This trend is projected to continue as the level of human-created emissions and greenhouse gases continues to increase. The hazards determined to have a significant impact on the population and built environment of Connecticut are:

- Dam Failure
- Drought
- Earthquakes
- Flood-Related Hazards
- Sea Level Rise
- Thunderstorm-Related Hazards
- Tornados
- Tropical Cyclones (Hurricanes and Tropical Storms)
- Wildland Fires
- Winter Weather

Rising sea levels, coupled with potentially higher hurricane wind speeds, rainfall intensity, and storm surges are expected to have a significant impact on coastal communities. More intense heat waves will likely lead to more heat-related illnesses, droughts, and wildfires. Climate change is intensifying the risks from natural hazards ranging from snowstorms, droughts, and wildfires to coastal storms such as hurricanes and nor'easters. Although no area is risk-free, coastal and riverine zones are especially vulnerable because of flood risks. Data collected by the SHPO in Connecticut's four coastal counties show significant risk to designated historic properties. More than 3,000 historic buildings and districts are at risk of flooding during coastal storms. Data also shows that many of these and other resources will be inundated under median projections for sea level rise.

MA-65 Figure 1: CT Flood Hazards Areas



Data Source: Esri Landscape Maps

The changing character and severity of weather events coupled with projections for sea level rise pose direct and dramatic threats to Connecticut's historic properties and heritage assets. Anticipated hazards to historic properties from weather events and sea level rise include, but are not limited to:

- Inundation from storm surge and riverine flooding
- Structural stress from high winds
- Erosion from flooding, storm surge, and high winds
- Debris damage related to high winds and flooding
- Structural damage from snow loads
- Freeze-thaw damage related to extreme temperature swings

Describe the vulnerability to these risks of housing occupied by low- and moderate-income households based on an analysis of data, findings, and methods.

A full assessment of vulnerabilities throughout the state for each of the climate change related hazards listed above as they relate to housing occupied by low- and moderate-income individuals and families is not possible as low- and moderate-income households are present in every community. The majority of hazards determined to have a significant impact on the population and built environment of Connecticut impact all households irrespective of household income. Please see opportunity mapping on the Department of Housing website for details on areas of low- and moderate-income households.²²

²² https://www.ctoca.org/ct_opportunity_map

As indicated by the Connecticut State Historic Preservation Office in its Shared Stewardship: 2018-2023 Statewide Historic Preservation Plan, climate change and associated sea level rise have emerged as serious and immediate threats to the preservation of Connecticut's historic properties and other resources. As the science of climate change has advanced, with patterns of projected change demonstrated empirically, threats to historic and other resources have become a focus of public, private, and professional concern. The categories of impacts to properties have emerged from current scientific data and from our current national posture:

- **Storm Events:** the first major threat is the increased number, severity, and frequency of storm events with the potential to result in substantial damage to and /or loss of properties.
- **Sea Level Rise:** the second category of impact is sea level rise. Major threats with sea level rise are resource inundation, loss or damage from increased storm surge, loss of access and services related to disruptions to infrastructure including bridges, roads, and services, and loss of resources related to the implementation of abandonment as an adaptation measure.
- **Environmental Change:** the third category of threat is associated with the trajectory of environmental change that will impact the physical patterns of care. New and unexpected conditions of conducive material deterioration are anticipated to emerge in the state; they will require increased conservation intervention. These include increased temperatures resulting in increased thermal movement; changes in expansion and contraction rates associated with altered seasonal cycles; and invasive species, including vegetation, insects, biological, and microbiological agents, that are anticipated to become more common and to pose increasing threats through infestation or decay.

Integrating resources resiliency into state and local government plans is critical to ensure that preservation values are represented in plans for hazard mitigation, conservation, and development, and climate preparedness. The effects of climate change and rising sea levels are real and the benefits of preservation-friendly resiliency and sustainability measures will be critical in protecting our coastal and riverine zones, particularly in low-lying areas where low- and moderate-income households are often located.

Flood risks related to rising sea levels, storm surges, and increasing rainfall intensity are one of the highest risks throughout Connecticut, and in particular coastal communities. Coastal cities and towns will become more vulnerable to storms in the coming century as sea level rises, shorelines erode, and storm surges become higher. Rising sea level erodes wetlands and beaches, reducing their mitigating effect on coastal storms. Infill and shoreline development further reduce the capacity of natural coastlines to reduce storm surges and impacts of sea level rise. With less natural protection, coastal communities are more vulnerable to the impacts of climate change. There are large areas of low- to moderate-income census tracts in Bridgeport are subject to flooding, particularly the South End, West End and Est End communities, and neighborhoods along the Pequonnock River, and the Enterprise Zone off Route 8. In the New Haven area, the West River, Edgewood, Amity, West Rock, Fairhaven, and Fairhaven Heights neighborhoods have high concentrations of low- and moderate-income households at high risk of flooding.

Strategic Plan

SP-05 Overview

The Connecticut Department of Housing's (DOH) mission is to ensure everyone has access to quality housing opportunities and to ensure options are available for everyone throughout the State of Connecticut. DOH has fully embraced the challenge of providing a variety of housing options for all income levels, tenancy, age groups, and disability status in municipalities and neighborhoods throughout CT. DOH has leveraged state, federal and private resources to facilitate the development and preservation of all types of housing, including ownership and rental housing, conventional market-rate rental to deed-restricted affordable housing and supportive housing, and rapid and long-term production. Importantly, the vast majority of projects supported with funding from DOH are affordable units, with income targeting from 30% AMI, 50% AMI, 60% AMI, 80% AMI, up to 120% AMI.

The level of homelessness throughout the state is directly correlated to the lack of affordable housing in the state's communities. More families and households of every type are trying to make ends meet and are finding it increasingly more difficult to pay rent. To respond to this ongoing crisis, the primary goal of this strategic plan is to continue producing affordable housing, in as many communities as possible, and quickly as possible. DOH recognizes the urgent need for additional housing of all types throughout the state and is deploying resources as quickly as possible to increase the supply of high-quality housing units.

Collaboration is key. Partnerships must be fostered with local governments, state agency partners, non-profit and for-profit developers, housing authorities, and the private sector to develop, innovate and sustain creative and comprehensive housing solutions inclusive of mixed-income housing, mixed-use development, adaptive reuse, transit-oriented development, supportive services, and sustainable development. Approaching 20 years after the Great Recession, many opportunities to stabilize housing have been missed. As the housing market has stabilized and rebounded, the production of housing that communities and the state needs has been insufficient.

Further, the dramatic disparity in homeownership rates between urban communities and suburban and rural communities continues to be exacerbated as more and more large-scale rental housing continues to be produced in urban communities that are better able to absorb these developments. As a microcosm of the state, Hartford has the lowest homeownership rate, standing at approximately 23%. There are neighborhoods where the homeownership rate is as low as 7%. In neighboring jurisdictions, the homeownership rate will be 70%, 80%, or higher.

As described in the CT Housing & Segregation Study from January 2024, the concentration of people of color is centered in cities due to historical practices. Segregation in Connecticut is high, regardless of the index or race/ethnicity being referenced. The cities of Bridgeport, Hartford, and New Haven have ingrained urban patterns and have the highest measures of segregation. These are followed closely by the suburbs, which are the areas in which segregation is holding steady or increasing. Rural areas have the lowest levels of segregation, generally due to low population density.

Due to the historical and current patterns of segregation, where populations of color are primarily concentrated in urban areas with limited and diminishing opportunities for homeownership, there are limited opportunities for communities of color to build wealth. People of color in Connecticut are far less likely to own their own homes with households identifying as Black or African American

having just a 41% homeownership rate compared to 73% for White households. This is explored more fully in Section MA-10.

Connecticut's housing environment is challenging, with rising rents and home prices putting significant pressure on CT households even as household income is increasing. In order for Connecticut to function at its best, there must be an adequate supply of housing in proximity to employment, public transportation, and community facilities, such as public schools. The housing stock must include affordable and accessible for sale rental units, not only to meet social equity goals, but in order to ensure community viability. The development of a diverse and affordable housing stock must be carried out without sacrificing sound regulations that are in place to protect the environment and public health.

The State of Connecticut has seen increases in chronic and family homelessness, and the homeless response system is finding it increasingly more difficult to meet the demands. While CT had effectively eliminated chronic Veteran homelessness, in the past 4 years Veteran homelessness has reappeared. DOH has worked extensively towards informed decision making that creates housing options for all people including extremely low-, very low-, low- and moderate-income households, seniors, people with special needs, families and children, and the homeless in rural, suburban, and urban areas.

The strategic plan establishes the framework for the efficient allocation of all state and federal resources available to DOH, including federal formula grant funding, for the development and preservation of affordable housing and community development activity that assists extremely low-, low- and moderate-income households in the state over the next five years. The consolidated plan articulates policies, strategies, goals and objectives, which are based on an analysis of the state's housing needs, housing market, and community development needs.

Housing is a key component of attaining and sustaining local viability, community health and ensuring a thriving community. Ensuring affordable housing options for both owners and renters is an important contributing factor to future community health. Additionally, many of Connecticut's most vulnerable citizens need quality affordable housing with the availability of supportive services. In order to address these needs, it is important to add new housing as well as preserve the affordable housing that presently serves households in a coordinated and efficient manner.

Housing development is linked to Connecticut's other public policy areas which include education, transportation, energy cost and availability, public health and safety, environmental quality, and economic development. These areas are not independent of each other. They are interconnected and interdependent. Just as transportation is not just a network of roads and bridges, housing is not just shelter. It is an integral part of the state's socio-economic fabric. Public policy and investment decisions made in one area directly and indirectly impact the other areas. As such, the state must comprehensively consider these relationships and take a multifaceted and balanced approach to addressing Connecticut's housing and community development needs.

SP-10 Geographic Priorities – 91.215 (a)(1)

General Allocation Priorities

Describe the basis for allocating investments geographically within the jurisdiction (or within the EMSA for HOPWA)

The following federal resources will be directed toward specific geographic areas as described below:

Emergency Solutions Grant (ESG) - Emergency Solutions Grant Funds are awarded through a formula established by the federal government. The state's allocation of ESG funds may be used anywhere in Connecticut with the exception of four jurisdictions (Bridgeport, Hartford, New Haven and Waterbury). These jurisdictions receive their own allocations of ESG funds directly from the federal government and are therefore not eligible for state allocations. Because of the transient nature of homelessness, the ESG program is exempt from Priority Funding Area requirements.

Home Investment Partnership Program (HOME) and the **National Housing Trust Fund (NHTF)** - The state's allocation of HOME and NHTF funds may be used anywhere within the State of Connecticut. Priority will be given to activities in higher opportunity areas as demonstrated through Opportunity Mapping at the DOH website in accordance with the most recent Analysis of Impediments to Fair Housing Choice.

Federal Low-Income Housing Tax Credits (LIHTC) - Federal Low-Income Housing Tax Credits may be used anywhere within the State of Connecticut. However, in accordance with federal law, states are required to develop allocation criteria that disperse the tax credits across the state through an IRS-approved competitive process. CHFA is Connecticut's tax credit administering agency and has an approved competitive process that allows points to be given to rental housing projects. CHFA's allocation plan must be and is consistent with the recommendations in the State Plan of Conservation and Development.

Small Cities Community Development Block Grant (SC/CDBG) – SC/CDBG funds are awarded through a formula established by the federal government. The state's allocation of SC/CDBG funds may not be used in any of the following jurisdictions: Bridgeport, Bristol, Danbury, East Hartford, Fairfield, Greenwich, Hamden, Hartford, Manchester, Meriden, Middletown, Milford Town, New Britain, New Haven, New London, Norwalk, Norwich, Stamford, Stratford, Waterbury, West Hartford, West Haven. These jurisdictions are Entitlement Communities and receive their own allocations of CDBG funds directly from the federal government and are not eligible for a state allocation designated for Small Cities.

Housing Opportunities for Persons Living with HIV/AIDS (HOPWA) - The majority of HOPWA dollars allocated to Connecticut are apportioned through the eligible Metropolitan Statistical Area (EMSA) of Bridgeport, Hartford, New Haven and their surrounding areas. DOH receives a small amount of "Balance of State Dollars" and uses a competitive procurement process for HOPWA services to ensure statewide coverage for the balance of state catchment area: Windham County, New London County, Middlesex County and Litchfield County.

SP-25 Priority Needs - 91.215(a)(2)

SP-25 Figure 1: Priority Needs Summary

1	Priority Need Name	Development of Affordable Housing
	Priority Level	High
	Population	Income Level: • Extremely Low • Low • Moderate • Middle Family Types: • Large Families • Families with Children • Elderly • Public Housing Residents Homeless: • Chronic Homeless • Individuals • Families with Children • Mentally Ill • Chronic Substance Abuse • Veterans • Persons with HIV/AIDS • Victims of Domestic Violence Non-Homeless Special Needs: • Elderly • Frail Elderly • Persons with Mental Disabilities • Persons with Physical Disabilities • Persons with Developmental Disabilities • Persons with Alcohol or Other Addictions • Persons with HIV/AIDS and their Families • Victims of Domestic Violence
	Geographic Areas Affected	
	Associated Goals	Quality Affordable Housing Public Housing Strategies
	Description	Owner-occupied and rental housing projects that create extremely low-, very low-, low- and moderate-income housing
	Basis for Relative Priority	Based on housing and community development needs, and past funding requests, demand remains high for the development and rehabilitation of affordable housing units.
2	Priority Need Name	Preservation of Existing Affordable Housing
	Priority Level	High

	Population	Income Level: • Extremely Low • Low • Moderate • Middle Family Types: • Large Families • Families with Children • Elderly • Public Housing Residents Homeless: • Chronic Homeless • Individuals • Families with Children • Mentally Ill • Chronic Substance Abuse • Veterans • Persons with HIV/AIDS • Victims of Domestic Violence Non-Homeless Special Needs: • Elderly • Frail Elderly • Persons with Mental Disabilities • Persons with Physical Disabilities • Persons with Developmental Disabilities • Persons with Alcohol or Other Addictions • Persons with HIV/AIDS and their Families • Victims of Domestic Violence
	Geographic Areas Affected	
	Associated Goals	Quality Affordable Housing Public Housing Strategies
	Description	Preservation of existing owner-occupied and rental housing for extremely low-, very low-, low-, and moderate-income households.
	Basis for Relative Priority	Based on housing needs assessment and past funding requests, demand remains high for housing rehabilitation.
	3 Priority Need Name	Permanent Supportive Housing for Special Needs Populations
	Priority Level	High

	Population	Income Level: • Extremely Low • Low • Moderate • Middle Family Types: • Large Families • Families with Children • Elderly • Public Housing Residents Homeless: • Chronic Homeless • Individuals • Families with Children • Mentally Ill • Chronic Substance Abuse • Veterans • Persons with HIV/AIDS • Victims of Domestic Violence Non-Homeless Special Needs: • Elderly • Frail Elderly • Persons with Mental Disabilities • Persons with Physical Disabilities • Persons with Developmental Disabilities • Persons with Alcohol or Other Addictions • Persons with HIV/AIDS and their Families • Victims of Domestic Violence
	Geographic Areas Affected	
	Associated Goals	Quality Affordable Housing Homeless Prevention and Supportive Housing
	Description	Create decent permanent supportive housing units for low- and moderate-income persons with special needs, including the elderly and frail elderly; those living with some type of physical or cognitive disability; those living with HIV/AIDS and their families; persons with substance use disorders; victims of domestic violence, dating violence, sexual assault, and stalking; formerly incarcerated; youth transitioning from the foster care system; and other population groups that may be identified as having special needs, which might require housing with supportive services, in the future.
	Basis for Relative Priority	These special needs populations have been found to have higher barriers to accessing housing options in the state. Based on housing needs, and increased service needs for homeless and special needs populations, the state will work to expand housing opportunities linked to supportive services when necessary.

4	Priority Need Name	Homelessness Prevention
	Priority Level	High
	Population	Income Level: • Extremely Low • Low • Moderate • Middle Family Types: • Large Families • Families with Children • Elderly • Public Housing Residents Homeless: • Chronic Homeless • Individuals • Families with Children • Mentally Ill • Chronic Substance Abuse • Veterans • Persons with HIV/AIDS • Victims of Domestic Violence Non-Homeless Special Needs: • Elderly • Frail Elderly • Persons with Mental Disabilities • Persons with Physical Disabilities • Persons with Developmental Disabilities • Persons with Alcohol or Other Addictions • Persons with HIV/AIDS and their Families • Victims of Domestic Violence
	Geographic Areas Affected	
	Associated Goals	Homeless Prevention and Supportive Housing
	Description	Need for enhancing suitable living environment, create decent housing, and address the shelter, housing and service needs of the homeless, and those threatened with homelessness with an emphasis on ending chronic homelessness, including veteran's and family homelessness, as well as preventing future homelessness.
	Basis for Relative Priority	CT has seen a 13% overall increase in homelessness from 2023 to 2024, and a 32% increase from 2021 when homelessness was at its lowest level in CT.
5	Priority Need Name	Non-Housing Community Development
	Priority Level	Low

	Population	Income Level: • Extremely Low • Low • Moderate • Middle Family Types: • Large Families • Families with Children • Elderly • Public Housing Residents Non-Housing Community Development
	Geographic Areas Affected	
	Associated Goals	Non-Housing Community Development
	Description	The state will provide assistance to help undertake community infrastructure and public facility improvement projects affecting the public health, safety, and welfare of LMI individuals and households. The state will also fund limited infrastructure improvements particularly those connected to affordable housing developments that will benefit LMI households.
	Basis for Relative Priority	Based on consultations and data analysis.
6	Priority Need Name	Eliminate Lead Based Paint Hazards
	Priority Level	High
	Population	Income Level: • Extremely Low • Low • Moderate • Middle Family Types: • Large Families • Families with Children • Elderly • Public Housing Residents
	Geographic Areas Affected	
	Associated Goals	Eliminate Lead Based Paint Hazards
	Description	In coordination with the Healthy Homes Initiative, which is spearheaded by the Department of Public Health (DPH), DOH supports the federal Lead Hazard Reduction Demonstration Program, which in Connecticut is referred to as Connecticut Children's Healthy Homes program in conjunction with the Connecticut Lead Action for Medical Primary Prevention Project.

	Basis for Relative Priority	There is a need to protect children before they are poisoned by lead hazards or injured by safety hazards in their homes. The Healthy Homes Program integrates health and safety interventions, lead hazard control, energy efficiency interventions, and housing rehabilitation for property owners by coordinating resources in an efficient manner to produce healthy homes.
7	Priority Need Name	Fair Housing and Housing Choice
	Priority Level	High
	Population	Income Level: • Extremely Low • Low • Moderate • Middle Family Types: • Large Families • Families with Children • Elderly • Public Housing Residents Homeless: • Chronic Homeless • Individuals • Families with Children • Mentally Ill • Chronic Substance Abuse • Veterans • Persons with HIV/AIDS • Victims of Domestic Violence Non-Homeless Special Needs: • Elderly • Frail Elderly • Persons with Mental Disabilities • Persons with Physical Disabilities • Persons with Developmental Disabilities • Persons with Alcohol or Other Addictions • Persons with HIV/AIDS and their Families • Victims of Domestic Violence
	Geographic Areas Affected	
	Associated Goals	Fair Housing and Housing Choice Remove Barriers to Affordable Housing

	Description	Within available appropriations, the DOH will continue to support the Connecticut Fair Housing Center with their efforts to assist the State of Connecticut to fulfill the recommendations in the state's Analysis of Impediments to Fair Housing Choice for state level action. DOH will continue to conduct regular monitoring of its funding recipients in the areas of civil rights and fair housing and enforcement. The state will update and redraft the Connecticut Fair Housing Regulations consistent with guidance from the Fair Housing Enforcement Office HUD. The state will implement a variety of action steps to address barriers to affordable housing identified in The Analysis of Impediments to Fair Housing Choice, including the following. • Creation and rehabilitation of affordable housing in a variety of locations. • Collaborate with other agencies to affirmatively further fair housing. • Convene stakeholders to review potential legislative solutions to existing impediments. • Maximize the effectiveness of programs that promote mobility. Promote fair housing enforcement and education.
	Basis for Relative Priority	The Analysis of Impediments to Fair Housing Choice provides a very clear description of the various barriers to affordable housing, and established an attainable road map for addressing the various barriers to affordable housing in Connecticut.

Narrative (Optional)

During the development of the 2025-2029 Consolidated Plan, CEW Advisors, Inc., on behalf of the DOH, engaged in a comprehensive fact-finding exercise which included data research and analysis, literature review of relevant reports, studies, and planning guides. This data was validated and supplemented through roundtable discussions, focus groups, one-on-one consultation interviews, stakeholder conversations, community meetings, and online survey results to identify priority needs. This information served as the foundation for the development of the Consolidated Plan and guides the Strategic Plan. These priority needs are integrated into the Goals of this Consolidated Plan and will be addressed systematically through a series of projects and actions over the next five years.

The State of Connecticut defines “high priority need” to include activities, projects, and programs that will be funded with federal funds, either alone or in combination with other public or private investments, to address the described needs during the Strategic Plan program years. Regarding “low priority needs,” these are activities, projects, or programs that *may* be funded with federal funds, either alone or in combination with other public or private investments, if additional federal funding becomes available during the strategic plan program years.

Priority ratings were established after a thorough examination of Connecticut's housing and community development needs, the state's current and historical housing market (See Needs Assessment and Housing Market Analysis sections), and based on the consultation and

community engagement process described above. Based on the review of all relevant and available data, and in discussion with state agency partners, municipal leaders and staff, public housing authorities, affordable housing developers, public service agencies, and the broader public, key themes and priorities were consistently identified. Issues chosen to be assigned high priority funding status within this plan were selected based on four primary factors.

- 1) the primary eligibility criteria of the respective funding,
- 2) the availability of other funds to address the issue,
- 3) the relative demonstrated need as identified in the needs assessment, and
- 4) the impact of the issue on the prevention and reduction of homelessness.

This does not exclude the state from funding lower priority projects; however, the high priority designation serves to emphasize to the public which areas the state will concentrate its efforts over the next five years, in terms of housing and community development. A proposed project that addresses a high priority need is not guaranteed funding based solely on the fact that it will address a high priority need. All projects funded by the state must be financially and logistically feasible as well as meet all the eligibility criteria of the proposed funding source. When two or more projects are competing for funding dollars (all things being equal), the project addressing the high priority need will be given funding preference.

SP-30 Influence of Market Conditions – 91.215 (b)

Influence of Market Conditions

Affordable Housing Type	Market Characteristics that will influence the use of funds available for housing type
Tenant Based Rental Assistance (TBRA)	Statewide, 77% of households with incomes under 50% AMI including both renters and homeowners pay at least 30% of their income for housing. 78% of the lowest income households (households with incomes at 30% AMI or less) pay more than 30% of their income for housing, and 64% pay more than 50% of their income for housing. Housing cost burden and severe housing cost burden are the largest problems facing the lowest-income households in the state, increasing their risk of being homeless. As household income decreases, housing cost burden and severe housing cost burden increases. Severe cost burden has been linked with instability and an increased risk of homelessness.
TBRA for Non-Homeless Special Needs	Connecticut has a population of residents who are not homeless but have special needs that may require deeply subsidized and/or service-enriched housing, including elderly, frail- elderly, persons with physical or mental disabilities, individuals living with HIV/AIDS, domestic violence victims, formerly incarcerated, and youth aging out of the foster care system. These individuals are often disproportionately low-income, earning a fraction of what people without these special needs earn. There is a connection between age and disability status. Although a wide variety of disabilities exist in Connecticut, the most common difficulty is mobility. As a result, the availability of housing that is accessible or visitable is an important factor to consider as we develop and rehabilitate Connecticut's housing. Persons with disabilities may have one or more physical, mental, or developmental conditions that constrain their possibilities for obtaining suitable housing. Persons with disabilities may require a single level home, special equipment to aid them in carrying out daily functions, or even a regular home nurse or family member to care for them. If their special needs are not met, many may become homeless.

New Unit Production	Of great concern is housing that the market is unable or unwilling to produce, without some form of subsidy, including housing that is traditionally for those with incomes between 80% and 120% of Area Median Income/Median Family Income (AMI/FMI). If housing that is affordable to households with incomes between 80% and 120 % of AMI/FMI is not being produced, then the availability of existing housing in that price range diminishes. In keeping with economic laws of supply and demand, scarcity increases prices. Adding to increased prices was the rising of federal interest rates, rising construction costs, and rising labor costs. After many years of low levels of new construction, housing stock is well short of what Connecticut needs for a vibrant and well-functioning housing market. Pandemic-related home purchasing has greatly impacted many cities throughout CT. If supply continues to fall short of demand, home prices and rents will continue to outpace income and household formation will fail to reach potential. The inadequate level of housing supply is a major challenge facing the Connecticut housing market today and for years to come unless there is an unprecedented level of investment for new housing production.
Rehabilitation	Connecticut has a large inventory of older housing stock, of which 68% was built prior to 1980; 26% of homes were built before 1950 and another 42% were built between 1950 and 1979. These older units will need more frequent and possibly more expensive maintenance and repairs in the coming years. Older housing stock also may not have the improvements and amenities expected in today's market and might not have the accessibility features necessary for the state's growing senior population. The age of the housing stock has implications on the need for rehabilitation regarding lead abatement. There are 6,415 renter households and another 1,870 owner households occupying substandard housing. These are the most critical rehabilitation needs as this implies these households may not have functioning kitchens or bathrooms. The older housing units may be the ones that lack complete plumbing or kitchen facilities which will further impact their vacancy and home repair needs. Approximately 3.2% of properties in Connecticut are listed as "other vacant." These 48,664 housing units may indicate different levels of disinvestment up to abandonment.

Acquisition, including preservation	The acquisition cost is the primary market factor for the viability of converting existing market-rate units to affordable housing units. The rising cost of housing requires strategic intervention by the state to maintain and increase high quality, affordable housing throughout CT. There is an insufficient amount of affordable housing to meet the demands of the state’s LMI households. Acquiring market-rate housing to convert to affordable units is largely cost prohibitive in the current real estate market. The state will use federal and state funds for acquisition and rehabilitation of a contaminated property that the private sector cannot approach feasibly, or for historic preservation within a neighborhood revitalization context. While there is a market for historical properties, their renovation or re-purposing costs are prohibitive. The state will identify opportunities for the potential loss of public housing units due to expiring contracts or owner choice to preserve existing public housing, and work with those owners and prospective developers/investors to leverage a variety of resources targeted at the preservation of these units so they are not lost from the total affordable housing inventory for the state.
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SP-35 Anticipated Resources - 91.215(a)(4), 91.220(c)(1,2)

Introduction

The state of CT receives five annual allocations from HUD. These include Community Development Block Grant (CDBG), HOME Investment Partnership Program (HOME), National Housing Trust Fund (HTF), Emergency Solutions Grant (ESG), and Housing Opportunities for Persons with HIV/AIDS (HOPWA). The strategic plan establishes the framework for the efficient allocation of all state and federal resources available to DOH, including federal formula grant funding, for the development and preservation of affordable housing and community development activity that assists extremely low-, low-, and moderate-income households in the state over the next five years. The consolidated plan articulates policies, strategies, goals and objectives which are based on an analysis of the state's housing needs, housing market, and community development needs.

While it is challenging to predict future Federal resources based on Congressional appropriations, the state anticipates receiving approximately **\$150 million** in total funding over the 5-year period from July 1, 2025 to June 30, 2030. Funding can fluctuate based on allocation methodologies nationally and based on Congressional funding levels. To project allocations for the next 5 years, funding levels for the previous five years was averaged and used as an estimate for future annual allocations for each of the next 5 years. Based on historical funding levels, it is projected that the state of CT will receive the following funding amounts for the 2025-2029 Program Years.

- **CDBG:** 69,477,793
- **HOME:** 52,175,024
- **HTF:** 15,724,165
- **ESG:** 11,492,213
- **HOPWA:** 1,444,246

Predicting the level of resources and basing accomplishments on these unknown Federal monies is not the most judicious approach. Congress may increase or reduce its appropriation to HUD in any one or every program year covered by this Consolidated Plan. The greatest risk to the efficient and effective delivery of programs and projects is related to fluctuations in funding. If funding allocations are reduced, the state's projected goals described in **SP-45: Goals Summary** may not be accomplished. Similarly, if funding increases then we anticipate additional opportunities to meet the state's affordable housing goals to occur. Further, while the state has made substantial progress in addressing housing and community needs throughout Connecticut, the sheer magnitude of the housing crisis and the limited new housing construction over the past 20 years makes it unlikely that existing needs will ever be truly addressed without a substantial increase in the Federal government's commitment to housing development.

Table 5 - Federal Allocations by Program, 2020-2024

	2020	2021	2022	2023	2024	5-Year Average
CDBG	13,854,179	8,511,446*	13,935,925	13,912,108	13,880,022	13,895,559
HOME	9,450,436	9,692,243	11,141,314	11,760,168	10,130,863	10,435,005
HTF	3,750,859	8,448,637	9,720,275	4,510,425	3,144,833	5,915,006
ESG	2,366,278	2,233,995	2,247,787	2,257,349	2,386,804	2,298,443
HOPWA	265,668	271,901	283,088	312,736	310,853	288,849

Data Source: Integrated Disbursement and Information System

Note: The 2021 CDBG allocation total was removed from the 5-Year Average.

SP-35 Figure 1: Anticipated Resources

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
CDBG	Public - Federal	Admin and Planning Acquisition Economic Development Housing Public Improvements Public Services	13,895,559			13,895,559	55,582,234	The Community Development Block Grant (CDBG) program is a flexible program that provides communities with resources to address a wide range of unique community development needs. CDBG works to ensure decent affordable housing, a suitable living environment, and expanded economic opportunities, principally to low- and moderate-income individuals and households.
HOME	Public - Federal	Acquisition Homebuyer assistance Homeowner rehab Multifamily rental new construction Multifamily rental rehab New construction for ownership TBRA	10,435,005			10,435,005	41,740,020	The HOME Program is dedicated to the development of affordable housing by providing decent affordable housing to lower-income households, expanding the capacity of nonprofit housing providers, strengthening the ability of state and local governments to provide housing, and leveraging private-sector participation
HOPWA	Public - Federal	Permanent housing in facilities Permanent housing placement Short term or transitional housing facilities STRMU Supportive services TBRA	288,849			288,849	1,155,397	The HOPWA program is the only federal program dedicated to addressing the housing needs of low-income individuals living with HIV/AIDS and their families. The program provides funds to promote stable housing and supportive services for this population, to prevent homelessness and promote independence.

ESG	Public - Federal	Conversion and rehab for transitional housing Financial Assistance Overnight shelter Rapid re-housing (rental assistance) Rental Assistance Services Transitional housing	2,298,443			2,298,443	9,193,770	The ESG program is focused on alleviating homelessness by providing funds for outreach to homeless individuals and families living on the streets, supporting the operation of the state's emergency shelter system, providing funds to rapidly rehouse individuals and families and to prevent homelessness before it occurs through various support services and financial assistance.
HTF	Public - Federal	Acquisition Admin and Planning Homebuyer assistance Multifamily rental new construction Multifamily rental rehab New construction for ownership	3,144,833			3,144,833	12,579,332	The HTF Program was established under the Housing and Economic Recovery Act of 2008 to address the housing needs of extremely low- and very low-income households by increasing affordable housing supply, supporting long-term affordable rental housing, and promoting homeownership.
Other	public - federal	Other	1,209,615	0	0	1,209,615	0	
Other	public - state	Other	704,913,640	0	0	704,913,640	0	State general obligation bond financing for construction and rehabilitation of affordable housing, including HTF State, Affordable Housing (FLEX), Workforce Housing, Lead Removal, and Time to Own Programs. Funds are used as matching funds and as leverage to incentivize private investment into affordable housing development.

Explain how federal funds will leverage those additional resources (private, state and local funds), including a description of how matching requirements will be satisfied

Financial leveraging and firm financial commitments are important considerations in awarding funding for projects/services. DOH adheres to all matching requirements for each federal funding source.

If appropriate, describe publicly owned land or property located within the jurisdiction that may be used to address the needs identified in the plan

Not applicable.

Discussion

The Department of Housing in collaboration with the Connecticut Housing Finance Authority invites any Developer/Owner that is looking to apply for funding and/or other resources from DOH and/or CHFA for the new construction, substantial rehabilitation, and/or preservation of affordable housing in each calendar year to participate in the Developer Engagement Process. This process is intended to identify and to create a pipeline of potential activity for future funding opportunities including but not limited to new construction, substantial rehabilitation and/or preservation of affordable and supportive housing.

Developers/applicants complete the DOH/CHFA Development Engagement Profile that describes the project, development or concept as it currently stands. There is no requirement to engage a consultant, prepare any formal documentation, obtain any approvals or expend any funds in order to complete and submit the DOH/CHFA Development Engagement Profile.

Upon receipt of a DOH/CHFA Development Engagement Profile, developers/applicants will be contacted by DOH to schedule a face-to-face meeting with DOH and CHFA staff to discuss the proposed activity outlined. When funding is available, including CDBG, HOME, NHTF, and state bond funds, projects in the pipeline will be invited to make an application.

SP-40 Institutional Delivery Structure – 91.215(k)

Explain the institutional structure through which the jurisdiction will carry out its consolidated plan including private industry, non-profit organizations, and public institutions.

Responsible Entity	Responsible Entity Type	Role	Geographic Area Served
CORPORATION FOR INDEPENDENT LIVING	Non-profit organizations	Ownership Planning Rental	State
CONNECTICUT DEPARTMENT OF HOUSING	Government	Economic Development Homelessness Non-homeless special needs Ownership Planning Public Housing Rental neighborhood improvements public facilities public services	State
The Department of Aging and Disability Services	Government	Homelessness Non-homeless special needs Ownership Planning Public Housing Rental neighborhood improvements public facilities public services	State
Commission on Human Rights and Opportunities	Government	Planning public services	State
State Library for the Blind and Physically Handicapped	Government	Planning public services	State

Responsible Entity	Responsible Entity Type	Role	Geographic Area Served
Bureau of Education and Services for the Blind	Government	Planning public services	State
Department of Education	Government	Planning public services	State
Commission on the Deaf and Hearing Impaired	Departments and agencies	Planning public services	State
Department of Developmental Services	Government	Planning public services	State
Department of Children and Families	Government	Planning public services	State
Department of Mental Health and Addiction Services	Government	Planning public services	State
Department of Public Health	Government	Planning public services	State
CONNECTICUT HOUSING FINANCE AUTHORITY	Government	Ownership Rental	State
Capital For Change	Non-profit organizations	Economic Development Ownership Planning Rental neighborhood improvements public facilities public services	State
COMMUNITY RENEWAL TEAM	Non-profit organizations	Planning public services	State
Department of Labor	Government	Economic Development Planning public services	
Department of Correction	Government	Non-homeless special needs Planning	State

Responsible Entity	Responsible Entity Type	Role	Geographic Area Served
Department of Veterans' Affairs	Government	Non-homeless special needs Planning public services	State
Department of Social Services	Government	Planning	State
Office of Policy and Management	Government	Planning public services	State
Interagency Committee on Supportive Housing and Homelessness	Departments and agencies	Homelessness Non-homeless special needs Planning public services	State
Statewide Long Term (Disaster) Recovery Committee	Government	Economic Development Homelessness Planning neighborhood improvements public facilities public services	State
The Governor's Council on Climate Change	Government	Economic Development Homelessness Planning neighborhood improvements public facilities public services	State

Responsible Entity	Responsible Entity Type	Role	Geographic Area Served
U.S. Department of Housing and Urban Development	Government	Economic Development Homelessness Non-homeless special needs Ownership Planning Public Housing Rental neighborhood improvements public facilities public services	Nation
Social Security Administration	Government	Planning public services	Nation
Federal Home Loan bank	Other	Economic Development Ownership Planning	Nation
Connecticut Association of Realtors	Regional organization	Ownership Planning public services	State
Connecticut Fair Housing Center	Non-profit organizations	Planning public services	State
Affordable Housing Alliance	Non-profit organizations	Planning public services	State
Fair Housing Association of Connecticut	Non-profit organizations	Planning public services	State
Americans with Disabilities Act Coalition of Connecticut, Inc.	Non-profit organizations	Non-homeless special needs Planning public services	State
Families United for Children's Mental Health	Regional organization	Planning public services	State
Conn Nahro	Regional organization	Planning public services	State

Responsible Entity	Responsible Entity Type	Role	Geographic Area Served
Connecticut Council of Organizations Serving the Deaf, Inc.	Non-profit organizations	Non-homeless special needs Planning public services	State
Balance of State Continuum of Care	Government	Homelessness Non-homeless special needs Ownership Planning Public Housing Rental public services	State
INFOLINE	Other	Planning public services	State

Assess of Strengths and Gaps in the Institutional Delivery System

The Department of Housing (DOH) is identified as the "first point of contact" for the institutional structure presented in this plan. This role is supported at three levels.

- 1) designation by the legislature to serve as the State's lead agency;
- 2) the role as "grantee" of various HUD program funds; and
- 3) the mission to serve all the citizens of Connecticut.

DOH fosters open participation, including supportive assistance, with the goal of facilitating meaningful involvement. DOH also works to increase participation at all levels, especially among extremely low- and very low-income groups, as well as those traditionally under-represented. Finally, DOH involves organizations that represent the special needs populations across Connecticut.

The State of Connecticut recognizes that socio-economic and economic issues and challenges must not be viewed in isolation because they cannot be adequately and/or appropriately addressed separately. Housing, social services, education, public safety, transportation, and public health are all inter-related and intrinsically interconnected. To be truly effective and efficiently implemented and executed, efforts and activities to address the state's needs must be comprehensive, inclusive and coordinated.

To encourage, promote and ensure coordination between public and assisted housing providers and private and governmental health, mental health, and service agencies, the state also participates (via membership) in various associations such as the Connecticut Chapter of the National Association of Housing and Redevelopment Officials (CONN-NAHRO), Connecticut Housing Coalition (CHC), and Connecticut Coalition to End Homelessness (CCEH).

The state also has in place numerous interagency councils, committees, task forces, commissions and working groups. Examples of some of these groups are as follows:

Connecticut Housing Finance Authority Board (CHFA) (C.G.S. Sec. 8-244) - established in 1969, is a 15- member board charged with making housing mortgage loans (via the Connecticut housing Finance Authority) to alleviate the shortage of housing for low- and moderate-income individuals and families.

Interagency Council on Homelessness: In January 2024, Gov. Lamont announced the formation of the Connecticut Interagency Council on Homelessness tasked with collaborating on a multi-agency approach that strengthen the state’s homelessness prevention and response efforts. The Commissioner of DOH serves as the Council’s chairperson. The governor is tasking the group with focusing its work on three main goals.

- *Strengthening current programs:* The council will apply specific knowledge of individual programming to unite policies across state agencies in a way that considers the whole individual – from refining recommendations on improving health and human services for people experiencing homelessness to strengthening housing stability and creating more affordable housing across the state.
- *Improving the effectiveness of the homelessness response system:* Perspectives of all state agencies will be considered in sharing and planning new approaches to help connect people experiencing homelessness to services more effectively. This includes immediate assistance for people experiencing homelessness, such as support for emergency shelters and investments in housing stability.
- *Meeting the demands of housing:* The council will collaborate on maximizing the use of funding for housing assistance, increasing the supply of permanent supportive housing, improving the effectiveness of rapid rehousing, and evaluating and finding solutions for expanded access to safe and affordable housing for all with an interagency approach of tailoring support to each individual’s specific needs.

Long Term Care Planning Committee (C.G.S. Sec. 17b-337) - established in 1998, is a 12 member commission created to establish a plan for a long-term care system for all persons in need of long-term care, to coordinate policy development, exchange information on long-term care issues, and promote consumer-directed care and provisions to support care-giving by family and other informal caregivers, and study issues relative to long-term within available appropriations.

Community Mental Health Strategy Board (C.G.S. Sec. 17a-485b) - established in 2001, is a 19 member board whose charge is to assist, expand access, integrate prevention, early intervention, recovery and rehabilitation services to adults and children or youth with mental illness.

Availability of services targeted to homeless persons and persons with HIV and mainstream services

SP-40 Figure 1: Homeless Prevention Services Summary

Homelessness Prevention Services	Available in the Community	Targeted to Homeless	Targeted to People with HIV
Homelessness Prevention Services			
Counseling/Advocacy	X	X	X
Legal Assistance	X	X	X
Mortgage Assistance	X	X	X
Rental Assistance	X	X	X
Utilities Assistance	X	X	X
Street Outreach Services			
Law Enforcement	X	X	X
Mobile Clinics	X	X	X
Other Street Outreach Services	X	X	X
Supportive Services			
Alcohol & Drug Abuse	X	X	X
Child Care	X	X	X
Education	X	X	X
Employment and Employment Training	X	X	X
Healthcare	X	X	X
HIV/AIDS	X	X	X
Life Skills	X	X	X
Mental Health Counseling	X	X	X
Transportation	X	X	X

Other			
Other	X	X	X

Describe how the service delivery system including, but not limited to, the services listed above meet the needs of homeless persons (particularly chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth)

To fully coordinate HOPWA activities with assistance provided under the Continuum of Care Program, the Department of Housing's HOPWA program was integrated with the state's Coordinated Entry System known as the Coordinated Access Networks (CANs). The use of the CANs' coordinated entry system ensures that HOPWA assistance is provided to those living with HIV/AIDS with the highest vulnerability and risks to housing stability. All referrals for permanent housing (TBRA) funded through HOPWA will occur through the CAN system. HOPWA grantees will be required to report permanent supportive housing (TBRA) vacancies to their local CAN and to accept only applicants referred by their local CAN off the By-Name List (BNL). This will ensure that applicants who have been homeless the longest and have the most intensive service needs receive priority access to HOPWA resources. If there are no literally homeless people living with HIV/AIDS in the geographic area, the local CAN will prioritize people at risk of homelessness with the most intensive service needs for referral to HOPWA funded TBRA.

The funding is used for the creation of more housing units across the state. The expansion of affordable housing, especially deeply subsidized supporting housing units, creates numerous opportunities to transition homeless individuals and families from shelter into safe and affordable units so they can recover from and overcome the barriers to the housing.

The pool of federal and state dollars, allocated to local community and faith-based organizations and municipalities, is for the provision of temporary shelter for homeless individuals and families. The funds provide operational costs, essential services such as counseling, case management, health, education, employment and training as well as HMIS costs and rapid-rehousing tenant based rental assistance.

Describe the strengths and gaps of the service delivery system for special needs population and persons experiencing homelessness, including, but not limited to, the services listed above

The state recognizes the importance of partnering with other agencies to help serve its housing and community development needs. Nonprofit agencies play an important role in the provision of affordable housing, supportive housing and social services, and economic development activities. Local organizations with direct public contact have a clear view and understanding of the state's institutional structure and typically serve in one or more of the following capacities:

- 1) are eligible to receive public and private funds or resources targeted at serving need populations;
- 2) are legally restricted or structured by organizational charter to serve lower income or specific need populations;
- 3) are identified by regulation, program or otherwise allowed to undertake certain governmental programs serving need populations; or
- 4) have daily contact with, represent or advocate on behalf of, certain populations in need.

The system is currently facing capacity issues stemming in large part from the increase in the number of individuals and families needing services. As the rental market across the state saw double digit rent increases over the past several years, rents have become increasingly unaffordable for a larger segment of the population, including households that never struggled with homelessness previously. The system has seen a significant increase in senior homelessness, homelessness among single mothers, and homelessness among low-wage workers. Affordable housing units are in short supply which prevents individuals and families from transitioning out of the shelter system which then prevents the shelter system from rapidly accommodating the newly homeless.

Importantly, homelessness is the manifestation of the failure of other systems in the state of CT and throughout the country. This can be directly related to the shortage of mental health and substance abuse services that exacerbate homelessness, the failure of discharge planning from the Department of Correction that leads to homelessness, the failure of the foster care system that does not prepare older youth for independent living, and the failure of employers to provide living wages that would allow people to be able to afford increasing rents. But critically, these systems are failing because of the lack of affordable housing options in the state, driven by the ongoing commodification of housing, particularly by large-scale real estate investment groups that view rental housing as a wealth extraction tool. As DOH continues to invest limited resources in the production of additional housing, the magnitude of the problem is enormous.

Provide a summary of the strategy for overcoming gaps in the institutional structure and service delivery system for carrying out a strategy to address priority needs

The most significant impediment regarding the gaps in the institutional structure and the service delivery system is lack of funding for affordable housing development. As previously mentioned, the state of CT has a shortage of approximately 100,000 subsidized affordable housing units. At an average per unit cost of \$200,000 per unit, the state's investment in new construction is \$20 billion. Without significant investments from the federal government for affordable housing production, the needs will remain and the strains on the systems will persist.

With that said, the coordination and delivery capabilities of the institutional structure will be complemented by the state's continued effort to foster coordination of services and collaboration among various partners. Illustrations of these services include:

Consolidated Planning Process: As lead agency designated in the ConPlan to coordinate and manage the process, DOH is responsible for providing oversight and coordination to the related service providers and the public on HUD-related matters. Consultation with outside individuals and agencies is programmed as a vital part of the ConPlan development. Contributors included both public and private, individual and agency, profit and non-profit, local, regional and state entities.

Technical Assistance and Monitoring: Technical assistance and monitoring are the primary means of fostering the state's awareness of the Small Cities/CDBG program participants meeting the requirements of the federal CDBG program. Further, DOH employs a Project Manager specifically tasked with coordinating with the CT Council of Governments and Local Municipalities to support their efforts with the planning and implementation the strategies contained in their respective Affordable Housing Plans. This staff serves as a liaison, working with municipalities to provide guidance and support, particularly in securing grants to advance their housing goals

Fair Housing Action Plan: Through implementation of the Fair Housing Action Plan, Connecticut is addressing limitations on fair housing choice by achieving the following six objectives:

- 1) providing better training of state employees in the area of fair housing;
- 2) expanding fair housing outreach and education activities;
- 3) increasing monitoring and enforcement of fair housing laws and policies;
- 4) improving the infrastructure necessary for viable diverse communities;
- 5) increasing the supply of affordable housing ; and
- 6) increasing the access of racial and ethnic minorities, the disabled and families with children to the existing supply of housing.

Interagency Council on Homelessness: In January 2024, Gov. Lamont announced the formation of the Connecticut Interagency Council on Homelessness tasked with collaborating on a multi-agency approach that strengthen the state’s homelessness prevention and response efforts. The Commissioner of DOH serves as the Council’s chairperson. The governor is tasking the group with focusing its work on three main goals.

- *Strengthening current programs:* The council will apply specific knowledge of individual programming to unite policies across state agencies in a way that considers the whole individual – from refining recommendations on improving health and human services for people experiencing homelessness to strengthening housing stability and creating more affordable housing across the state.
- *Improving the effectiveness of the homelessness response system:* Perspectives of all state agencies will be considered in sharing and planning new approaches to help connect people experiencing homelessness to services more effectively. This includes immediate assistance for people experiencing homelessness, such as support for emergency shelters and investments in housing stability.
- *Meeting the demands of housing:* The council will collaborate on maximizing the use of funding for housing assistance, increasing the supply of permanent supportive housing, improving the effectiveness of rapid rehousing, and evaluating and finding solutions for expanded access to safe and affordable housing for all with an interagency approach of tailoring support to each individual’s specific needs.

Coordination between area service providers:

Non-profits: Connecticut has a large network of capable non-profit housing and social service providers. Of particular note is the on-going communication between the state and such organizations in the areas of fair housing, program policy and funding requests. Through these types of working partnerships, the lead agency can ensure that available resources are used to their fullest potential.

Private Sector: As part of the development process for the Consolidated Plan, the lead agency has held public hearings and has invited housing and social service providers to discuss the most pressing needs of the community. These hearings have helped bring groups together in an effort to coordinate their resources and efforts.

Coordination between state and other agencies: Through intergovernmental coordination, the state has strengthened its efforts to produce and preserve affordable housing within the state through the involvement of state departments and agencies, as well as other agencies at the local, regional, state and federal level.

SP-45 Goals Summary – 91.215(a)(4)

Goals Summary Information

SP-45 Figure 1: Goals Summary

1	Goal Name	Promote Affordable Housing and Fair Housing Choice
	Start Year	2025
	End Year	2029
	Category	Affordable Housing
	Geographic Area	
	Needs Addressed	Fair Housing and Housing Choice
	Funding	
	Goal Outcome Indicator	Other: 130
2	Goal Name	Affordable Rental Housing
	Start Year	2025
	End Year	2029
	Category	Affordable Housing
	Geographic Area	
	Needs Addressed	Development of Affordable Housing Preservation of Existing Affordable Housing
	Funding	
	Goal Outcome Indicator	Rental units constructed: 15,500 Household Housing Units Rental units rehabilitated: 15,500 Household Housing Units
3	Goal Name	Affordable Homeownership
	Start Year	2025
	End Year	2029
	Category	Affordable Housing
	Geographic Area	
	Needs Addressed	Development of Affordable Housing Preservation of Existing Affordable Housing
	Funding	
	Goal Outcome Indicator	Homeowner Housing Added: 5,000 Household Housing Units Homeowner Housing Rehabilitated: 450 Household Housing Units
4	Goal Name	Public Housing Strategies
	Start Year	2025
	End Year	2029
	Category	Public Housing
	Geographic Area	
	Needs Addressed	Preservation of Existing Affordable Housing Development of Affordable Housing
	Funding	
	Goal Outcome Indicator	Rental units rehabilitated: 5,000 Household Housing Units Rental units constructed: 0 Household Housing Units
5	Goal Name	Homelessness Prevention
	Start Year	2025
	End Year	2029
	Category	Homeless
	Geographic Area	
	Needs Addressed	Homelessness Prevention

	Funding	
	Goal Outcome Indicator	Tenant-based Rental Assistance / Rapid Rehousing: 72,500 Households Assisted
6	Goal Name	Special Needs Housing and Services
	Start Year	2025
	End Year	2029
	Category	Non-Homeless Special Needs
	Geographic Area	
	Needs Addressed	Permanent Supportive Housing for Special Needs Populations
	Funding	
	Goal Outcome Indicator	Rental units constructed: 1,000 Household Housing Units
7	Goal Name	Non-Housing Community Development
	Start Year	2025
	End Year	2029
	Category	Non-Housing Community Development
	Geographic Area	
	Needs Addressed	Non-Housing Community Development
	Funding	
	Goal Outcome Indicator	Public Facility or Infrastructure Activities for Low/Moderate Income Housing Benefit: 5 projects
8	Goal Name	Lead-Based Paint Hazards
	Start Year	2025
	End Year	2029
	Category	Affordable Housing
	Geographic Area	
	Needs Addressed	Eliminate Lead-Based Paint Hazards
	Funding	
	Goal Outcome Indicator	Rental units rehabilitated: 500 Household Housing Unit

SP-45 Figure 2: Goal Descriptions

1	Goal Name	Promote Affordable Housing and Fair Housing Choice
	Goal Description	Over the five-year period covered by this plan, the state will focus its resources on achieving the following goals related to fair housing: • Within available appropriations, the DOH will continue to support the Connecticut Fair Housing Center with their efforts to assist the State of Connecticut to fulfill the recommendations in the state's AI for state level action. • DOH will continue to conduct regular monitoring of its funding recipients in the areas of civil rights and fair housing and enforcement. • Update and redraft the Connecticut Fair Housing Regulations consistent with guidance from the Fair Housing Enforcement Office • Creation and rehabilitation of affordable housing in a variety of locations. • Collaborate with other agencies to affirmatively further fair housing.

		• Convene stakeholders to review potential legislative solutions to existing impediments. • Maximize the effectiveness of programs that promote mobility. • Promote fair housing enforcement and education
2	Goal Name	Affordable Rental Housing
	Goal Description	The state will work to preserve and increase the supply of quality affordable rental housing available to low-and moderate-income households. Increasing the supply of quality affordable rental housing will be accomplished in multiple ways including new construction and rehabilitation of existing units. Adaptive re-use of historic structures provides multiple benefits to communities. Redevelopment lowers the ratio of poor quality or unused structures. Additionally, re-use lessens sprawl in rapidly developing areas by preserving open space/undeveloped land. Adaptive re-use is very likely to engender community support by preserving structures that have long been part of the community.
3	Goal Name	Affordable Homeownership
	Goal Description	The state will work to improve the ability of low- and moderate-income residents to access homeownership opportunities and, within available resources, assist distressed households in maintaining homeownership. While increasing the supply of low- and moderate-income homes available for ownership, the quality of the living environment can be improved by incorporating responsible development strategies such as mixed-use and transit-oriented developments. Increasing the supply of quality affordable homeownership can be accomplished in multiple ways including new construction and rehabilitation of existing units.
4	Goal Name	Public Housing Strategies
	Goal Description	The state will work to enhance public housing throughout the state in two ways: 1) Preservation - The state will identify opportunities for the potential loss of public housing units due to expiring contracts or owner choice to preserve existing public housing, and work with those owners and prospective developers/investors to leverage a variety of resources targeted at the preservation of these units. 2) Replacement - The state will identify opportunities for the potential replacement of public housing units due to obsolescence or other environmental concerns, and work with the owners and prospective developers/investors to leverage a variety of resources targeted at the replacement of these units.
5	Goal Name	Homelessness Prevention

	Goal Description	The state will work to reduce homelessness through the utilization of funds for rental assistance programs to ensure low-income households are able to maintain their housing and protect those threatened with homelessness and prevent future homelessness.
6	Goal Name	Special Needs Housing and Services
	Goal Description	Create decent housing, a suitable living environment and economic opportunities for low- and moderate-income persons with special needs. The state will emphasize programs to create additional rental units to provide quality affordable permanent supportive housing to address the needs of this population group and will work to expand housing opportunities linked to services.
7	Goal Name	Non-Housing Community Development
	Goal Description	The state will promote community development projects that are targeted to low- and moderate -income persons. The State of Connecticut will focus on housing and community development programs that directly benefit these individuals. The state will encourage the maximization of existing infrastructure and resources and the re-use of blighted and brownfield properties through the application of responsible growth principles and strategies and livability principles and provide incentives for community revitalization efforts as per the state's responsible growth strategies and growth management policies specified in the current C&D Plan as well as in concert with the federal government's Sustainable Communities Initiative. As a general rule, the state will adopt and employ, to the greatest extent possible, responsible growth strategies, including but not limited to: consistency with the state's Conservation and Development (C&D) Plan; inter-municipal or regional collaborations; re-use, rehabilitation, and revitalization of land, property and infrastructure; urban infill development; mixed-use developments; walkable environments; transit-oriented developments; and incorporation of sustainable development standards in the implementation of all of the strategies and objectives outlined in this plan. With specific regard to the Small Cities SC/CDBG program the state will provide assistance to help undertake community infrastructure, facility and service projects (public facilities) affecting public health, safety and welfare.
8	Goal Name	Lead-Based Paint Hazards
	Goal Description	In coordination with the Health Homes initiative, which is spearheaded by the Department of public Health (DPH), DOH

	continues to administer the federal Lead Hazard Reduction Demonstration Program, which in Connecticut is referred to as Connecticut Children's Healthy Homes Program in conjunction with the Connecticut Lead Action for Medicaid Primary Prevention Project (LAMPP). Connecticut Children's Healthy Homes Program improves children's health by making their homes healthier, safer places to be. They are committed to protecting children from lead poisoning and making homes in Connecticut green, safe and healthy. The Healthy Homes Program receives funding through the US Department of Housing and Urban development and the State of Connecticut Department of Housing. Their goal is to protect children before they are exposed to lead hazards or injured by safety hazards in their homes. The Healthy Homes Program integrates health and safety interventions, lead hazard control, energy efficiency interventions, and housing rehabilitation for property owners by coordinating resources in an efficient manner to produce healthy homes. Connecticut has statutes, regulations, technical standards, guidance documents and policies that relate to health and housing. The DOH would continue to comprehensively address lead-based paint issues as required under HUD's Lead - Safe Housing Regulation. The Healthy Homes Initiative encompasses several known home-based health hazards and programs and seeks to coordinate the delivery of services through collaboration with the DOH and other state and community stakeholders. Initial strategies for statewide implementation include training and technical capacity building of housing and health partners, development and implementation of healthy homes materials, assessments (inspection forms) and evidence-based interventions in DOH-eligible communities.
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Estimate the number of extremely low-income, low-income, and moderate-income families to whom the jurisdiction will provide affordable housing as defined by HOME 91.315(b)(2)

The State of Connecticut's annual goals are subject to change, based on funding allocations, funding award decisions, and local needs and priorities.

SP-50 Public Housing Accessibility and Involvement – 91.215(c)

Need to Increase the Number of Accessible Units (if Required by a Section 504 Voluntary Compliance Agreement)

There are 107 Public Housing Authorities in Connecticut, 57 are solely state supported and there are 50 that are supported with federal funding. Among these 50 federally funded public housing authorities, there are 32 that provide 13,599 federally funded units of public housing supported by Annual Contribution Contracts. There are an additional 17,000 state-financed public housing units which are not supported at all by federal dollars, but which still comprise an important element of the state's total affordable housing inventory.

Connecticut is one of a handful of states with state-financed public housing. Connecticut's first state-financed units were occupied in 1948, and the stock is among the oldest in the state. These state financed public housing units are managed primarily by local housing authorities and do not receive federal support. It has been determined that the most immediate threat to the state's public housing units, mostly due to the age of the stock and its level of deferred maintenance, is its preservation.

The state will identify opportunities for the potential loss of public housing units due to expiring contracts or owner choice to preserve existing public housing, and work with those owners and prospective developers/investors to leverage a variety of resources targeted at the preservation of these units. The state will identify opportunities for the potential replacement of public housing units due to obsolescence or other environmental concerns, and work with the owners and prospective developers/investors to leverage a variety of resources targeted at the replacement of these units. The state will also support public housing authorities that wish to expand their portfolio of public housing by investing funds in the new construction of public housing units.

Activities to Increase Resident Involvement

DOH will identify opportunities for the preservation and replacement of public housing units. DOH will make housing related activities by PHA's a priority.

Is the public housing agency designated as troubled under 24 CFR part 902?

N/A. There are no non-entitlement PHA's that are on HUD's troubled PHA list.

Plan to remove the 'troubled' designation

N/A

SP-55 Barriers to affordable housing – 91.215(h)

Barriers to Affordable Housing

Housing is a basic need of every person and family regardless of age, race, or income level. The lack of housing choices for all citizens affects the state's fiscal condition, the quality of life, and the vitality of the state, and its cities, towns and neighborhoods. The availability and quality of housing choices have substantial impacts on economic competitiveness, responsible growth, and the cost of infrastructure, not just roads and bridges, but also the cost of municipal services and local schools.

As is the case nationwide, decades of public and private policies and practices have resulted in high levels of segregation within many Connecticut communities. Demographic and geographic data indicate that several groups including people of color, people with lawful sources of income other than employment, people with disabilities, and single-parent households are particularly concentrated in the state's lowest income communities.

Connecticut's housing crisis is deeply embedded in a legacy of discriminatory practices and a tangled web of land use regulations. Fifty-two percent of Connecticut renters are cost-burdened, according to the 2022 American Community Survey 5-year estimates, and opportunities to rent are largely concentrated in urban areas with existing multifamily housing and where affordable housing units are often clustered. Limited rental housing drives up rent prices and puts more renters at risk of eviction.

As part of a 5-part series published in the CT Mirror, issues surrounding Connecticut's affordable housing needs were detailed.²³ The primary problem related to the development of affordable housing in CT is that the power to permit or deny housing development has been delegated to each municipality. Zoning is administered at the local level, and if a local government does not grant permission to build, typically development does not proceed. Modern day zoning in CT is a legacy of racially motivated segregationist policy from the 1920s. While fair housing laws prohibit the most egregious practices, local zoning ordinances are used to exclude and segregate. Municipalities often cite concerns about preserving the character of a town, traffic congestion, or declining property values as objections to affordable housing, especially multi-family development. While everyone understands the need for affordable housing, it seems developments are supported so long as they are built somewhere else.

The Affordable Housing Land Use Appeals Procedure (§8-30g) allows housing developers, seeking to build "set aside" housing with long-term affordability for low- and moderate-income households, to challenge a town's failure to approve their proposed development, even when it does not meet local zoning regulations. This procedure applies to all municipalities that do not yet have 10% or more of their housing units designated as assisted. Thirty-one municipalities are exempt from the Appeals Procedure, due to having met the 10% threshold of qualified, affordable units in the municipality (this Appeals List is administered by DOH). While more than 8,500 housing units with long-term affordability restrictions have been created through the Appeals Procedure since its enactment in 1990, there are many projects that do not move forward. In recent years, developers have prevailed in about 75% of these cases.

²³ <https://ctmirror.org/2024/09/27/actions-the-ct-legislature-can-take-to-promote-more-affordable-housing/>

While new housing units are needed throughout CT to alleviate the high cost of housing, most of Connecticut does not allow for two or more housing units on one lot. This results in renters having limited housing options outside of the large urban areas in the state. The strong local control over zoning ordinances allows most towns to limit the types of new housing allowed by right. Much of Connecticut allows only single-family housing as-of-right. Development of new multifamily buildings is severely limited, and developers can face a time-consuming and often costly special permitting process with local land use authorities.

The maps below were created through the National Zoning Atlas, which compiles local zoning regulations into one database.²⁴ The first map shows areas where new single-family housing is permitted, the second map shows where new two-family housing is permitted, and the third map shows where new four-plus unit structures are permitted without requiring a special permit. These maps represent the clearest picture of the limitations related to building multi-family housing throughout Connecticut. Connecticut residents in areas that allow mostly single-family housing were found more likely to be white, to have high household incomes, and to own their homes.

While local zoning regulations and NIMBYism are key barriers to affordable housing development, additional barriers include the availability and acquisition cost of land, the cost of infrastructure needed for new housing development (particularly for suburban and rural development), permitting and fees, building codes, environmental remediation, assembly of financing, labor shortages of construction labor, rising interest rates, and shortages and cost of construction materials.

Strategy to Remove or Ameliorate the Barriers to Affordable Housing

The solution for the housing crisis is simple: build more houses, while concurrently repurposing the older housing stock to meet the needs of a population that is aging, and in need of accessible housing decent housing. The challenge comes from having the sufficient resources necessary to produce enough new housing to move the needle on affordability statewide. To address this, the state has been devoting hundreds of millions of dollars from the state budget for housing.

The state will implement a variety of action steps to address a majority of the barriers identified in the Analysis of Impediments to Fair Housing Choice, including the following:

- Creation and rehabilitation of affordable housing in a variety of locations
 - Continue to prioritize developments that achieve fair housing goals in historically under-served communities.
 - Increase funding flexibility to seize immediate development opportunities to increase affordable housing units in high opportunity communities.
 - Evaluate the effectiveness of funding rounds in facilitating the creation of new family affordable housing units to ensure the availability of affordable family housing in broader geographically diverse areas.
- Seek opportunities to align policies and funding with the activities of other state agencies.
- Collaborate with other agencies to affirmatively further fair housing: DOH will participate in new and existing opportunities to align policies and funding with other agencies.

²⁴ <https://www.zoningatlas.org/atlas>

- Convene stakeholders to review potential legislative solutions to existing impediments: DOH will convene partner agencies, organizations and stakeholders in the redrafting of the Connecticut Fair Housing Regulations and Waiting List Regulations.
- Maximize the effectiveness of programs to ensure they are promoting fair housing choice to the greatest extent possible.
- Promote fair housing enforcement and education.
- Review affirmative fair housing marketing plans for developers of affordable housing receiving funding from DOH or CHFA to ensure compliance with the law.
- Evaluate funding opportunities to balance the needs of the state's rental assistance program with the investments needed for the creation and preservation of more affordable housing.

SP-60 Homelessness Strategy – 91.215(d)

Reaching out to homeless persons (especially unsheltered persons) and assessing their individual needs

For more than twenty-five years, various agencies, both public and quasi-public, along with private organizations have joined in a collaborative effort to identify and develop long-term solutions to end chronic and long-term homelessness. The current partners in this effort are DOH, the Department of Mental Health and Addiction Services (DMHAS), the Department of Children and Families (DCF), the Department of Corrections (DOC), the Department of Veteran Affairs (VA), Court Support Services Division - Judicial (CSSD), the Department of Developmental Services (DDS), the Department of Social Services (DSS), the Office of Policy and Management (OPM), CHFA, and the Corporation of Supportive Housing (CSH). Connecticut is the only state in the nation consistently investing in the development of supportive housing on a statewide basis.

In January 2024, Gov. Lamont announced the formation of the Connecticut Interagency Council on Homelessness tasked with collaborating on a multi-agency approach that strengthens the state's homelessness prevention and response efforts. The Commissioner of DOH serves as the Council's chairperson. The Council will focus its work on three main goals.

- ***Strengthening current programs:*** The council will apply specific knowledge of individual programming to unite policies across state agencies in a way that considers the whole individual – from refining recommendations on improving health and human services for people experiencing homelessness to strengthening housing stability and creating more affordable housing across the state.
- ***Improving the effectiveness of the homelessness response system:*** Perspectives of all state agencies will be considered in sharing and planning new approaches to help connect people experiencing homelessness to services more effectively. This includes immediate assistance for people experiencing homelessness, such as support for emergency shelters and investments in housing stability.
- ***Meeting the demands of housing:*** The council will collaborate on maximizing the use of funding for housing assistance, increasing the supply of permanent supportive housing, improving the effectiveness of rapid rehousing, and evaluating and finding solutions for expanded access to safe and affordable housing for all with an interagency approach of tailoring support to each individual's specific needs.

The state will emphasize programs targeted at supportive housing, rapid rehousing, and homelessness prevention as the primary means to prevent and end homelessness in Connecticut. The state will work to expand permanent supportive housing in Connecticut to break the cycle of long-term, chronic homelessness and it will utilize the Coordinated Access Network (CAN) to produce better placements and outcomes for the most vulnerable individuals in need of assistance. Each of these programs is designed to assist the target population with staying stably housed and thus not breaching the emergency shelters/transitional living system.

Addressing the emergency and transitional housing needs of homeless persons

DOH will continue to maintain and fund Emergency Shelters across the state and will continue to fund youth transitional living programs. Currently, the state's emergency response system for homelessness is over-capacity and as such there are delays for individuals and families accessing shelter. Once in shelter, the lack of truly affordable housing options for extremely low-income

households delays their move from emergency shelter to transitional or permanent supportive housing. As needs are identified in local communities, DOH examines its current financial capability to determine if there is financial and program support for new shelters and transitional housing units. According to the Coalition to End Homelessness, there are 41 emergency shelters located throughout the state (see MA-35).

DOH intends to utilize ESG monies for Rapid Re-housing over the next five-year period. DOH has awarded a non-profit the right to act as the ESG financial assistance fiduciary agency. At a minimum 40% of the annual ESG allocation will go to this fiduciary to administer financial assistance requested by housing relocation and stabilization agencies. DOH has leverage existing resources to provide housing relocation and stabilization services to support the Rapid Re-housing program to ensure that homeless households will have a better chance of remaining stably housed.

Helping homeless persons (especially chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth) make the transition to permanent housing and independent living, including shortening the period of time that individuals and families experience homelessness, facilitating access for homeless individuals and families to affordable housing units, and preventing individuals and families who were recently homeless from becoming homeless again.

DOH has leveraged existing resources to provide Housing Relocation and Stabilization Services to support the Rapid Re-housing program to ensure that homeless households will have a better chance of remaining stably housed. Through competitive procurement, seven (7) agencies have been awarded assistance to aid the homeless population with housing relocation and up to 12 months of stabilization services and in-home case management. These seven agencies receive referrals for services and financial assistance through their local Coordinated Access Network.

Clients will attain alternative housing and/or access to social and /or treatment services. Alternative housing includes, but is not limited to, transitional housing, residential treatment programs, supportive and permanent housing. Social services include, but are not limited to, domestic violence abuse counseling, family counseling, educational and employment and financial counseling, childcare, security deposit and rental assistance programs. Treatment services include, but are not limited to, residential and outpatient mental health and substance abuse treatment and medical treatment.

DOH also provides funding for the Youth Transitional Living Program to two contractors for the provision of multi-family or single room residency living arrangements. A variety of support services are provided to these individuals during their stay in the program. Stays can range from a period of six months to two years. The goal is to have these youth gain self-sufficiency and permanent housing.

DOH regularly consults with the Connecticut Coalition to End Homelessness for the provision of technical assistance, programmatic training needs, program development service model recommendations and program evaluation.

Help low-income individuals and families avoid becoming homeless, especially extremely low-income individuals and families who are likely to become homeless after being discharged from a publicly funded institution or system of care, or who are receiving assistance from public and private agencies that address housing, health, social services, employment, education or youth needs

Connecticut has a long history of providing permanent supportive housing to the most vulnerable homeless and at-risk of becoming homeless individuals and families in our state. In April of 2006, a Memorandum of Understanding (MOU) was entered into by several state agencies including the Office of Policy and Management (OPM), DOH, the Department of Mental Health and Addiction Services (DMHAS), the Department of Social Services (DSS), the Connecticut Housing Finance Authority (CHFA) and the Corporation for Supportive Housing (CSH). This MOU was in support of the statewide Next Steps Supportive Housing Initiative and the purpose was to increase service-supported, affordable housing for people with mental illness or substance abuse problems who face homelessness.

DOH has devoted both Section 8 and state Rental Assistance to project-based programs developed as part of this initiative. DOH actively participates, a member of DOH staff is one of the chairs, in the Balance of State Continuum of Care Steering Committee and Homeless Management Information Systems (HMIS) Steering Committee Meetings. DOH is also a member of the Reaching Home Steering Committee. Reaching Home is the leadership structure for planning and oversight of a framework to end homelessness in Connecticut modeled after the Federal Strategic Plan to Prevent and End Homelessness, Opening Doors.

Connecticut has implemented a Social Innovation Fund (SIF) grant, funded through CSH, in which we created a data match between our Homeless Management Information System (HMIS) and our Medicaid data, to locate and provide permanent supportive housing to the high cost users of Medicaid who are also homeless.

Connecticut also created a Connecticut Collaborative on Re-entry (CCR), formerly known as the Frequent User Service Engagement (FUSE) program in which we match data from the HMIS and our criminal justice system to permanently house individuals that cycle between jails and homeless shelters. Both programs are successful in reducing high-cost institutional care. Services are designed to address the individual needs of the residents, and include the help of a case manager, connections to community treatment and employment services, and rehabilitation services that help the client achieve and retain permanent housing.

Connecticut has budgeted hundreds of millions of dollars into the production of affordable housing over the past several years. Even with this unprecedented level of investment, more resources are needed to meet the goals of ending chronic homelessness and youth and family homelessness, and providing the affordable housing options for the most economically vulnerable residents of the state who are increasingly at risk of homelessness.

Since 2019, there have been 321 state-financed developments that were completed. These new construction and rehabilitation projects increased the supply of affordable housing by almost 4,900 housing units, including 225 additional permanent supportive housing units using a variety of financing tools including the Low-Income Housing Tax Credit Program (LIHTC), as well as other Federal and State programs.

SP-65 Lead based paint Hazards – 91.215(i)

Actions to address LBP hazards and increase access to housing without LBP hazards

In coordination with the Healthy Homes Initiative, which is spearheaded by the Department of Public Health (DPH), DOH continues to administer the federal Lead Hazard Reduction Demonstration Program, which in Connecticut is referred to as Connecticut Children's Healthy Homes Program in conjunction with the Connecticut Lead Action for Medicaid Primary Prevention Project (LAMPP). The goal is to enhance suitable living environments and create decent, healthy, and safe housing for low- and moderate-income persons through evaluation and reduction of lead-based paint hazards and the implementation of Healthy Homes principles, assessment practices, and evidence-based interventions.

DOH will enhance suitable living environments and ensure the availability of a healthy, safe, and decent housing supply that is free of lead-based paint, will incorporate the healthy housing principle (dry, clean, pest-free, ventilated, safe, without contaminants, maintained and accessible), and measures radon and reduces elevated levels. To achieve this DOH will do the following:

- Actively participate in the Statewide Healthy Homes Initiative meetings, as scheduled.
- Collaborate with the DPH Healthy Homes Initiative on the development and implementation of a uniform healthy homes assessment and intervention approach.
- Support the abatement or remediation of lead-based paint and lead-based paint hazards, damaged asbestos containing materials, elevated indoor radon levels, and other identified or known environmental hazards in housing units in collaboration with other state agencies and in accordance with applicable federal and state laws. Lead-based paint testing, and remediation or abatement activities will be conducted in accordance with Regulations of CT State Agencies Section 19a-111 et.al., the final lead-safe housing rule - {Title X of the Lead-based Paint Hazard Reduction Act of 1992 (24CFR Pt 35)} the EPA Lead Paint: Renovation, Repair, and Painting Program (RRP) effective April 22, 2010, and through healthy homes assessments and intervention strategies established in concert with the Department of Public Health.
- Fund up to three housing rehabilitation projects per year with the goal of making 20 units per year healthy homes (as defined in concert with the Statewide Healthy Homes Initiative).
- Build the technical capacity of local housing agencies by sponsoring five (5) National Center for Healthy Homes (NCHH) training courses (1 course held annually, or as needed).
- Support the training and certification of DOH and/or local housing staff who are interested in seeking national certification as "healthy homes specialists." In particular, support two "Essentials for Healthy Homes Practitioners" training courses per year.

How are the actions listed above integrated into housing policies and procedures?

In coordination with the Healthy Homes Initiative which is spearheaded the Department of Public Health (DPH), DOH continues to administer the Federal Lead Hazard Reduction Demonstration Program, which in Connecticut is referred to as Connecticut Children's Healthy Homes Program in conjunction with the Connecticut Lead Action for Medicaid Primary Prevention Project (LAMPP).

Connecticut Children's Healthy Homes Program improves children's health by making their homes healthier, safer place to be. They are committed to protecting children from lead poisoning and

making homes in Connecticut green, safe and healthy. The Healthy Homes Program receives funding through HUD and DOH.

Their goal is to protect children before they are poisoned by lead hazards or injured by safety hazards in their homes. The Healthy Homes Program integrates health and safety interventions, lead hazard control, energy efficiency interventions, and housing rehabilitation for property owners by coordinating resources in an efficient manner to produce healthy homes.

The Healthy Homes Program's services are available in 15 towns and cities across Connecticut. The Healthy Homes Program provides qualified homeowners and tenants with:

- Inspections and plans for lead and home safety hazard removal
- Financial assistance to remediate hazards
- Relocation assistance during construction
- Referrals to low- or no-cost home weatherization programs designed to increase energy efficiency lead hazard and healthy homes education.

SP-70 Anti-Poverty Strategy – 91.215(j)

Jurisdiction Goals, Programs and Policies for reducing the number of Poverty-Level Families

The five programs covered by the state's Consolidated Plan - SC/CDBG, HOME, NHTF, ESG and HOPWA - directly support the overall State Anti-Poverty Strategy by addressing the housing and/or non-housing community development needs of persons at or below the poverty level.

In addition to the five programs covered by the Consolidated Plan, the State of Connecticut, through several agencies and organizations employs numerous policies and programs to reduce the number of poverty level families within the state. These programs and the organizations that administer them are described within the Institutional Structure section of this plan.

How are the Jurisdiction poverty reducing goals, programs, and policies coordinated with this affordable housing plan

Additionally, the State of Connecticut has several statutory and federally mandated interconnected/interrelated plans that further articulate and constitute the state's Anti-Poverty Strategy. These plans include but are not limited to those enumerated below:

- Connecticut's Economic Development Strategy
- Conservation & Development Policies Plan: The Plan for Connecticut 2018-2023
- State of Connecticut Temporary Assistance for Needy Families (TANF) State Plan
- Department of Housing Section 8 Housing Choice Voucher Program Plan
- Department of Housing Rental Assistance Payment Program Plan

SP-80 Monitoring – 91.230

Describe the standards and procedures that the jurisdiction will use to monitor activities carried out in furtherance of the plan and will use to ensure long-term compliance with requirements of the programs involved, including minority business outreach and the comprehensive planning requirements

DOH monitors recipients' compliance with program requirements in accordance with all federal requirements. Recipients are made aware of the compliance requirements associated with their respective projects in advance of accepting a contract for funding with DOH.

Small Cities - DOH performs monitoring to ensure that funds are being spent correctly and in compliance with federal regulations. Each grant must be monitored on-site at least once prior to closeout. DOH monitors program compliance and financial compliance with federal regulatory mandates. The on-site monitoring visit and the desk reviews are mechanisms used for in-depth investigation and overall assessments. Quarterly financial reports are required for all grant recipients.

Grant subrecipients of federal funds are also monitored for compliance with Single Audit, OMB Circulars, and contractual financial requirements. In-depth financial monitoring and technical assistance are provided to improve financial accountability and fiscal responsibility. DOH staff will provide follow-up if it is deemed necessary.

HOME & NHTF - All recipients are required to submit quarterly status reports to the Office of Housing Finance (OHF) on their projects. DOH conducts site inspections with grantees, as warranted. Site inspections may include, but not be limited to, a review of the rent structure, utility allowance, yearly re- certification of income, verification of income and review of resident folders. DOH staff will provide follow-up if it is deemed necessary.

Six months prior to expected project completion, OHF staff coordinates with agency audits staff in scheduling of the Pre-occupancy monitoring visit. After project completion, DOH's Compliance Manual is used through the affordability period.

ESG - DOH Grants and Contract staff monitor ESG programs using a tool which, in a comprehensive manner, reviews each program's Administration, Personnel Policies and Procedures, Accounting, Budgeting, Reporting, Program Services, Goals and Objectives, Outcomes and Measures, Contractor's Self Evaluation Process, and Quality Assurance/Licensure Compliance. After all phases of the program have been evaluated, the Staff Representative will write up any areas of concern with whatever follow up is needed. DOH staff will provide follow-up if it is deemed necessary.

HOPWA - HOPWA contracts are handled a little differently than ESG. In addition to the above review, a coordinated effort between DOH staff representatives and the staff of the Connecticut AIDS Residence Coalition (CARC) performs a "Standard of Care" review and HOPWA monitoring requirements.

Expected Resources

AP-15 Expected Resources – 91.220(c)(1,2)

Introduction

The state of CT receives five annual allocations from HUD. These include Community Development Block Grant (CDBG), HOME Investment Partnership Program (HOME), National Housing Trust Fund (HTF), Emergency Solutions Grant (ESG), and Housing Opportunities for Persons with HIV/AIDS (HOPWA). The strategic plan establishes the framework for the efficient allocation of all state and federal resources available to DOH, including federal formula grant funding, for the development and preservation of affordable housing and community development activity that assists extremely low-, low-, and moderate-income households in the state over the next five years. The consolidated plan articulates policies, strategies, goals and objectives which are based on an analysis of the state's housing needs, housing market, and community development needs.

While it is challenging to predict future Federal resources based on Congressional appropriations, the state anticipates receiving approximately **\$150 million** in total funding over the 5-year period from July 1, 2025 to June 30, 2030. Funding can fluctuate based on allocation methodologies nationally and based on Congressional funding levels. To project allocations for the next 5 years, funding levels for the previous five years was averaged and used as an estimate for future annual allocations for each of the next 5 years. Based on historical funding levels, it is projected that the state of CT will receive the following funding amounts for the 2025-2029 Program Years.

- **CDBG:** 69,477,793
- **HOME:** 52,175,024
- **HTF:** 15,724,165
- **ESG:** 11,492,213
- **HOPWA:** 1,444,246

Predicting the level of resources and basing accomplishments on these unknown Federal monies is not the most judicious approach. Congress may reduce its appropriation to HUD in any one or every program year covered by this Consolidated Plan. The greatest risk to the efficient and effective delivery of programs and projects is related to fluctuations in funding. If funding allocations are reduced, the state's projected goals described in **SP-45: Goals Summary** may not be accomplished. Further, while the state has made substantial progress in addressing housing and community needs throughout Connecticut, the sheer magnitude of the housing crisis and the limited new housing construction over the past 20 years makes it unlikely that existing needs will ever be truly addressed without a substantial increase in the Federal government's commitment to housing development. All proposed activities' budgets will be proportionally increased or decreased from the estimated funding levels to match actual allocation amounts.

Table 6 - Federal Allocations by Program, 2020-2024

	2020	2021	2022	2023	2024	5-Year Average
CDBG	13,854,179	8,511,446*	13,935,925	13,912,108	13,880,022	13,895,559
HOME	9,450,436	9,692,243	11,141,314	11,760,168	10,130,863	10,435,005
HTF	3,750,859	8,448,637	9,720,275	4,510,425	3,144,833	5,915,006
ESG	2,366,278	2,233,995	2,247,787	2,257,349	2,386,804	2,298,443

HOPWA	265,668	271,901	283,088	312,736	310,853	288,849
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Data Source: Integrated Disbursement and Information System

Note: The 2021 CDBG allocation total was removed from the 5-Year Average.

AP-15 Figure 1: Anticipated Resources

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Remainder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
CDBG	Public - Federal	Admin and Planning Acquisition Economic Development Housing Public Improvements Public Services	13,895,559			13,895,559	55,582,234	The Community Development Block Grant (CDBG) program is a flexible program that provides communities with resources to address a wide range of unique community development needs. CDBG works to ensure decent affordable housing, a suitable living environment, and expanded economic opportunities, principally to low- and moderate-income individuals and households.
HOME	Public - Federal	Acquisition Homebuyer assistance Homeowner rehab Multifamily rental new construction Multifamily rental rehab New construction for ownership TBRA	10,435,005			10,435,005	41,740,020	The HOME Program is dedicated to the development of affordable housing by providing decent affordable housing to lower-income households, expanding the capacity of nonprofit housing providers, strengthening the ability of state and local governments to provide housing, and leveraging private-sector participation
HOPWA	Public - Federal	Permanent housing in facilities Permanent housing placement Short term or transitional housing facilities STRMU Supportive services TBRA	288,849			288,849	1,155,397	The HOPWA program is the only federal program dedicated to addressing the housing needs of low-income individuals living with HIV/AIDS and their families. The program provides funds to promote stable housing and supportive services for this population, to prevent homelessness and promote independence.

ESG	Public - Federal	Conversion and rehab for transitional housing Financial Assistance Overnight shelter Rapid re-housing (rental assistance) Rental Assistance Services Transitional housing	2,298,443			2,298,443	9,193,770	The ESG program is focused on alleviating homelessness by providing funds for outreach to homeless individuals and families living on the streets, supporting the operation of the state's emergency shelter system, providing funds to rapidly rehouse individuals and families and to prevent homelessness before it occurs through various support services and financial assistance.
HTF	Public - Federal	Acquisition Admin and Planning Homebuyer assistance Multifamily rental new construction Multifamily rental rehab New construction for ownership	3,144,833			3,144,833	12,579,332	The HTF Program was established under the Housing and Economic Recovery Act of 2008 to address the housing needs of extremely low- and very low-income households by increasing affordable housing supply, supporting long-term affordable rental housing, and promoting homeownership.
Other	public - federal	Other	1,209,615	0	0	1,209,615	0	
Other	public - state	Other	704,913,640	0	0	704,913,640	0	State general obligation bond financing for construction and rehabilitation of affordable housing, including HTF State, Affordable Housing (FLEX), Workforce Housing, Lead Removal, and Time to Own Programs. Funds are used as matching funds and as leverage to incentivize private investment into affordable housing development.

Explain how federal funds will leverage those additional resources (private, state and local funds), including a description of how matching requirements will be satisfied

Financial leveraging and firm financial commitments are important considerations in awarding funding for projects/services. DOH adheres to all matching requirements for each federal funding source.

If appropriate, describe publicly owned land or property located within the jurisdiction that may be used to address the needs identified in the plan

Not applicable.

Discussion

The Department of Housing in collaboration with the Connecticut Housing Finance Authority invites any Developer/Owner that is looking to apply for funding and/or other resources from DOH and/or CHFA for the new construction, substantial rehabilitation, and/or preservation of affordable housing in each calendar year to participate in the Developer Engagement Process. This process is intended to identify and to create a pipeline of potential activity for future funding opportunities including but not limited to new construction, substantial rehabilitation and/or preservation of affordable and supportive housing.

Developers/applicants complete the DOH/CHFA Development Engagement Profile that describes the project, development or concept as it currently stands. There is no requirement to engage a consultant, prepare any formal documentation, obtain any approvals or expend any funds in order to complete and submit the DOH/CHFA Development Engagement Profile.

Upon receipt of a DOH/CHFA Development Engagement Profile, developers/applicants will be contacted by DOH to schedule a face-to-face meeting with DOH and CHFA staff to discuss the proposed activity outlined. When funding is available, including CDBG, HOME, NHTF, and state bond funds, projects in the pipeline will be invited to make an application.

Annual Goals and Objectives

AP-20 Annual Goals and Objectives

AP-20 Figure 1: Goals Summary

1	Goal Name	Promote Affordable Housing and Fair Housing Choice
	Start Year	2025
	End Year	2029
	Category	Affordable Housing
	Geographic Area	
	Needs Addressed	Fair Housing and Housing Choice
	Funding	
	Goal Outcome Indicator	Other: 130
2	Goal Name	Affordable Rental Housing
	Start Year	2025
	End Year	2029
	Category	Affordable Housing
	Geographic Area	
	Needs Addressed	Development of Affordable Housing Preservation of Existing Affordable Housing
	Funding	
	Goal Outcome Indicator	Rental units constructed: 15,500 Household Housing Units Rental units rehabilitated: 15,500 Household Housing Units
3	Goal Name	Affordable Homeownership
	Start Year	2025
	End Year	2029
	Category	Affordable Housing
	Geographic Area	
	Needs Addressed	Development of Affordable Housing Preservation of Existing Affordable Housing
	Funding	
	Goal Outcome Indicator	Homeowner Housing Added: 5,000 Household Housing Units Homeowner Housing Rehabilitated: 450 Household Housing Units
4	Goal Name	Public Housing Strategies
	Start Year	2025
	End Year	2029
	Category	Public Housing
	Geographic Area	
	Needs Addressed	Preservation of Existing Affordable Housing Development of Affordable Housing
	Funding	
	Goal Outcome Indicator	Rental units rehabilitated: 5,000 Household Housing Units Rental units constructed: 0 Household Housing Units
5	Goal Name	Homelessness Prevention
	Start Year	2025
	End Year	2029
	Category	Homeless
	Geographic Area	
	Needs Addressed	Homelessness Prevention
	Funding	

	Goal Outcome Indicator	Tenant-based Rental Assistance / Rapid Rehousing: 72,500 Households Assisted
6	Goal Name	Special Needs Housing and Services
	Start Year	2025
	End Year	2029
	Category	Non-Homeless Special Needs
	Geographic Area	
	Needs Addressed	Permanent Supportive Housing for Special Needs Populations
	Funding	
	Goal Outcome Indicator	Rental units constructed: 1,000 Household Housing Units
7	Goal Name	Non-Housing Community Development
	Start Year	2025
	End Year	2029
	Category	Non-Housing Community Development
	Geographic Area	
	Needs Addressed	Non-Housing Community Development
	Funding	
	Goal Outcome Indicator	Public Facility or Infrastructure Activities for Low/Moderate Income Housing Benefit: 5 projects
8	Goal Name	Lead-Based Paint Hazards
	Start Year	2025
	End Year	2029
	Category	Affordable Housing
	Geographic Area	
	Needs Addressed	Eliminate Lead-Based Paint Hazards
	Funding	
	Goal Outcome Indicator	Rental units rehabilitated: 500 Household Housing Unit

AP-20 Figure 2: Goal Descriptions

1	Goal Name	Promote Affordable Housing and Fair Housing Choice
	Goal Description	Over the five-year period covered by this plan, the state will focus its resources on achieving the following goals related to fair housing: • Within available appropriations, the DOH will continue to support the Connecticut Fair Housing Center with their efforts to assist the State of Connecticut to fulfill the recommendations in the state's AI for state level action. • DOH will continue to conduct regular monitoring of its funding recipients in the areas of civil rights and fair housing and enforcement. • Update and redraft the Connecticut Fair Housing Regulations consistent with guidance from the Fair Housing Enforcement Office • Creation and rehabilitation of affordable housing in a variety of locations. • Collaborate with other agencies to affirmatively further fair housing.

		• Convene stakeholders to review potential legislative solutions to existing impediments. • Maximize the effectiveness of programs that promote mobility. • Promote fair housing enforcement and education
2	Goal Name	Affordable Rental Housing
	Goal Description	The state will work to preserve and increase the supply of quality affordable rental housing available to low-and moderate-income households. Increasing the supply of quality affordable rental housing will be accomplished in multiple ways including new construction and rehabilitation of existing units. Adaptive re-use of historic structures provides multiple benefits to communities. Redevelopment lowers the ratio of poor quality or unused structures. Additionally, re-use lessens sprawl in rapidly developing areas by preserving open space/undeveloped land. Adaptive re-use is very likely to engender community support by preserving structures that have long been part of the community.
3	Goal Name	Affordable Homeownership
	Goal Description	The state will work to improve the ability of low- and moderate-income residents to access homeownership opportunities and, within available resources, assist distressed households in maintaining homeownership. While increasing the supply of low- and moderate-income homes available for ownership, the quality of the living environment can be improved by incorporating responsible development strategies such as mixed-use and transit-oriented developments. Increasing the supply of quality affordable homeownership can be accomplished in multiple ways including new construction and rehabilitation of existing units.
4	Goal Name	Public Housing Strategies
	Goal Description	The state will work to enhance public housing throughout the state in two ways: 1) Preservation - The state will identify opportunities for the potential loss of public housing units due to expiring contracts or owner choice to preserve existing public housing, and work with those owners and prospective developers/investors to leverage a variety of resources targeted at the preservation of these units. 2) Replacement - The state will identify opportunities for the potential replacement of public housing units due to obsolescence or other environmental concerns, and work with the owners and prospective developers/investors to leverage a variety of resources targeted at the replacement of these units.
5	Goal Name	Homelessness Prevention

	Goal Description	The state will work to reduce homelessness through the utilization of funds for rental assistance programs to ensure low-income households are able to maintain their housing and protect those threatened with homelessness and prevent future homelessness.
6	Goal Name	Special Needs Housing and Services
	Goal Description	Create decent housing, a suitable living environment and economic opportunities for low- and moderate-income persons with special needs. The state will emphasize programs to create additional rental units to provide quality affordable permanent supportive housing to address the needs of this population group and will work to expand housing opportunities linked to services.
7	Goal Name	Non-Housing Community Development
	Goal Description	The state will promote community development projects that are targeted to low- and moderate -income persons. The State of Connecticut will focus on housing and community development programs that directly benefit these individuals. The state will encourage the maximization of existing infrastructure and resources and the re-use of blighted and brownfield properties through the application of responsible growth principles and strategies and livability principles and provide incentives for community revitalization efforts as per the state's responsible growth strategies and growth management policies specified in the current C&D Plan as well as in concert with the federal government's Sustainable Communities Initiative. As a general rule, the state will adopt and employ, to the greatest extent possible, responsible growth strategies, including but not limited to: consistency with the state's Conservation and Development (C&D) Plan; inter-municipal or regional collaborations; re-use, rehabilitation, and revitalization of land, property and infrastructure; urban infill development; mixed-use developments; walkable environments; transit-oriented developments; and incorporation of sustainable development standards in the implementation of all of the strategies and objectives outlined in this plan. With specific regard to the Small Cities SC/CDBG program the state will provide assistance to help undertake community infrastructure, facility and service projects (public facilities) affecting public health, safety and welfare.
8	Goal Name	Lead-Based Paint Hazards
	Goal Description	In coordination with the Health Homes initiative, which is spearheaded by the Department of public Health (DPH), DOH

	continues to administer the federal Lead Hazard Reduction Demonstration Program, which in Connecticut is referred to as Connecticut Children's Healthy Homes Program in conjunction with the Connecticut Lead Action for Medicaid Primary Prevention Project (LAMPP). Connecticut Children's Healthy Homes Program improves children's health by making their homes healthier, safer places to be. They are committed to protecting children from lead poisoning and making homes in Connecticut green, safe and healthy. The Healthy Homes Program receives funding through the US Department of Housing and Urban development and the State of Connecticut Department of Housing. Their goal is to protect children before they are exposed to lead hazards or injured by safety hazards in their homes. The Healthy Homes Program integrates health and safety interventions, lead hazard control, energy efficiency interventions, and housing rehabilitation for property owners by coordinating resources in an efficient manner to produce healthy homes. Connecticut has statutes, regulations, technical standards, guidance documents and policies that relate to health and housing. The DOH would continue to comprehensively address lead-based paint issues as required under HUD's Lead - Safe Housing Regulation. The Healthy Homes Initiative encompasses several known home-based health hazards and programs and seeks to coordinate the delivery of services through collaboration with the DOH and other state and community stakeholders. Initial strategies for statewide implementation include training and technical capacity building of housing and health partners, development and implementation of healthy homes materials, assessments (inspection forms) and evidence-based interventions in DOH-eligible communities.
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AP-30 Methods of Distribution – 91.320(d)&(k)

Introduction:

The Department of Housing in collaboration with the Connecticut Housing Finance Authority invites any Developer/Owner that is looking to apply for funding and/or other resources from DOH and/or CHFA for the new construction, substantial rehabilitation, and/or preservation of affordable housing each calendar year to participate in a new *Developer Engagement Process*. This process is intended to identify and to create a pipeline of potential activity for future funding opportunities including but not limited to new construction, substantial rehabilitation and/or preservation of affordable and supportive housing.

Developers/applicants complete the *DOH/CHFA Development Engagement Profile* that describes the project, development or concept as it currently stands. There is no requirement to engage a consultant, prepare any formal documentation, obtain any approvals or expend any funds in order to complete and submit the *DOH/CHFA Development Engagement Profile*. Upon receipt of a *DOH/CHFA Development Engagement Profile*, developers/applicants will be contacted by DOH to schedule a virtual meeting with DOH and CHFA staff to discuss the proposed activity outlined. When funding is available, including HOME, NHTF, and state bond funds, projects in the pipeline will be invited to make an application.

For CDBG and RHP funding opportunities, communities participate in a competitive application process at least annually for CDBG funds to implement their proposed community and economic development projects. For ESG and HOPWA funding, the state holds a competitive RFP for services every three years.

Distribution Methods

Table 7 - Distribution Methods by State Program

1	State Program Name:	Community Development Block Grant - Small Cities
	Funding Sources:	CDBG

Describe the state program addressed by the Method of Distribution.	Communities funded under the SC/CDBG Program can undertake a wide range of activities in the areas of housing, economic development, community facilities, and public services, provided each activity meets one of the three national program objectives (see criteria that will be used to select applications below). Eligible activities include : • Acquisition of real property; • Clearance (including assessment and remediation of known or suspected environmentally contaminated sites), rehabilitation, reconstruction, and construction of buildings; • Code enforcement; • Disposition of real property; • Economic development assistance to for-profit business; • Energy efficiency/conservation; • Housing services; • Loss of rental income; • Micro-enterprise assistance; • Planning and capacity building; • Program administrative costs; • Public facilities and improvements; • Public services; • Relocation assistance; • Removal of architectural barriers (commonly called ADA improvements); and • Technical assistance. Communities participate in a competitive application process at least annually for CDBG funds to implement their proposed community and economic development projects. Generally, applications are due in early spring and will be rated and ranked according to current DOH policy. This process is subject to change annually and will be communicated by DOH. Method of Distribution includes the following: • The process is started by the applicant completing and submitting an Intent to Apply Form. It is noted that all proposed projects must meet eligibility requirements and national objective criteria. It is understood that the proposed project could change by the time applications are submitted; • Attend the Application Workshop and receive the application form; • Hold Public Hearing (eventually there will be two public hearings at different times during the project): Notice to be published at least twice in a daily newspaper of
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		general circulation in the municipality; Affidavit of Publication and meeting minutes will be a part of application; • Conduct an Environmental Review: Establish Environmental Review Record; Determine type of activity and environmental impact; Publish request for release of funds; Request release of funds from DOH; • Write Application: Select eligible activity; Determine National Objective; Prepare and submit application to DOH; • Rate and Rank: DOH receives and reviews application; DOH rates and ranks applications; • Award: DOH submits ratings and rankings to Commissioner of Housing for award approval; Governor's Office announces the awards; • Contract Documents: DOH prepares contract documents; DOH sends contract documents to grantee; Grantee returns signed documents to DOH; Commissioner of Housing executes contract documents; • Construction Period; • DOH conducts Monitoring and Closeout.
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Describe all of the criteria that will be used to select applications and the relative importance of these criteria.	Communities can meet a national objective through one of the following: • Low- and Moderate-Income Benefit: area benefit, limited clientele, direct benefit; • Slum and blight: prevention or elimination on an area basis; or prevention or elimination on a spot slum and blight basis; • Urgent Need: sudden and unexpected need; threat to the health and welfare of the community; occurred within 18 months; and no other funds available. DOH will conduct due diligence and evaluate all eligible applications using the evaluation criteria described herein. Depending on the nature of the proposed activity, site inspections may be conducted by DOH staff. An evaluation of the site's feasibility will be completed and considered as part of the final review. Staff review will include but not be limited to the following: Need and Impact - Project Need and Impact can result in 128 points total and includes points for income levels served; relocation assistance; whether a town meets the goals listed in the current Plan of Conservation and Development; and support letters. Capacity - Capacity can result in 58 points total and includes points for members of the applicant team having experience with the CDBG program with excellent performance; number of non-SC projects completed on time and within budget; completed SC/CDBG grants; number of Small Cities grants currently open; compliance; litigation; citizen complaints; returned funds; leveraged funds; program income; and staffing. Construction and Environment - Construction and Environment can result in 25 points total and includes points for Standard Projects (Site and Building Report, Coordination / Approval / Clearances, Construction, Sustainable Energy Features and Design); Residential Rehab Program (Procurement, Site Evaluation, Hazardous Material Process, Construction, Monitoring, Approvals/Permitting, Schedule, Compliance, Budget, Administration, Sustainability); Infrastructure (Infrastructure, Approvals, Permit Coordination, Construction Documents, Sustainable Features) Fair Housing and Equal Opportunity - Fair Housing and Equal Opportunity can result in 20 points total and include points for identifying Fair Housing Action Steps completed or in process within the last three years. DOH looks at number of awards made to Section 3 residents or contractors; good faith efforts to reach Section 3 residents or contractors; awards made to small and minority and women owned businesses; if an applicant is a new grantee; identification of projects in the last 3 years that
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		promote principles of Fair Housing; follows all ADA requirements. Other - Other can result in 4 additional points and includes: Fiscal and Grants Management; Consistency with State Consolidated Plan; DOH Training; and General Application Information.
	If only summary criteria were described, how can potential applicants access application manuals or other state publications describing the application criteria? (CDBG only)	FY 2025-26 funding for the SC/CDBG Program will be available for all eligible activities through a competitive application funding round. DOH provides adequate advance notice of fund availability and reserves the right to cease accepting applications at any time that all available funds have been committed. Based on funding availability and other considerations, DOH may limit the number of applications that can be submitted by a municipality in a funding round. Notification of such limitations will be included in DOH's notice of fund availability should DOH elect to set such a limitation. In the case of Urgent Need, DOH will accept applications on a first-come first-serve basis, if funds are available. Application materials are available at the DOH website, www.ct.gov/doh, or by contacting Miguel Rivera, CT Department of Housing, 505 Hudson Street, Hartford, CT 06106. Phone: 860-270-8012.
	Describe the process for awarding funds to state recipients and how the state will make its allocation available to units of general local government, and non-profit organizations, including community and faith-based organizations. (ESG only)	
	Identify the method of selecting project sponsors (including providing full access to grassroots faith-based and other community-based organizations). (HOPWA only)	

Describe how resources will be allocated among funding categories.	The FY 2025-26 allocation to DOH for the SC/CDBG Program is anticipated to be \$13,895,559. SC/CDBG funds are subject to availability from the federal government. If changes to this distribution become necessary, procedures outlined below will be observed in making those changes. DOH will use \$100,000 plus 2% of the award for its administration of the SC/CDBG Program. DOH will also use up to 1% of the award for technical assistance activities including technical assistance training sessions for grantees and handbooks for use by local governments. DOH will focus 2025 Small Cities CDBG funding on the preservation of the State-Sponsored Housing Portfolio (“SSHP”) but will not exclude housing authorities outside of SSHP or Public Infrastructure in support of affordable housing. Grantee administration costs are restricted to up to 8% of any grant award or \$33,000, whichever is lower. Requests for funding will be a part of the standard competitive funding round for projects and activities. Should the amount of the allocation by the federal government be greater or lesser than the anticipated allocation denoted, these funds will be distributed on a prorated basis as defined above.
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Describe threshold factors and grant size limits.	DOH has established the following threshold requirements for applicants to be eligible to apply for funds: • Eligible applicants: As defined by HUD program regulations; • Eligible activity: As defined by HUD program regulations; • National Objective: Each proposed activity must meet at least one national objective and must be fully supported within the application; • Citizen Participation: Applicants must provide certification of compliance with citizen participation criteria; • Consistency with the ConPlan: Applicants must identify how the project is consistent with the goals and strategies of the ConPlan; • Fair Housing and Equal Opportunity Compliance: Applicants must submit a Fair Housing Action Plan which complies with DOH's guidelines/policies; • Statement of Compliance: Applicants must be in compliance with all existing department assistance agreements and cannot be in default under any CHFA or HUD administered program; and • Expenditure Rates • 2024 grants are a Program Waiver • 2023 grants must be 50% expended by April 29, 2025 • 2022 grants must be 100% expended and have a Pre-Closeout Certificate by April 29, 2025 • 2021 grants and older must have been closed out with a Certificate of Completion and Semi-Annual Progress Reports by April 29, 2025
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	What are the outcome measures expected as a result of the method of distribution?	Each goal is supported by specific objectives (objectives are either specific actions to be taken or specific milestones to be achieved) designed to help achieve the goal. Each of these objectives is, in turn, followed by an output, a corresponding proposed outcome, and an indicator. Outputs are the products of the activities undertaken to meet the objectives and outcomes are the benefits that result from undertaking those activities. Indicators are the metric that will gauge the performance of the state in meeting the objective and ultimately the goals to which they relate. Outcomes measures for the SC/CDBG program can include but are not limited to: • New affordable rental housing; • New homeownership opportunities; • Preservation of existing affordable rental units; • Preservation of homeownership; • Increased opportunities for housing choice; • Increased rental housing opportunities that serve ELI, low- and moderate-income households in a variety of geographies. • Increased homeowners housing opportunities that serve low- and moderate-income households in a variety of geographies. • Expansion of access to rental and homeowner housing that serves low- and moderate-income households. • New/improved availability/accessibility and affordability in public housing. • New/improved availability/accessibility thru a non-housing community development project. • New/improved availability/accessibility thru an infrastructure/public facilities project. • New and improved sustainable communities. • Improved accessibility to housing free of lead-based paint and other environmental health and safety hazards.
2	State Program Name: Funding Sources:	Emergency Solutions Grant/ State Bond Funds ESG

Describe the state program addressed by the Method of Distribution.	The ESG (and State Bond Fund dollars) program is funded by the U.S. Department of Housing and Urban Development (HUD) to provide states and localities with resources and incentives to devise and implement long-term comprehensive strategies for meeting the emergency shelter and housing needs of the homeless and those at risk of homelessness. ESG and State Bond Fund dollars are utilized in conjunction with the Connecticut Balance of State Continuum of Care (CT BOS CoC) and the Connecticut Balance of State Steering Committee (CT BOS CoC Steering Committee). The CT BOS CoC is a united coalition of community and state systems that assist homeless and near homeless residents in the BOS region to obtain housing, economic stability, and an enhanced quality of life through a coordinated community-based process of identifying and addressing needs utilizing ESG and State Bond Fund dollars. Avoiding duplication of efforts, leveraging resources and coordinated planning are other purposes of the CT BOS. More specifically the CT BOS CoC is responsible for the following: • Enhance the knowledge of the service and housing providers to address the housing and service needs of homeless and formerly homeless persons in CT; • Identify housing needs of homeless and low-income persons in Connecticut on an ongoing basis; • Identify the gaps and needs of homeless households in Connecticut and participate in the process of prioritizing local, state and federal funding to meet these needs; • Support planning and development of housing and services to meet prioritized needs within Connecticut; • Participate in the development and operation of a coordinated access system (CAN) that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services and helps direct those persons to the appropriate providers; • Evaluate outcomes of projects funded under Emergency Solutions Grant and CoC programs and report to HUD; • Ensure that there is a single Homeless Management Information System (HMIS) for the CT BOS CoC area; and • Ensure that there is at least a biennial point-in-time count of homeless persons in the CT BOS CoC region. CT BOS CoC Steering Committee is the planning body that coordinates policies, strategies and activities toward ending homelessness in the CT BOS region. The Steering Committee gathers and analyzes information in order to determine the local needs of people experiencing homelessness, implements strategic responses, educates the community on homeless
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		issues, provides advice and input on the operations of homeless services and measures CoC performance.
	Describe all of the criteria that will be used to select applications and the relative importance of these criteria.	It is the intent of DOH to conduct a comprehensive, fair, and impartial evaluation of proposals received during any RFP process. When evaluating proposals, negotiating with successful proposers, and awarding contracts, DOH conforms to the Department's written procedures for POS procurements and the State's Code of Ethics. DOH designates a Screening Committee to evaluate proposals submitted in response to an RFP. The contents of all submitted proposals, including any confidential information, will be shared with the Screening Committee. Only proposals found to be responsive (complying with all instructions and requirements) will be reviewed, rated, and scored. All proposals must comply with the minimum submission requirements specified in the RFP. To be eligible for evaluation, proposals must: (a) be received on or before the due date and time; (b) meet the Proposal Format requirements; (c) follow the required Proposal Outline; and (d) be complete. Proposals that fail to follow instructions or satisfy these minimum submission requirements may not be reviewed further at the discretion of the Department. DOH will reject any proposal that deviates significantly from the requirements of the RFP. Proposals meeting the minimum submission requirements will be evaluated according to the established criteria. The criteria are the objective standards that the Screening Committee will use to evaluate the technical merits of the proposals. Only the criteria listed below will be used to evaluate proposals. The criteria are weighted according to their relative importance. The weights are confidential. • Organizational Profile; • Proposed Program Description; • Staffing Plan; • Program Outcome Requirements/Data and Technology Requirements; • Quality Assurance Requirements/Data and Technology Requirements; • Financial Profile; • Budget and Budget Narrative; and • Appendices

If only summary criteria were described, how can potential applicants access application manuals or other state publications describing the application criteria? (CDBG only)	
Describe the process for awarding funds to state recipients and how the state will make its allocation available to units of general local government, and non-profit organizations, including community and faith-based organizations. (ESG only)	Through competitive procurement, DOH has awarded five (5) ESG funded shelters: three (3) shelters that support families and two (2) shelters for both families and individuals. These shelters were previously established due to the documented need to support homeless individuals and families. As needs are identified in local communities, DOH examines its current financial capability to determine if there is financial and program support for new shelters. In addition to ESG funded shelters, DOH also funds an additional 32 shelters utilizing state and federal funds, which bring the total funded shelters to 37. DOH intends to utilize ESG monies for Rapid Re-housing for this fiscal year. DOH has awarded a non-profit the right to act as the ESG financial assistance fiduciary agency. At a minimum 40% of the annual ESG allocation will go to this fiduciary to administer financial assistance requested by housing relocation and stabilization agencies. DOH has leveraged existing resources to provide Housing Relocation and Stabilization Services to support the Rapid Re-housing program to ensure that homeless households will have a better chance of remaining stably housed. Through competitive procurement, seven (7) agencies have been awarded assistance to aid our homeless population with housing relocation and up to 12 months of stabilization services and in-home case management. These seven agencies receive referrals for services and financial assistance through their local Coordinated Access Network (CAN). The funding received from ESG and the state enables the organizations to provide shelter bed, case management services, and rapid rehousing services to homeless persons. DOH regularly consults with the Connecticut Coalition to End Homelessness, Inc. for the provision of technical assistance, programmatic training needs, program development service model recommendations and program evaluation.

Identify the method of selecting project sponsors (including providing full access to grassroots faith-based and other community-based organizations). (HOPWA only)	
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Describe how resources will be allocated among funding categories.	Connecticut anticipates receiving \$2,298,443 in federal ESG funds for the Action Plan program year beginning July 1, 2025. ESG funds are subject to availability from the federal government. If changes to this distribution become necessary, the procedures outlined below will be observed in making those changes. ESG funds will be pooled with approximately \$110 million in state funds for individual and family services. Should the amount of the allocation by the federal government be greater or lesser than the anticipated allocation, these funds will be distributed on a prorated basis as described in this section. During the FY, DOH may recapture funds from previous fiscal years due to any of the following: a) nonperformance; underutilization; or program income. Funds may be reallocated based on demand and/or emergency situations. In the event that additional funds are allocated that affect DOH's initial allocation and/or are recaptured from other states and reallocated to DOH during the FY, these funds will be distributed in accordance with the Action Plan guidelines in effect as of the date of reallocation. The pool of federal and state dollars, allocated to local community and faith-based organizations and municipalities, is for the provision of temporary shelter for homeless individuals and families. The funds provide operational costs, essential services such as counseling, case management, health, education, employment and training as well as HMIS costs and rapid re-housing. It is projected that under the Emergency Solutions Grants Program (ESG), federal ESG funds will be targeted as follows: Operations (Emergency Shelter) 50%; HMIS 4%; Rapid Re-housing 41% and administration 5%. Eligible Activities shall include one or more of the following: • Shelter beds/units – number of beds; • Diversion to help clients resolve potential shelter need through assistance other than emergency shelter; • Rapid Rehousing services, including housing location and placement services, stabilization case management and financial assistance; • Housing inspections; and • Case management in the shelter and/or in housing, with emphasis on housing stabilization and providing linkage to mainstream services
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Describe threshold factors and grant size limits.	During a grant solicitation process, the award of any contract is dependent upon the availability of funding to the Department. The funding source (Federal ESG and/or State ESS) will be determined by the Department, based in part, on the location of the proposed activity. ESG funds will only be used to fund programs in the Balance of State Eligible Metropolitan Service Area (EMSA) for the ESG program. A proposer must have the following minimum qualifications: • Proposer must demonstrate experience and focus on serving the homeless and/or those at risk of becoming homeless. Demonstration of abilities will occur in the proposal and workplan, which should include but not be limited to the following: • Successfully provided emergency shelter or housing services for persons that are homeless or at risk of homelessness for a minimum of two (2) years, or equivalent (e.g. supportive housing for other special needs populations, such as persons with mental health, substance abuse, homelessness, or other disabilities); • Currently provides case management services in conjunction with emergency shelter and/or permanent housing; • Demonstrated participation in local and statewide coordinated access and rapid rehousing initiatives. This should be demonstrated by attaching local Coordinate Access Network (CAN) and/or Rapid Rehousing meeting minutes/summaries reflecting attendance; and • Have the capacity to collect client level data using the Homeless Management Information System (HMIS) used in CT (CASEWORTHY), or ability to implement such data collection no later than three months after contract start date. • Demonstrated managerial and administrative support to implement an ESS and/or ESG program, including the ability to meet the data and technology requirements. • Evidence of financial stability.
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	What are the outcome measures expected as a result of the method of distribution?	DOH has negotiated the client-based outcomes and measures with directors of emergency shelters listed below. Each shelter will select and negotiate individual numerical outcomes and measures with DOH staff and will submit monthly statistical demographics reports, as well as ESG annual performance reports. DOH has also added contractual language as it relates to Homeless Management Information System (HMIS) requirements and utilization. The projected numerical goals represent statewide outcomes that will be evaluated every six months. Clients will attain alternative housing and/or access to social and/or treatment services. Alternative housing includes, but is not limited to, transitional housing, residential treatment programs, supportive and permanent housing. Social services include but are not limited to domestic violence abuse counseling, family counseling, educational and employment and financial counseling, child care, security deposit and rental assistance programs. Treatment services include, but are not limited to, residential and outpatient mental health and substance abuse treatment and medical treatment. Measure 1: At least 40% of clients access permanent housing. Measure 2: No more than 15% of clients are discharged to homelessness. Measure 3: At least 100% of Clients access additional social and /or outpatient treatment services as needed in the housing plan. Measure 4: For clients whose housing plans include agreed upon goals of accessing information on health, education, housing, budgeting, and/or other services as defined in the program component selected above, in order to make informed decisions about their health, education, finances, housing and other identified needs, 100% were provided with such information, as individually appropriate, in order to enable them to make informed decisions on meeting those needs; 100% of clients have come into the program through local coordinated access. Measure 5: The monthly shelter utilization rate, as reported in the Monthly Shelter Utilizer Report, shall be at or above 80%. Measure 6: If the monthly shelter utilization rate falls under 80% for more than 3 months consistently during this contract period, the contractor will communicate with DOH to explain the reasons for the low utilization rate.
3	State Program Name:	HOME Investment Partnerships (HOME) Program
	Funding Sources:	HOME

Describe the state program addressed by the Method of Distribution.	DOH will invest in the production of affordable housing through new construction or rehabilitation only when it determines that the units produced will remain affordable for the minimum required time period under the HOME Program. DOH, at its discretion, may extend the affordability period beyond the minimum required by the HOME Program. If HOME funds are used for homebuyers, the state will abide by the guidelines for resale and recapture as required in Section 92.254 of the HOME Investment Partnerships Program Consolidated Final Rule, HUD CPD Notice 12-003 and HUD CPD Notice 12-007. The state is also seeking to expand access to affordable housing through the utilization of partnerships with stakeholders and other funding organizations that leverage non-state resources for development or preservation of affordable housing. DOH will accept applications for all HOME Program eligible activities.
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Describe all of the criteria that will be used to select applications and the relative importance of these criteria.	The Department of Housing in collaboration with the Connecticut Housing Finance Authority invites any Developer / Owner that is looking to apply for funding and/or other resources from DOH and/or CHFA for the new construction, substantial rehabilitation, and/or preservation of affordable housing in the next calendar year to participate in a new <i>Developer Engagement Process</i>. This process is intended to identify and to create a pipeline of potential activity for future funding opportunities including but not limited to new construction, substantial rehabilitation and/or preservation of affordable and supportive housing. Developers/applicants complete the <i>DOH/CHFA Development Engagement Profile</i> that describes the project, development or concept as it currently stands. There is no requirement to engage a consultant, prepare any formal documentation, obtain any approvals or expend any funds in order to complete and submit the <i>DOH/CHFA Development Engagement Profile</i>. Upon receipt of a <i>DOH/CHFA Development Engagement Profile</i>, developers / applicants will be contacted by DOH to schedule a virtual meeting with DOH and CHFA staff to discuss the proposed activity outlined. When funding is available, including HOME, NHTF, and state bond funds, projects in the pipeline will be invited to make an application. Applications will be considered against financial and qualitative issues, including but not limited to: • Financial feasibility; • Reasonableness to proceed to construction; • Financial leveraging and firm financial commitments; • Social and economic impact on the neighborhood, community, region and state as defined in the strategies and priorities outlined in the ConPlan, including but not limited to transportation, education and job creation/retention. • Level of consistency with DOH's responsible growth criteria including compliance with the current Conservation and Development Policies Plan for Connecticut; • Fair Housing and Equal Opportunity Compliance; • Number of current open contracts; • Current project's expenditure rates; and • Prior audit or monitoring performance.
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If only summary criteria were described, how can potential applicants access application manuals or other state publications describing the application criteria? (CDBG only)	
Describe the process for awarding funds to state recipients and how the state will make its allocation available to units of general local government, and non-profit organizations, including community and faith-based organizations. (ESG only)	
Identify the method of selecting project sponsors (including providing full access to grassroots faith-based and other community-based organizations). (HOPWA only)	
Describe how resources will be allocated among funding categories.	The FY 2024-25 HUD allocation to DOH for the HOME Program is anticipated to be \$10,435,005. HOME funds are subject to availability from the federal government. If changes to this distribution become necessary, procedures outlined below will be observed in making those changes. DOH will use 10% of its annual HOME allocation for program administration. A minimum of 15% of the annual allocation will be set-aside for Community Housing Development Organizations (CHDO) as required by federal law. The amount of program income is estimated based on an average of the amount received by DOH over the last four program years. Should the amount of the allocation by the federal government be greater or lesser than the anticipated allocation denoted, these funds will be distributed on a prorated basis as defined above. FY 2025-26 Allocation: \$10,435,005 State Admin (10%): \$1,043,500.50 CHDO Set-aside (15%): \$1,565,250.75 Subtotal: \$2,608,751.25 Program Allocation: \$7,826,253.75

	Describe threshold factors and grant size limits.	• Eligible applicants as defined by HUD program regulations • Applicant capacity: Previous experience with the HOME program and /or other public financing, quality of work product, efficiency and effectiveness in project management; • Number of open contracts with DOH: Applicants with three or more open contracts (not pending closeout within six months of application), regardless of funding source, will be rejected; • Eligible activity: Only those activities eligible under the appropriate federal acts will be funded; • Statement of compliance with all program requirements. Applicants must be in compliance with all existing DOH assistance agreements and cannot be in default under any CHFA or HUD-administered program (Waiver provision available in extraordinary circumstances); • Consistency with ConPlan: Applicants must identify how the project is consistent with the goals and strategies of the ConPlan; and • Fair Housing and Equal Opportunity Compliance: Applicants must provide a certification/demonstration of compliance with all fair housing and equal employment opportunities obligations/guidelines.
	What are the outcome measures expected as a result of the method of distribution?	The State of Connecticut will continue its efforts to strengthen the abilities of state and local governments to expand and preserve the supply of decent, safe, sanitary, and affordable housing with the use of FY 2025-26 HOME funds. All HOME Program assisted rental and home ownership units will meet all program guidelines for income eligibility and accessibility.
4	State Program Name:	Housing Opportunities for Persons with AIDS (HOPWA) Program
	Funding Sources:	HOPWA

Describe the state program addressed by the Method of Distribution.	Connecticut anticipates receiving \$288,849 in federal Housing Opportunities for Persons with AIDS (HOPWA) funds for the Action Plan program year beginning July 1, 2025. HOPWA funds are subject to availability from the federal government. If changes to this distribution become necessary, the procedures outlined below will be observed in making those changes. HOPWA funds will be pooled with approximately \$4.1 million in annual funding from Connecticut's general operating budget. Should the amount of the allocation by the federal government be greater or lesser than the anticipated allocation denoted, these funds will be distributed on a prorated basis as described in this section. Funds may be reallocated during the FY based on demand and/or emergency situations. In the event that additional funds are allocated that affect Connecticut's initial allocation and/or are recaptured from other states and reallocated to Connecticut during the FY, these funds will be distributed in accordance with the Action Plan guidelines in effect as of the date of reallocation. The majority of HOPWA dollars allocated to Connecticut are funneled through the Eligible Metropolitan Statistical Area (EMSA) of Bridgeport, Hartford, New Haven and their surrounding areas. DOH receives a small amount of "Balance of State Dollars". DOH anticipates conducting a competitive procurement process for HOPWA services to ensure statewide coverage for the Balance of State catchment area. The type of housing to be funded is tenant-based scattered site apartments or congregate housing, with applicable administration costs within the identified cap. The housing programs are located in two Balance of State EMSAs and provide housing with supportive services to approximately 20 individuals at any one time. The supportive services include case management, cooking and cleaning assistance, transportation, education, and volunteer opportunities.
Describe all of the criteria that will be used to select applications and the relative importance of these criteria.	Each housing program serves an eligible person based on a verification of HIV/AIDS diagnosis that is a client with a positive diagnosis; income verification for a person who is a low- and moderate-income individual and person's family and /or eligible to receive housing information services regardless of income. It is also based on a review of the living situation that is related to those who are homeless and near homeless individuals.

If only summary criteria were described, how can potential applicants access application manuals or other state publications describing the application criteria? (CDBG only)	
Describe the process for awarding funds to state recipients and how the state will make its allocation available to units of general local government, and non-profit organizations, including community and faith-based organizations. (ESG only)	
Identify the method of selecting project sponsors (including providing full access to grassroots faith-based and other community-based organizations). (HOPWA only)	Effective July 1, 2020, in order to fully coordinate HOPWA activities with assistance provided under the Continuum of Care Program, the Department of Housing's HOPWA program will be integrated with the State's Coordinated Entry system known as the Coordinated Access Network (CAN). The use of the CAN coordinated entry system will help to ensure that HOPWA assistance is provided to those living with HIV/AIDS with the highest vulnerability and risks to housing stability. All referrals for permanent housing (TBRA) funded through HOPWA will occur through the CAN system. HOPWA grantees will be required to report permanent supportive housing (TBRA) vacancies to their local CAN and to accept only applicants referred by their local CAN off the By-Name List (BNL). This will ensure that applicants who have been homeless the longest and have the most intensive service needs receive priority access to HOPWA resources. If there are no literally homeless people living with HIV/AIDS in its geographic area, the local CAN will prioritize people at risk of homelessness with the most intensive service needs for referral to HOPWA funded TBRA. DOH anticipates conducting a competitive procurement process for HOPWA services to ensure statewide coverage for the Balance of State catchment area.

Describe how resources will be allocated among funding categories.	The non-profit organizations that provide the described services have established excellent reputations within their communities. Each has developed networks that are informed of the available housing and supportive services provided. Staff work closely with discharge planners from hospitals, homeless shelters and correction facilities, as well as, with case managers and care coordinators for the regional AIDS consortia. AIDS Connecticut (ACT) and its members, through its quality assurance program, continue to work closely with DOH to establish appropriate and measurable performance measures for ACT's activities. In addition, ACT mails a semi-annual newsletter to approximately 1,200 social service and housing contacts. The DOH consults with ACT for technical assistance in the development of service models and program evaluation. ACT is a membership organization for AIDS housing providers in the state.
Describe threshold factors and grant size limits.	The Standards of Care review assures the quality of programs by setting down guidelines for services, health and safety, and general management. A dual-committee of DOH staff representative along with ACT staff use this tool to identify programs' strengths and weaknesses, highlight their best practices, and develop a framework, time line and process for technical assistance to correct deficiencies. The Standards of Care is a comprehensive tool first produced in 1992 and carefully reviewed and updated several times since then. The philosophy behind this tool's development and use is the belief that all people have a right to safe, affordable, accessible, and permanent housing that enhances their quality of life. The Standards of Care was developed by the Standards Committee of ACT to describe the best practices of operating supportive residential programs for people living with HIV/AIDS. The Standards of Care describes four levels of supportive housing from Level I, a completely independent housing program, to Level IV for those who need skilled nursing care. The Standards of Care are reviewed annually by the Continuous Quality Improvement Committee (CQI) to ensure that the tool remains relevant to member agencies and DOH.

	What are the outcome measures expected as a result of the method of distribution?	DOH has contractually required Homeless Management Information System (HMIS) utilization by all HOPWA grantees. The Department has also aligned its contract outcome measures with HUD's HOPWA outcome measures. DOH has negotiated the following outcomes and measures with the AIDS residence service providers. Each organization that receives HOPWA funds will establish numerical goals for the outcomes and measures selected, submit semi-annual reports and their annual CAPER Report to the Department. The numerical goals identified below represent the goal for all individual AIDS residence programs. • Measure 1: 80% clients will maintain housing stability, avoid homelessness and access care each year. • Measure 2: 100% of clients will have income below 80% of area median income upon intake. • Measure 3: 100% of clients will have a housing plan for maintaining or establishing stable on-going housing within 60 days of intake. • Measure 4: 100% of clients will have contact with case manager/benefits counselor consistent with the schedule specified in client's individual service plan. • Measure 5: 100% clients had contact with a primary health care provider consistent with the schedule specified in client's individual service plan. • Measure 6: 75% of clients have accessed and can maintain medical insurance/assistance. • Measure 7: 50% of clients have successfully accessed or maintained qualification for sources of income. • Measure 8: 10% of total numbers of households have obtained an income-producing job.
5	State Program Name:	National Housing Trust Fund
	Funding Sources:	HTF

Describe the state program addressed by the Method of Distribution.	The National Housing Trust Fund (NHTF) provides formula grants to the state to increase and preserve the supply of decent, safe, and sanitary affordable housing for extremely low-income (ELI - with incomes not greater 30 percent of area median income) and very low-income (VLI - with incomes not greater than 50% of area median income) households, including homeless families. DOH will use NHTF funds in combination with State Bond Funds, federal HOME, federal 811 PRA and other funds to develop and rehabilitate ELI housing. It will be used to leverage the development of units targeted for extremely low-income families, with a priority for the development of permanent supportive housing units. DOH will invest in the production of affordable housing through new construction or substantial rehabilitation only when it determines that the units produced will remain affordable for the minimum required time period under the NHTF. DOH, at its discretion, may extend the affordability period beyond the minimum required by the NHTF.
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Describe all of the criteria that will be used to select applications and the relative importance of these criteria.	The Department of Housing in collaboration with the Connecticut Housing Finance Authority invites any Developer / Owner that is looking to apply for funding and/or other resources from DOH and/or CHFA for the new construction, substantial rehabilitation, and/or preservation of affordable housing in the next calendar year to participate in a new <i>Developer Engagement Process</i>. This process is intended to identify and to create a pipeline of potential activity for future funding opportunities including but not limited to new construction, substantial rehabilitation and/or preservation of affordable and supportive housing. Developers/applicants complete the <i>DOH/CHFA Development Engagement Profile</i> that describes the project, development or concept as it currently stands. There is no requirement to engage a consultant, prepare any formal documentation, obtain any approvals or expend any funds in order to complete and submit the <i>DOH/CHFA Development Engagement Profile</i>. Upon receipt of a <i>DOH/CHFA Development Engagement Profile</i>, developers / applicants will be contacted by DOH to schedule a virtual meeting with DOH and CHFA staff to discuss the proposed activity outlined. When funding is available, including HOME, NHTF, and state bond funds, projects in the pipeline will be invited to make an application. • Applicants for NHTF must meet the minimum program eligibility and threshold requirements; • Depending on the nature of the proposed activity, site inspections may be conducted by DOH staff. An evaluation of the site's feasibility will be completed and considered as part of the review process. • Project selection will be made on a competitive basis in accordance with the Ranking and Rating Criteria. The Selection Criteria include: affordability, marketability and fair housing; applicant capacity; project feasibility and readiness to proceed; and responsible growth and livability initiatives.
If only summary criteria were described, how can potential applicants access application manuals or other state publications describing the application criteria? (CDBG only)	

	Describe the process for awarding funds to state recipients and how the state will make its allocation available to units of general local government, and non-profit organizations, including community and faith-based organizations. (ESG only)	
	Identify the method of selecting project sponsors (including providing full access to grassroots faith-based and other community-based organizations). (HOPWA only)	
	Describe how resources will be allocated among funding categories.	The FY 2025-26 HUD allocation to DOH for the NHTF is anticipated to be \$3,144,833. Funds are subject to availability from the federal government. If changes to this distribution become necessary, procedures outlined below will be observed in making those changes. Administrative costs cannot exceed 10 percent of the annual grant. The amount of program income is expected to be \$0 as the awards will be structured as non-interest-bearing loans or advances, deferred payment loans, or grants. FY 2024-25 Allocation: \$3,144,833 State Administration (10%): \$314,483.30 Program Allocation: \$2,830,349.70 Estimated Program Income: \$0 Availability for Eligible Activities: \$2,830,349.70

6	Describe threshold factors and grant size limits.	Applications will only be accepted from eligible recipients which include: units of general local government (including other PJ's: Participating Jurisdictions), for-profit and nonprofit entities (including CHDO's and local housing authorities), and joint ventures among various types of entities. Every contract for construction or substantial rehabilitation shall comply with state and federal labor standards. Furthermore, every contract for the construction or rehabilitation of housing that includes 12 or more NHTF - assisted units must comply with the Davis Bacon Act, 40 USC 276a-276a-5. Eligible recipients must meet the following thresholds: • Must have completed at least one affordable housing project using state (FLEX, State Housing Trust Funds) or Federal (HOME, LIHTC) funds on time and within budget; • Must have completed at least one affordability project of a similar size and scope to the proposed NHTF activity; • Must have sufficient financial capacity or access to appropriate capital to obligate NHTF funds; • Must operate at least one affordable housing project in accordance with state or federal obligations, or have contracted for management services with such experience; • Must provide a certification that any housing units assisted will comply with NHTF requirements; • Must provide a certification of compliance with all existing DOH assistance agreements and cannot be in default under any CHFA or HUD-administered program at the time of application; and • Must provide a certification/demonstration of compliance with all fair housing and equal employment opportunities obligations/guidelines.
	What are the outcome measures expected as a result of the method of distribution?	The State of Connecticut will continue its efforts to strengthen the abilities of state and local governments to expand and preserve the supply of decent, safe, sanitary, and affordable housing with FY 2024-25 NHTF funding. All NHTF Program assisted rental units will meet all program guidelines for income eligibility and accessibility.
	State Program Name:	Recovery Housing Program
	Funding Sources:	RHP

Describe the state program addressed by the Method of Distribution.	The Recovery Housing Program (RHP) is authorized by the SUPPORT for Patients and Communities Act (SUPPORT Act), which was passed in 2018. RHP rules fall under the umbrella of the Community Development Block Grant (CDBG) Program, as modified for RHP by Federal Register Notice (FR-6225-N-01) (the Notice). The intent of the pilot Recovery Housing Program (RHP) is to support individuals in recovery from substance use disorders (SUD) on a path to self-sufficiency by providing stable, temporary housing. RHP funds may be used to develop or maintain housing for individuals in recovery from SUD. At its discretion, the State of Connecticut may carry out activities utilizing the state CDBG program regulations to distribute RHP funds to units of general local government, Indian tribes, tribally-designated housing entities, and entitlement areas. The State of Connecticut will utilize RHP funding on RHP-eligible activities (42 U.S.C. 5305(a)). The state will utilize RHP funding for the purpose of providing stable, temporary housing for individuals in recovery from a substance use disorder. CDBG-eligible activities that meet the RHP intent of providing stable, temporary housing for individuals in recovery from a substance use disorder are limited to: • Public facilities and improvements; • Acquisition of real property; • Lease, rent, and utilities; • Rehabilitation and reconstruction of single-unit residential buildings; • Rehabilitation and reconstruction of multi-unit residential buildings; • Rehabilitation and reconstruction of public housing; • Disposition of real property; • Clearance and demolition; • Relocation; and • Expansion of existing eligible activities to include new construction of housing. Any activity not specifically authorized by HUD program regulations will be considered to be ineligible for assistance under the Recovery Housing program. RHP funds may not be used for activities to aid in the prevention or elimination of slums or blight, or activities addressing urgent needs. All RHP funds must be used for activities that benefit LMI persons. 24CFR 570.208(a)(2) and 570.483(b)(2)(i)(B) expand Limited Clientele criteria to enable assistance for acquisition, rehabilitation, reconstruction, or new construction activities, when at least 51% of beneficiaries are LMI. Any cost or other limitations on beneficiary participation may not be
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	prohibitive for low-income persons. In addition, 24CFR 570.208(a)(2)(i)(A) or 570.483(b)(2)(ii)(A) expands eligible categories of Limited Clientele to include persons who meet the federal poverty limits or persons who are insured by Medicaid. Lease, rent, and utilities costs may be paid for an eligible individual for up to 2 years. There is not limit on the portion of the grant that may be used for such costs. Payments must result in a new service or quantifiable increase in an existing service.
Describe all of the criteria that will be used to select applications and the relative importance of these criteria.	Proposals will be evaluated by a review team on applicant qualifications including but not limited to: • financial capacity of the applicant to provide and/or coordinate the provision of necessary services; • organizational capacity of the applicant to provide and/or coordinate the provision of necessary services; • past positive history of the applicant with DOH. DOH will conduct due diligence and evaluate all eligible applications using the evaluation criteria described herein. Depending on the nature of the proposed activity, site inspections may be conducted by DOH staff or its agent. An evaluation of the site's feasibility will be completed and considered as part of the final review. Staff/agent review will include but not be limited to the following: • detailed project description including map showing project location; • Project participants and partners including names of lead applicant(s), leasing agencies, equity provider, source of permanent financing and owner of assets after project completion, as applicable; • project budget and requested grant amount; • consistency with the RHP program national objectives All final decisions are left to the discretion of the DOH Commissioner. As previously noted, should insufficient applications be received to fully utilize available funding, the Department will consult with the state's two Continuum of Care, the Connecticut Balance of State Continuum of Care (CT BOS CoC) and Opening Doors Fairfield County (ODFC) to identify other potential opportunities.

If only summary criteria were described, how can potential applicants access application manuals or other state publications describing the application criteria? (CDBG only)	
Describe the process for awarding funds to state recipients and how the state will make its allocation available to units of general local government, and non-profit organizations, including community and faith-based organizations. (ESG only)	
Identify the method of selecting project sponsors (including providing full access to grassroots faith-based and other community-based organizations). (HOPWA only)	
Describe how resources will be allocated among funding categories.	As mandated by the SUPPORT Act, The State of Connecticut will distribute funds giving priority to entities with the greatest need and ability to deliver effective assistance in a timely manner. RHP dollars will be utilized in the following two ways: 1) in conjunction with the state's two Continuum of Cares, the Connecticut Balance of State Continuum of Care (CT BOS CoC) and Opening Doors Fairfield County (ODFC) in support of creating sober housing; and 2) in conjunction with the Court Support Services Division of the State of Connecticut Judicial Branch in the creation of transitional housing. The Federal Fiscal Year 2024 allocation to DOH for the RHP Program is anticipated to be \$1,205,697. Grant administration will be capped at 5% of the allocation, which is \$60,284. The total funds available to fund projects out of FFY 24, is anticipated to be \$1,145,413 which is FFY 24 allocation of \$1,205,697 minus administrative costs of \$60,284. The state does not intend to utilize RHP funds to generate program income or to allocate RHP funding for technical assistance. Administration matching funds are not required.

Describe threshold factors and grant size limits.	DOH has established the following threshold requirements in order for applicants to be eligible to apply for funds: • Eligible applicants: nonprofit corporations, municipal and tribal governments; • Eligible activities: must benefit individuals in recovery from a substance use disorder and are limited to: • Acquisition of real property; • Lease, rent, and utilities; • Rehabilitation and reconstruction of multi-unit residential buildings; • Disposition of real property; • Clearance and demolition; • Relocation; and • New construction of housing. • National Objective: Each proposed activity must meet at least one national objective and must be fully supported within the application; • Statement of Compliance: Applicants must be in compliance with all existing department assistance agreements and cannot be in default under any CHFA or HUD administered program.
What are the outcome measures expected as a result of the method of distribution?	The intent of RHP is to support individuals in recovery from substance use disorders (SUD) on a path to self-sufficiency by providing stable, temporary housing. Cross-sector partnerships help serve the diverse needs that those entering recovery housing are likely to have and enhance the impact of recovery housing. Recovery housing is one component of the care continuum that promotes long-term recovery and addresses the needs of the whole person with a SUD. Housing First/Whole Person Care addresses various dimensions of an individual's life that require different treatment that may affect long-term recovery. Partnerships that bring additional resources to collectively address all dimensions are essential. The State of Connecticut intends to coordinate with the state's two Continuum of Care, the Connecticut Balance of State Continuum of Care (CT BOS CoC) and Opening Doors Fairfield County (ODFC); and will also coordinate with the Court Support Services Division of the State of Connecticut Judicial Branch.

Discussion:

The state will target its state and federal funds to certain geographic areas consistent with the state's Opportunity Mapping and priorities set in the recommended State Plan of Conservation and Development, except as prohibited by federal or state law. For example, the state's allocation of SC/CDBG and ESG funds may only be used in Federally designated non-entitlement areas. However, since there is a major emphasis on directing resources to areas in need of revitalization, resources will be focused, to the greatest extent possible, in targeted areas.

The existing Section 8 Housing Choice Voucher Program/Certificate, Section 8 Moderate Rehabilitation, Resident Service Coordinator grant, Elderly Rental Assistance Payments, State Rental Assistance Payments, and other "housing support" programs are exempt from the state's geographic targeting.

Projects

AP-35 Projects – 91.220(d)

Introduction

AP-35 Figure 1: Project Information

#	Project Name

Describe the reasons for allocation priorities and any obstacles to addressing underserved needs

AP-38 Project Summary

AP-38 Figure 1: Project Summary Information

1. <project short name>	
<i>Project Name</i>	
<i>Target Area</i>	
<i>Goals Supported</i>	
<i>Needs Addressed</i>	
<i>Funding</i>	
<i>Description</i>	
<i>Target Date</i>	
<i>Estimate the number and type of families that will benefit from the proposed activities</i>	
<i>Location Description</i>	
<i>Planned Activities</i>	
<i>Project Name</i>	

AP-40 Section 108 Loan Guarantee – 91.320(k)(1)(ii)

Will the state help non-entitlement units of general local government to apply for Section 108 loan funds?

Yes, if requested.

Available Grant Amounts

Guaranteed by HUD and backed by the full faith and credit of the United States Treasury, Section 108 notes are issued to investors through private underwriters. Section 108 funds are offered to eligible communities in the form of loans that must be repaid in full. Under the provision of the SC/CDBG program, for any projects approved under this provision, the state would pledge its future SC/CDBG funds as the ultimate repayment source in case of repayment default by the loan recipients.

The state's participation in the Section 108 program does not commit any funding to any local government. HUD would make the ultimate decisions regarding any local government applications for Section 108 loans. All Section 108 projects must meet all applicable CDBG requirements and result in significant employment and/or benefit for low- and moderate-income persons. Projects that already have alternate sources of financing under another program would generally not be considered for Section 108 loans unless the available funds are not sufficient to meet the project's needs. Section 108 program regulations are found at 24 CFR Subpart M-Loan Guarantees, Sections 570.700 to 570.711. All Section 108 projects would be required to provide additional security and demonstrate that the Section 108 borrowing can be paid back. Additionally, in order to be considered for funding by DOH, all Section 108 projects of regional significance would need to receive the approval of either the regional planning organization or the economic development district in which the project would be proposed.

Acceptance process of applications

Proposals for Section 108 loans would be accepted by DOH throughout the year and would be evaluated on project merits by a review team. Communities would be requested to complete a pre-application, which would enable DOH to determine that the proposal meets federal eligibility and feasibility criteria. Proposals would be accepted for large-scale housing rehabilitation, housing development, site preparation, infrastructure and economic development. The amount of funds committed to a particular project would be based on financial need and public benefit relative to risk.

Pre-Application: All eligible communities would need to submit a pre-application to DOH. DOH's current Small Cities Letter of Intent can be used and modified to include the following information:

- Detailed project description including map showing project location.
- Project participants and partners including names of lead applicant(s), leasing agencies, equity providers, sources of permanent financing and owner of assets after project

completion.

- Project budget and requested loan amount.
- Project activities proposed to be funded by the Section 108 loan.
- Need and market assessment of the project.
- Financial need (proof that other sources of finance were sought for before applying for Section 108 as per CFR Sec. 570.704 (b) (4)).
- Local and regional economic development benefits, including identification as a project prioritized by Comprehensive Economic Development Strategy (CEDS) and District Organizations of Economic Development Districts (EDD) created under Federal Departments of Commerce, Economic Development Administration guidelines.
- Consistency with the SC/CDBG program's national objectives.
- Consistency with other public benefit requirements of Section 108 (job creation and benefits to low- and moderate-income people).
- Proof of local government's, or private entity's in case loan will be transferred, capability for repayment.
- Proposed repayment plan identifying all sources of repayment.
- Citizen's approval of project and loan obligations.
- In case of joint applications from multi-jurisdictional consortia, agreement and terms for collaboration and the community designated to serve as lead applicant.
- Municipality's SC/CDBG program history with DOH.
- Property owner's approval.
- Consistency with the state's responsible growth policies and federal USDOT and HUD sustainable communities' livability principles.
- (as applicable) regional planning organization or economic development district approval.
- Any other information that may help with the project and loan approval.

Communities or projects would be evaluated by a review team on project merit.

All final decisions would be left to the discretion of the DOH Commissioner. If DOH approves the pre-application, the non-entitlement community or communities would be informed of the decision and would be instructed to submit a final application.

Final Application: If selected by DOH in the pre-application stage, the applicant would be provided with the final application documents and application instructions.

AP-45 Community Revitalization Strategies – 91.320(k)(1)(ii)

Will the state allow units of general local government to carry out community revitalization strategies?

Yes, if requested.

State's Process and Criteria for approving local government revitalization strategies

In 1996, HUD established criteria, which allowed states to approve a locally determined strategy for revitalizing an area that is among the community's most distressed. In order to provide some incentive for communities to undertake such revitalization, the SC/CDBG Program regulations provide certain benefits for the use of SC/CDBG funds in such an area. DOH will apply the same criteria to communities eligible for the SC/CDBG Program.

A community that is interested in undertaking a Community Revitalization Strategy (CRS) must submit a request to DOH prior to applying for SC/CDBG funds. A community's revitalization strategy must be designed to provide for the economic empowerment of low- and moderate-income residents of a particular area that is among the community's most distressed . It must also provide for other long-term improvements within a reasonable period of time. Therefore, the CRS must clearly describe how it meets the following criteria:

- **Boundaries:** A community must identify the neighborhood's boundaries for which the CRS applies. All areas within the boundaries must be contiguous;
- **Demographic Criteria:** The designated area must be a primarily residential area that contains at least 51% Low- and Moderate-Income (LMI) residents. However, a community may not utilize the area benefit presumption authorized by 24 CFR 570.483(e)(5)(i) or the aggregation of housing units authorized by 24 CFR 570.483(e)(5)(ii) unless it meets the additional demographic criteria outlined in 24 CFR 570.483(b)(1)(v). Communities that intend to utilize the area benefit presumption or the aggregation of housing units must provide DOH with the census data needed to support the LMI percentage and poverty rate in the designated area.
- **Consultation:** The community must describe how the CRS was developed in consultation with the area's stakeholders, including residents, owners/operators of businesses and financial institutions, nonprofits, and community groups that are in or serve the neighborhood.
- **Assessment:** the CRS must include an assessment of the economic conditions of the area and an examination of the opportunities for economic development improvement and the problems likely to be encountered;
- **Economic Empowerment:** there must be a realistic development strategy and implementation plan to promote the area's economic progress focusing on activities to create meaningful jobs for the unemployed low- and moderate-income residents of the area as well as activities to promote the substantial revitalization of the area; and
- **Performance Measures:** The CRS must identify the results to be achieved, expressing them

in terms that are readily measurable, in the form of benchmarks.

A community with an approved Neighborhood Revitalization Zone (NRZ) pursuant to Connecticut General Statutes Chapter 118, Sec 7-600 may use the strategic plan developed for the NRZ as the CRS as long as any additional information required by DOH is also provided.

AP-50 Geographic Distribution – 91.220(f)

Description of the geographic areas of the entitlement (including areas of low-income and minority concentration) where assistance will be directed

The following federal resources will be directed toward specific geographic areas as described below:

- Emergency Solutions Grant (ESG) - Emergency Solutions Grant funds are awarded through a formula established by the federal government. The state's allocation of ESG funds may be used anywhere in Connecticut without restriction. Four jurisdictions (Bridgeport, Hartford, New Haven and Waterbury) receive their own allocations of ESG funds directly from the federal government, thus are not eligible for the state allocations. Because of the nature of homelessness, the ESG program is exempt from Priority Funding Area requirements.
- Home Investment Partnerships Program (HOME) - The HOME Program was established under the Cranston-Gonzalez National Affordable Housing Act of 1990. The state's allocation of HOME funds may be used anywhere within the State of Connecticut, however, use of funds in high opportunity areas will be prioritized.
- Federal Low-Income Housing Tax Credits (FLIHTC) - Federal Low-Income Housing Tax Credits may be used anywhere within the State of Connecticut. However, in accordance with federal law, states are required to develop allocation criteria that disperse the tax credits across the state through an IRS-approved competitive process. CHFA is Connecticut's tax credit administering agency and has an approved competitive process that allows points to be given to rental housing projects. CHFA's allocation plan must be consistent with the recommended State Plan of Conservation and Development.
- Small Cities Community Development Block Grant (SC/CDBG) - Small Cities Community Development Block Grant funds are awarded through a formula established by the federal government. The state's allocation of SC/CDBG funds may not be used in the following jurisdictions: Bridgeport, Bristol, Danbury, East Hartford, Fairfield, Greenwich, Hamden, Hartford, Manchester, Meriden, Middletown, Milford Town, New Britain, New Haven, New London, Norwalk, Norwich, Stamford, Stratford, Waterbury, West Hartford, and West Haven. These jurisdictions receive their own allocations of CDBG funds directly from the federal government and are not eligible for use of the state allocation designated for small cities.
- The majority of HOPWA dollars allocated to Connecticut are apportioned through the Eligible Metropolitan Statistical Area (EMSA) of Bridgeport, Hartford, New Haven, and their surrounding areas. DOH receives a small amount of "Balance of State Dollars" and uses a competitive procurement process for HOPWA services to ensure statewide coverage for the balance of state catchment area: Tolland County, New London County, Middlesex County and Litchfield County.
- National Housing Trust Fund - funding will be available in all 169 communities. Priority will

be given to activities in higher opportunity areas as demonstrated through Opportunity Mapping at the DOH website in accordance with the most recent Analysis of Impediments to Fair Housing Choice. Priority will be given to applications for projects in the higher "opportunity areas."

- Recovery Housing Program - The State of Connecticut will use its RHP funds to act directly, subject to state law and RHP requirements, to carry out activities through employees, contractors, and subrecipients in all geographic areas within its jurisdiction, including entitlement areas and tribal areas. The State of Connecticut will prioritize the distribution of funds in the service area of the Opening Doors Fairfield County (ODFC) Continuum of Care, service availability through Court Support Services Division of the State of Connecticut Judicial Branch in the creation of transitional housing.

Rationale for the priorities for allocating investments geographically

The state will target its state and federal funds to certain geographic areas consistent with the priorities set in the recommended State Plan of Conservation and Development, except as prohibited by federal or state law. For example, the state's allocation of SC/CDBG and ESG funds may only be used in non-entitlement areas. However, since there is a major emphasis on directing resources to areas in need of revitalization, resources will be focused, to the greatest extent possible, in targeted areas.

The existing Section 8 Housing Choice Voucher/Certificate, Section 8 Moderate Rehabilitation, Resident Service Coordinator grant, Elderly Rental Assistance Payments, State Rental Assistance Payments, and other "housing support" programs are exempt from the state's geographic targeting.

Discussion

Funding under the SC/CDBG, RHP and HOME programs will be available to all eligible communities in accordance with program requirements. Communities with demonstrated greater needs may be given higher priority. With respect to ESG, DOH sought/will seek competitive proposals statewide, and awards were/will be made consistent with a fair and equitable distribution that takes into consideration the availability of resources available to ESG-municipalities to ensure that there is not a duplication of services, while addressing needs of the Balance of State. Details on awards and contracts will be made available as part of the CAPER. With regard to HOPWA, effective July 1, 2020, in order to fully coordinate HOPWA activities with assistance provided under the Continuum of Care Program, the Department of Housing's HOPWA program will be integrated with the State's Coordinated Entry system known as the Coordinated Access Network (CAN). For NHTF, funding will be available in all 169 communities. Preference will be given to activities in higher opportunity areas as demonstrated through Opportunity Mapping at the DOH website in accordance with the most recent Analysis of Impediments to Fair Housing Choice.

Affordable Housing

AP-55 Affordable Housing – 91.220(g)

Introduction

DOH's goal for affordable housing is to make sure that everyone has access to housing opportunities and options in the State of Connecticut, including housing and service needs of the homeless and those threatened with homelessness.

Affordable Housing Strategies

Fair Housing and Housing Choice

Fair housing initiatives promote equal housing opportunities for all of Connecticut's residents and increase housing choice opportunities through the application of responsible development principles and strategies.

Supply of Quality Affordable Housing

The state will work to preserve and increase the supply of quality affordable rental housing available to low- and moderate-income households and improve the ability of low- and moderate-income residents to access homeownership opportunities and, within available resources, assist distressed households in maintaining homeownership. While increasing the supply of low- and moderate income homes available for ownership, the quality of the living environment can be improved by incorporating responsible development strategies such as mixed-use and transit-oriented developments.

AP-55 Figure 1: Goals by Support Requirement

One Year Goals for the Number of Households to be Supported	
Homeless	3,000
Non-Homeless	8,390
Special-Needs	14,500
Total	24,390

AP-55 Figure 2: Goals by Support Type

One Year Goals for the Number of Households Supported Through	
Rental Assistance	14,500
The Production of New Units	4,300
Rehab of Existing Units	4,290
Acquisition of Existing Units	0
Total	23,090

Discussion

Fair Housing and Housing Choice

In the first year of the 2025-2029 ConPlan, the state will focus its resources on achieving the following:

- Within available appropriations, the DOH will continue to support the Connecticut Fair Housing Center with their efforts to assist the State of Connecticut to fulfill the recommendations in the state's latest Analysis of Impediments to Fair Housing Choice for state level action.
- DOH will continue to conduct regular monitoring of its funding recipients in the areas of civil rights and fair housing enforcement.
- Update and redraft the Connecticut Fair Housing Regulations consistent with guidance from the Fair Housing Enforcement Office of HUD.

Quality Affordable Housing

In the first year of the 2025-2029 ConPlan, the state will focus its resources to achieve the following:

With regard to new affordable rental housing:

- DOH will work to create 3,300 units of new affordable rental housing.
- DOH will work to rehabilitate 4,200 units of affordable rental housing.

With regard to new homeownership opportunities:

- DOH will work to create 1,000 units of new affordable homeownership housing.
- DOH will work to rehabilitate 90 units of existing homeownership housing.

The above referenced figures were based on historic performance, current unit production costs and anticipated financial resources identified during the development of the 2025-2029 ConPlan.

AP-60 Public Housing – 91.220(h)

Introduction

DOH intends to provide decent housing and enhance suitable living environments for residents of public housing.

Actions planned during the next year to address the needs to public housing

DOH will address the housing needs of residents of public housing through preservation of existing housing units, the creation of replacement units and additional rent subsidies.

Preservation

The state will identify opportunities for the potential loss of public housing units due to expiring contracts or owner choice to preserve existing public housing, and work with those owners and prospective developers/investors to leverage a variety of resources targeted at the preservation of these units.

Replacement

The state will identify opportunities for the potential replacement of public housing units due to obsolescence or other environmental concerns, and work with the owners and prospective developers/investors to leverage a variety of resources targeted at the replacement of these units.

Actions to encourage public housing residents to become more involved in management and participate in homeownership

DOH and CHFA will continue counseling process for first time borrowers to reduce default rates and will also work to reduce single family delinquencies and foreclosures through proactive intervention indicators. DMHAS, DSS, DOH, and CHFA will promote homeownership opportunities for persons with disabilities who have been unable to access private financing.

If the PHA is designated as troubled, describe the manner in which financial assistance will be provided or other assistance

Not applicable.

Discussion

The State of Connecticut has 107 housing authorities whose primary mission is to produce and manage federal and state low-income public housing and administer federal and state housing choice vouchers and rental assistance programs. They work in conjunction with the State of Connecticut and other local organizations to ensure that affordable housing is available for those who need it. Housing Authorities are public entities eligible for many state and federal funding

programs. Within their area of operation, housing authorities are authorized to:

- Prepare, carry out, acquire, lease and operate housing projects.
- Provide for construction, reconstruction, improvement, alteration or repair of any housing project.
- Demise any dwellings, houses, accommodations, lands, buildings, structures or facilities.
- Investigate living, dwelling and housing conditions and the means and methods of improving such conditions.
- Determine where slum areas exist or where there is a shortage of decent, safe and sanitary dwelling accommodations for families of low- and moderate-income.
- Other duties and obligations related to the provision of housing for low-and moderate-income families.

AP-65 Homeless and Other Special Needs Activities – 91.220(i)

Introduction

As indicated in the Needs Assessment, Market Analysis and Institutional Structure sections of this document, it is clear that Connecticut is investing significant resources to address the growing homelessness problem in the state. However, the ongoing transformation of the housing market has created significant headwinds to solving homelessness in the state.

In PY 2025-2026, DOH intends to continue investing funds in the emergency shelter system to address the immediate needs of those entering homelessness. DOH will also enhance suitable living environments, create descent housing, and address the shelter, housing and service needs of the homeless, and those threatened with homelessness with an emphasis on continuing to end chronic homelessness, including veteran's homelessness and youth and family homelessness, as well as preventing future homelessness.

Describe the jurisdictions one-year goals and actions for reducing and ending homelessness including:

Reaching out to homeless persons (especially unsheltered persons) and assessing their individual needs

For more than twenty-five years, various agencies, both public and quasi-public, along with private organizations have joined in a collaborative effort to identify and develop long-term solutions to end chronic and long-term homelessness. The current partners in this effort are DOH, the Department of Mental Health and Addiction Services (DMHAS), the Department of Children and Families (DCF), the Department of Corrections (DOC), the Department of Veteran Affairs (VA), Court Support Services Division - Judicial (CSSD), the Department of Developmental Services (DDS), the Department of Social Services (DSS), the Office of Policy and Management (OPM), CHFA, and the Corporation of Supportive Housing (CSH). Connecticut is the only state in the nation consistently investing in the development of supportive housing on a statewide basis.

In January 2024, Gov. Lamont announced the formation of the Connecticut Interagency Council on Homelessness tasked with collaborating on a multi-agency approach that strengthens the state's homelessness prevention and response efforts. The Commissioner of DOH serves as the Council's chairperson. The Council will focus its work on three main goals.

- ***Strengthening current programs:*** The council will apply specific knowledge of individual programming to unite policies across state agencies in a way that considers the whole individual – from refining recommendations on improving health and human services for people experiencing homelessness to strengthening housing stability and creating more affordable housing across the state.
- ***Improving the effectiveness of the homelessness response system:*** Perspectives of all state agencies will be considered in sharing and planning new approaches to help connect people experiencing homelessness to services more effectively. This includes immediate assistance for people experiencing homelessness, such as support for emergency shelters and investments in housing stability.
- ***Meeting the demands of housing:*** The council will collaborate on maximizing the use of funding for housing assistance, increasing the supply of permanent supportive housing, improving the effectiveness of rapid rehousing, and evaluating and finding solutions for

expanded access to safe and affordable housing for all with an interagency approach of tailoring support to each individual's specific needs.

The state will emphasize programs targeted at supportive housing, rapid rehousing, and homelessness prevention as the primary means to prevent and end homelessness in Connecticut. The state will work to expand permanent supportive housing in Connecticut to break the cycle of long-term, chronic homelessness and it will utilize the Coordinated Access Network (CAN) to produce better placements and outcomes for the most vulnerable individuals in need of assistance. Each of these programs is designed to assist the target population with staying stably housed and thus not breaching the emergency shelters/transitional living system.

Addressing the emergency shelter and transitional housing needs of homeless persons

DOH will continue to maintain and fund Emergency Shelters across the state and will continue to fund youth transitional living programs. Currently, the state's emergency response system for homelessness is over-capacity and as such there are delays for individuals and families accessing shelter. Once in shelter, the lack of truly affordable housing options for extremely low-income households delays their move from emergency shelter to transitional or permanent supportive housing. As needs are identified in local communities, DOH examines its current financial capability to determine if there is financial and program support for new shelters and transitional housing units. According to the Coalition to End Homelessness, there are 41 emergency shelters located throughout the state (see MA-35).

DOH intends to utilize ESG monies for Rapid Re-housing over the next five-year period. DOH has awarded a non-profit the right to act as the ESG financial assistance fiduciary agency. At a minimum 40% of the annual ESG allocation will go to this fiduciary to administer financial assistance requested by housing relocation and stabilization agencies. DOH has leverage existing resources to provide housing relocation and stabilization services to support the Rapid Re-housing program to ensure that homeless households will have a better chance of remaining stably housed.

Helping homeless persons (especially chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth) make the transition to permanent housing and independent living, including shortening the period of time that individuals and families experience homelessness, facilitating access for homeless individuals and families to affordable housing units, and preventing individuals and families who were recently homeless from becoming homeless again

DOH has leveraged existing resources to provide Housing Relocation and Stabilization Services to support the Rapid Re-housing program to ensure that homeless households will have a better chance of remaining stably housed. Through competitive procurement, seven (7) agencies have been awarded assistance to aid the homeless population with housing relocation and up to 12 months of stabilization services and in-home case management. These seven agencies receive referrals for services and financial assistance through their local Coordinated Access Network.

Clients will attain alternative housing and/or access to social and /or treatment services. Alternative housing includes, but is not limited to, transitional housing, residential treatment programs, supportive and permanent housing. Social services include, but are not limited to, domestic violence abuse counseling, family counseling, educational and employment and financial counseling, childcare, security deposit and rental assistance programs. Treatment

services include, but are not limited to, residential and outpatient mental health and substance abuse treatment and medical treatment.

DOH also provides funding for the Youth Transitional Living Program to two contractors for the provision of multi-family or single room residency living arrangements. A variety of support services are provided to these individuals during their stay in the program. Stays can range from a period of six months to two years. The goal is to have these youth gain self-sufficiency and permanent housing.

DOH regularly consults with the Connecticut Coalition to End Homelessness for the provision of technical assistance, programmatic training needs, program development service model recommendations and program evaluation.

Helping low-income individuals and families avoid becoming homeless, especially extremely low-income individuals and families and those who are: being discharged from publicly funded institutions and systems of care (such as health care facilities, mental health facilities, foster care and other youth facilities, and corrections programs and institutions); or, receiving assistance from public or private agencies that address housing, health, social services, employment, education, or youth needs

DOH has leveraged existing resources to provide Housing Relocation and Stabilization Services to support the Rapid Re-housing program to ensure that homeless households will have a better chance of remaining stably housed. Through competitive procurement, seven (7) agencies have been awarded assistance to aid the homeless population with housing relocation and up to 12 months of stabilization services and in-home case management. These seven agencies receive referrals for services and financial assistance through their local Coordinated Access Network.

Clients will attain alternative housing and/or access to social and /or treatment services. Alternative housing includes, but is not limited to, transitional housing, residential treatment programs, supportive and permanent housing. Social services include, but are not limited to, domestic violence abuse counseling, family counseling, educational and employment and financial counseling, childcare, security deposit and rental assistance programs. Treatment services include, but are not limited to, residential and outpatient mental health and substance abuse treatment and medical treatment.

DOH also provides funding for the Youth Transitional Living Program to two contractors for the provision of multi-family or single room residency living arrangements. A variety of support services are provided to these individuals during their stay in the program. Stays can range from a period of six months to two years. The goal is to have these youth gain self-sufficiency and permanent housing.

DOH regularly consults with the Connecticut Coalition to End Homelessness for the provision of technical assistance, programmatic training needs, program development service model recommendations and program evaluation.

Discussion

DOH will utilize all eligible resources administered by the DOH to reduce the recurrence of homelessness by assisting families who are leaving homeless shelters and transitional living programs to achieve housing stability by providing support services; Continue RRP to promote quick access to housing for those who are eligible; Utilize the Coordinated Access Network (CAN)

to produce better placements and outcomes for the most vulnerable individuals in need of assistance; Implement the CT811 PRA program to locate project-based rental subsidies in areas where community-based services are available; Implement the homeless and prevention response fund which provides forgivable loans and grants to landlords to renovate multifamily homes in exchange for participation in the scattered site supportive housing program or participation in the rapid rehousing program; Implement the state-funded Eviction Foreclosure Prevention Program that assists families and individuals to remain in permanent housing.

Connecticut anticipates receiving **\$2,298,443** in federal ESG funds for the Action Plan program beginning July 1, 2025. ESG funds are subject to availability from the federal government. ESG funds will be pooled with approximately **\$10 million** in annual funding from Connecticut's general operating budget and approximately **\$6.5 million** from the U.S. Department of Health and Human Services TANF and Social Services Block Grants. Additionally, DOH will be utilizing approximately **\$1.2 million** of Recovery Housing Program (RHP) funds from HUD.

The pool of federal and state dollars, allocated to local community and faith-based organizations and municipalities, is for the provision of temporary shelter for homeless individuals and families. The funds provide operational costs, essential services such as counseling, case management, health, education, employment and training as well as HMIS cost and rapid re-housing. It is projected that under the Emergency Solutions Grant Program (ESG), federal ESG funds will be targeted as follows: Operations (Emergency Shelter) 50%; HMIS 4%; Rapid Re-Housing 41% and Administration 5%.

AP-70 HOPWA Goals – 91.320(k)(4)

One year goals for the number of households to be provided housing through the use of HOPWA for:	
Short-term rent, mortgage, and utility assistance to prevent homelessness of the individual or family	11
Tenant-based rental assistance	13
Units provided in permanent housing facilities developed, leased, or operated with HOPWA funds	0
Units provided in transitional short-term housing facilities developed, leased, or operated with HOPWA funds	0
Total	24

AP-75 Barriers to Affordable Housing – 91.220(j)

Introduction:

Housing is a basic need of every person and family regardless of age, race, or income level. The lack of housing choices for all citizens affects the state's fiscal condition, the quality of life, and the vitality of the state, and its cities, towns and neighborhoods. The availability and quality of housing choices have substantial impacts on economic competitiveness, responsible growth, and the cost of infrastructure, not just roads and bridges, but also the cost of municipal services and local schools.

As is the case nationwide, decades of public and private policies and practices have resulted in high levels of segregation within many Connecticut communities. Demographic and geographic data indicate that several groups including people of color, people with lawful sources of income other than employment, people with disabilities, and single-parent households are particularly concentrated in the state's lowest income communities.

Connecticut's housing crisis is deeply embedded in a legacy of discriminatory practices and a tangled web of land use regulations. Fifty-two percent of Connecticut renters are cost-burdened, according to the 2022 American Community Survey 5-year estimates, and opportunities to rent are largely concentrated in urban areas with existing multifamily housing and where affordable housing units are often clustered. Limited rental housing drives up rent prices and puts more renters at risk of eviction.

As part of a 5-part series published in the CT Mirror, issues surrounding Connecticut's affordable housing needs were detailed.²⁵ The primary problem related to the development of affordable housing in CT is that the power to permit or deny housing development has been delegated to each municipality. Zoning is administered at the local level, and if a local government does not grant permission to build, typically development does not proceed. Modern day zoning in CT is a legacy of racially motivated segregationist policy from the 1920s. While fair housing laws prohibit the most egregious practices, local zoning ordinances are used to exclude and segregate. Municipalities often cite concerns about preserving the character of a town, traffic congestion, or declining property values as objections to affordable housing, especially multi-family development. While everyone understands the need for affordable housing, it seems developments are supported so long as they are built somewhere else.

The Affordable Housing Land Use Appeals Procedure (§8-30g) allows housing developers, seeking to build "set aside" housing with long-term affordability for low- and moderate-income households, to challenge a town's failure to approve their proposed development, even when it does not meet local zoning regulations. This procedure applies to all municipalities that do not yet have 10% or more of their housing units designated as assisted. Thirty-one municipalities are exempt from the Appeals Procedure, due to having met the 10% threshold of qualified, affordable units in the municipality (this Appeals List is administered by DOH). While more than 8,500 housing units with long-term affordability restrictions have been created through the Appeals Procedure since its enactment in 1990, there are many projects that do not move forward. In recent years, developers have prevailed in about 75% of these cases.

²⁵ <https://ctmirror.org/2024/09/27/actions-the-ct-legislature-can-take-to-promote-more-affordable-housing/>

While new housing units are needed throughout CT to alleviate the high cost of housing, most of Connecticut does not allow for two or more housing units on one lot. This results in renters having limited housing options outside of the large urban areas in the state. The strong local control over zoning ordinances allows most towns to limit the types of new housing allowed by right. Much of Connecticut allows only single-family housing as-of-right. Development of new multifamily buildings is severely limited, and developers can face a time-consuming and often costly special permitting process with local land use authorities.

The maps below were created through the National Zoning Atlas, which compiles local zoning regulations into one database.²⁶ The first map shows areas where new single-family housing is permitted, the second map shows where new two-family housing is permitted, and the third map shows where new four-plus unit structures are permitted without requiring a special permit. These maps represent the clearest picture of the limitations related to building multi-family housing throughout Connecticut. Connecticut residents in areas that allow mostly single-family housing were found more likely to be white, to have high household incomes, and to own their homes.

While local zoning regulations and NIMBYism are key barriers to affordable housing development, additional barriers include the availability and acquisition cost of land, the cost of infrastructure needed for new housing development (particularly for suburban and rural development), permitting and fees, building codes, environmental remediation, assembly of financing, labor shortages of construction labor, rising interest rates, and shortages and cost of construction materials.

Actions it planned to remove or ameliorate the negative effects of public policies that serve as barriers to affordable housing such as land use controls, tax policies affecting land, zoning ordinances, building codes, fees and charges, growth limitations, and policies affecting the return on residential investment

The solution for the housing crisis is simple: build more houses, while concurrently repurposing the older housing stock to meet the needs of a population that is aging, and in need of accessible housing decent housing. The challenge comes from having the sufficient resources necessary to produce enough new housing to move the needle on affordability statewide. To address this, the state has been devoting hundreds of millions of dollars from the state budget for housing.

The state will implement a variety of action steps to address a majority of the barriers identified in the Analysis of Impediments to Fair Housing Choice, including the following:

- Creation and rehabilitation of affordable housing in a variety of locations
 - Continue to prioritize developments that achieve fair housing goals in historically under-served communities.
 - Increase funding flexibility to seize immediate development opportunities to increase affordable housing units in high opportunity communities.
 - Evaluate the effectiveness of funding rounds in facilitating the creation of new family affordable housing units to ensure the availability of affordable family housing in broader geographically diverse areas.

²⁶ <https://www.zoningatlas.org/atlas>

- Seek opportunities to align policies and funding with the activities of other state agencies.
- Collaborate with other agencies to affirmatively further fair housing: DOH will participate in new and existing opportunities to align policies and funding with other agencies.
- Convene stakeholders to review potential legislative solutions to existing impediments: DOH will convene partner agencies, organizations and stakeholders in the redrafting of the Connecticut Fair Housing Regulations and Waiting List Regulations.
- Maximize the effectiveness of programs to ensure they are promoting fair housing choice to the greatest extent possible.
- Promote fair housing enforcement and education.
- Review affirmative fair housing marketing plans for developers of affordable housing receiving funding from DOH or CHFA to ensure compliance with the law.

Evaluate funding opportunities to balance the needs of the state's rental assistance program with the investments needed for the creation and preservation of more affordable housing.

<i>Discussion:</i>

The following expands upon the above listed strategies for addressing the barriers to affordable housing:

- Create and rehabilitate affordable housing in a variety of locations - DOH will continue to assign a high point value for developments that achieve fair housing goals in historically under-served communities; DOH will increase funding flexibility to seize immediate development opportunities to increase affordable housing units in high opportunity communities; and DOH will evaluate the effectiveness of funding rounds in facilitating the creation of new family affordable housing units to ensure the availability of affordable family housing in diverse areas.
- DOH will seek opportunities to align policies and funding with the activities of other state agencies - DOH will continue to work closely with its sister agencies to promote collaboration to maintain/create/expand housing programs and to promote fair housing choice.
- Maximize the effectiveness of programs to ensure they are promoting fair housing choice to the greatest extent possible - DOH will look to a fair housing study that will soon be released by the state to elevate awareness of fair housing in its housing programs.
- Promote fair housing enforcement and education - DOH will work with mobility counselors under contract to improve processes.
- Review affirmative fair housing marketing plans for developers of affordable housing receiving funding from DOH or CHFA to ensure they comply with the law.

AP-85 Other Actions – 91.220(k)

Introduction:

Housing is a key component of attaining and sustaining local viability and community health and ensuring a thriving community. Ensuring affordable housing options for both owners and renters is an important contributing factor to future community health. Additionally, many of Connecticut's most vulnerable citizens are in need of quality affordable housing with the availability of services. In order to address these needs, it is important to add new housing as well as preserve affordable housing presently serving households in need in a coordinated and efficient manner.

Housing development is linked to Connecticut's other public policy areas which include education, transportation, energy cost and availability, public health and safety, environmental quality, and economic development. These areas are not independent of each other. They are interconnected and interdependent. Just as transportation is not just a network of roads and bridges, housing is not just shelter. It is an integral part of the state's socio-economic fabric. Public policy and investment decisions made in one area directly and indirectly impact the other areas. As such, the state must comprehensively consider these relationships and take a multifaceted and balanced approach to addressing Connecticut's housing and community development needs.

Responsible Development and Sustainable Communities principles consider and connect all of the aforementioned public policy areas. These principles are in conformance with the state's Conservation and Development Policies Plan for Connecticut (C&D Plan), and the current Analysis of Impediments to Fair Housing Choice. Because Responsible Growth and Sustainable Communities principles make the most efficient uses of energy, land, travel time, and other societal resources over the long-term they are incorporated into the state's Consolidated Plan. The state will use its federal formula grant funding and state resources to address Connecticut's housing and community development needs through the application of Responsible Growth and Sustainable Communities principles and by giving funding priority to projects that address multiple needs and leverage existing infrastructure and resources.

Actions planned to address obstacles to meeting underserved needs

Each objective has a proposed funding source (or sources), a targeted population and geographic target, and a priority rating. Each objective is supported by a brief discussion of the need/basis for assigning the priority and identifying obstacles to meeting underserved needs summarized from the Needs Assessment and Housing Market Analysis sections of this plan.

Actions planned to foster and maintain affordable housing

The following strategies and goals will help to preserve an expand the supply of quality affordable rental housing and to expand and maintain homeownership:

- Interdepartmental Cooperation
- Support Other Housing Providers
- Financial Resources - DOH, CHFA, and the Office of Policy and Management (OPM) will

continue to work at the state and federal level to increase the amount of resources available to build or renovate quality affordable housing.

- Low Income Housing Tax Credits - CHFA, through any necessary revision of the Low Income Tax Credit Qualified Allocation Plan, will ensure that the Low Income Housing Tax Credit program addresses the needs and priorities of this Consolidated Plan for Housing and Community Development.
- Rental Housing - DOH and CHFA will individually and jointly finance quality affordable new rental housing and preserve existing state-assisted and/or CHFA finance housing stock by using private, federal, local, and state resources.
- Housing Rehabilitation - DOH will use its Small Cities Community Development Block Grant (SC/CDBG) program, as well as other programs, to rehabilitate eligible owner-occupied and small rental housing.
- Homeownership Counseling - CHFA will continue its counseling process for first time borrowers to reduce default rates and will also work to reduce single family delinquencies and foreclosures through proactive intervention indicators.
- Homeownership for Person with Disabilities - DMHAS, DSS, DOH, and CHFA will promote homeownership opportunities for persons with disabilities who have been unable to access private financing.
- Mortgage Assistance - CHFA will continue to implement the Time to Own Program, Emergency Mortgage Assistance and CT FAMILIES (Connecticut Fair Alternative Mortgage Lending Initiative & Education Services) program as well as counseling initiatives and mediation efforts to assist economically distressed households maintain homeownership.
- Encourage and promote mixed use and transit-oriented development. To these ends the DOH will: Prioritize funding requests for affordable housing projects that include mixed-uses and /or are located close to public transportation facilities and are on established bus routes.
- Encourage and support municipal efforts to create higher density residential zoning districts through the Incentive Housing Zone Program and other programs.
- Green Building - Encourage green building by the use of sustainable construction in new buildings that meet Leadership in Energy and Environmental Design (LEED) standards or similar standards and through the use of tax credits, and in coordination with the Green Bank.
- Healthy Homes - DOH, CHFA, the Department of Energy and Environmental Protection (DEEP), the Department of Public Health (DPH), DSS, local governments and property owners will work to help abate lead paint through the Connecticut Children's Healthy Home Program or other similar programs and work with DPH on the implementation of its 'Healthy Homes Initiative' which has been designed to promote and mainstream healthy housing principles to ensure that Connecticut's housing supply is dry, clean, pest-free, ventilated,

safe, without contaminants, maintained and accessible.

Initiate use and testing of the Connecticut Opportunity Map: DOH has funded the development of this web-based mapping tool to illustrate the location of communities which have some or all of the characteristics that have been linked to education, economic and social success.

<i>Actions planned to reduce lead-based paint hazards</i>

In coordination with the Healthy Homes Initiative, which is spearheaded by the Department of Public Health (DPH), DOH continues to administer the federal Lead Hazard Reduction Demonstration Program, which in Connecticut is referred to as Connecticut Children's Healthy Homes program in conjunction with the Connecticut Lead Action for Medicaid Primary Prevention Project (LAMPP).

The goal is to enhance suitable living environments and create decent, healthy, and safe housing for low-and moderate-income persons through evaluation and reduction of lead-based paint hazards and the implementation of Healthy Homes principles, assessment practices, and evidence-based interventions.

DOH will enhance suitable living environments and ensure the availability of a healthy, safe, and decent housing supply, that is free of lead-based paint, will incorporate the healthy housing principles (dry, clean, pest-free, ventilated, safe, without contaminants, maintained and accessible), and measures radon and reduces elevated levels. To achieve this DOH will do the following:

- Actively participate in the Statewide Healthy Homes Initiative meetings, as scheduled.
- Collaborate with the DPH Healthy Homes Initiative on the development and implementation of a uniform healthy homes assessment and intervention approach.
- Support the abatement or remediation of lead-based paint and lead-based hazards, damaged asbestos containing materials, elevated indoor radon levels, and other identified or known environmental hazards in housing units in collaboration with other state agencies and in accordance with applicable federal and state laws. Lead-based paint testing, and remediation or abatement activities will be conducted in accordance with Regulations of CT State Agencies Section 19a-111 et.al., the final lead safe housing rule - [Title X of the Lead-based Paint Hazard Reduction Act of 1992 (24CFR Pt 35)] the EPA Lead Paint: Renovation, Repair and Painting Program (RRP) effective April 22, 2010, and through healthy homes assessments and intervention strategies established in concert with the Department of Public Health.
- Fund up to three housing rehabilitation projects per year with the goal of making 20 units per year healthy homes (as defined in concert with the statewide Healthy Homes Initiative).
- Build the technical capacity of local housing agencies by sponsoring up to five (5) National Center for Healthy Homes (NCHH) training courses (1 course held annually, or as needed).

Support the training and certification of DOH and/or local housing staff who are interested in seeking national certification as "healthy homes specialists." In particular, support up to two (2) "Essentials for Healthy Homes Practitioners" training courses per year.

Actions planned to reduce the number of poverty-level families

The six programs covered by the state's Consolidated Plan - SC/CDBG, HOME, ESG, HOPWA, NHTF, and RHP - directly support the overall State Anti-Poverty Strategy by addressing the housing and/or non-housing community development needs of persons at or below the poverty level.

In addition to the six programs covered by the Consolidated Plan, the State of Connecticut, through several agencies and organizations employs numerous policies and programs to reduce the number of poverty level families within the state. These programs and the organizations that administer them are described within the Institutional Structure of the ConPlan.

The Department of Housing supports the Two-Generational (2Gen) approach, or whole family approach, which focuses on creating opportunities for addressing the needs of children and adults together by taking a family-centered, results-oriented approach so that children and families get the education, workforce training, and social supports they need to secure economic stability that passes from one generation to the next.

Additionally, the State of Connecticut has several statutory and federally mandated interconnected/interrelated plans that further articulate and constitute the State's Anti-Poverty Strategy. These plans include but are not limited to those enumerated below. The plans that follow are available online via the links provided:

- Connecticut's Economic Action Plan September 30, 2021
- Connecticut Conservation and Development Policies Plan 2025-2030 (State C&D Plan)
- State of Connecticut Temporary Assistance for Needy Families FY 21-23
- State of Connecticut Section 8 Administrative Plan July 2023
- State of Connecticut Administrative Plan for the Rental Assistance Payments Program "RAP" July 1, 2019

Actions planned to develop institutional structure

The Department of Housing (DOH) is identified as the "first point of contact" for the institutional structure presented in this plan. This role is supported at three levels through: (1) designation by the legislature to serve as the State's lead agency; (2) the role as "grantee" of various HUD program funds; and (3) the mission to serve all the citizens of Connecticut. DOH will: (1) conduct and foster open participation, including supportive assistance, with the goal of facilitating meaningful involvement; (2) work to increase participation at all levels, especially among extremely low- and very low-income groups, as well as those traditionally under-represented; and (3) involve organizations that represent need populations across Connecticut.

The state recognizes the importance of partnering with other agencies to help serve its housing and community development needs. Nonprofit agencies play an important role in the provision of affordable housing, supportive housing and social services, and economic development activities. Local organizations with direct public contact have a clear view and understanding of the state's housing and human service needs. Such organizations are an essential part of the state's institutional structure and typically serve in one or more of the following capacities: (1) are eligible to receive public and private funds or resources targeted at serving need populations; (2) are legally

restricted or structured by organizational charter to serve lower income or specific need populations; (3) are identified by regulation, program or otherwise allowed to undertake certain governmental programs serving need populations; or (4) have daily contact with, represent or advocate on behalf of, certain populations in need.

Private sector participants, in the preservation or development of the state's housing and community development delivery system, include financial institutions, builders/developers, foundations and realtors. Local financial institutions provide construction financing, low interest rehabilitation loans, mortgage financing and loan servicing, while builders/developers are active in participating in affordable housing projects. Many private businesses and organizations are involved or support the efforts of public agencies to provide human services and opportunities throughout Connecticut. Based on the needs and objectives developed in the *ConPlan*, the state is prepared to support applications for assistance by other entities that serve to accomplish the goals set forth in the plan.

Connecticut will pursue and support efforts to develop urban/suburban and regional partnerships, in addition to collaboration with private and non-profit development corporations. The collective efforts of all parties will ensure that available resources are allocated to priority activities.

<i>Actions planned to enhance coordination between public and private housing and social service agencies</i>

Connecticut is comprised of many types of communities. The complementary nature between proposed services and programs and other, current government programs are determined, in part, by the mission of each service provider in the system. Factors such as a municipality's current housing infrastructure, the size and expertise of its professional staff, access to transportation, and the relative affordability of its housing stock, all help determine realistic strategies for a town to pursue. The coordination and delivery capabilities described in the *ConPlan* Institutional Structure will complement the State's present efforts to foster coordination of services.

As lead agency designated in the *ConPlan* to coordinate and manage the process, DOH is responsible for providing oversight and coordination to the related service providers and the public on HUD-related matters. Consultation with outside individuals and agencies was programmed as a vital part of the *ConPlan* development. Contribution included both public and private, individual and agency, profit and non-profit, local, regional and state entities.

The State provides direct guidance to its funding recipients on various program requirements. Technical assistance and monitoring are the primary means of fostering the state's awareness of Small Cities/CDBG program participants meeting the requirements of the federal CDBG program. These efforts are designed to: (a) achieve CDBG program objectives; (b) increase its capacity to understand and administer all aspects of the Small Cities program in an efficient and effective manner; (c) meets its statutory requirements and certifications; and (d) resolve any problems or issues identified as a result of a review.

Successful implementation of the state *Fair Housing Plan* will require coordination between several state agencies. Connecticut can begin addressing limitations on fair housing choice by achieving the following six objectives: (1) providing better training of state employees in the area of

fair housing; (2) expanding fair housing outreach and education activities; (3) increasing monitoring and enforcement of fair housing laws and policies; (4) improving the infrastructure necessary for viable diverse communities; (5) increasing the supply of affordable housing; and, (6) increasing the access of racial and ethnic minorities, persons with disabilities and families with children to the existing supply of housing.

The Interagency Council on Supportive Housing was co-chaired by the Secretary of OPM and the Director of the Office of Workforce Competitiveness. Legislative changes and additions to the Council have led to the current Interagency Committee on Supportive Housing and Homelessness. The Committee was established to develop and implement strategies and solutions to address the problems associated with homelessness, including the development of supportive housing options and reducing inappropriate use of emergency health care, shelter, chemical dependency, corrections, foster care, and similar services. It also addresses improving the health, employability, self-sufficiency, and other social outcomes for individuals and families experiencing homelessness. Membership includes the Commissioners (or their designees) of the Departments of Children and Families (DCF), Correction (DOC), DOH, Mental Health and Addictive Services (DMHAS), DPH, Social Services (DSS), and Veterans Affairs, the Secretary of OPM, the Corporation for Supportive Housing and the Executive Director of CHFA. Through various supportive housing, the Committee is responsible for the creation or development of more than 4,000 permanent supportive housing units.

Discussion:

Connecticut has a large network of capable non-profit housing and social service providers, and the state is interested in affecting coordination among these providers and the local government. Toward this end, the state will encourage coordination among these providers. Of particular note is the on-going communication between the state and such organizations in the areas of fair housing, program policy, and funding requests. Through these types of working partnerships, the lead agency can ensure that available resources are used to their fullest potential.

As part of the development process for the *Consolidated Plan*, the lead agency has held public hearing(s) and has invited housing and social service providers to discuss the most pressing needs of the community. These hearings have helped bring groups together in an effort to coordinate their resources and efforts.

The state has strengthened its efforts to produce and preserve affordable housing within the state through the involvement of state departments and agencies, as well as other agencies at the local, regional, state and federal level. The state will continue to foster relationships with other governmental agencies, as well as neighboring jurisdictions in the furtherance of the goals and objectives for preserving the supply of affordable housing and promoting community development activities as set forth in this Consolidated Plan.

Program Specific Requirements

AP-90 Program Specific Requirements – 91.220(l)(1,2,4)

Introduction:

This annual Action Plan is the first action plan under the State of Connecticut's 2025-2029 Consolidated Plan for Housing and Community Development (ConPlan), the five-year strategic plan addressing Connecticut's housing and community development needs. The state submits the ConPlan to the U.S. Department of Housing and Urban Development (HUD) in order to be eligible to receive funding under the Small Cities Community Development Block Grant (SC/CDBG), HOME Investment Partnerships (HOME), Emergency Solutions Grant (ESG), Housing Opportunities for Persons with AIDS (HOPWA), and National Housing Trust Fund (NHTF) Programs.

The 2025-2026 Action Plan is for the state fiscal year July 1, 2025 to June 30, 2026. This Action Plan is the implementation plan for the goals, objectives and strategies outlined in the state's 2025-2029 Consolidated Plan. This Action Plan describes how the state will use allocated funds by the state to address its affordable housing needs and by the federal government in connection with the five federal Community Planning and Development (CPD) formula grant programs. In addition, the ConPlan identifies the state's housing priorities for the five-year time period identified for all of its anticipated state and federal resources.

This Action Plan outlines the state's proposed goals for program year 2025-2026 based on the performance measurement system presented in the 2025-2029 ConPlan, which is consistent with HUD's Notice of Outcome Performance Measurement System for Community Planning and Development Formula Grant Programs published in the Federal Register on March 7, 2006. Please refer to "Section V. Program Activities, Sub-section F. Performance Measurement Section" of this Action Plan for more detail regarding the objectives and outcomes. It is expected that the CAPER containing performance data for the 2025-2026 annual Action Plan program year with regard to the six federal CPD formula grant programs will be submitted to HUD in September 2026.

This Action Plan provides a detailed plan for expending PY 2025-2026 funds for the following federal programs:

- Small Cities Community Development Block Grant (SC/CDBG) **\$13,895,559**
- HOME Investment Partnerships (HOME) **\$10,435,005**
- National Housing Trust Fund (NHTF) **\$3,144,833**
- Emergency Solutions Grant (ESG) **\$2,298,443**
- Housing Opportunities for Persons with AIDS (HOPWA) **\$288,849**

Community Development Block Grant Program (CDBG)

Reference 24 CFR 91.220(l)(1)

Projects planned with all CDBG funds expected to be available during the year are identified in the Projects Table. The following identifies program income that is available for use that is included in projects to be carried out.

1. The total amount of program income that will have been received before the start of the next program year and that has not yet been reprogrammed:	\$1,259,144
2. The amount of proceeds from section 108 loan guarantees that will be used during the year to address the priority needs and specific objectives identified in the grantee's strategic plan	
3. The amount of surplus funds from urban renewal settlements	
4. The amount of any grant funds returned to the line of credit for which the planned use has not been included in a prior statement or plan.	
5. The amount of income from float-funded activities	
Total Program Income	\$1,259,144

Other CDBG Requirements

1. The amount of urgent need activities	0
2. The estimated percentage of CDBG funds that will be used for activities that benefit persons of low and moderate income. Overall Benefit - A consecutive period of one, two or three years may be used to determine that a minimum overall benefit of 70% of CDBG funds is used to benefit persons of low and moderate income. Specify the years covered that include this Annual Action Plan.	100%

HOME Investment Partnership Program (HOME)

Reference 24 CFR 91.320(k)(2)

1. A description of other forms of investment being used beyond those identified in Section 92.205 is as follows:

The State of Connecticut will continue its effort to strengthen the abilities of state and local governments to expand and preserve the supply of decent, safe, sanitary, and affordable housing with the use of FY 2024-25 HOME funds. All HOME Program assisted rental and home ownership units will meet all program guidelines for income eligibility and accessibility.

DOH will invest in the production of affordable housing through new construction or rehabilitation only when it determines that the units produced will remain affordable for the minimum required time period under the HOME Program. DOH, at its discretion, may extend the affordability period

beyond the minimum required by the HOME Program. If HOME funds are used for homebuyers, the state will abide by the guidelines for resale and recapture as required in Section 92.254 of the HOME Investment Partnerships Program Consolidated Final Rule, HUD CPD Notice 12-003 and HUD CPD Notice 12-007.

Pursuant to Sec. 92.218-92.222 of the HOME Final Rule, the Participating Jurisdiction (PJ) incurs a 25% matching obligation for the HOME funds it expends, unless a waiver is provided by HUD due to Fiscal Distress and/or Presidential Disaster Declaration. We anticipate there will be a match requirement for this year's HOME funds.

DOH receives HOME program income from grantees, in the form of loan repayments. The amount of program income listed in the Resources Allocation Plan is an estimate of what would be available during the program year, based on the average received by DOH over the last three program years. Program income funds are made available for HOME program eligible activities as described herein.

The state is also seeking to expand access to affordable housing through the utilization of partnerships with stakeholders and other funding organizations that leverage non-state resources for development or preservation of affordable housing. Geographically, HOME funds will be available to all 169 communities. DOH will accept applications for all HOME Program eligible activities. DOH is open to but not limited to the following sources of investment: equity investments, interest-bearing loans or advances, non-interest-bearing loans or advances, interest subsidies, deferred payment loans, grants and loan guarantees.

2. A description of the guidelines that will be used for resale or recapture of HOME funds when used for homebuyer activities as required in 92.254, is as follows:

DOH normally will not permit resale restrictions unless it is required by 24 CFR Part 92.254 or if the sponsor has a long-standing history in owning and/or managing affordable housing.

Homeowner Rehabilitation: For homeowner rehabilitation projects, DOH will look to recapture the entire subsidy during the period of affordability.

Homebuyer Assistance: For homebuyer projects, DOH may utilize HOME funds to assist homebuyers provided either resale or recapture requirements are met and in compliance with 24 CFR Part 92.254.

The following provisions shall apply to homeownership projects: Affordability period requirements, direct subsidy requirements, development subsidy requirements, and affordability enforcement requirements.

Resale Provisions

- The following provisions shall apply to resale restricted projects as described below: Fair return on investment shall be equal to the average change in the Consumer Price Index over the original homebuyer's period of ownership to the time of resale times the homebuyer's original investment plus the residual value of the documented cost of unsubsidized improvements; Residual value shall be the value of the capital improvement after allowable depreciation in accordance with current Internal Revenue Service standards for depreciation of fixed assets; Capital improvement shall mean any substantial material alteration to the appearance of the unit.

- A resale restriction requires the resale of the unit to HOME Program qualified homebuyers throughout its affordability.
- The family must ensure that the housing is made available for subsequent purchase only to a buyer whose family qualifies as a low-income family.
- Resale price must provide the original HOME-assisted owner a fair return on investment.
- The resale requirement must ensure that the housing under a resale provision will remain affordable.

A **subsidy recapture** requires that any sale after the initial sale of a HOME Program assisted ownership unit or a homeowner rehabilitation unit during the affordability period trigger a repayment of a portion of the HOME Program subsidy that the buyer received when they originally purchased or rehabilitated the unit. Subsidy recapture is limited to direct homebuyer assistance (not developer subsidy) and subsidy recapture shall be structured so that it is reduced using the following formula:

$$\text{Yearly Reduction} = 1/\#$$

(Where "#" equals the number of years of affordability required)

3. A description of the guidelines for resale or recapture that ensures the affordability of units acquired with HOME funds? See 24 CFR 92.254(a)(4) are as follows:

DOH normally will not permit resale restrictions unless it is required by 24 CFR Part 92.254 or if the sponsor has a long-standing history in owning and/or managing affordable housing.

Homeowner Rehabilitation: For homeowner rehabilitation projects, DOH will look to recapture the entire subsidy during the period of affordability.

Homebuyer Assistance: For homebuyer projects, DOH may utilize HOME funds to assist homebuyers provided either resale or recapture requirements are met and in compliance with 24 CFR Part 92.254.

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Resale Provisions

- The following provisions shall apply to resale restricted projects as described below: Fair return on investment shall be equal to the average change in the Consumer Price Index over the original homebuyer's period of ownership to the time of resale times the homebuyer's original investment plus the residual value of the documented cost of unsubsidized improvements; Residual value shall be the value of the capital improvement after allowable depreciation in accordance with current Internal Revenue Service standards for depreciation of fixed assets; Capital improvement shall mean any substantial material alteration to the appearance of the unit.
- A resale restriction requires the resale of the unit to HOME Program qualified homebuyers throughout its affordability.
- The family must ensure that the housing is made available for subsequent purchase only to a buyer whose family qualifies as a low-income family.
- Resale price must provide the original HOME-assisted owner a fair return on investment.

- The resale requirement must ensure that the housing under a resale provision will remain affordable.

A **subsidy recapture** requires that any sale after the initial sale of a HOME Program assisted ownership unit or a homeowner rehabilitation unit during the affordability period trigger a repayment of a portion of the HOME Program subsidy that the buyer received when they originally purchased or rehabilitated the unit. Subsidy recapture is limited to direct homebuyer assistance (not developer subsidy) and subsidy recapture shall be structured so that it is reduced using the following formula:

$$\text{Yearly Reduction} = 1/\#$$

(Where "#" equals the number of years of affordability required)

4. Plans for using HOME funds to refinance existing debt secured by multifamily housing that is rehabilitated with HOME funds along with a description of the refinancing guidelines required that will be used under 24 CFR 92.206(b), are as follows:

Refinancing of Existing Permanent Debt (applies only to nonprofit developers):

DOH may permit the use of HOME funds toward the cost of fully or partially refinancing an existing permanent mortgage loan on rental property provided, in the opinion of the Commissioner, the following conditions are met:

- The rehabilitation of the housing must be the primary eligible activity. Therefore, the cost of the rehabilitation of the housing must equal or exceed \$25,000 per HOME-assisted unit;
- The new investment is being made to create additional affordable units;
- The housing has not been previously financed with HOME funds;
- A review of the management practices of the applicant must demonstrate that the proposed rehabilitation is not the result of dis-investment in the property by any entity involved in the application for HOME funds;
- A review of the proposed operating budget for the project must demonstrate that both the cost of the refinancing and the needed rehabilitation of the project can be met and still result in the affordability of the units to HOME-eligible tenants for a period of 15 years or the term of the refinancing, whichever is longer;
- When compared to the refinancing terms being proposed, the loan being refinanced must have: An interest rate higher than the proposed refinancing; or, a lump-sum repayment requirement (a balloon payment);
- Priority may be given to projects located in a neighborhood identified in a neighborhood revitalization strategy under 24 CFR 91.215(e)(2), a federally-designated Empowerment Zone or Enterprise Community, a state-designated Neighborhood Revitalization Zone, or Neighborhood Stabilization Program; and
- The activity does not involve the refinancing of a multifamily loan made or insured by any state or federal program, including the SC/CDBG Program.

5. If applicable to a planned HOME TBRA activity, a description of the preference for persons with special needs or disabilities. (See 24 CFR 92.209(c)(2)(i) and CFR 91.220(l)(2)(vii)).

Not applicable.

6. If applicable to a planned HOME TBRA activity, a description of how the preference for a specific category of individuals with disabilities (e.g. persons with HIV/AIDS or chronic mental illness) will narrow the gap in benefits and the preference is needed to narrow the gap in benefits and services received by such persons. (See 24 CFR 92.209(c)(2)(ii) and 91.220(l)(2)(vii)).

Not applicable.

7. If applicable, a description of any preference or limitation for rental housing projects. (See 24 CFR 92.253(d)(3) and CFR 91.220(l)(2)(vii)). Note: Preferences cannot be administered in a manner that limits the opportunities of persons on any basis prohibited by the laws listed under 24 CFR 5.105(a).

Not applicable.

Emergency Solutions Grant (ESG) Reference 91.320(k)(3)

1. Include written standards for providing ESG assistance (may include as attachment)

Connecticut anticipates receiving **\$2,386,804** in federal ESG funds for the Action Plan program year beginning July 1, 2024. ESG funds are subject to availability from the federal government. If changes to this distribution become necessary, procedures outlined below will be observed in making those changes. ESG funds will be pooled with approximately **\$100,294,941 in State funding for individual and family services.**

Should the amount of the allocation by the federal government be greater or lesser than the anticipated allocation denoted, these funds will be distributed on a prorated basis as described in this section. During the FY, DOH may recapture funds from previous fiscal years due to any of the following: a) nonperformance; underutilization; or program income.

Funds may be reallocated based on demand and/or emergency situations. In the event that additional funds are allocated that affect DOH's initial allocation and/or are recaptured from other states and reallocated to DOH during the FY, these funds will be distributed in accordance with the Action Plan guidelines in effect as of the date of reallocation.

2. If the Continuum of Care has established centralized or coordinated assessment system that meets HUD requirements, describe that centralized or coordinated assessment system.

DOH has aligned its emergency shelter services with Emergency Solution Grants expectations. ESG funds may be used for the following components: street outreach, emergency shelter, homelessness prevention, rapid re-housing, HMIS and administrative costs. DOH issued a Request for Proposals from shelter providers in order to allocate a majority of the anticipated ESG funding. The remaining balance of the ESG was identified for two purposes: HMIS local system administration for the Balance of State Continuum of Care agencies to assist with AHAR reports and ESG-financial assistance for the literally homeless households located in Balance of State communities. It should be noted that the HMIS allocation and ESG-financial assistance allocation includes allowable administrative costs.

3. Identify the process for making sub-awards and describe how the ESG allocation available to private nonprofit organizations (including community and faith-based organizations).

DOH administers these funds by providing assistance to seven (7) non-profit organizations. In addition, DOH provides state and other funding to these providers who are experienced, well established in their communities and provides quality services. The funding received from ESG enables the organizations to provide shelter beds, case management services and rapid re-housing services to homeless persons. DOH is currently developing a more formal process for the future allocation of all sources of funds to homeless shelters.

The pool of federal and state dollars, allocated to local community faith-based organizations and municipalities, is for the provision of temporary shelter for homeless individuals and families. The funds provide operational costs, essential services such as counseling, case management, health education, employment and training as well as HMIS costs and rapid re-housing. It is projected that under the Emergency Solutions Grants Program (ESG), federal ESG funds will be targeted as follows: Operations (Emergency Shelter) 50%; HMIS 4%; Rapid Re-housing 42% and Administration 5%.

Through competitive procurement, DOH has awarded five (5) ESG funded shelters: three (3) shelters that support families and two (2) shelters for both families and individuals. These shelters were previously established due to the documented need to support homeless individuals and families. As needs are identified in local communities, DOH examines its current financial capability to determine if there is financial and program support for new shelters. In addition to ESG funded shelters, DOH also funds an additional 32 shelters utilizing state and federal funds, which bring the total funded shelters to 37. DOH intends to utilize ESG monies for Rapid Re-housing for this fiscal year. DOH has awarded a non-profit the right to act as the ESG financial assistance fiduciary agency. At a minimum 40% of the annual ESG allocation will go to this fiduciary to administer financial assistance requested by housing relocation and stabilization agencies. DOH has leveraged existing resources to provide Housing Relocation and Stabilization Services to support the Rapid Re-housing program to ensure that homeless households will have a better chance of remaining stably housed. Through competitive procurement, seven (7) agencies have been awarded assistance to aid our homeless population with housing relocation and up to 12 months of stabilization services and in-home case management. These seven agencies receive referrals for services and financial assistance through their local Coordinated Access Network (CAN).

4. If the jurisdiction is unable to meet the homeless participation requirement in 24 CFR 576.405(a), the jurisdiction must specify its plan for reaching out to and consulting with homeless or formerly homeless individuals in considering policies and funding decisions regarding facilities and services funded under ESG.

Consultation was sought throughout the year with the CT Balance of State (BOS) Continuum of Care (CoC) Steering Committee to garner feedback on the proposal for the Emergency Solutions Grant's Program. This process was conducted to seek input and address any concerns that might identify gaps or deficiencies in the proposed service(s). Members were notified of the public hearing(s) to be held for the development of the Action Plan, and encouraged to provide written comment.

5. Describe performance standards for evaluating ESG.

DOH has negotiated the client-based outcomes and measures with directors of emergency shelters listed below. Each shelter will select and negotiate individual numerical outcomes and measures with DOH staff and will submit monthly statistical demographics reports, as well as ESG annual performance reports. DOH has also added contractual language as it relates to Homeless Management Information System (HMIS) requirements and utilization. The projected numerical goals represent statewide outcomes that will be evaluated every six months.

Clients will attain alternative housing and/or access to social and/or access to treatment services. Alternative housing includes, but is not limited to, transitional housing, residential treatment programs, supportive and permanent housing. Social services include but are not limited to domestic violence abuse counseling, family counseling, educational and employment and financial counseling, childcare, security deposit and rental assistance programs. Treatment services include, but are not limited to, residential and outpatient mental health and substance abuse treatment and medical treatment.

Measure 1: At least 40% of clients access permanent housing.

Measure 2: No more than 15% of clients are discharged to homelessness.

Measure 3: At least 100% of clients access additional social and/or outpatient treatment services as needed in the housing plan.

Measure 4: For clients whose housing plans include agreed upon goals of accessing information on health, education, housing, budgeting, and/or other services as defined in the program component selected above, in order to make informed decisions about their health, education, finances, housing and other identified needs, 100% were provided with such information, as individually appropriate, in order to enable them to make informed decisions on meeting those needs. 100% of clients have come into the program through local coordinated access.

Measure 5: The monthly shelter utilization rate, as reported in the Monthly Shelter Utilization Report, shall be at or above 80%.

Measure 6: If the monthly shelter utilization rate falls under 80% for more than 3 months consistently during this contract period, the contractor will communicate with DOH to explain the reasons for the low utilization rate.

In a broader perspective, the state will use its federal formula grant funding and state resources to address Connecticut's housing and community development needs through the application of Responsible Growth and Sustainable Communities principles and by giving funding priority to projects that address multiple needs and leverage existing infrastructure and resources.

At the end of each program year, the state must also prepare a CAPER to provide information to HUD and citizens about that year's accomplishments. The CAPER is the annual report that summarizes activities undertaken and details the progress the state has made in carrying out the Consolidate Plan and the annual Action Plan. Performance Measures are also reported based on actual outcomes for proposed accomplishments that appeared in the corresponding program year Action Plan. This information allows for evaluation of the state's performance to determine whether the activities undertaken during the program year addressed the needs identified in the Consolidated Plan. The CAPER is due to HUD within 90 days after the end of the state's program year.

Housing Trust Fund (HTF)
Reference 24 CFR 91.320(k)(5)

1. How will the grantee distribute its HTF funds? Select all that apply:

☒ Applications submitted by eligible recipients

2. If distributing HTF funds through grants to subgrantees, describe the method for distributing HTF funds through grants to subgrantees and how those funds will be made available to state agencies and/or units of general local government. If not distributing funds through grants to subgrantees, enter "N/A".

Not Applicable.

3. If distributing HTF funds by selecting applications submitted by eligible recipients,
a. Describe the eligibility requirements for recipients of HTF funds (as defined in 24 CFR § 93.2). If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Applications will only be accepted from eligible recipients which include: units of general local government (including other PJ's: Participating Jurisdictions), for-profit and not-for-profit entities (including CHDO's and local housing authorities), and joint ventures among various types of entities.

Every contract for construction or substantial rehabilitation shall comply with state and federal labor standards. Furthermore, every contract for the construction or rehabilitation of housing that includes 12 or more NHTF-assisted units must comply with the Davis Bacon Act, 40 USC 276a-5.

Eligible recipients must meet the following thresholds:

- Must have completed at least one affordable housing project using state (Flex, State Housing Trust Fund) or Federal (HOME, LIHTC) funds on time and within budget.

- Must have completed at least one affordability project of a similar size and scope to the proposed NHTF activity.
- Must have sufficient financial capacity or access to appropriate capital to obligate NHTF funds.
- Must operate at least one affordable housing project in accordance with state or federal obligations, or have contracted for management services with such experience.
- Must provide a certification that any housing units assisted will comply with NHTF requirements.
- Must provide a certification of compliance with all existing DOH assistance agreements and cannot be in default under any CHFA or HUD-administered program at the time of application; and
- Must provide a certification/demonstration of compliance with all fair housing and equal employment opportunities obligations/guidelines.

b. Describe the grantee’s application requirements for eligible recipients to apply for HTF funds. If not distributing funds by selecting applications submitted by eligible recipients, enter “N/A”.

The Department of Housing in collaboration with the Connecticut Housing Finance Authority is inviting any Developer/Owner that is looking to apply for funding and/or other resources from DOH and/or CHFA for the new construction, substantial rehabilitation, and/or preservation of affordable housing in the next calendar year to participate in a new *Developer Engagement Process*.

This process is intended to identify and to create a pipeline of potential activity for future funding opportunities including but not limited to new construction, substantial rehabilitation and/or preservation of affordable and supportive housing.

Developers/applicants should complete the *DOH/CHFA Development Engagement Profile* that describes the project, development or concept as it currently stands. There is no requirement to engage a consultant, prepare any formal documentation, obtain any approvals or expend any funds in order to complete and submit the *DOH/CHFA Development Engagement Profile*.

Upon receipt of a *DOH/CHFA Development Engagement Profile*, developers/applicants will be contacted by DOH to schedule a virtual meeting with DOH and CHFA staff to discuss the proposed activity outlined. When funding is available, including HOME, NHTF, and state bond funds, projects in the pipeline will be invited to make an application.

- Applicants for NHTF must meet the minimum program eligibility and threshold requirements;
- Depending on the nature of the proposed activity, site inspections may be conducted by DOH staff. An evaluation of the site’s feasibility will be completed and considered as part of the review process.

- Applications will be considered against financial and qualitative issues, including but not limited to: affordability, marketability and fair housing; applicant capacity; project feasibility and readiness to proceed; and responsible growth and livability initiatives.

c. Describe the selection criteria that the grantee will use to select applications submitted by eligible recipients. If not distributing funds by selecting applications submitted by eligible recipients, enter “N/A”.

Applications will be considered against financial and qualitative issues, including but not limited to: affordability, marketability and fair housing; applicant capacity; project feasibility and readiness to proceed; and responsible growth and livability initiatives.

d. Describe the grantee’s required priority for funding based on geographic diversity (as defined by the grantee in the consolidated plan). If not distributing funds by selecting applications submitted by eligible recipients, enter “N/A”.

Funding under the HOME and NHTF programs will be available in all 169 communities. However, preference will be given to activities in higher opportunity areas as demonstrated through Opportunity Mapping at the DOH website in accordance with the most recent Analysis of Impediments to Fair Housing Choice. Priority will be given to applications for projects in the higher "opportunity areas."

e. Describe the grantee’s required priority for funding based on the applicant's ability to obligate HTF funds and undertake eligible activities in a timely manner. If not distributing funds by selecting applications submitted by eligible recipients, enter “N/A”.

Capacity of eligible applicants will be evaluated in accordance with the applicant's ability to obligate NHTF funds and undertake eligible activities in a timely manner.

Eligible applicants will be evaluated under the following categories:

- Experience with affordable residential projects and substantially all closed/completed on time;
- Experience with market rate residential projects and substantially all completed on time;
- Residential development experience but with some closing/completion problems;
- Development experience but either (a) lacking residential development experience (affordable or otherwise); or (b) one or more team members is involved in at least 8 DOH projects that have not closed on construction financing (as of the application deadline); and
- Record indicates development team member(s) have had numerous closing or completion problems in the past.

f. Describe the grantee's required priority for funding based on the extent to which the rental project has Federal, State, or local project-based rental assistance so that rents are affordable to extremely low-income families. If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Eligible housing shall consist of affordable housing that has maximum rent (including utilities) that is established at 30 percent of the annual income of a family whose income equals 30 percent of AMI or 30% of the poverty line, whichever is greater. HUD will publish the NHTF rent limits on an annual basis. NHTF maximum rents will not exceed the HUD published NHTF rents, on an annual basis.

- Income from all family members must be included when determining income eligibility. DOH will utilize the definition of annual income in 24 CFR 5.609 (Section 8 definitions).
- If the NHTF-assisted unit receives Federal or State project-based rental subsidy, the maximum rent is the rent allowable under the Federal or State project-based rental subsidy program.
- Utility Allowances - DOH will allow the use of any of the following relative to utility allowance schedules: Published utility allowance schedules for the Section 8 Housing Choice Voucher Program, as calculated and published by administering entity; Published utility allowance schedules for the state Rental Assistance Payments Program, as calculated and published by DOH; or Results of a documented utility study consistent with industry standards on the same or similar units.
- DOH shall annually review and approve rents for NHTF units.
- In a project containing NHTF-assisted and other units, the grantee may designate fixed or floating NHTF units. This designation must be made at the time of project commitment in the written agreement between the DOH and the recipient, and the NHTF units must be identified not later than the time of project completion. Fixed units must remain the same throughout the affordability period. Floating units must be changed to maintain conformity with NHTF requirements during the affordability period so that the total number of housing units meeting the requirements remains the same.

An NHTF-assisted unit that has either project-based State or project-based Federal rental assistance attached to it may not also receive NHTF operating cost assistance.

If project-based State or project-based Federal rental assistance is included as noted below, the applicable program requirements related to site and neighborhood standards will apply to NHTF-assisted units.

g. Describe the grantee's required priority for funding based on the financial feasibility of the project beyond the required 30-year period. If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Units that have an affordability period of less than thirty years will be deemed ineligible to receive NHTF funds.

h. Describe the grantee's required priority for funding based on the merits of the application in meeting the priority housing needs of the grantee (such as housing that is accessible to transit or employment centers, housing that includes green building and sustainable development features, or housing that serves special needs populations). If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Priority consideration will be given to projects or activities that are consistent with priorities detailed in the most recent ConPlan. These priorities are:

Projects that include the incorporation of sustainable development standards into all project designs, including green building standards, alternate energy sources, water conservation, land design conservation, and energy conservation.

Projects that are a mixed-income development, where a portion of the units are not income restricted and the projected rents of the non-restricted units are targeted to income levels substantially higher than the restricted units.

Projects that preserve or increase affordable housing for ELI.

i. Describe the grantee's required priority for funding based on the extent to which the application makes use of non-federal funding sources. If not distributing funds by selecting applications submitted by eligible recipients, enter "N/A".

Priority consideration will be given to those projects/activities that leverage non-federal funding sources. DOH will look at the percentage of DOH's investment versus the total development cost. Other state funds, including but not limited to Urban Act, Brownfield, HTCC, State Historic Tax Credits, and CRDA, are not considered leverage for the purposes of this scoring category.

In addition, DOH will look at whether the project is located in a census tract where other state or municipal housing, economic, community development, or other funding is planned or underway.

NHTF funds will be provided as non-interest bearing loans or advances, deferred payment loans, or grants. Program income is not anticipated as a result of these subsidy types.

4. Does the grantee's application require the applicant to include a description of the eligible activities to be conducted with HTF funds? If not distributing funds by selecting applications submitted by eligible recipients, select "N/A".

Yes

5. Does the grantee's application require that each eligible recipient certify that housing units assisted with HTF funds will comply with HTF requirements? If not distributing funds by selecting applications submitted by eligible recipients, select "N/A".

Yes

6. Performance Goals and Benchmarks. The grantee has met the requirement to provide for performance goals and benchmarks against which the grantee will measure its

progress, consistent with the grantee's goals established under 24 CFR 91.315(b)(2), by including HTF in its housing goals in the housing table on the SP-45 Goals and AP-20 Annual Goals and Objectives screens.

Yes

7. Maximum Per-unit Development Subsidy Amount for Housing Assisted with HTF Funds. Enter or attach the grantee's maximum per-unit development subsidy limits for housing assisted with HTF funds.

The limits must be adjusted for the number of bedrooms and the geographic location of the project. The limits must also be reasonable and based on actual costs of developing non-luxury housing in the area.

If the grantee will use existing limits developed for other federal programs such as the Low Income Housing Tax Credit (LIHTC) per unit cost limits, HOME's maximum per-unit subsidy amounts, and/or Public Housing Development Cost Limits (TDCs), it must include a description of how the HTF maximum per-unit development subsidy limits were established or a description of how existing limits developed for another program and being adopted for HTF meet the HTF requirements specified above.

The Department has adopted the HOME Maximum Subsidy Limits for the NHTF. This is being done in order to ensure consistency across programs, prevent skewing of subsidy allocations to higher cost areas of the state, and to promote the creation of deep income targeted units across all geographic areas, without prejudice or undo influence. Typically, these federal funds are used in conjunction with state resources, in order to best leverage all available funding streams.

National Housing Trust Fund (NHTF)

2023 STATEWIDE MAXIMUM PER-UNIT SUBSIDY AMOUNT

Bedrooms	0 Bedroom	1 Bedroom	2 Bedroom	3 Bedroom	4 Bedroom
Elevator-Type Projects	\$63,881	\$72,230	\$89,049	\$115,201	\$126,454
HOME Maximum Per Unit Subsidy for Elevator Type Projects	\$153,314	\$173,352	\$213,717	\$276,482	\$303,489

8. Rehabilitation Standards. The grantee must establish rehabilitation standards for all HTF-assisted housing rehabilitation activities that set forth the requirements that the housing must meet upon project completion. The grantee's description of its standards must be in sufficient detail to determine the required rehabilitation work including methods and materials. The standards may refer to applicable codes or they may establish requirements that exceed the minimum requirements of the codes. The grantee must attach its rehabilitation standards below.

In addition, the rehabilitation standards must address each of the following: health and safety; major systems; lead-based paint; accessibility; disaster mitigation (where relevant); state and local codes, ordinances, and zoning requirements; Uniform Physical

Condition Standards; Capital Needs Assessments (if applicable); and broadband infrastructure (if applicable).

Prior to occupancy, all newly constructed or substantially rehabilitated units must be in full compliance with all of the following policies, regulations, statutes and requirements:

- 2025 CHFA Multifamily Design, Construction and Sustainability Standards - The standards are not intended to reduce or circumvent the requirements of law and current applicable codes. Although they apply primarily to new construction, they also apply to rehabilitation of existing structures as applicable to the proposed scope of work. These standards may be modified on where the particular characteristics of the site or other local conditions make compliance impractical or undesirable. If an applicant is unable to comply with any of the items listed, the applicant must contact DOH to discuss; at such time, additional requirements may be necessary.
- 2025 CHFA Construction Guidelines: Technical Services/Asset Management (TSAM) and Capital Improvement Guide (CIG). Individual building materials, components, fabrications, and equipment for all proposed repair, replacement and capital improvement projects shall comply with all Building Codes, State and Federal regulations and the applicable sections(s) of the current "Multifamily Design, Construction and Sustainability Standards." To determine the Technical Services process for reviewing specific Asset Management capital improvement, repair and replacement projects, consult the "Construction Guidelines: Technical Services/Asset Management (TSAM) Capital Improvement Project Review."
- 2025 CHFA Construction Guidelines: Project Planning & Technical Services Review DOH requires that all building materials, components, fabrications, and equipment for all proposed repair, replacement and capital improvement work be completed in accordance with all applicable Building Codes, State and Federal regulations and current "Multifamily Design, Construction and Sustainability Standards - CHFA" (the Standards). The "Construction Guidelines: Technical Services/Asset Management (TSAM) Capital Improvement Project Review" outline the Technical Services process for reviewing specific Asset Management capital improvement, as well as repair and replacement projects associated with the useful life of major systems.
- 2025 CHFA Construction Guidelines: Environmental & Hazardous Materials: These environmental/hazardous material guidelines shall be followed for providing construction financing of multifamily developments pertaining to both new construction and the rehabilitation of existing buildings & properties. These guidelines provide specific guidance relevant to, but are not limited to the following: lead-based paint, asbestos, radon, mold, flood classification and/or flood zone.
- 2022 Connecticut State Building Code: At a minimum, all activities using NHTF are required to comply with the above or most current code.
- 2025 CHFA Construction Guidelines: Energy Conservation & Sustainability

These standards are typically updated annually and can be found on the CHFA Housing Design and Construction Criteria website.²⁷

²⁷ <https://www.chfa.org/developers/design-and-construction-criteria/>

9. Resale or Recapture Guidelines. Below, the grantee must enter (or attach) a description of the guidelines that will be used for resale or recapture of HTF funds when used to assist first-time homebuyers. If the grantee will not use HTF funds to assist first-time homebuyers, enter “N/A”.

Not Applicable

10. HTF Affordable Homeownership Limits. If the grantee intends to use HTF funds for homebuyer assistance and does not use the HTF affordable homeownership limits for the area provided by HUD, it must determine 95 percent of the median area purchase price and set forth the information in accordance with §93.305. If the grantee will not use HTF funds to assist first-time homebuyers, enter “N/A”.

Any limitation or preference must not violate nondiscrimination requirements in § 93.350, and the grantee must not limit or give preferences to students. The grantee may permit rental housing owners to limit tenants or give a preference in accordance with § 93.303(d)(3) only if such limitation or preference is described in the action plan.

NHTF provides formula grants to states to increase and preserve the supply of decent, safe, and sanitary affordable housing for extremely low-income and very low-income households, including homeless families. DOH currently intends to coordinate the use of NHTF with the application process for both HOME and state bond funding, as well as federal Section 811 PRA and other funds to develop/rehabilitate ELI housing. It will be used to leverage the development of units targeted for extremely low income families with a priority for the development of permanent supportive housing units.

11. Refinancing of Existing Debt. Enter or attach the grantee’s refinancing guidelines below. The guidelines describe the conditions under which the grantee will refinance existing debt. The grantee’s refinancing guidelines must, at minimum, demonstrate that rehabilitation is the primary eligible activity and ensure that this requirement is met by establishing a minimum level of rehabilitation per unit or a required ratio between rehabilitation and refinancing. If the grantee will not refinance existing debt, enter “N/A.”

Not Applicable.

Recovery Housing Program (RHP)

The Recovery Housing Program (RHP) is authorized by the SUPPORT for Patients and Communities Act (SUPPORT Act), which was passed in 2018. RHP rules fall under the umbrella of the Community Development Block Grant (CDBG) Program, as modified for RHP by Federal Register Notice (FR-6225-N-01) (the Notice).

The intent of the pilot Recovery Housing Program (RHP) is to support individuals in recovery from substance use disorders (SUD) on a path to self-sufficiency by providing stable, temporary housing. RHP funds may be used to develop or maintain housing for individuals in recovery from SUD.

The RHP is administered by the United States Department of Housing and Urban Development (HUD). Within the State of Connecticut, the Department of Housing (DOH) is designated as the principal state agency for the allocation and administration of RHP funding.

As mandated by the SUPPORT Act, The State of Connecticut will distribute funds giving priority to entities with the greatest need and ability to deliver effective assistance in a timely manner. RHP dollars will be utilized in the following two ways: 1) in conjunction with the state's two Continuum of Cares, the Connecticut Balance of State Continuum of Care (CT BOS CoC) and Opening Doors Fairfield County (ODFC) in support of creating sober housing; and 2) in conjunction with the Court Support Services Division of the State of Connecticut Judicial Branch in the creation of transitional housing.

The RHP is incorporated into this FY 2025-2026 Action Plan and includes the following sections in accordance with federal regulations:

- Resources: Funding sources available;
- State Direct Activity;
- Method for distributing funds for activities;
- Geographic Distribution: Geographic areas to which the state will direct assistance;
- Administration Costs;
- Program Income;
- Monitoring;
- Procurement Process;
- Priority Needs;
- National Objectives;
- Eligible Activities;
- Overall Benefit;
- Waivers and Alternative Requirements
- Summary of Public Comments: Comments made on the Action Plan and DOH responses;
- Applications for Assistance: HUD Form SF-424;

1. FY 2024-2025 Federal Resource Allocation Plan for the RHP

The following table details the funding allocated to the State of Connecticut under Section 8071 of the pilot Recovery Housing Program (RHP) authorized by the SUPPORT for Patients and Communities Act (SUPPORT Act).

Recovery Housing Program funds for the State of Connecticut	
Allocation Year	Recovery Housing Program Funds
Federal Fiscal Year 2024	\$1,205,697

The State of Connecticut will comply with RHP expenditure requirements and deadlines, including to expend at least 30% of its RHP funds within one year from the date HUD signs the RHP grant agreement, to expend 100% of the RHP funds before the end of the period of performance on September 1, 2027, and to limit administrative costs to 5% of the RHP grant. All program activities will be carried out directly through employees, procured contracts, or under agreements with subrecipients. RHP funds will be used in accordance with all program requirements including 2 CFR Part 200. All costs charged to the RHP grant must be reasonable and necessary.

The Federal Fiscal Year 2025 allocation to DOH for the RHP Program is anticipated to be \$1,205,697. RHP funds are subject to availability from the federal government. If changes to this distribution become necessary, procedures outlined below will be observed in making those changes. Grant

administration for FFY 25 will be capped at 5% of the allocation, which is \$60,284. Administration matching funds are not required. The state does not intend to utilize RHP funds to generate program income or to allocate RHP funding for technical assistance.

The total funds available to fund projects out of FFY 25, is anticipated to be \$1,145,413 which is FFY 25 allocation of \$1,205,697 minus administrative costs of \$60,284.

As mandated by the SUPPORT Act, the State of Connecticut will distribute funds giving priority to entities with the greatest need and ability to deliver effective assistance in a timely manner. RHP dollars will be utilized in the following two ways: 1) in conjunction with the state's two Continuum of Care, the Connecticut Balance of State Continuum of Care (CT BOS CoC) and Opening Doors Fairfield County (ODFC) in support of creating sober housing; and 2) in conjunction with the Court Support Services Division of the State of Connecticut Judicial Branch in the creation of transitional housing.

Should the amount of the allocation by the federal government be greater or lesser than the anticipated allocation denoted, these funds will be distributed on a prorated basis as defined above.

Recovery Housing Program	
RHP Award FFY 25	FFY 25 Funding
RHP Award	\$1,205,697
Minus	
Administrative Authorization (5% of Award)	\$60,284
Equals	
Total RHP Funding for Projects FFY 24	\$1,145,413

While the state cannot anticipate what other public or private funds may become available to support the programs, activities and strategies discussed here, the state will endeavor to maximize the use of any such resources as they become available.

2. Reprogramming of Funds

During any fiscal year, DOH may recapture funds. Recaptured funds may come from:

- Non-performing grantees; and
- Grantee's underutilized funds.

Any reprogrammed funds obtained during the FY will be reallocated based on demand and/or emergency situations. In the event that additional funds are allocated that affect Connecticut's initial allocation and/or are recaptured from other states and reallocated to Connecticut during the FY, these funds will be distributed in accordance with the Action Plan guidelines in effect as of the date of reallocation.

3. State Direct Administration

The State of Connecticut will use its RHP funds to act directly, subject to state law and RHP requirements, to carry out activities through employees, contractors, and subrecipients in all geographic areas within its jurisdiction, including entitlement areas and tribal areas. The state will

focus RHP funds towards projects that complement federal substance abuse-related assistance, and will be responsible for submitting the Request for Release of funds to HUD for approval.

The State of Connecticut will carry out activities through subrecipients and will comply with 24 CFR 570.489(m) relating to monitoring and management of subrecipients. The definition of subrecipient at 24 CFR 570.500(c) applies when utilizing subrecipients, and the requirements of 24 CFR 570.489(g) (as modified by section II.D.vii) shall apply. For purposes of this alternative requirement, the definition of subrecipients at CFR 570.500(c) is modified to expressly include Indian tribes. Indian tribes that receive RHP funding from the State of Connecticut must comply with the Indian Civil Rights Act (Title II of the Civil Rights Act of 1968, 25 U.S.C. 1301 et seq).

For activities carried out by the State of Connecticut in entitlement areas, the provisions of 24 CFR 570.486(c) are waived to the extent necessary to allow the state, either directly or through units of general local government, to use RHP funds for activities located in entitlement areas without contribution from the entitlement jurisdiction.

At its discretion, the State of Connecticut may carry out activities utilizing the state CDBG program regulations to distribute RHP funds to units of general local government, Indian tribes, tribally-designated housing entities, and entitlement areas.

4. National Objectives and Eligible Activities

The State of Connecticut will utilize RHP funding on RHP-eligible activities (42 U.S.C. 5305(a)). The state will utilize RHP funding for the purpose of providing stable, temporary housing for individuals in recovery from a substance use disorder.

CDBG-eligible activities that meet the RHP intent of providing stable, temporary housing for individuals in recovery from a substance use disorder are limited to:

- Public facilities and improvements;
- Acquisition of real property;
- Lease, rent, and utilities;
- Rehabilitation and reconstruction of single-unit residential buildings;
- Rehabilitation and reconstruction of multi-unit residential buildings;
- Rehabilitation and reconstruction of public housing;
- Disposition of real property;
- Clearance and demolition;
- Relocation; and
- Expansion of existing eligible activities to include new construction of housing.

Any activity not specifically authorized by HUD program regulations will be considered to be ineligible for assistance under the Recovery Housing program.

RHP funds may not be used for activities to aid in the prevention or elimination of slums or blight, or activities addressing urgent needs. All RHP funds must be used for activities that benefit LMI persons. 24CFR 570.208(a)(2) and 570.483(b)(2)(i)(B) expand Limited Clientele criteria to enable assistance for acquisition, rehabilitation, reconstruction, or new construction activities, when at least 51% of beneficiaries are LMI. Any cost or other limitations on beneficiary participation may not be prohibitive for low-income persons. In addition, 24CFR 570.208(a)(2)(i)(A) or 570.483(b)(2)(ii)(A)

expands eligible categories of Limited Clientele to include persons who meet the federal poverty limits or persons who are insured by Medicaid.

Lease, rent, and utilities costs may be paid for an eligible individual for up to 2 years. There is no limit on the portion of the grant that may be used for such costs. Payments must result in a new service or quantifiable increase in an existing service.

Grant administration will be capped at 5% of the allocation. The state does not intend to utilize RHP funds to generate program income or to allocate RHP funding for technical assistance. Administration matching funds are not required.

5. Waivers and Alternative Requirements

Section 8071 of the SUPPORT Act (Section 8071) requires funds appropriated or made available for the Recovery Housing Program be treated as community development block grant (CDBG) funds under Title I of the Housing and Community Development Act of 1974, unless otherwise provided in Section 8071 or modified by waivers and alternative requirements. The SUPPORT Act authorizes the Secretary to waive or specify alternative requirements to any provision of Title I of the HCD Act, except for requirements related to fair housing, nondiscrimination, labor standards, the environment, and requirements that activities benefit persons of low-and moderate-income. These waivers and alternative requirements are only applicable to the use of RHP funds and do not apply to CDBG funds used in conjunction with RHP funds or other sources of CDBG funds that are used for similar activities.

The State of Connecticut will follow all applicable waivers and alternative requirements to the CDBG program requirements at Title I of the Housing and Community Development Act (HCDA) and 24 CFR Part 570 that HUD has found are necessary to expedite or facilitate the use of RHP funds. Except as specified in the Notice, the statutory and regulatory provisions of the annual CDBG program apply.

6. Geographic Distribution

The State of Connecticut will use its RHP funds to act directly, subject to state law and RHP requirements, to carry out activities through employees, contractors, and subrecipients in all geographic areas within its jurisdiction, including entitlement areas and tribal areas. Whenever possible, the State of Connecticut will prioritize the distribution of funds in the service area of the Opening Doors Fairfield County (ODFC) Continuum of Care, service availability through Court Support Services Division of the State of Connecticut Judicial Branch in the creation of transitional housing.

7. Method of Distribution

The state's methods of distributing funds and carrying out activities funded by HUD will be through a Notice of Funding Availability (NOFA) and a competitive application process. The state will distribute RHP funds with priority given to entities serving populations with the greatest need and the ability to complete the eligible activity in a timely manner. Should insufficient applications be received to fully utilize available funding, the Department will consult with the state's two Continuum of Care, the Connecticut Balance of State Continuum of Care (CT BOS CoC) and Opening Doors Fairfield County (ODFC) to identify other potential opportunities. To maximize and leverage these resources, the state will coordinate RHP-funded projects with other Federal and non-federal assistance related to substance abuse, homelessness and at-risk of homelessness, employment, and other wrap-around services.

8. Program Eligibility and Threshold Requirements

DOH has established the following threshold requirements in order for applicants to be eligible to apply for funds:

- Eligible applicants: nonprofit corporations, municipal and tribal governments;
- Eligible activities: must benefit individuals in recovery from a substance use disorder and are limited to:
 - Acquisition of real property;
 - Lease, rent, and utilities;
 - Rehabilitation and reconstruction of multi-unit residential buildings;
 - Disposition of real property;
 - Clearance and demolition;
 - Relocation; and
 - New construction of housing.
- National Objective: Each proposed activity must meet at least one national objective and must be fully supported within the application;
- Statement of Compliance: Applicants must be in compliance with all existing department assistance agreements and cannot be in default under any CHFA or HUD administered program.

9. Application Evaluation Process

Proposals will be evaluated by a review team on applicant qualifications including but not limited to:

- financial capacity of the applicant to provide and/or coordinate the provision of necessary services;
- organizational capacity of the applicant to provide and/or coordinate the provision of necessary services;
- past positive history of the applicant with DOH.

DOH will conduct due diligence and evaluate all eligible applications using the evaluation criteria described herein. Depending on the nature of the proposed activity, site inspections may be conducted by DOH staff or its agent. An evaluation of the site's feasibility will be completed and considered as part of the final review. Staff/agent review will include but not be limited to the following:

- detailed project description including map showing project location;
- Project participants and partners including names of lead applicant(s), leasing agencies, equity provider, source of permanent financing and owner of assets after project completion, as applicable;
- project budget and requested grant amount;
- consistency with the RHP program national objectives.

All final decisions are left to the discretion of the DOH Commissioner.

As previously noted, should insufficient applications be received to fully utilize available funding, the Department will consult with the state's two Continuum of Care, the Connecticut Balance of State Continuum of Care (CT BOS CoC) and Opening Doors Fairfield County (ODFC) to identify other potential opportunities.

10. Funding Priorities

As mandated by the SUPPORT Act, The State of Connecticut will distribute funds giving priority to entities with the greatest need and ability to deliver effective assistance in a timely manner. RHP dollars will be utilized in the following two ways: 1) in conjunction with the state's two Continuum of Care, the Connecticut Balance of State Continuum of Care (CT BOS CoC) and Opening Doors Fairfield County (ODFC); and 2) in conjunction with the Court Support Services Division of the State of Connecticut Judicial Branch in the creation of transitional housing.

11. Program Income /Technical Assistance/Matching Requirements

Grant administration will be capped at 5% of the allocation. The state does not intend to utilize RHP funds to generate program income or to allocate RHP funding for technical assistance. Administration matching funds are not required.

12. Monitoring for Recovery Housing Program Funds

The Department of Housing shall make reviews and audits of any designated public agencies, units of general local government, and subrecipients. In the case of noncompliance, the state shall take action to prevent further efficiencies and mitigate consequences (24 CFR 570.492).

Additionally, under 24 CFR 58.49 (b) – responsible entity for environmental review, the Department of Housing shall be the responsible agency for submitting the Request for Release of funds to HUD for approval.

13. Reporting on Recovery Housing Program Funds

The accomplishments for the State of Connecticut Recovery Housing Program for Federal Fiscal Year 2024 will be provided upon guidance from HUD with 100% expenditure of funds by September 1, 2027.

14. Cross-Sector Partnerships

The intent of RHP is to support individuals in recovery from substance use disorders (SUD) on a path to self-sufficiency by providing stable, temporary housing. Cross-sector partnerships help serve the diverse needs that those entering recovery housing are likely to have and enhance the impact of recovery housing.

Recovery housing is one component of the care continuum that promotes long-term recovery and addresses the needs of the whole person with a SUD. Housing First/Whole Person Care addresses various dimensions of an individual's life that require different treatment that may affect long-term recovery. Partnerships that bring additional resources to collectively address all dimensions are essential. The State of Connecticut intends to coordinate with the state's two Continuum of Care, the Connecticut Balance of State Continuum of Care (CT BOS CoC) and Opening Doors Fairfield County (ODFC); and will also coordinate with the Court Support Services Division of the State of Connecticut Judicial Branch.

Discussion:

The purpose of the Consolidated Plan and Actions Plans is multifaceted, and attempts to balance the federal requirement for accessing certain federal block grants with the need to distribute state resources in accordance with statutory obligations. The State of Connecticut

applies for and administers six federal formula grant programs for affordable housing and community development activities:

- Small Cities Community Development Block Grant (SC/CDBG) - The SC/CDBG Program assists smaller cities/towns across the state to address their affordable housing, community development and economic development needs, refer to 24 CFR part 570, subparts D and I;
- RHP - the State will comply with Section 8071 of the pilot Recovery Housing Program (RHP) authorized by the SUPPORT for Patients and Communities Act (SUPPORT Act);
- HOME Investment Partnership (HOME) - The HOME Program funds the acquisition, construction and rehabilitation of affordable housing around the state, refer to 24 CFR part 92;
- Emergency Solutions Grant (ESG) - The ESG Program provides funds to emergency shelters, transitional housing for the homeless, and essential social services both to assist the homeless and to prevent homelessness, refer to 24 CFR 576;
- Housing Opportunities for Persons with AIDS (HOPWA) - The HOPWA Program aids not for profit organizations in meeting the housing and social service needs of persons with AIDS and HIV related illnesses and their families, refer to 24 CFR 574; and
- National Housing Trust Fund (NHTF) - NHTF provides formula grants to states to increase and preserve the supply of decent, safe, and sanitary affordable housing for extremely low-income and very low-income households, including homeless families, refer to section 1131 of the Housing and Economic Recovery Act of 2008 (Public Law 110-289). Section 1131 amended the Federal Housing Enterprises Financial Safety and Soundness Act of 1992 (12 U.S.C. 4501 et seq.) to add a new section 1337 "Affordable Housing Allocation" and a new section 1338, "Housing Trust Fund."

Appendices

Appendix A - Alternate/Local Data Sources

Appendix A Figure 1: Data Sources

1	Data Source Name ACS 2018-2022 5-Year Estimates
	List the name of the organization or individual who originated the data set. ACS 2018-2022 5-Year Estimates
	Provide a brief summary of the data set. American Community Survey data
	What was the purpose for developing this data set? Data available through the U.S. Census Bureau to provide information for Needs Assessment and Market Analysis
	How comprehensive is the coverage of this administrative data? Is data collection concentrated in one geographic area or among a certain population? Data gathered for state of CT and each county of the state
	What time period (provide the year, and optionally month, or month and day) is covered by this data set? 2018-2022
	What is the status of the data set (complete, in progress, or planned)? Completed
2	Data Source Name CHAS 2016-2020 5-Year Estimates
	List the name of the organization or individual who originated the data set. Comprehensive Housing Affordability Strategy
	Provide a brief summary of the data set. The CHAS special tabulation is a count of the number of households (or housing units) that have certain combinations of HUD-specified characteristics, summarized for HUD-specified geographies.
	What was the purpose for developing this data set? Data is used to provide information for the Needs Assessment.
	How comprehensive is the coverage of this administrative data? Is data collection concentrated in one geographic area or among a certain population? State of Connecticut
	What time period (provide the year, and optionally month, or month and day) is covered by this data set? 2016-2020
	What is the status of the data set (complete, in progress, or planned)? Complete