

# Connecticut State Innovation Model State Health Profile: Data Packet

## *Preliminary Findings*

Connecticut Department of Public Health

September 22, 2016

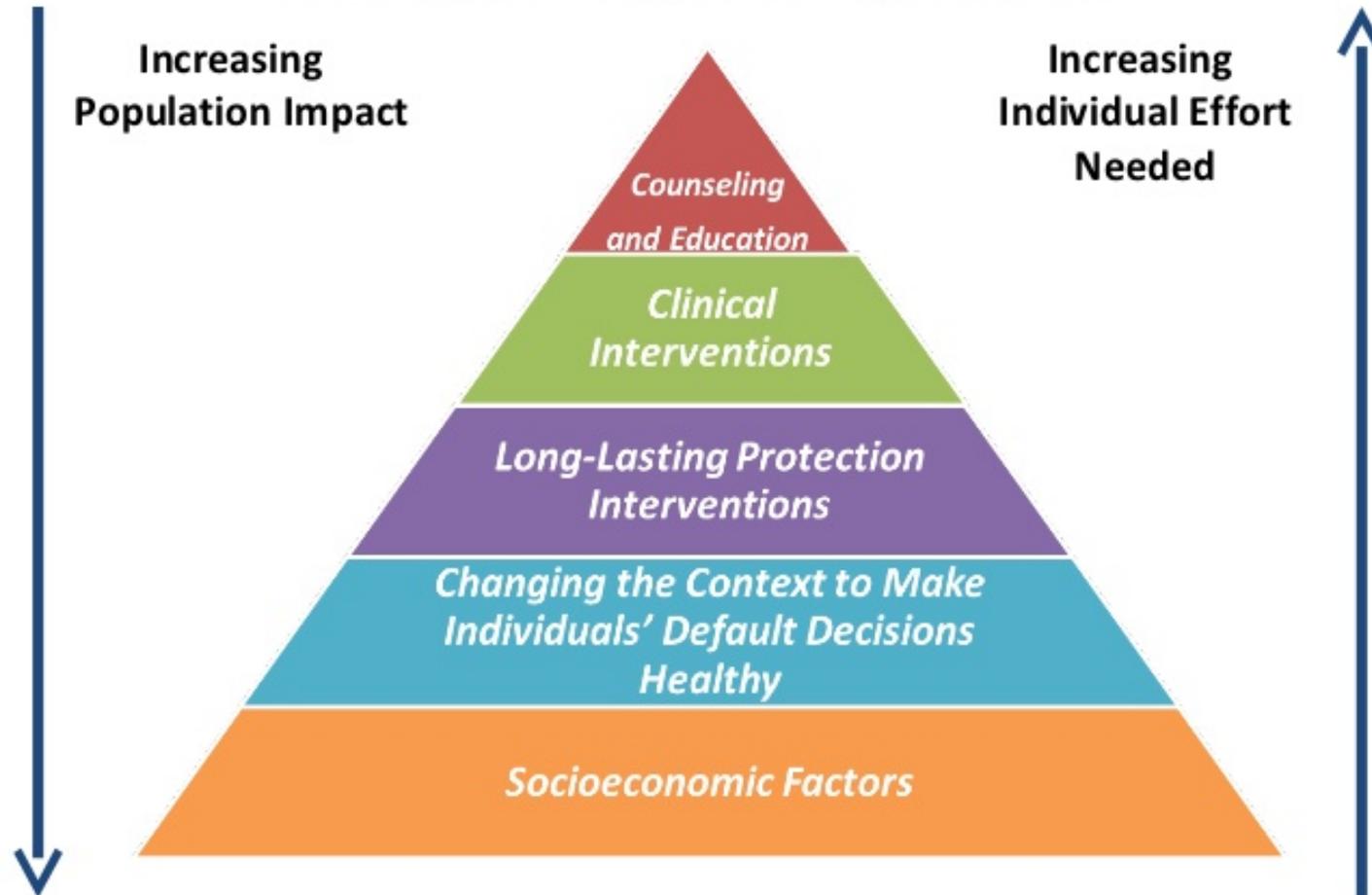


# Many Things Affect Our Health



“Making the healthy choice the easy choice.”

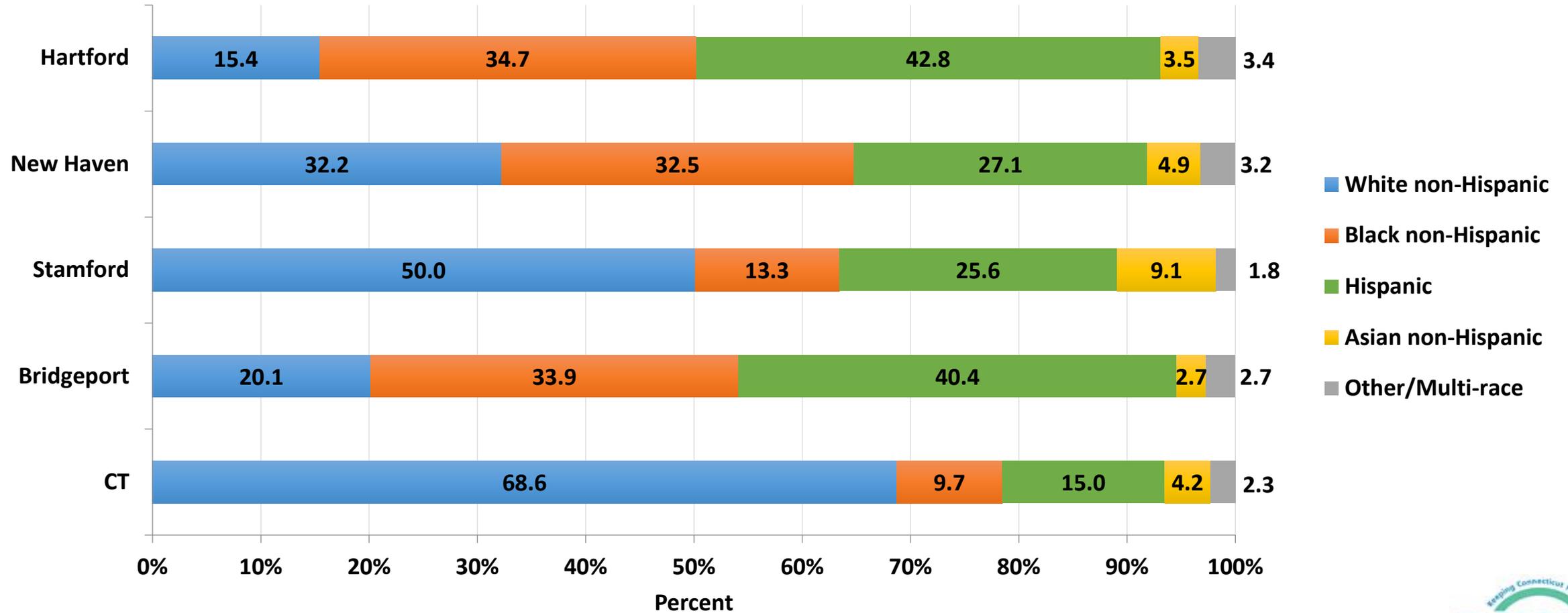
## Health Impact Pyramid



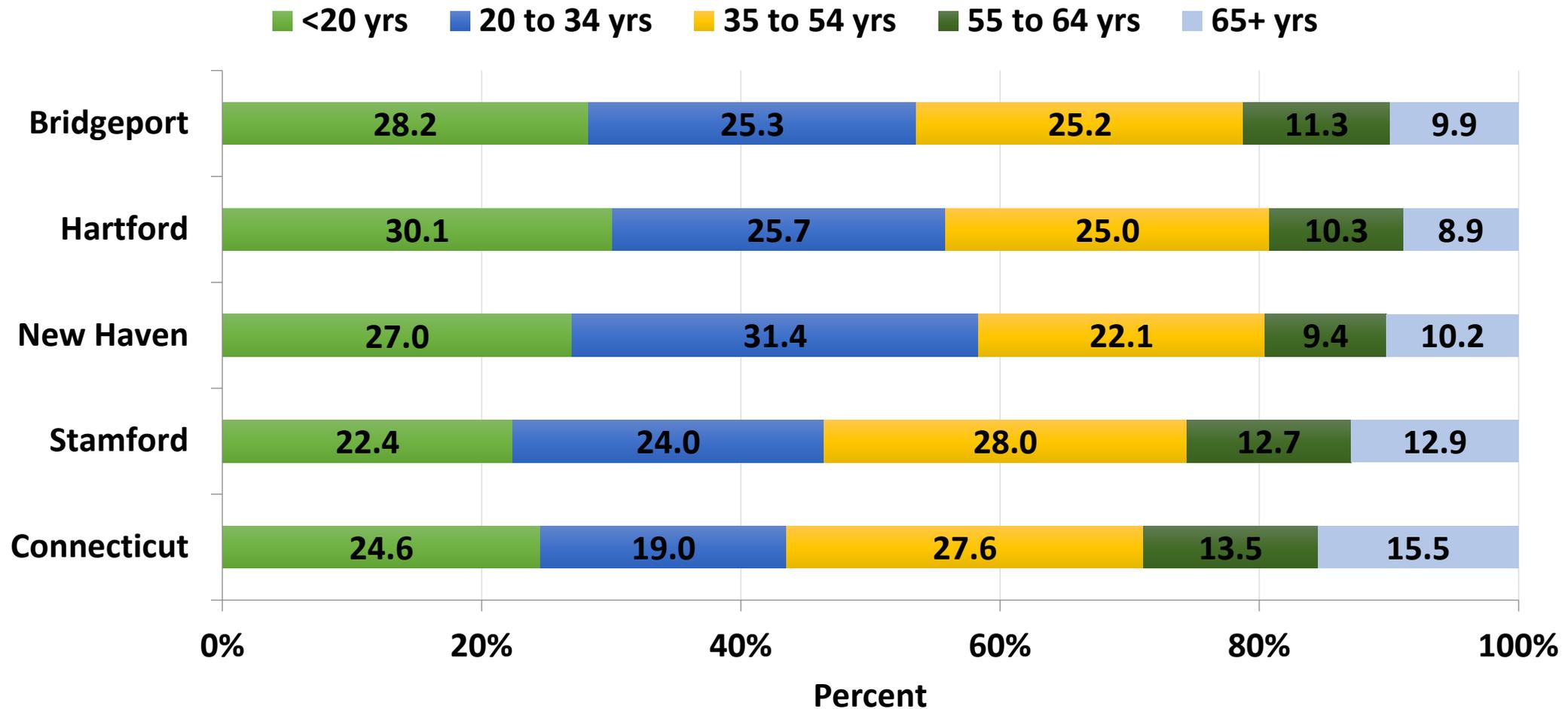
Frieden T. American Journal of Public Health | April 2010, Vol 100, No. 4

# CONNECTICUT POPULATION CHARACTERISTICS

# Percent of Population, by Race and Ethnicity, Connecticut and Its Largest Towns, 2014



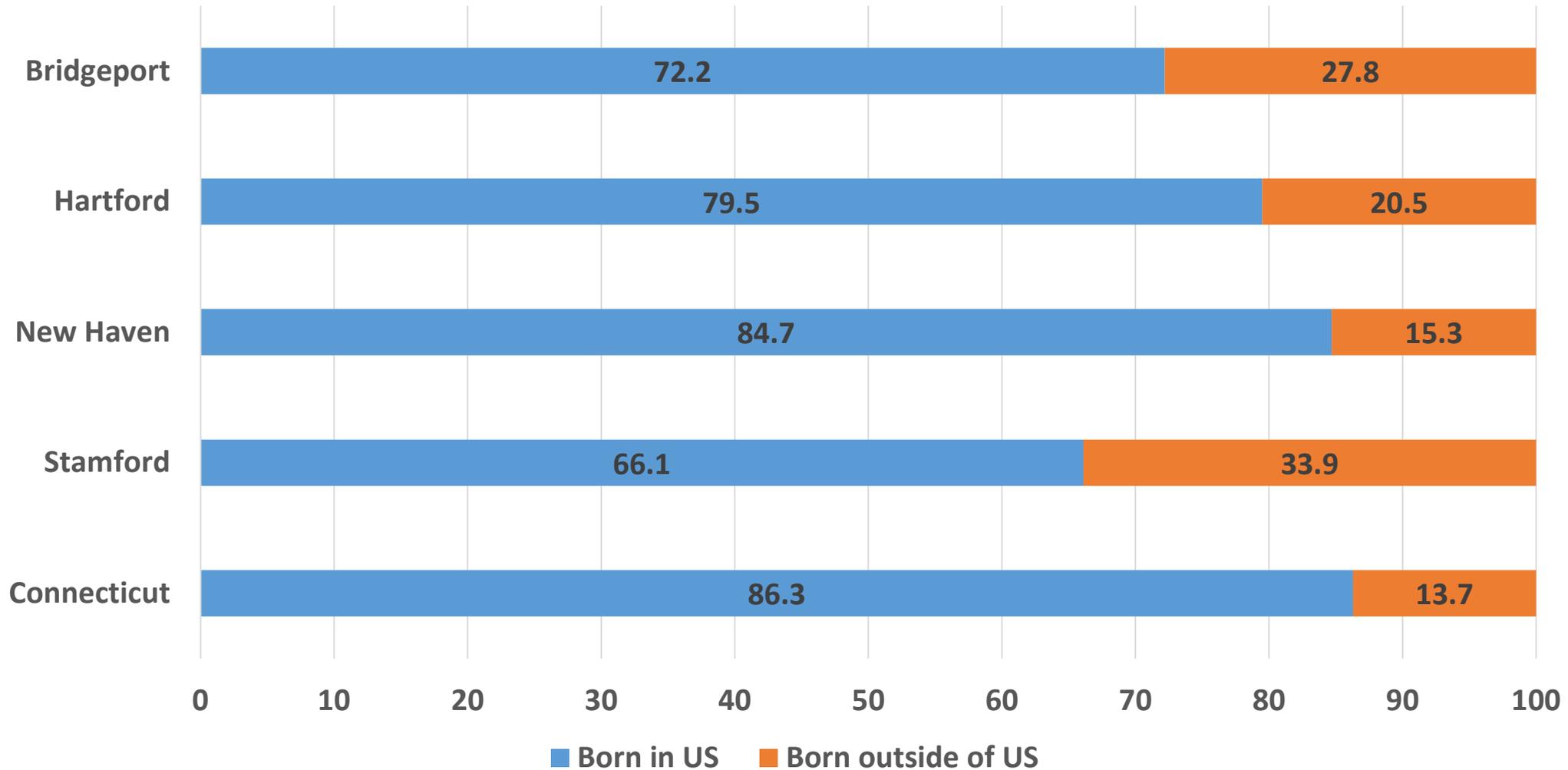
# Percent of Population, by Age, Connecticut and Its Largest Towns, 2014



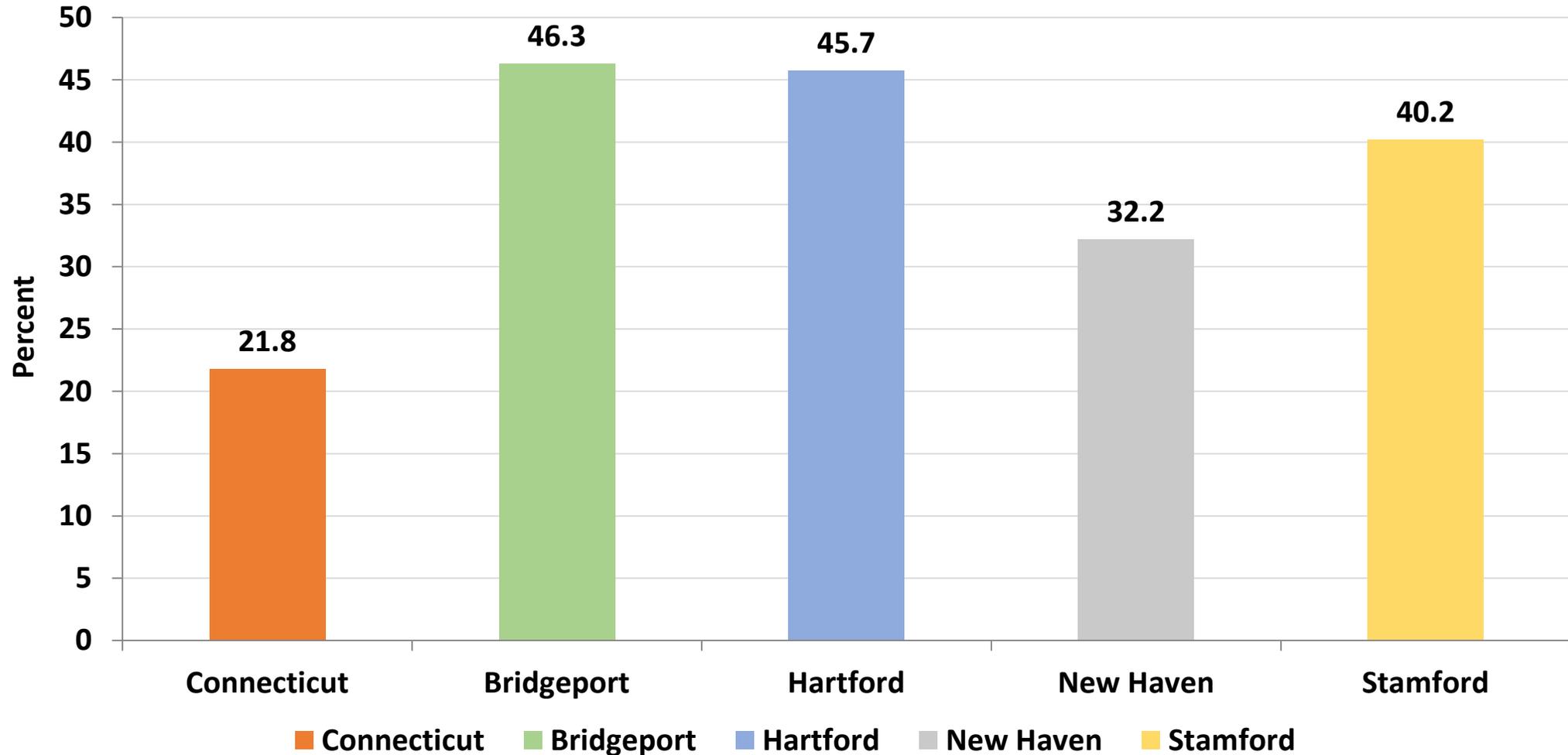
Data Source: 2014 ACS U.S. Census, DP05 File (1-year estimates)



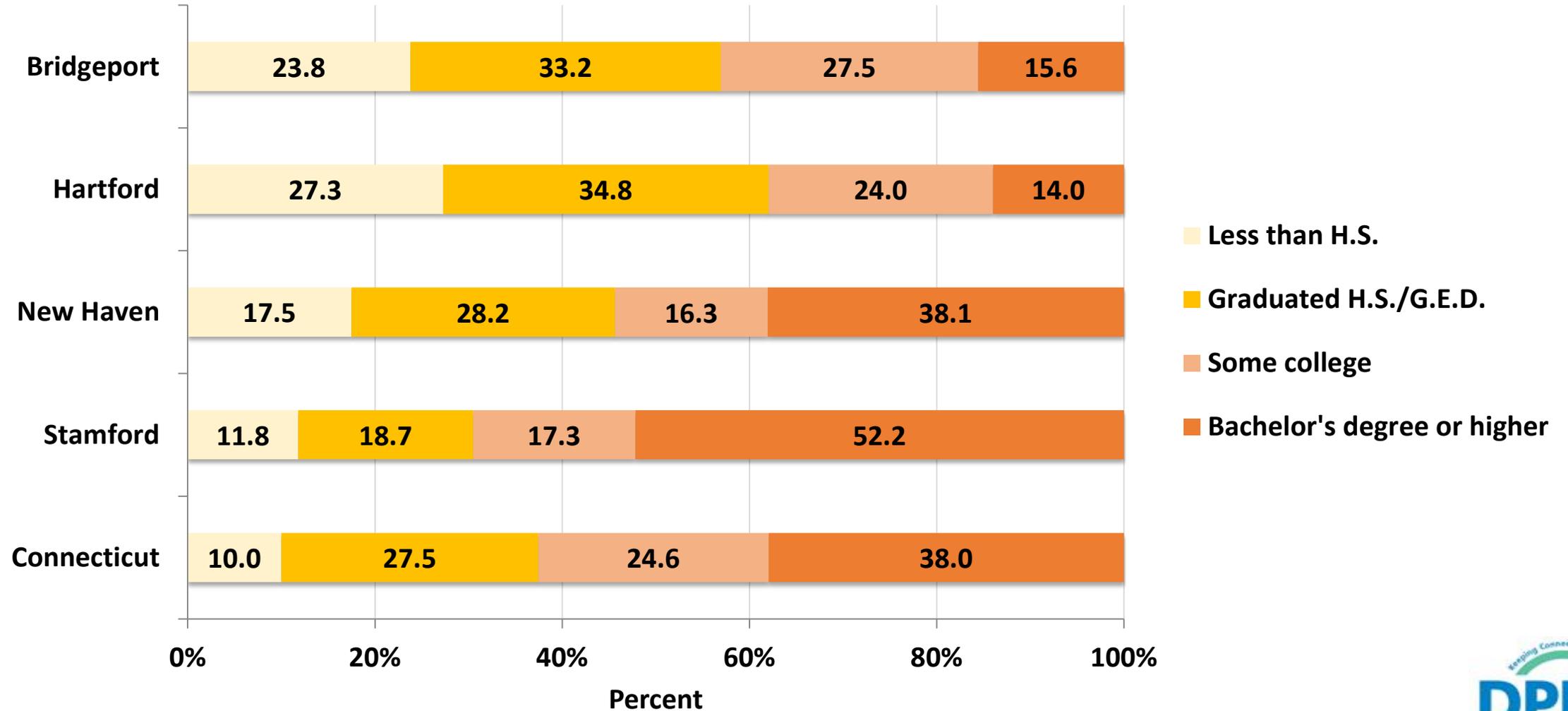
# Percent of Population Born in the U.S. and Outside the U.S., Connecticut and Its Largest Towns, 2014



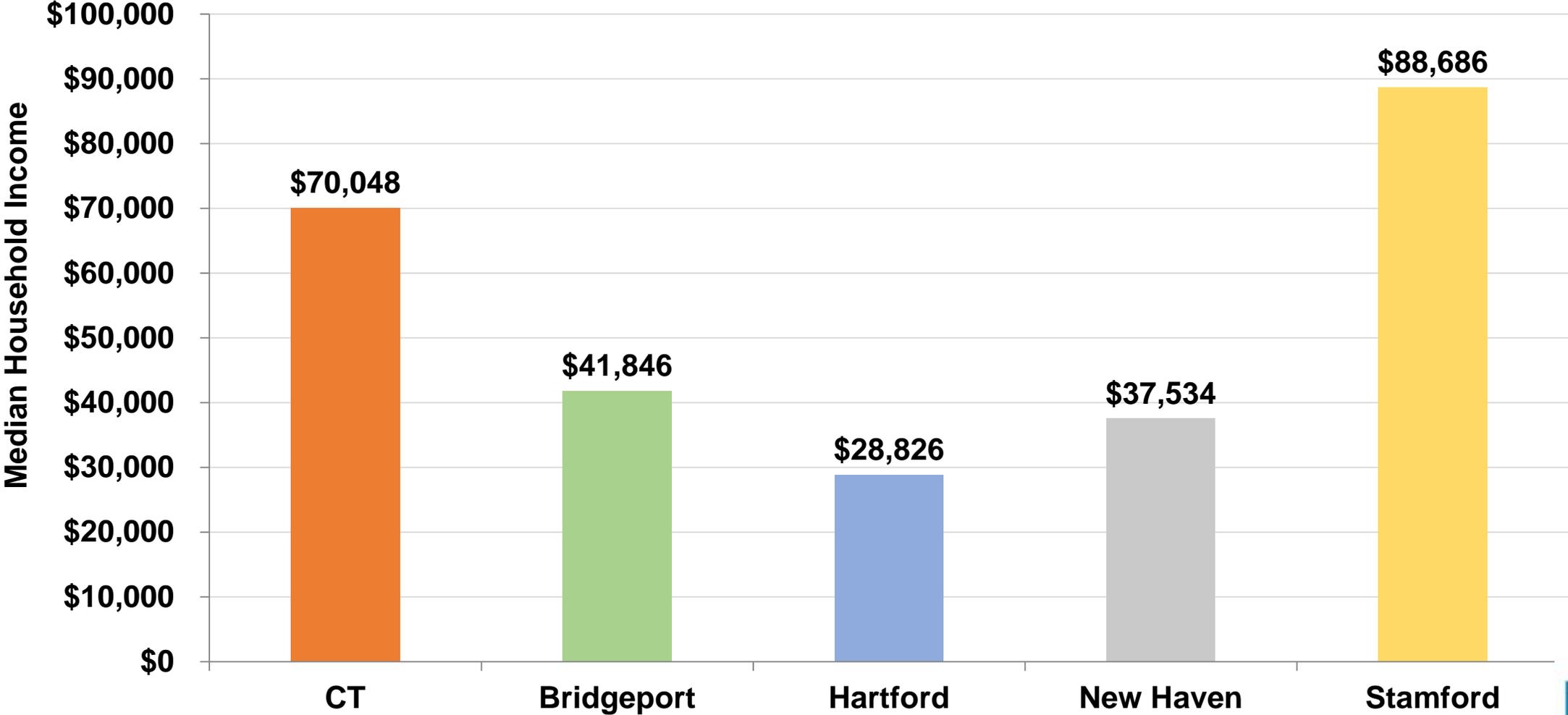
# Percent of Population 5 years+ Who Speak a Language Other Than English at Home, 2014



# Percent of Population, by Educational Attainment, Connecticut and Its Largest Towns, 2012

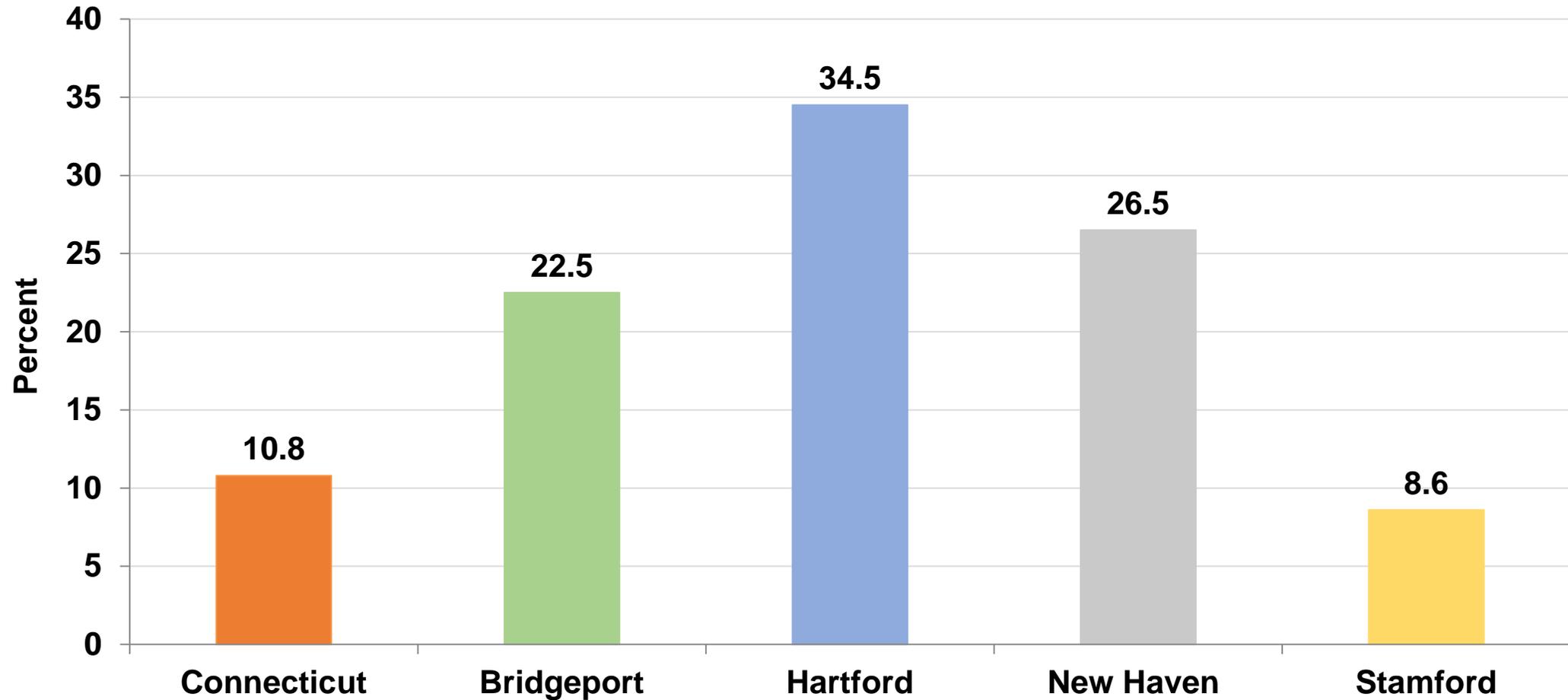


# Median Household Income, Connecticut and Its Largest Towns, 2014

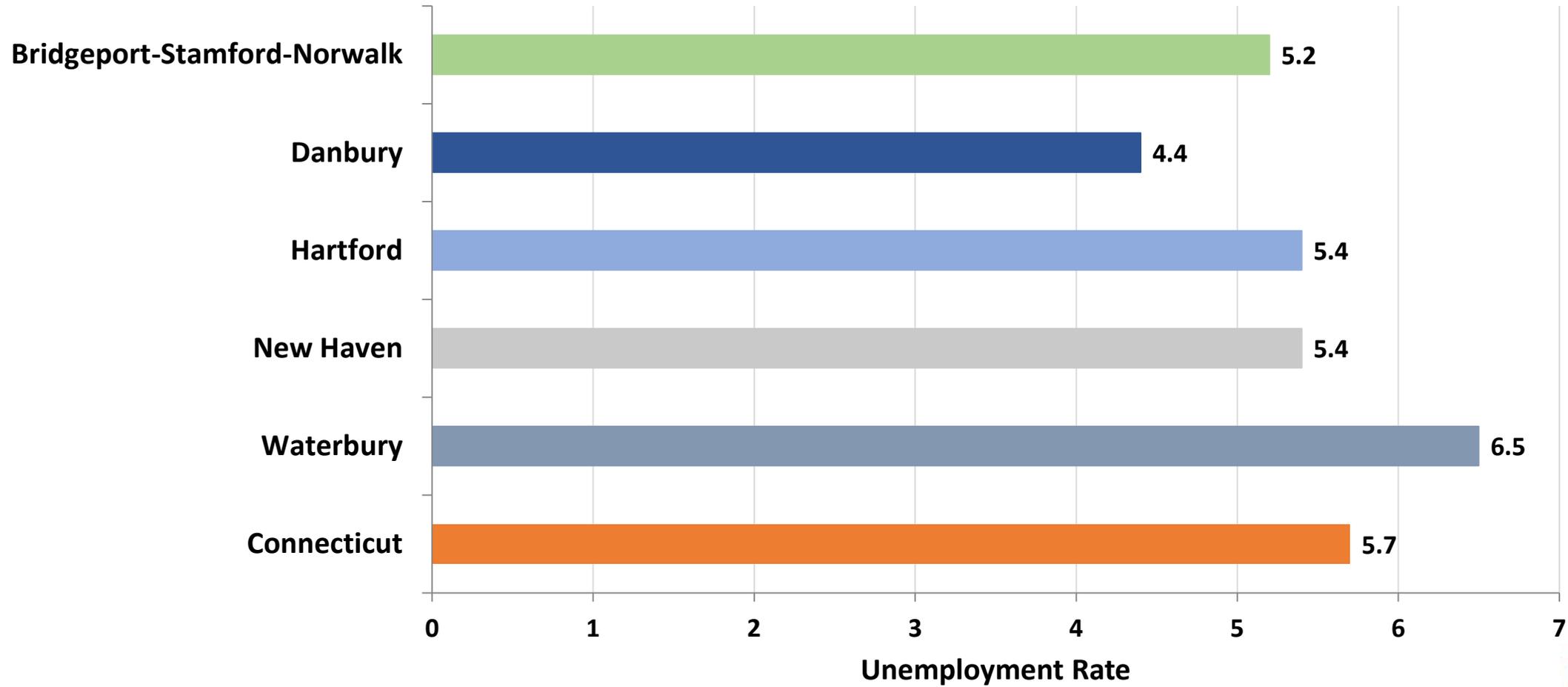


Data Source: 2012 ACS, U.S. Census, DP02 File (1-year estimates)

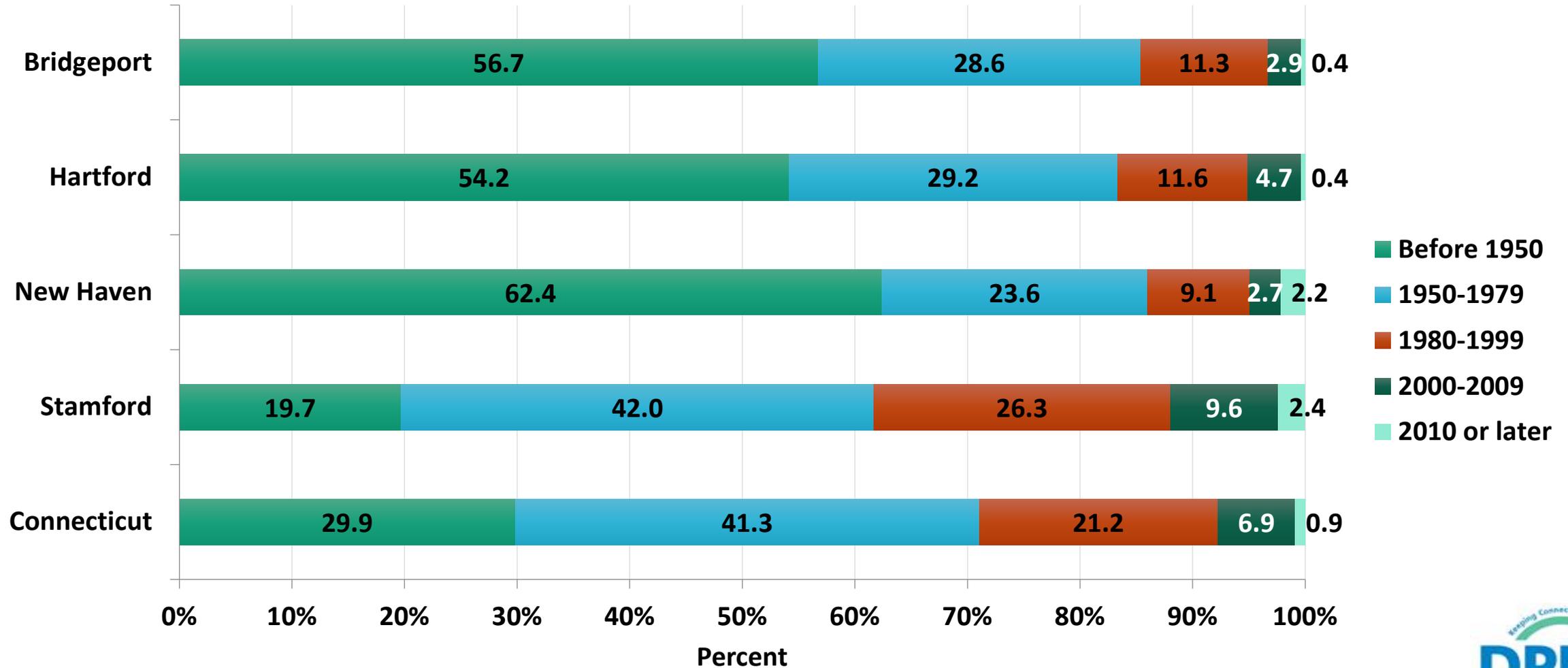
# Percent of Individuals Below Poverty Level, Connecticut and Its Largest Towns, 2014



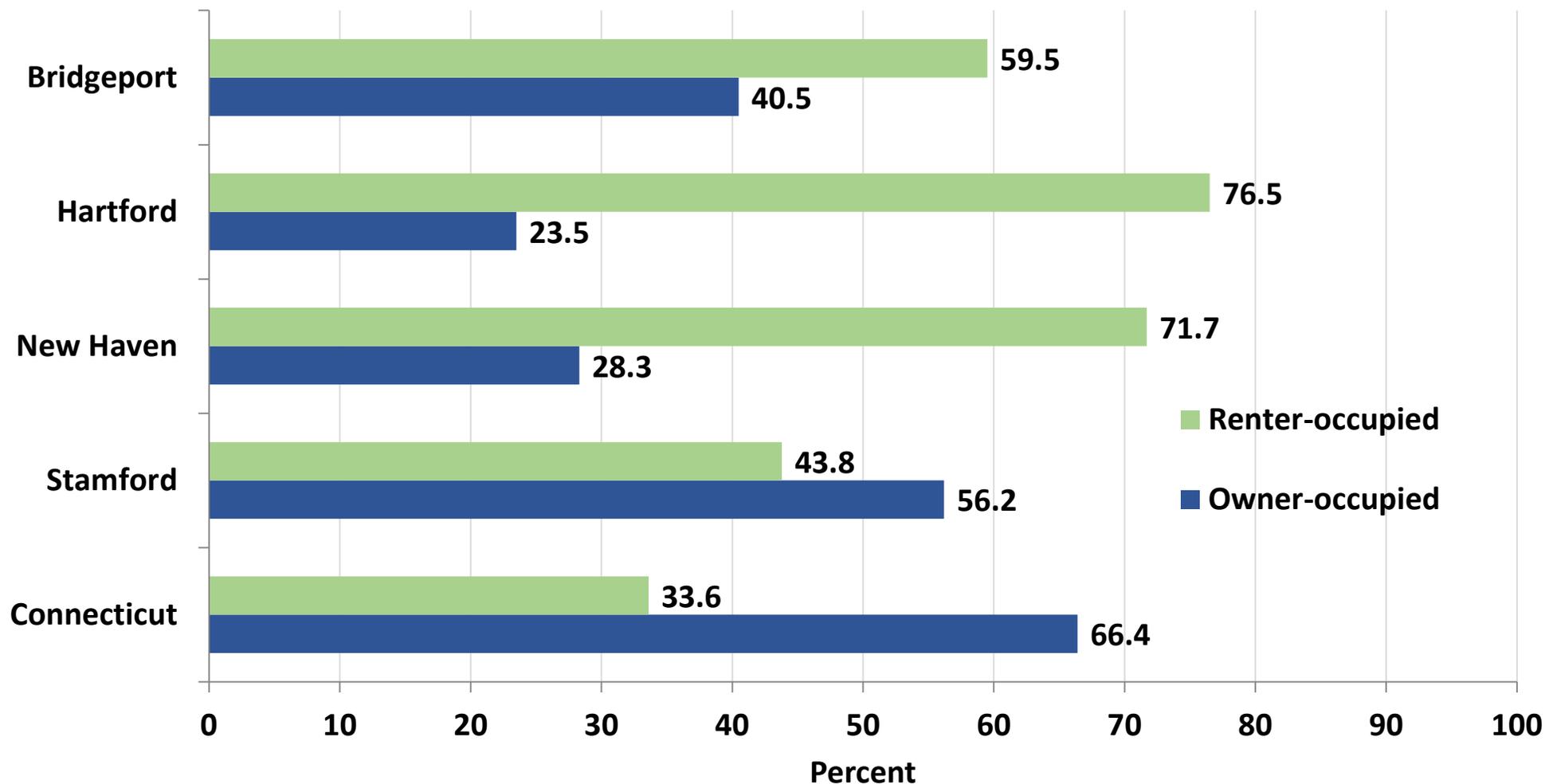
# Rate of Unemployment, Connecticut and Metropolitan Areas, 2016



# Percent of Housing, by Year of Construction, Connecticut and Its Largest Towns, 2014



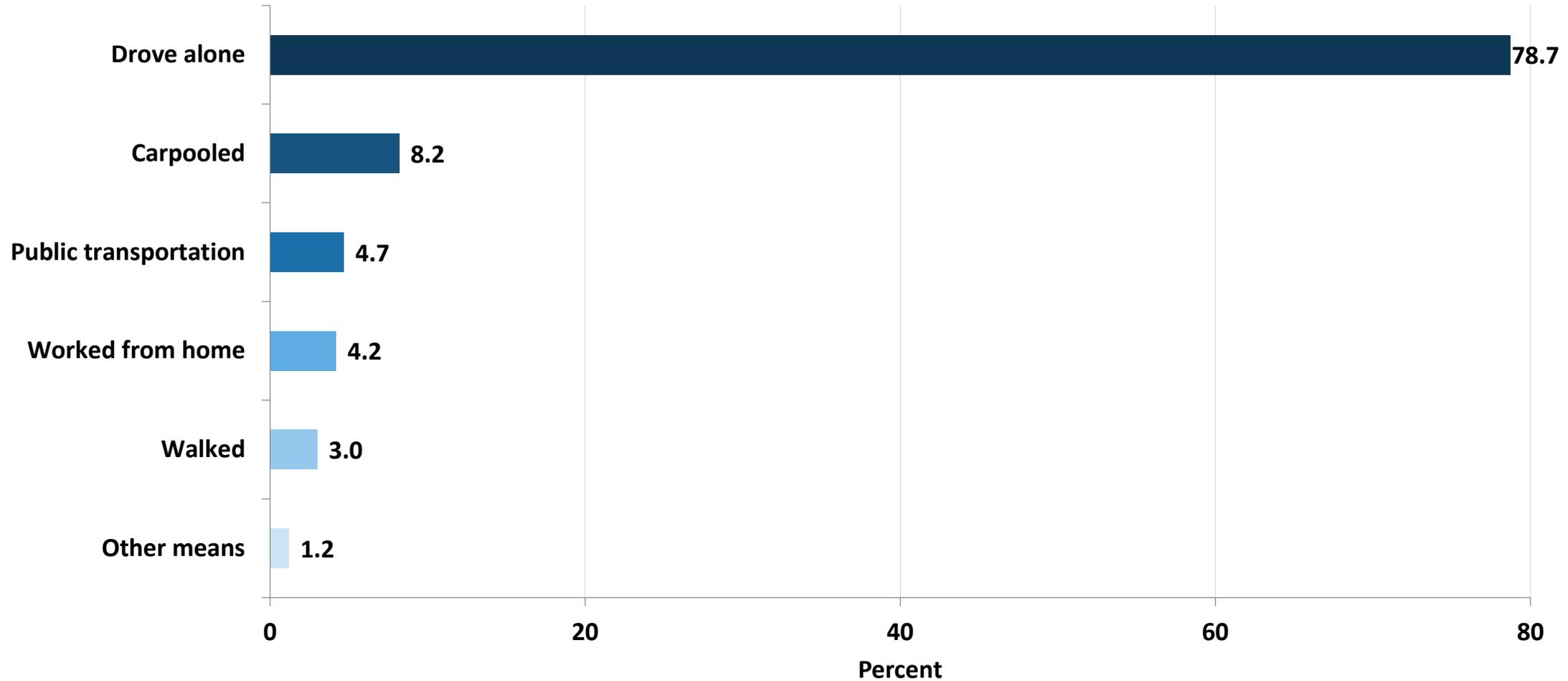
# Percent of Houses That are Owner-Occupied or Renter-Occupied, Connecticut and Its Largest Towns, 2014



Data Source: US Census Bureau, 2014 CP04 File, 1-year estimates



# Means of Transportation for Persons 16 Years or Older Who Commuted to Work, Connecticut, 2014



# CHRONIC DISEASE PREVENTION AND CONTROL

# Preliminary Cost Data

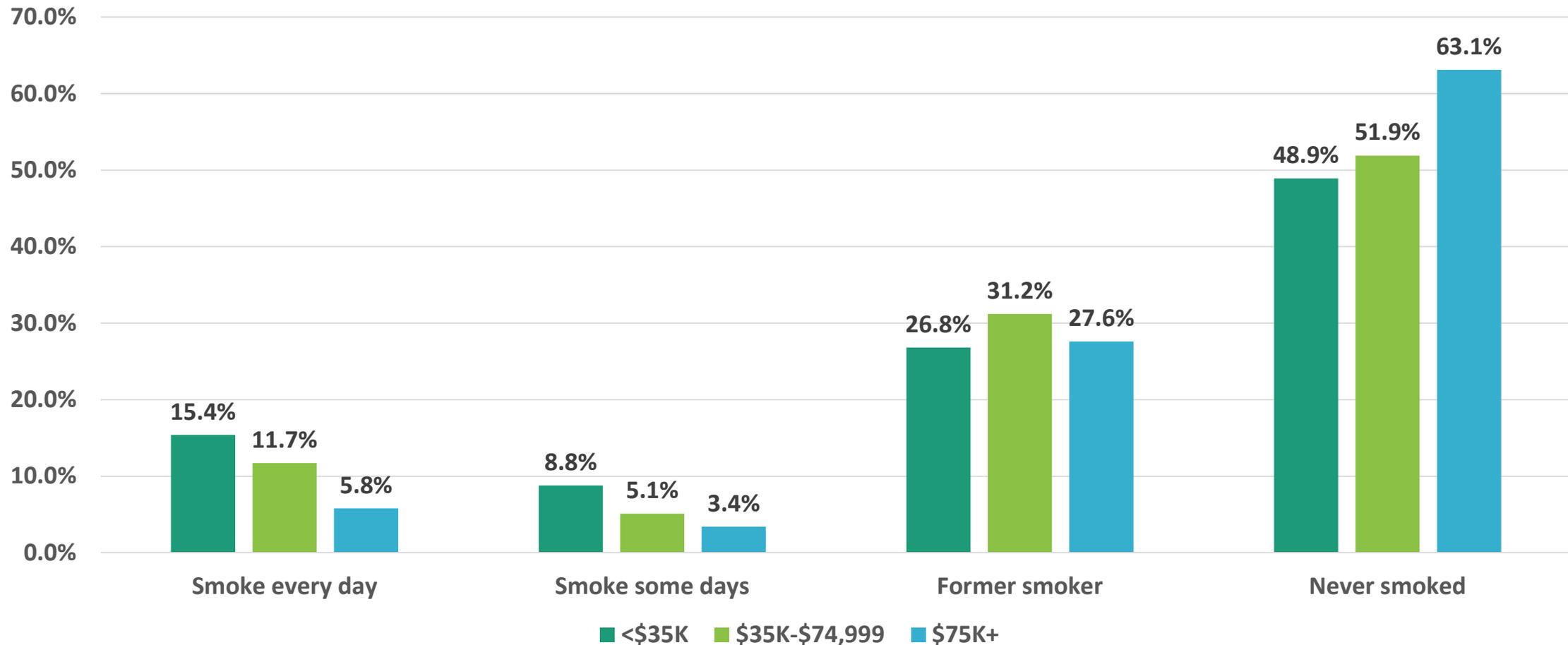
<b>Table 1: Annual Estimates of Six High Cost, High Burden Conditions in Connecticut</b>				
<b>Condition (per CDC 6.18 Initiative)</b>	<b>CDC National Estimate (annual)</b>	<b>CT Calculated Annual Estimate*</b>	<b>Year</b>	<b>Brief Description</b>
<b>Smoking</b>	\$300 Billion	\$3 Billion	2014	Includes direct healthcare costs and loss of productivity.
<b>Blood Pressure</b>	\$42.8 Billion	\$428 Million	2011	Includes direct healthcare costs for hypertension only (not CVD, stroke etc.)
<b>Healthcare Associated Infection</b>	\$28.4- 45 Billion	\$284-450 Million	2011	Includes direct healthcare costs only
<b>Asthma</b>	\$56 Billion	\$560 Million	2007	Includes direct healthcare costs only
<b>Unplanned Pregnancy</b>	\$21 Billion	\$210 Million	2010	Includes direct health care costs only
<b>Diabetes</b>	\$245 Billion	\$2.44 Billion	2012	Includes direct and indirect healthcare costs

Data Source: CDC 6/18 Initiative

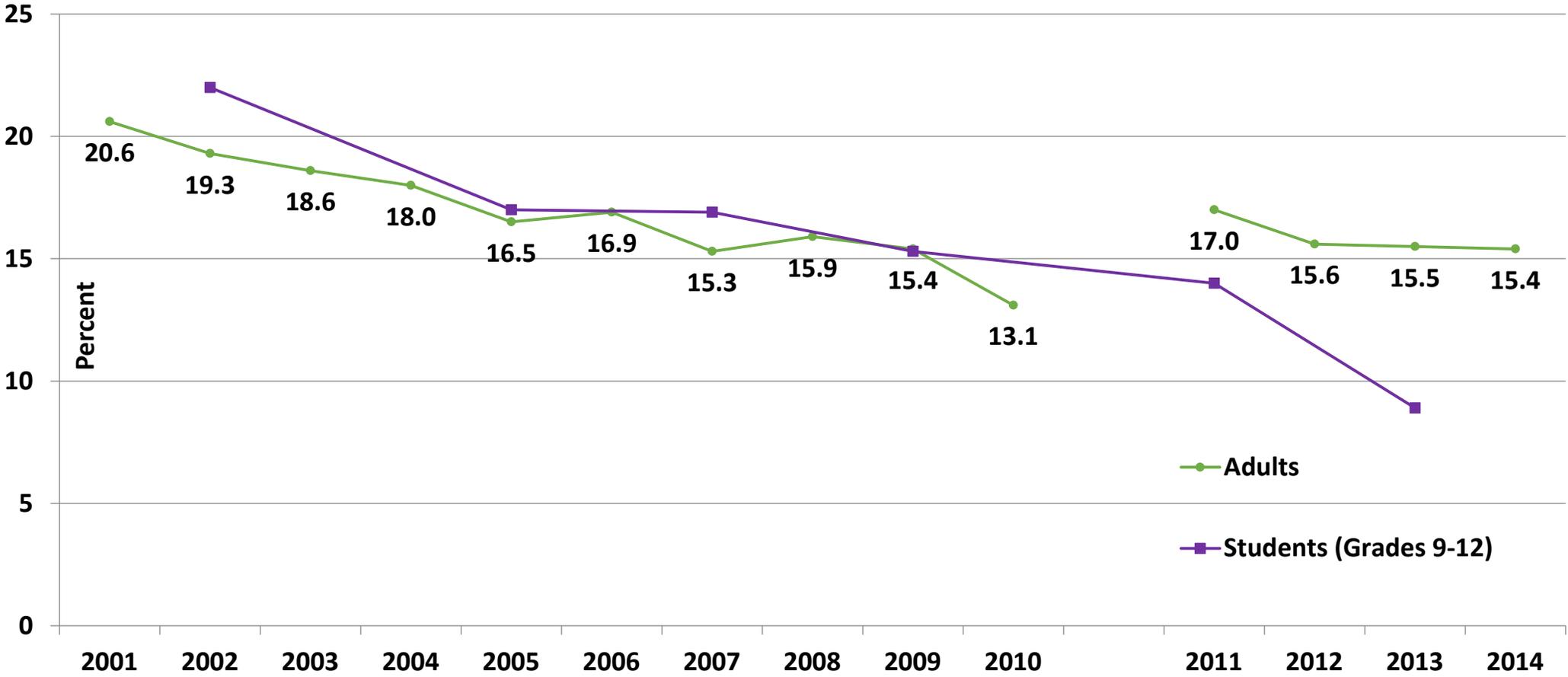
\* Calculation method: CDC National Estimate X 0.01, 0.01 is the CT proportion of the U.S. population (rounded to 100ths)



# Cigarette Smoker Status, by Annual Household Income, Connecticut, 2014

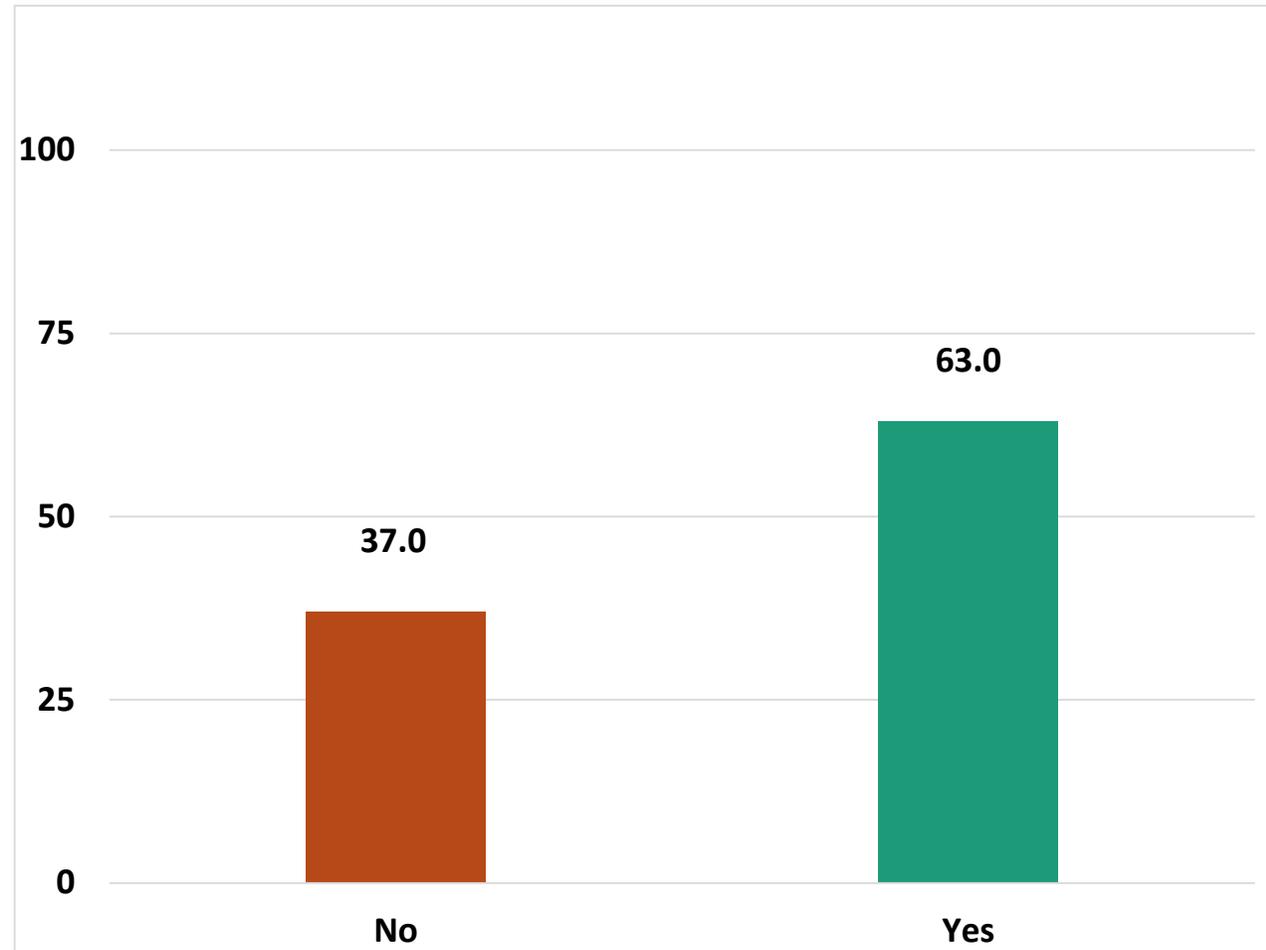


# Percent of Current Cigarette Smokers Among Youth and Adults, Connecticut, 2001-2014

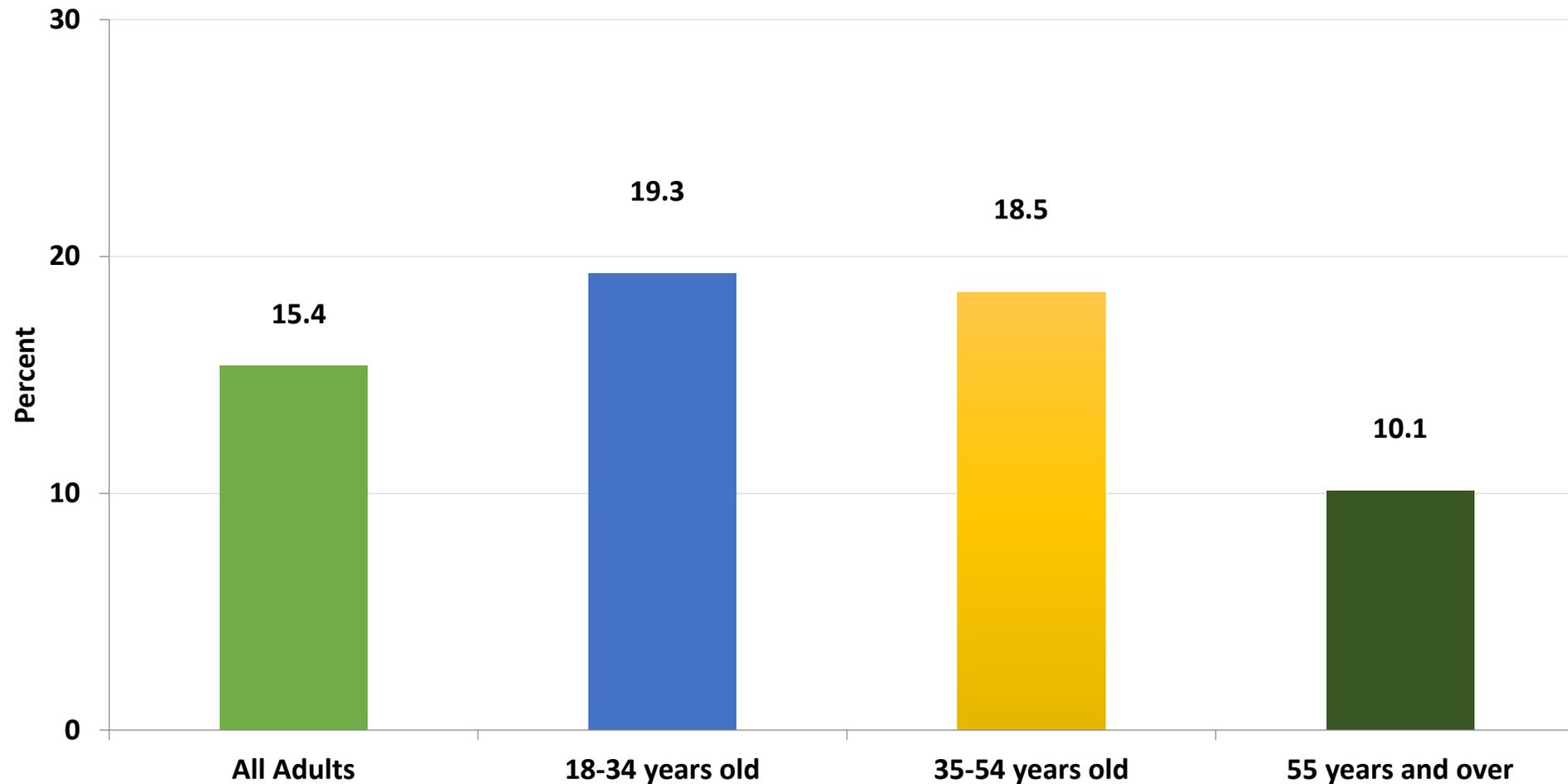


Data Source: BRFSS & CT Youth Tobacco Survey 2001 - 2014

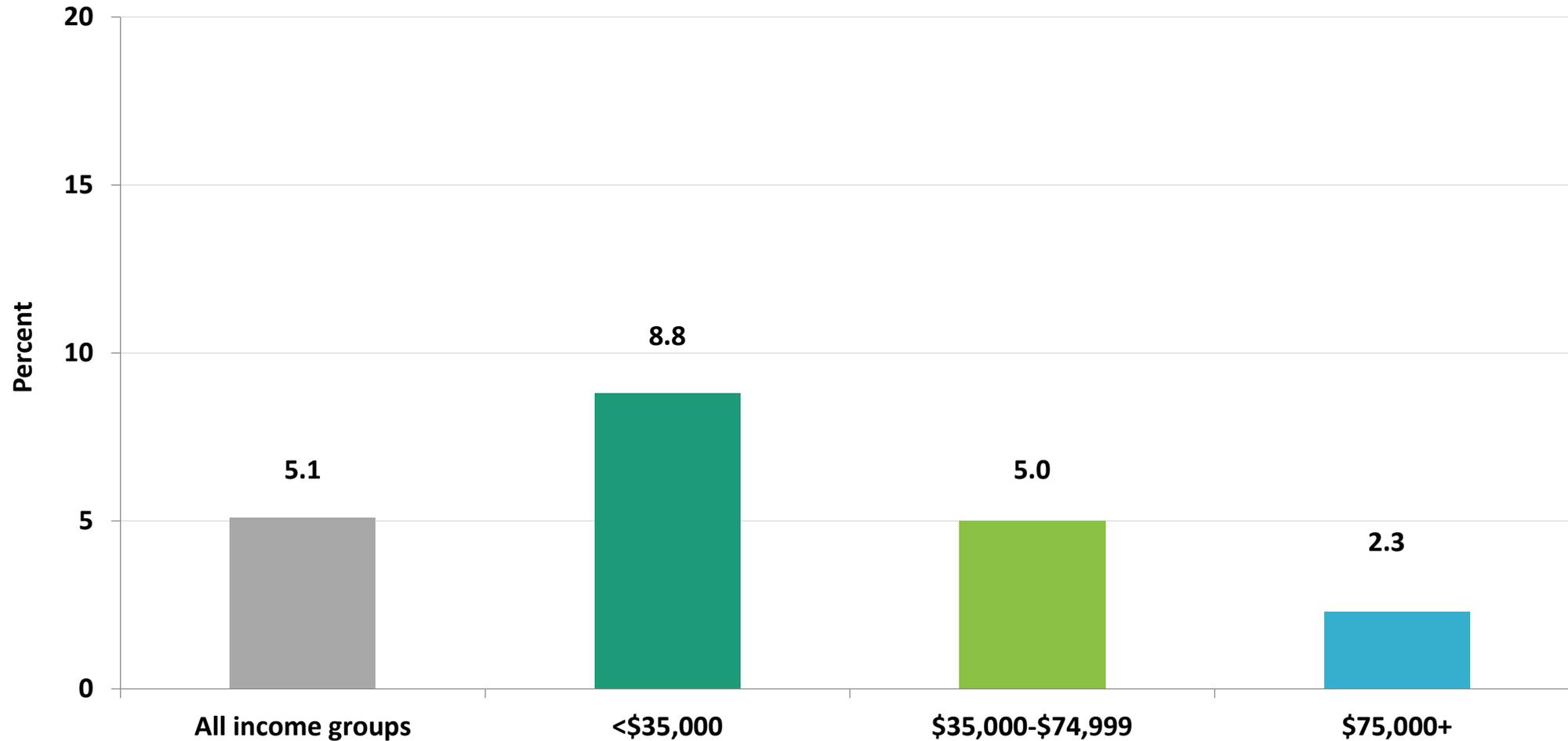
# Percent of Adult Smokers Who Made a Quit Attempt in the Past Year, Connecticut, 2014



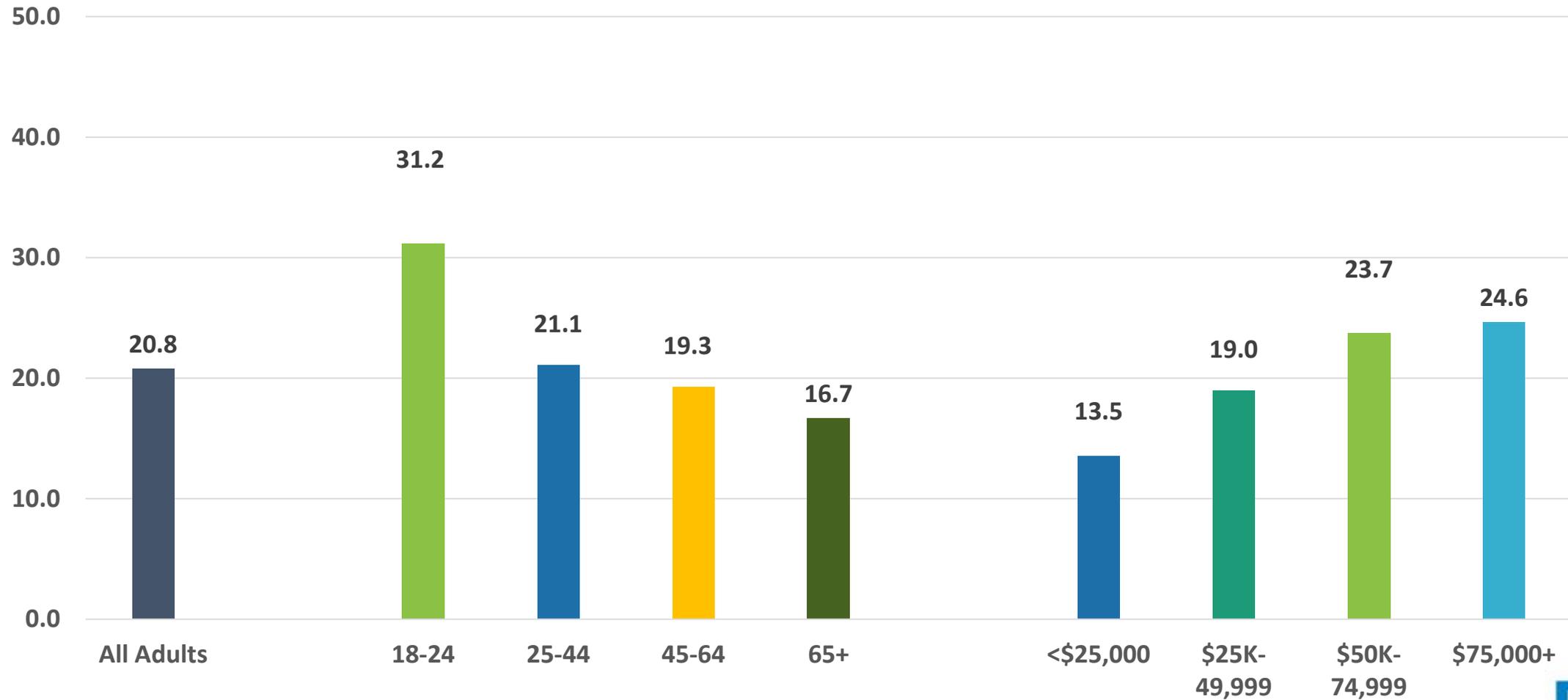
# Age-specific Prevalence of Adults Who Currently Smoke Cigarettes in Connecticut, 2014



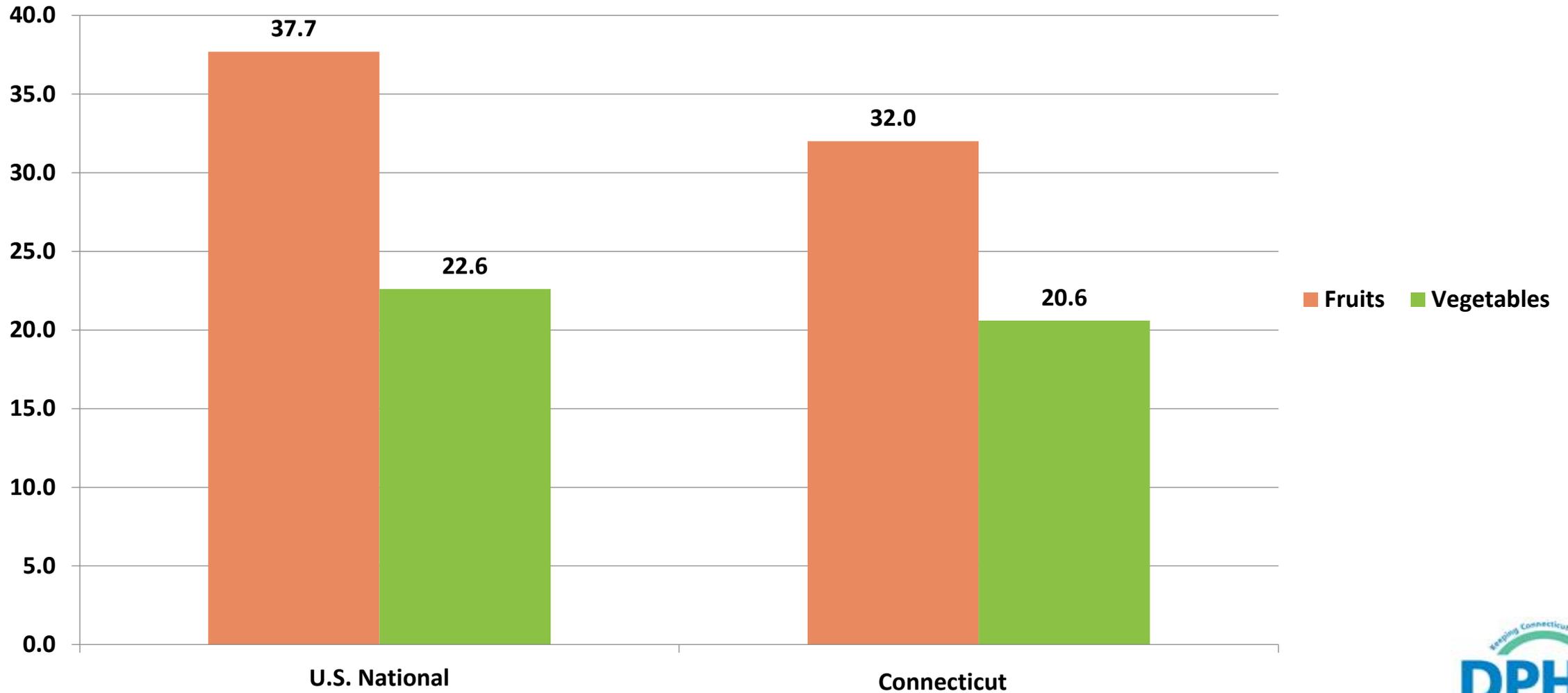
# Percent of Adults Ever Told They Have COPD, Emphysema or Chronic Bronchitis, by Income, Connecticut, 2014



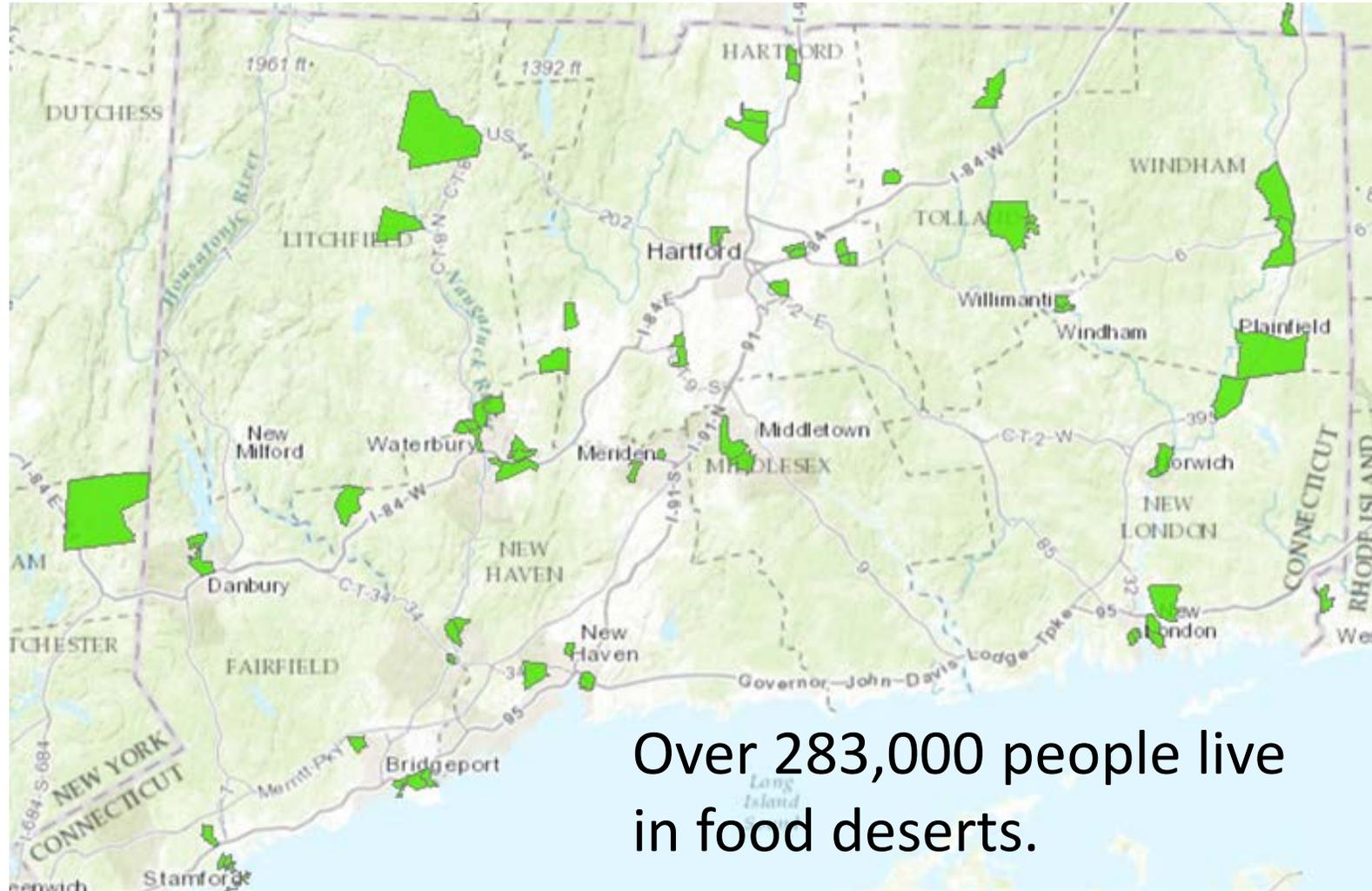
# Adults Participating in Enough Aerobic and Muscle Strengthening Exercises to Meet Guidelines, Connecticut, 2013



# Percent of Adults Who Consume Fruits and Vegetables Less Than Once Daily, Connecticut, 2013

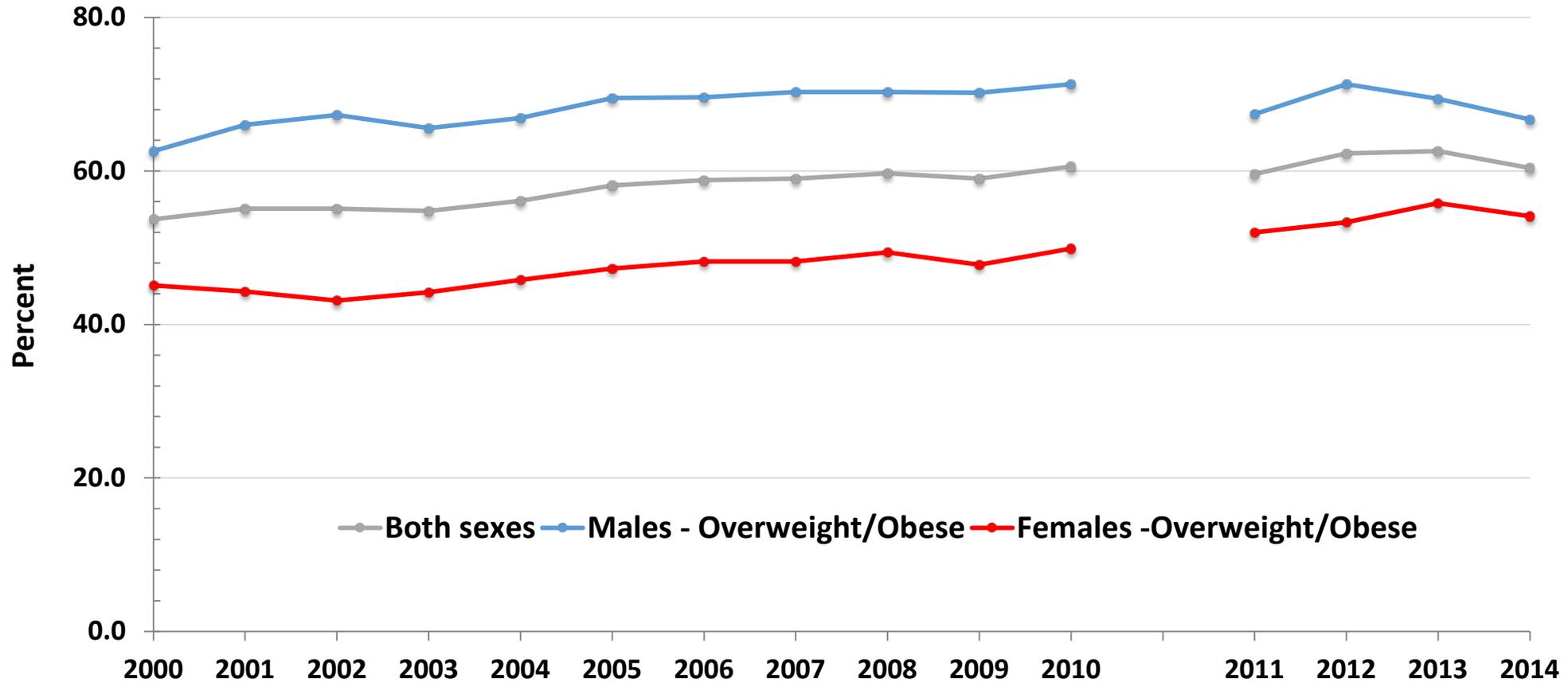


# Low Income Census Tracts Considered “Food Deserts,” Connecticut, 2009-2013

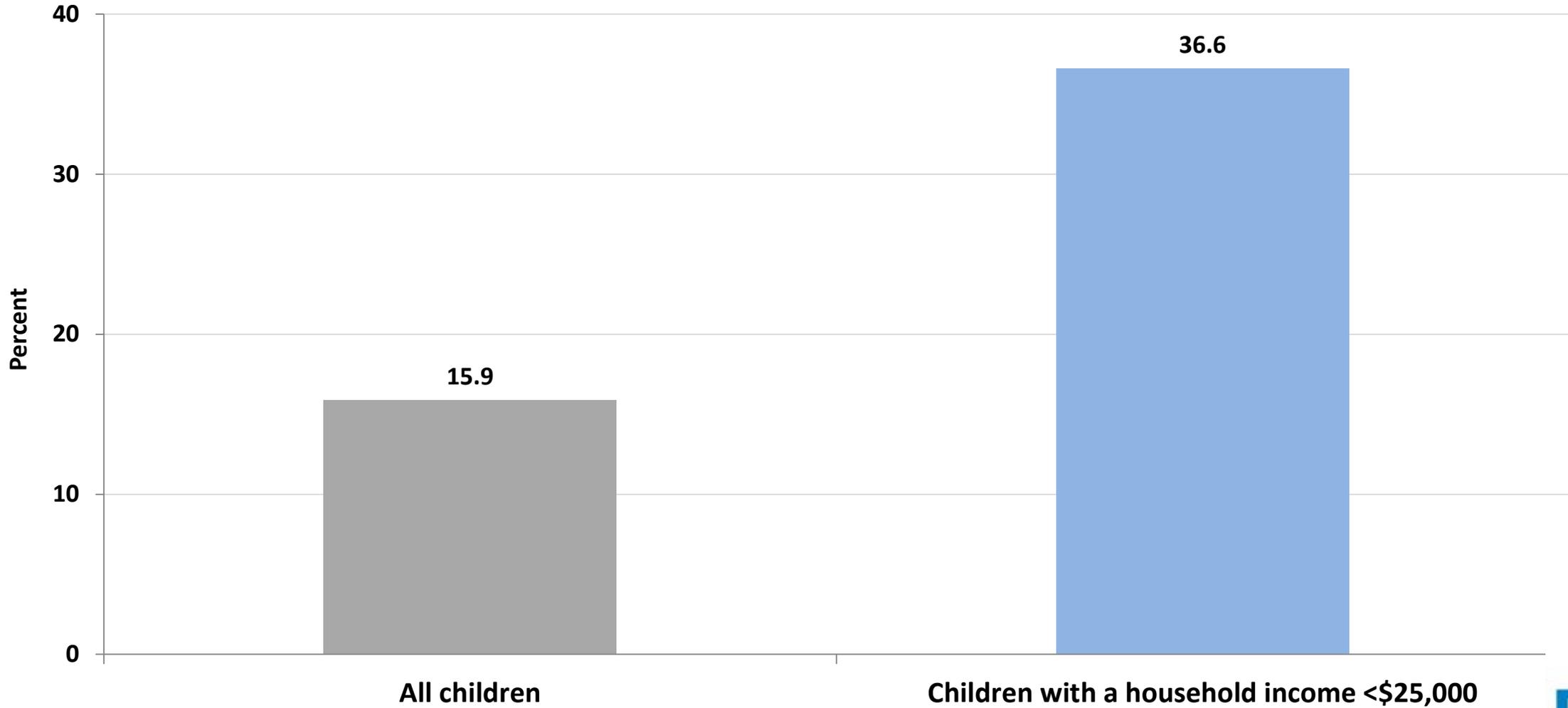


Over 283,000 people live  
in food deserts.

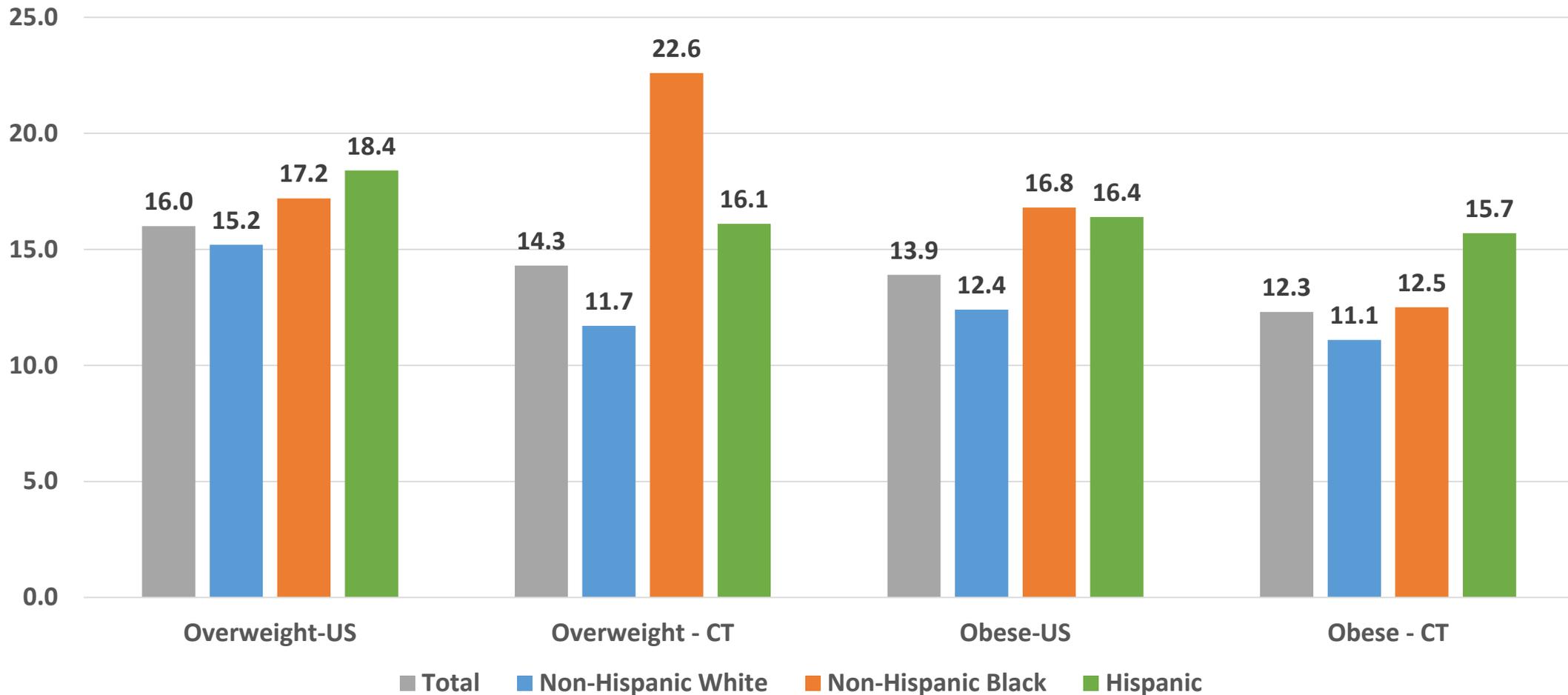
# Percent of Overweight or Obese Adults, Connecticut, 2000-2014



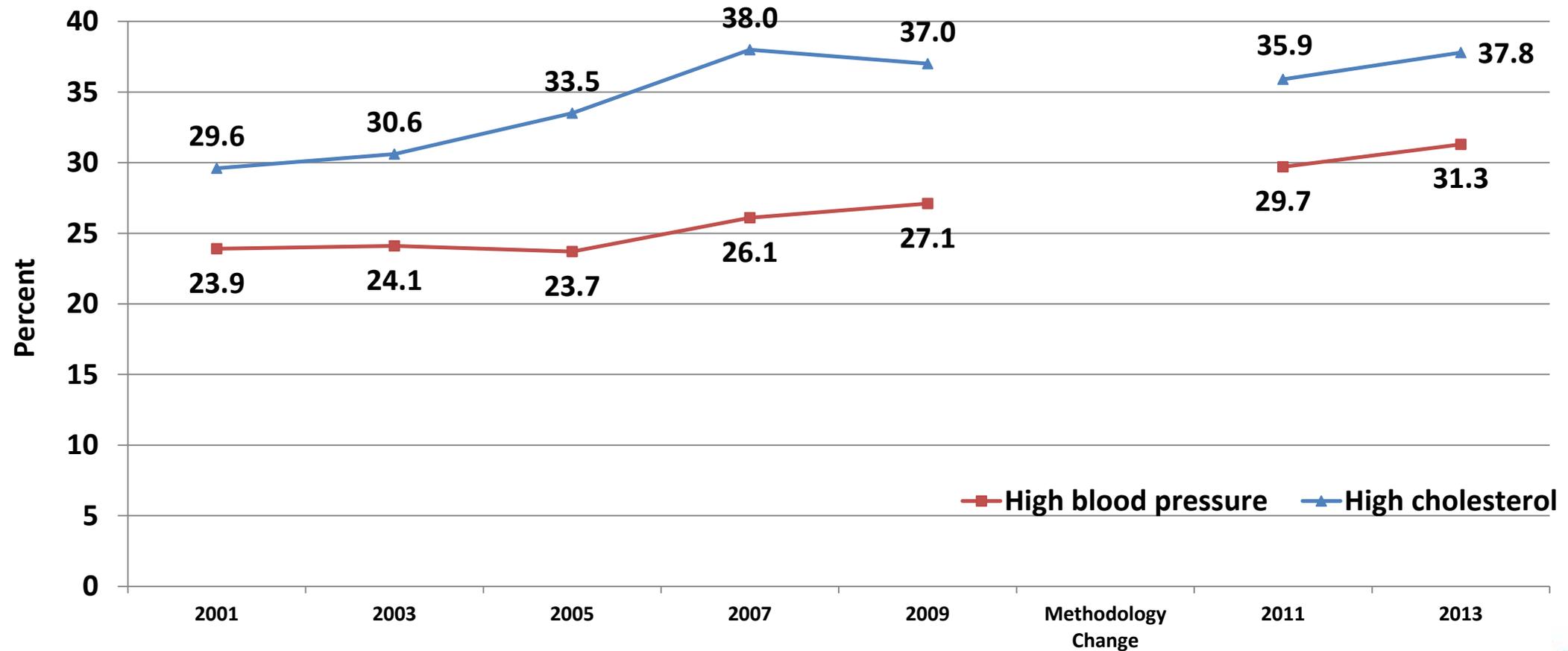
# Percent of Children (5-12 Years of Age) Who Are Obese, Connecticut, 2008-2010 combined



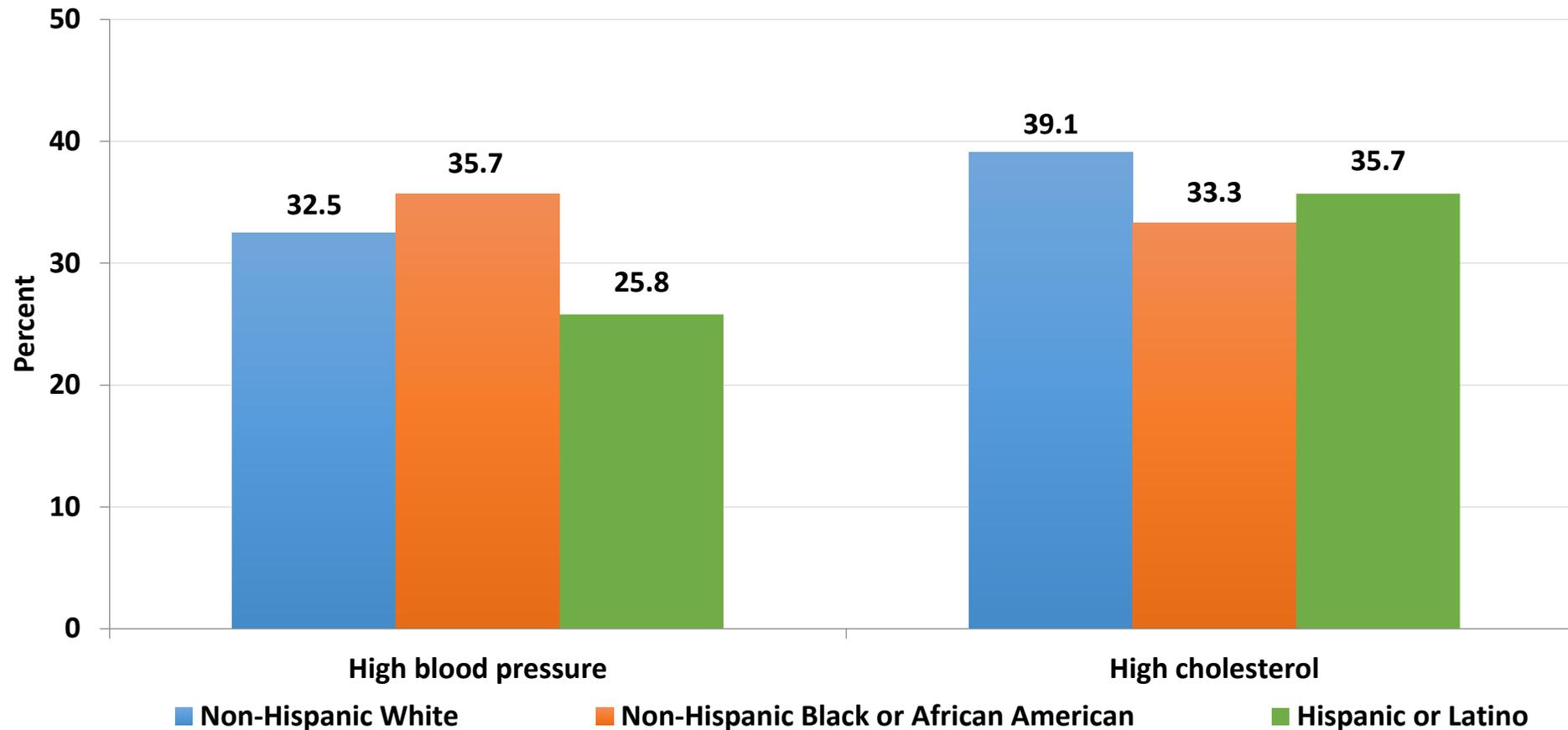
# Youth (grades 9-12) Considered Overweight and Obese, by Race and Ethnicity, Connecticut & United States, 2015



# Percent of Adults Ever Told by Provider They had High Blood Pressure or High Cholesterol, Connecticut, 2001-2013



# Percent of Adults Ever Told By a HealthCare Provider That They Had High Blood Pressure or High Cholesterol, by Race and Ethnicity, Connecticut, 2013



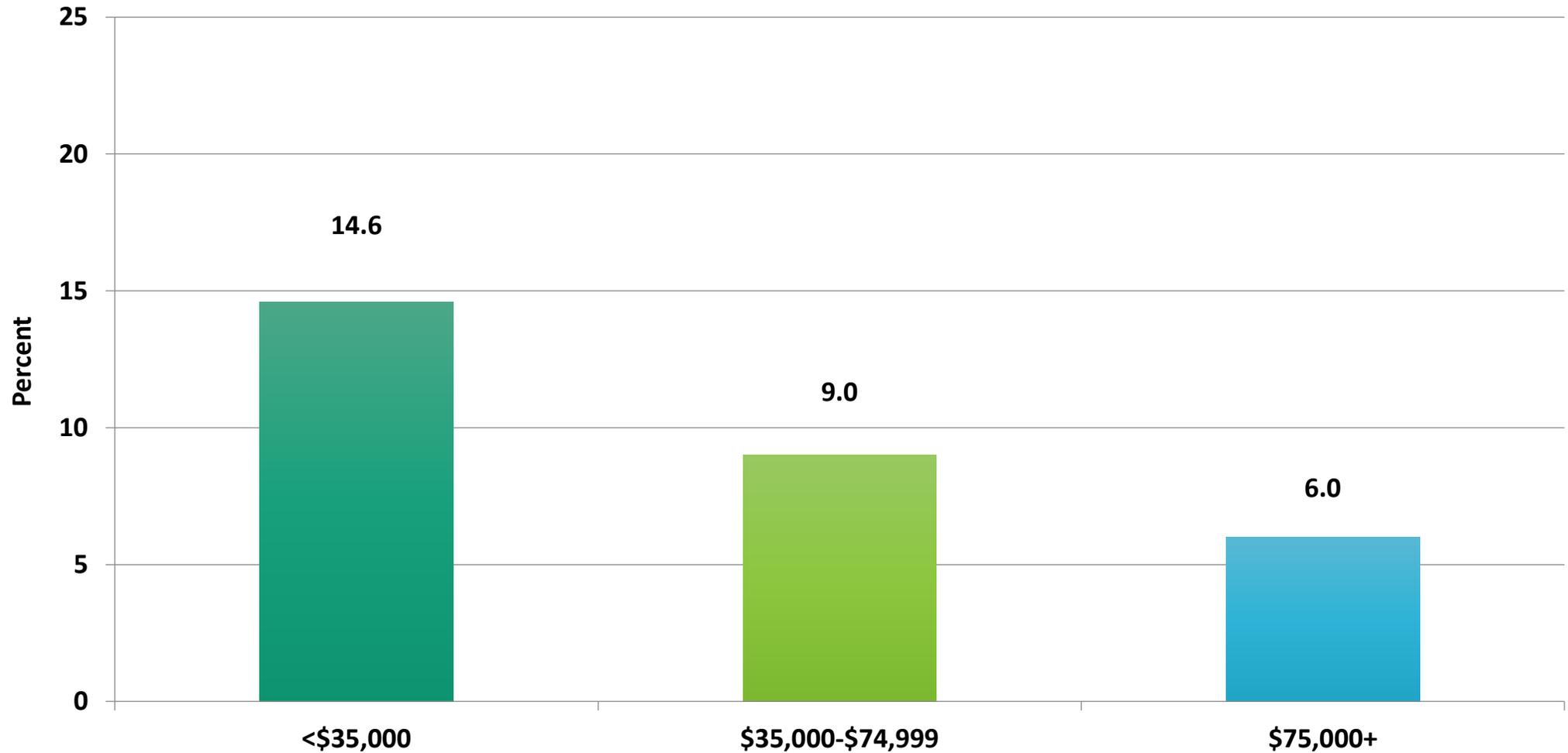
# Premature Mortality Due to Heart Disease, Years of Potential Life Lost, Under Age 75, by Town, Connecticut, 2009-2013



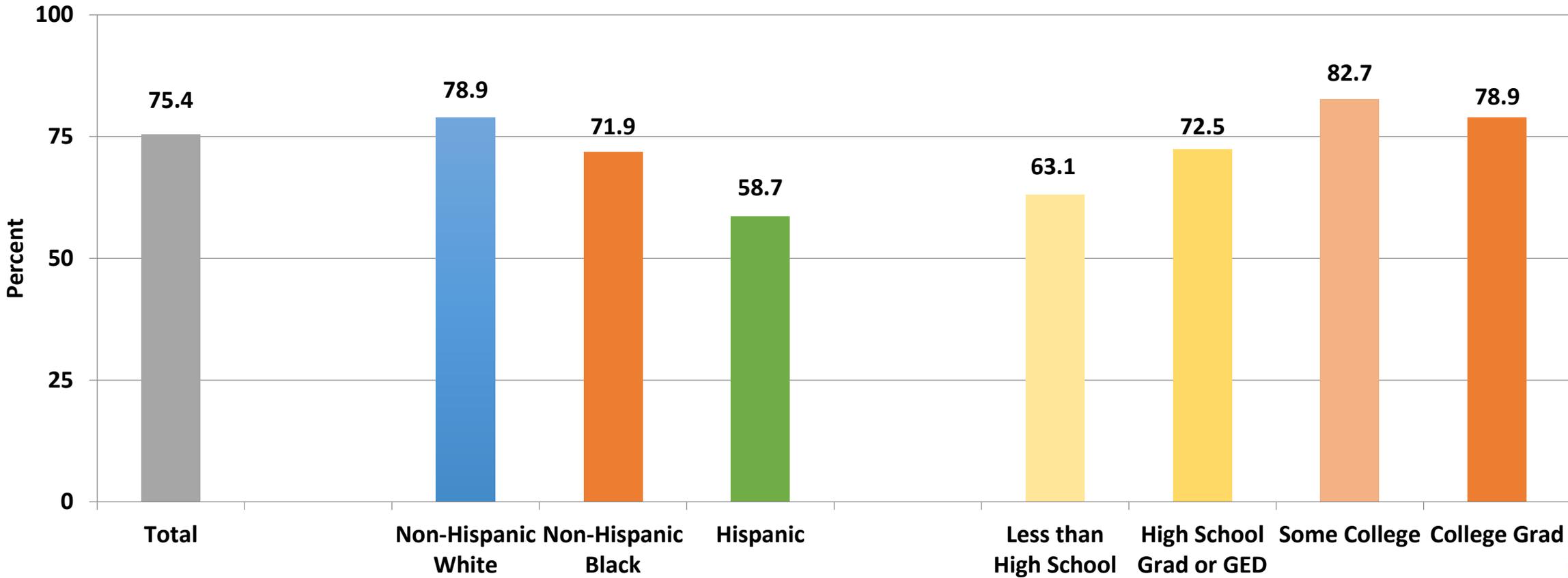
# Premature Mortality Due to Stroke, Years of Potential Life Lost Under Age 75, by Town, Connecticut, 2009-2013



# Percent of Adults Ever Told By a Provider That They Had Diabetes, by Income, Connecticut, 2014



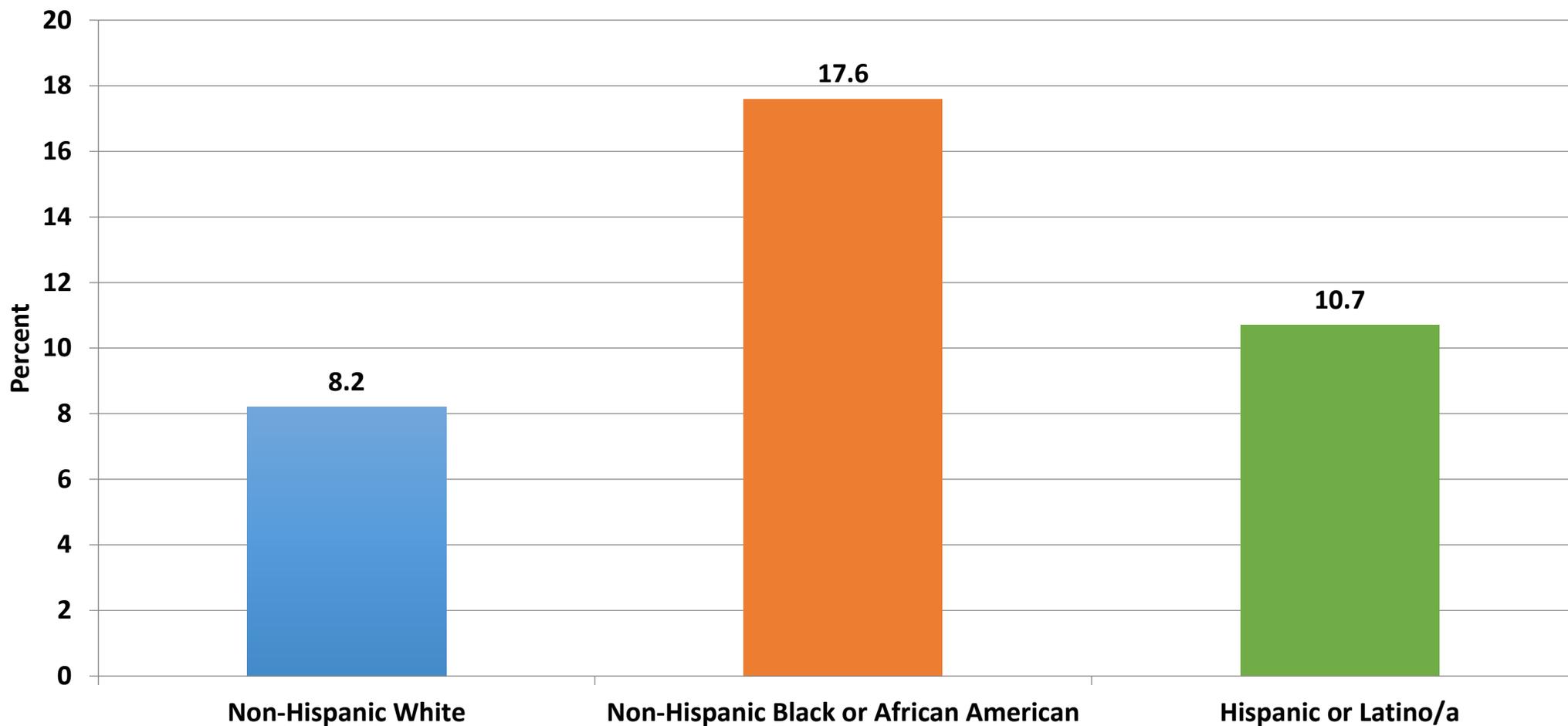
# Percent of Adults with Diabetes Who Had at Least 2 A1C Tests in the Past Year, Connecticut, 2012-2014



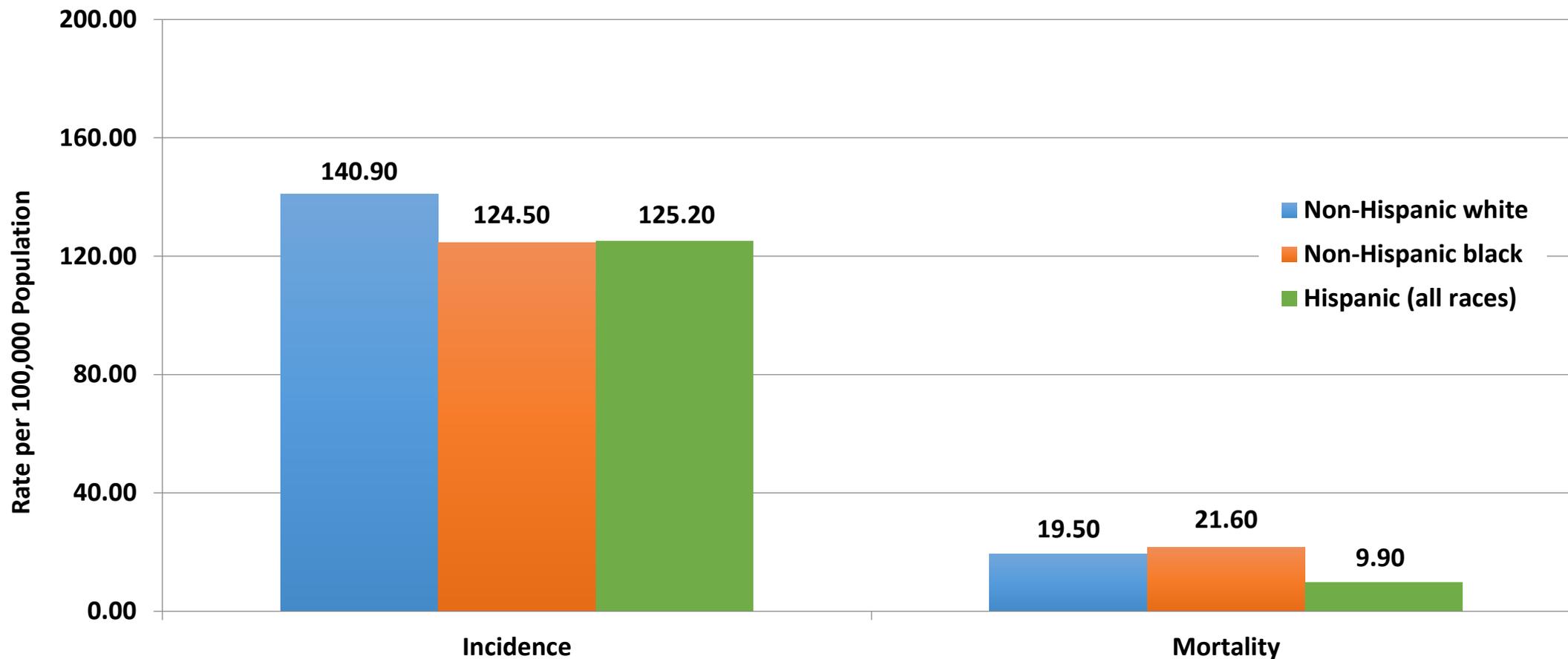
Data Source: BRFSS, 2012-2014



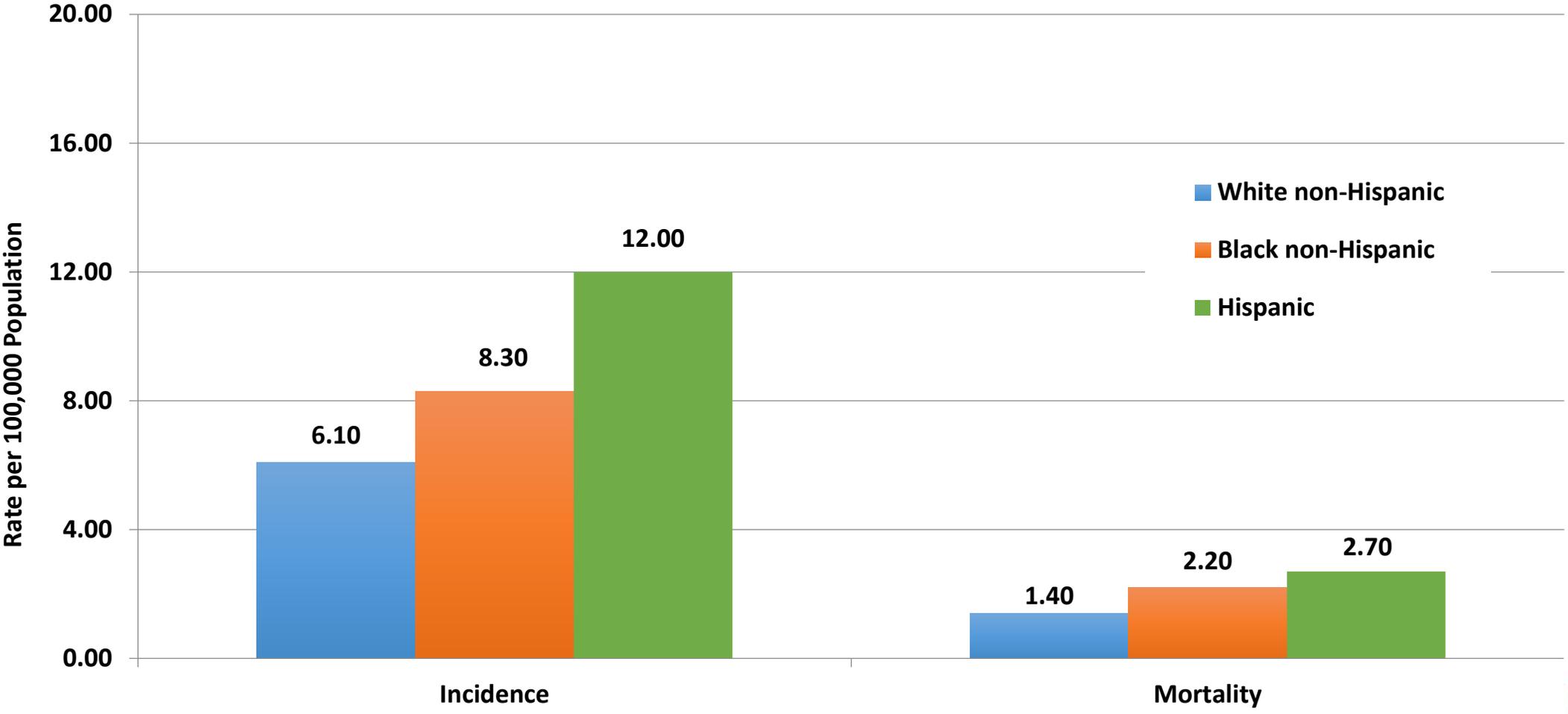
# Percent of Adults Ever Told by a Provider That They Have Diabetes, by Race and Ethnicity, Connecticut, 2014



# Female Breast Cancer Incidence and Mortality Rate, by Race and Ethnicity, Connecticut, 2011-2013



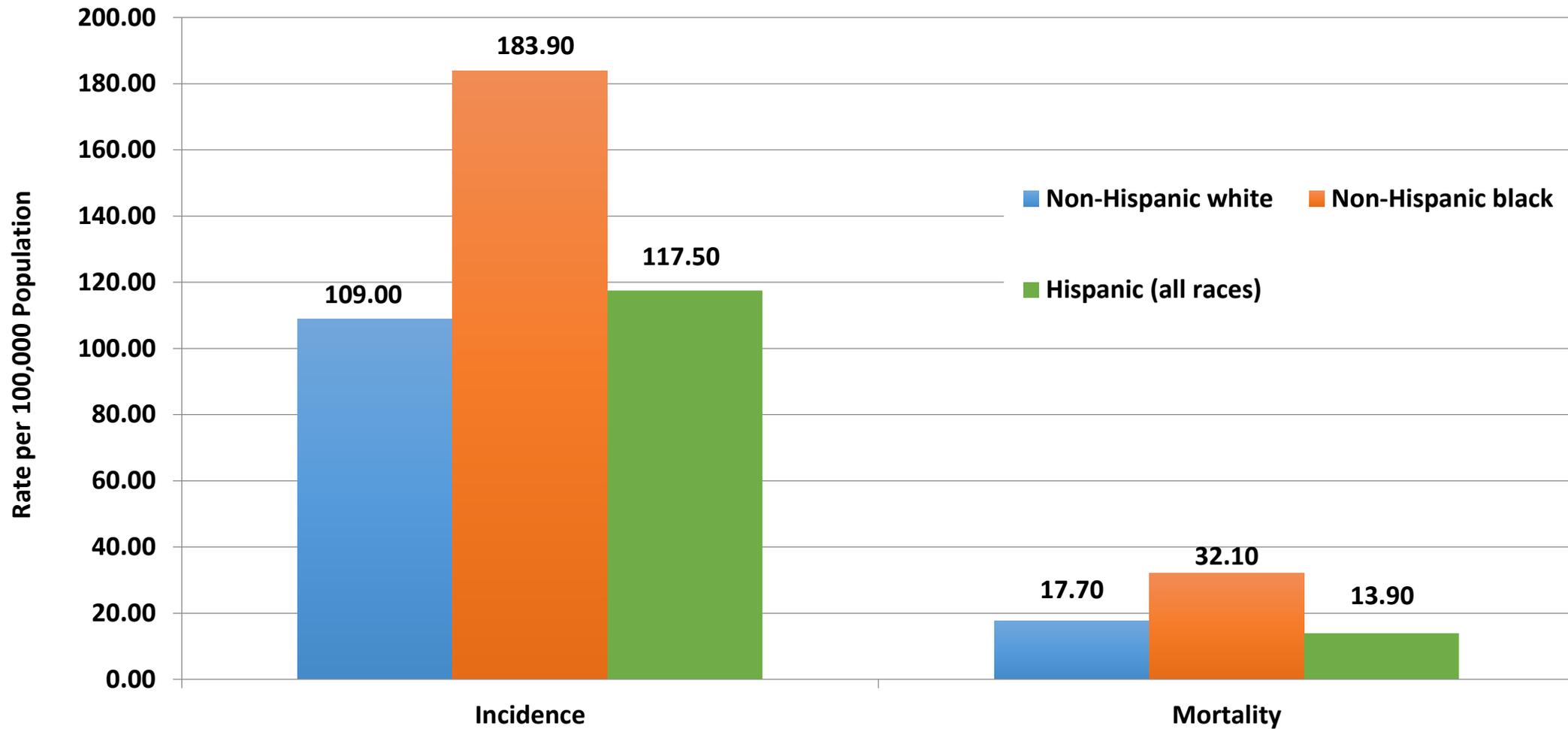
# Cervical Cancer Incidence and Mortality, by Race and Ethnicity, Connecticut, 2011-2013



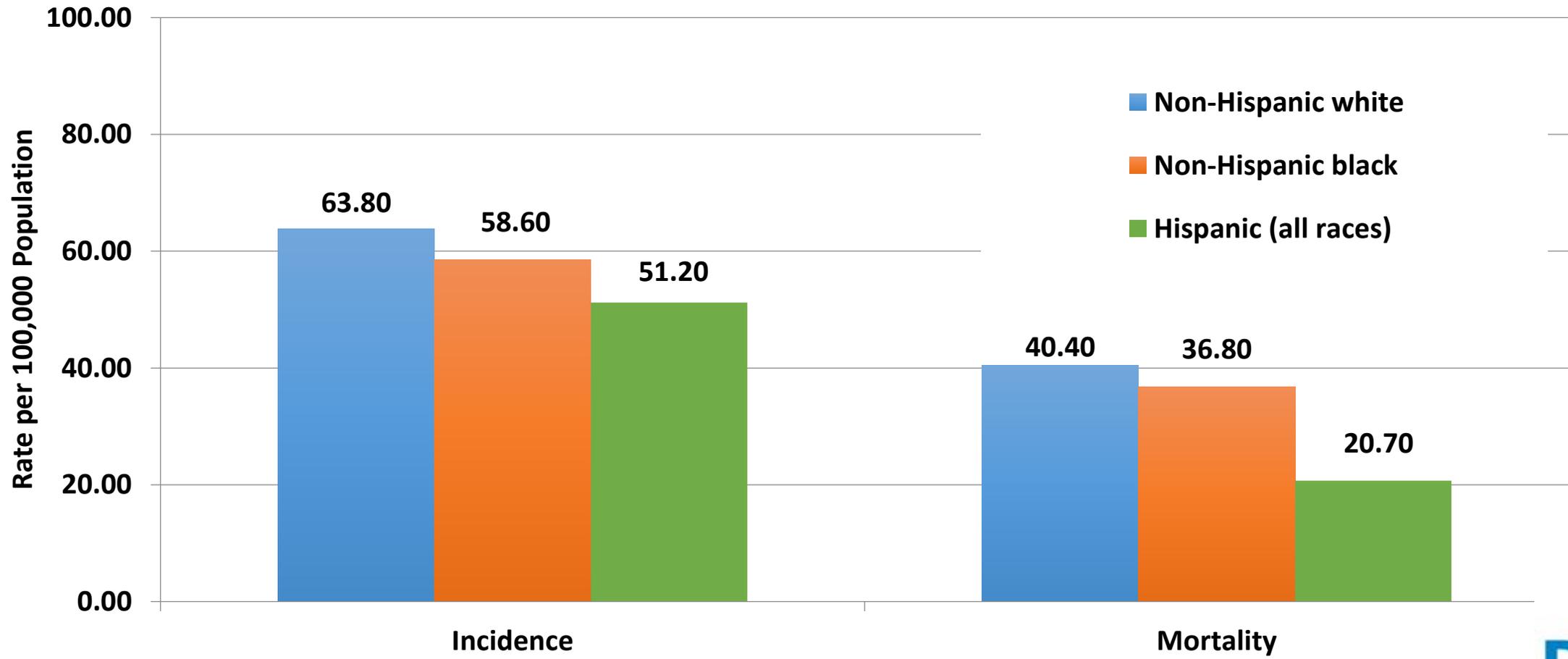
Data Source: Connecticut Tumor Registry, CT DPH



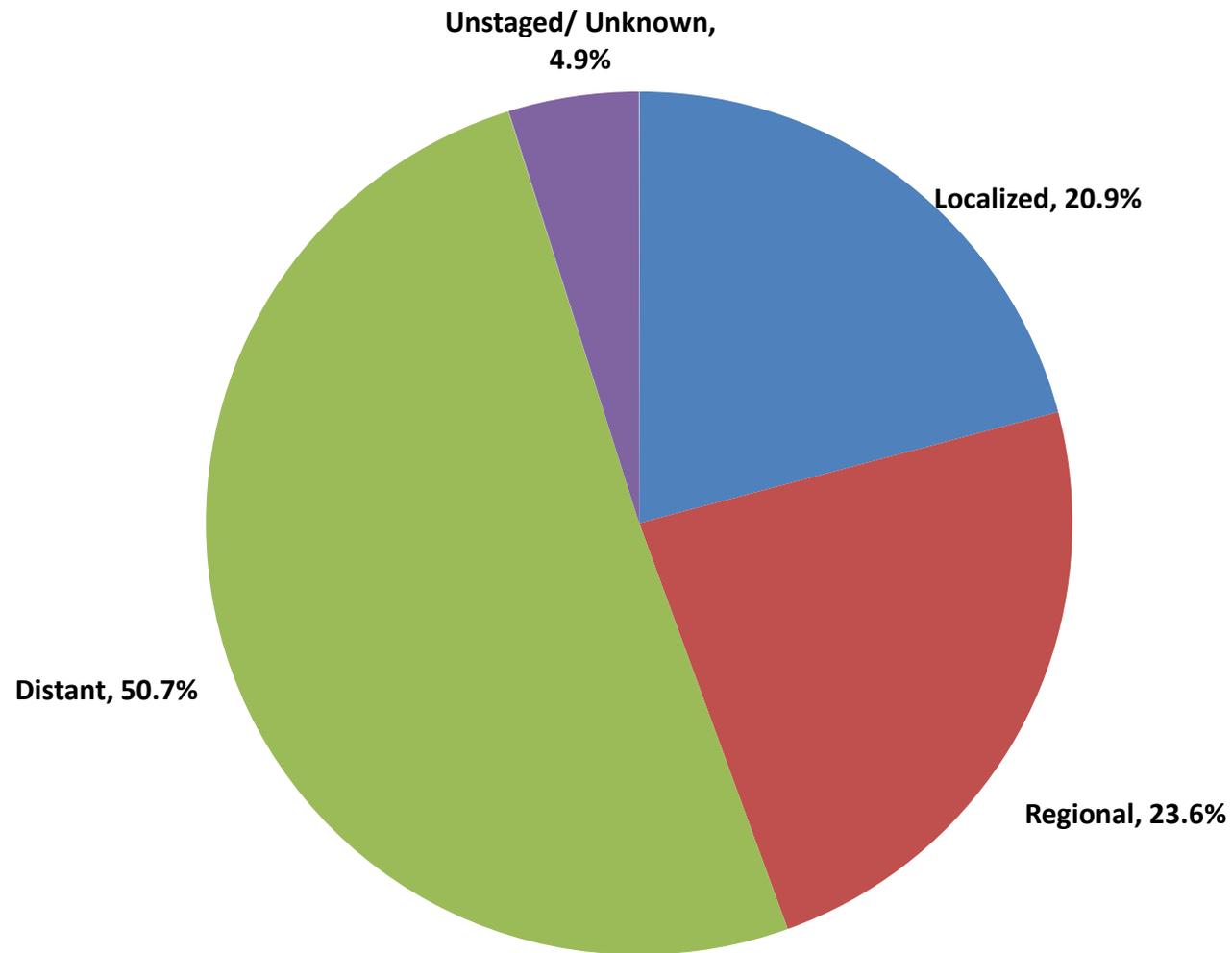
# Prostate Cancer Incidence and Mortality, by Race and Ethnicity, Connecticut, 2008-2010



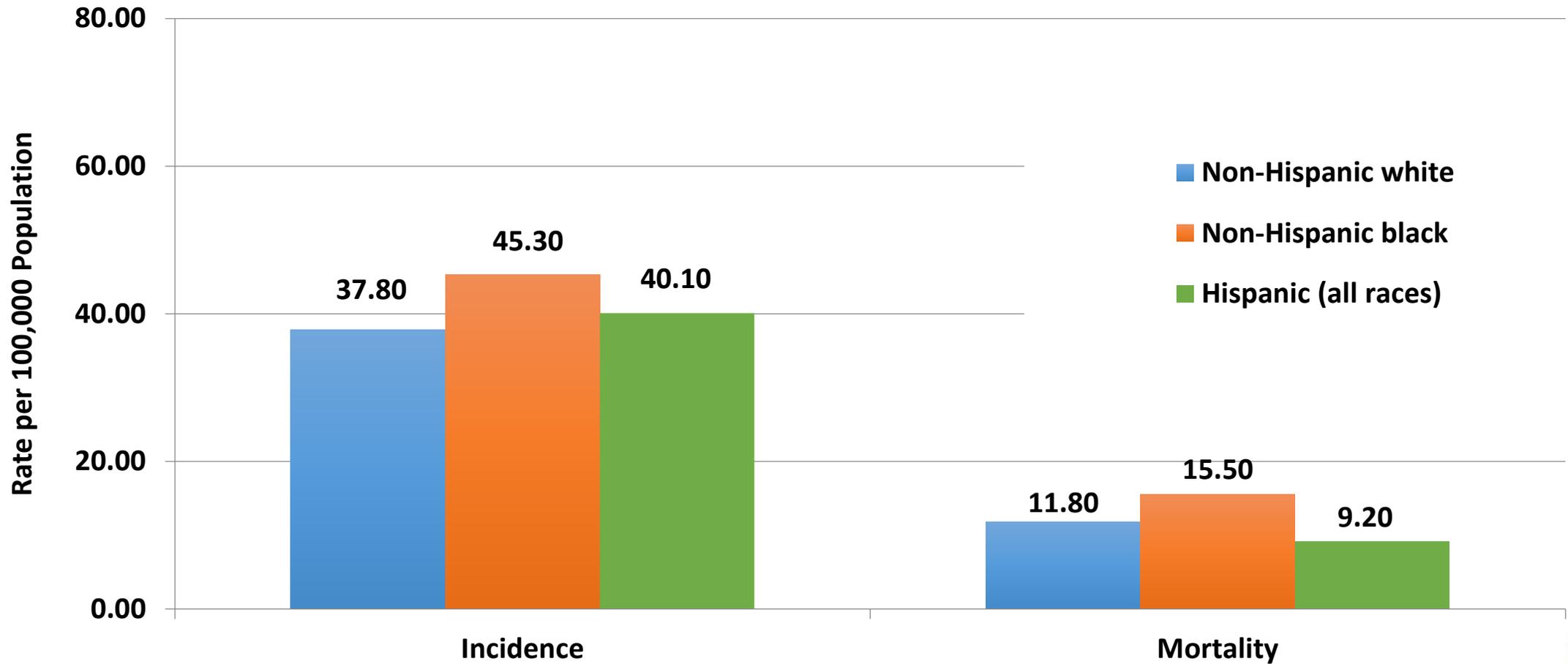
# Lung Cancer Incidence and Mortality, by Race and Ethnicity, Connecticut, 2011-2013



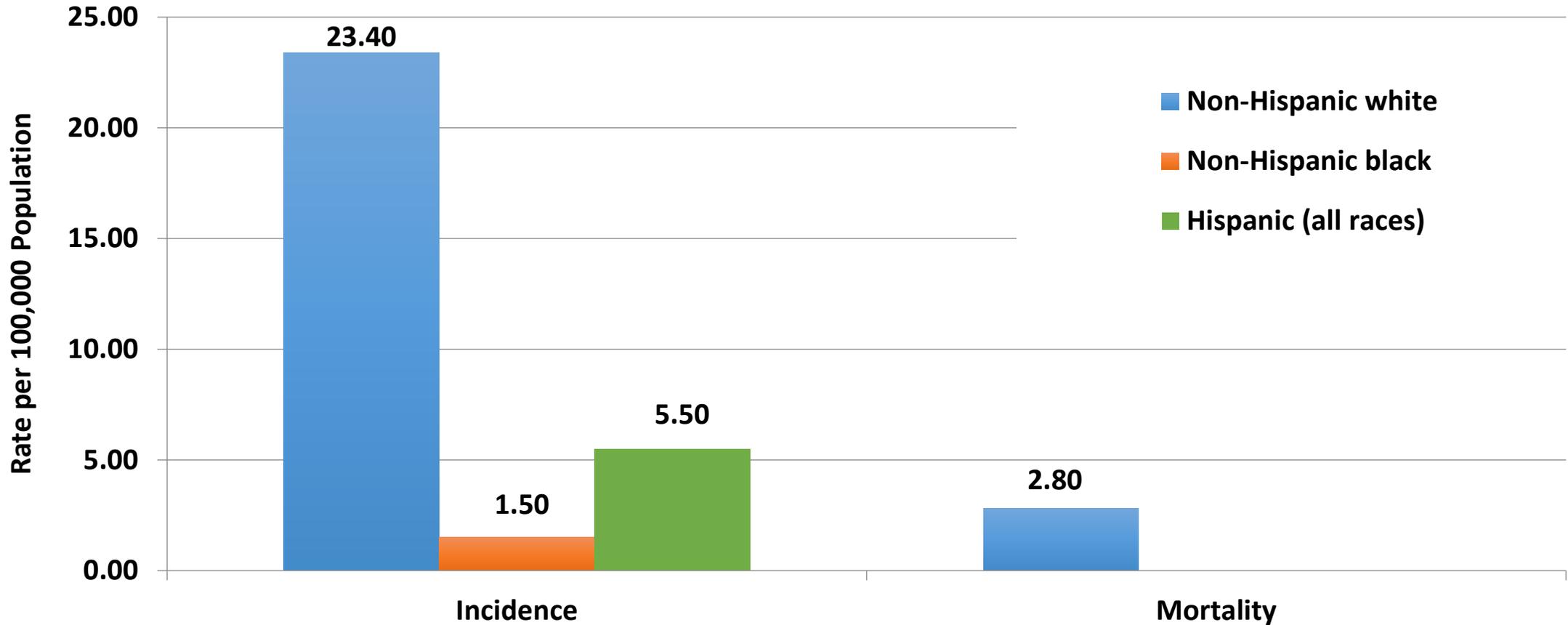
# Stage of Lung Cancer Diagnosis, Connecticut, 2008-2012



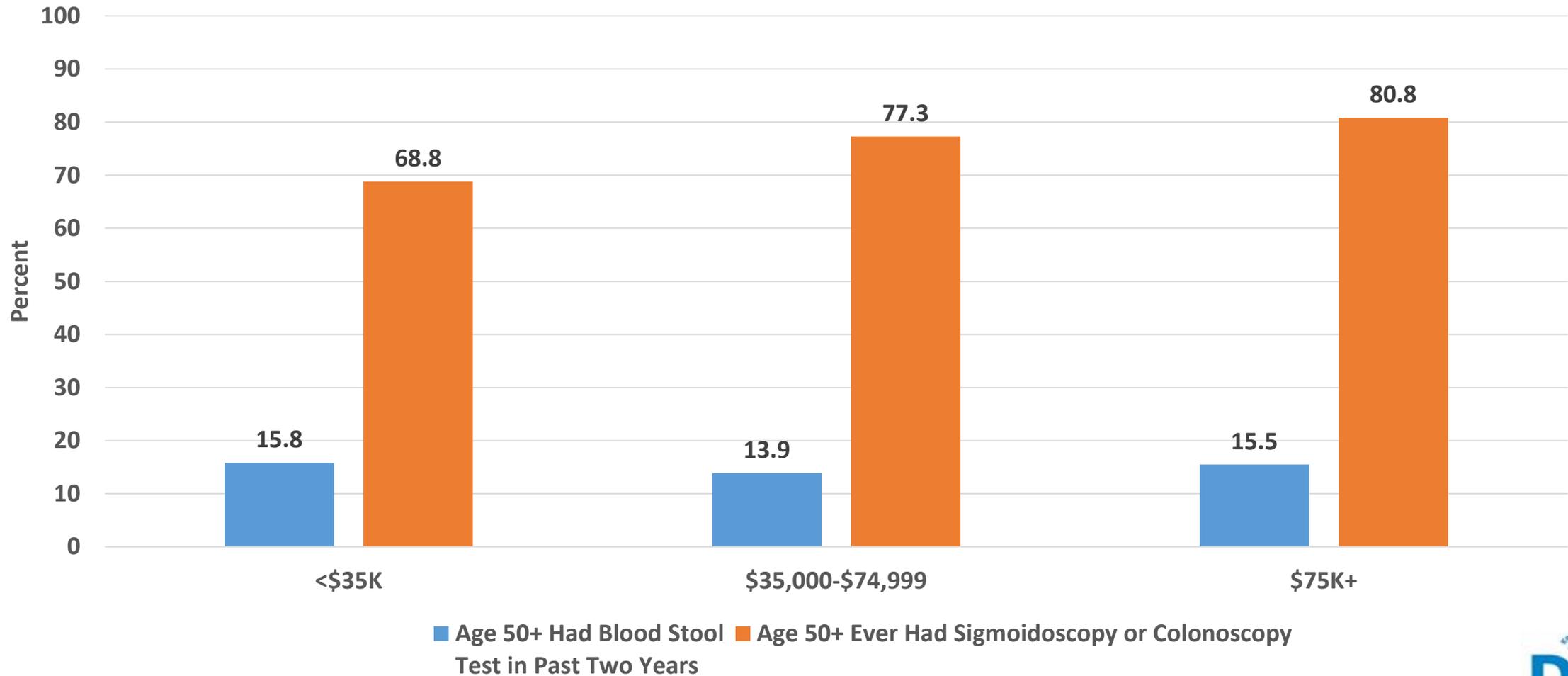
# Colorectal Cancer Incidence and Mortality, by Race and Ethnicity, Connecticut, 2008-2010



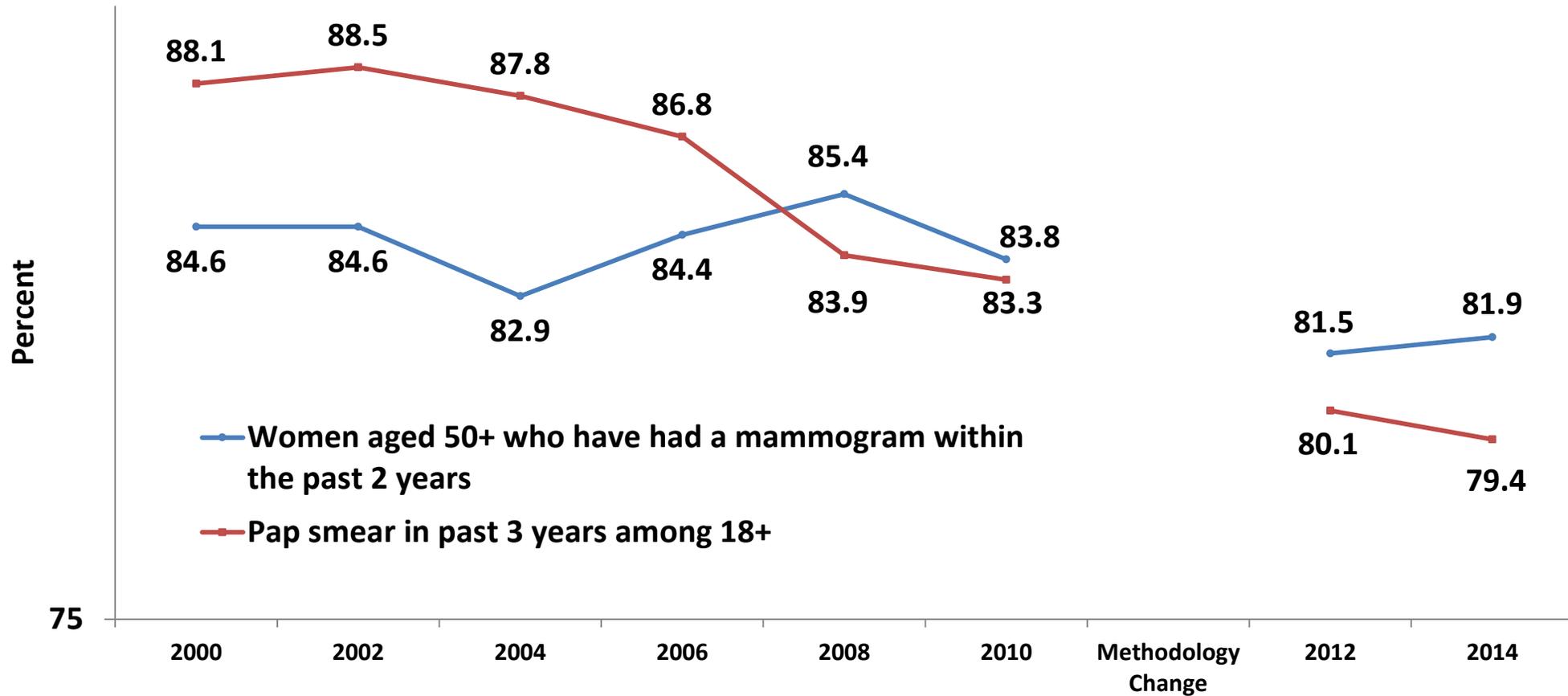
# Melanoma Incidence and Mortality, by Race and Ethnicity, Connecticut, 2008-2010



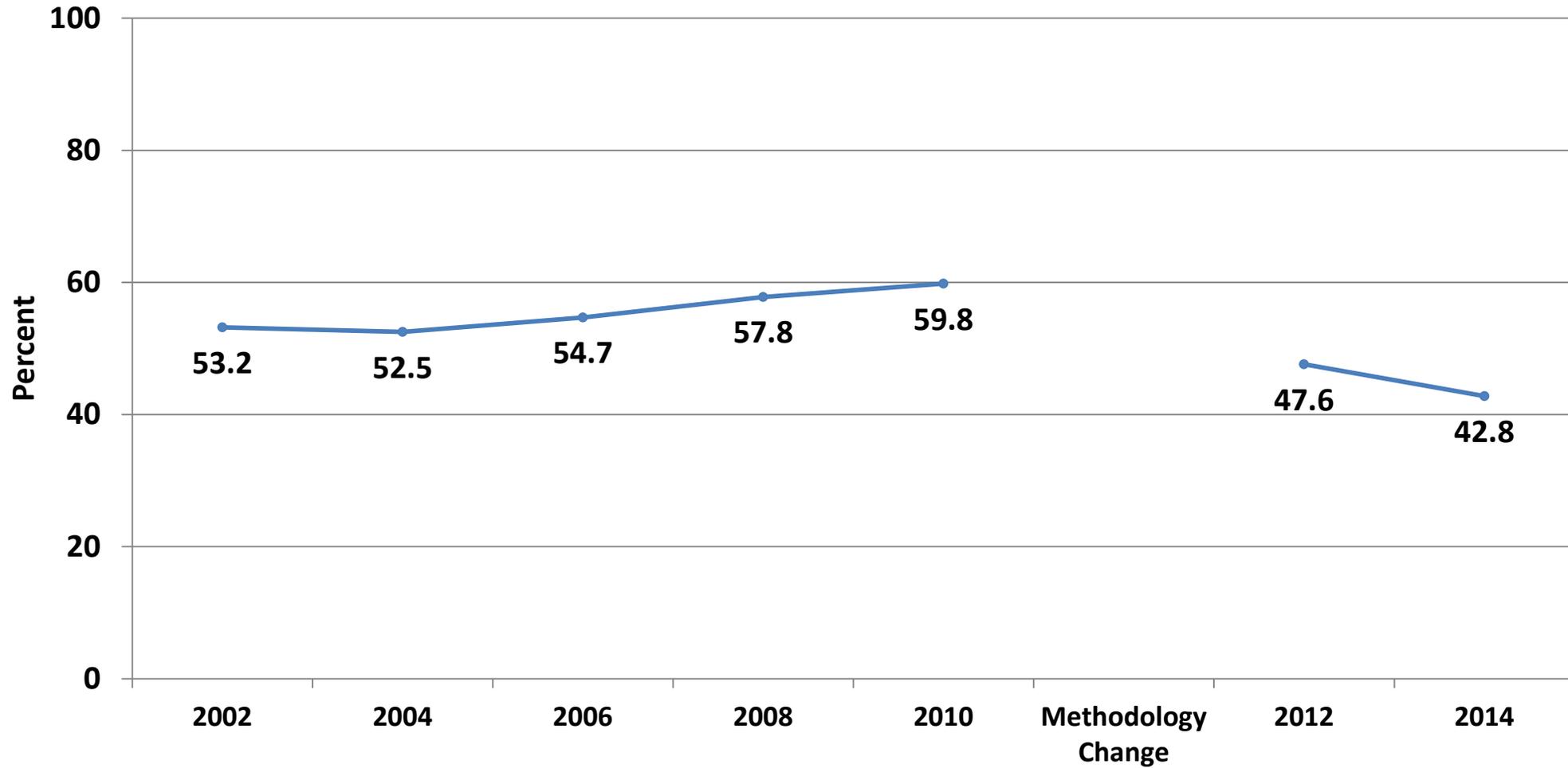
# Percent of Adults Aged 50+ Screened for Colorectal Cancer, by Income, Connecticut, 2014



# Female Cancer Screening Behaviors, Connecticut, 2000-2014



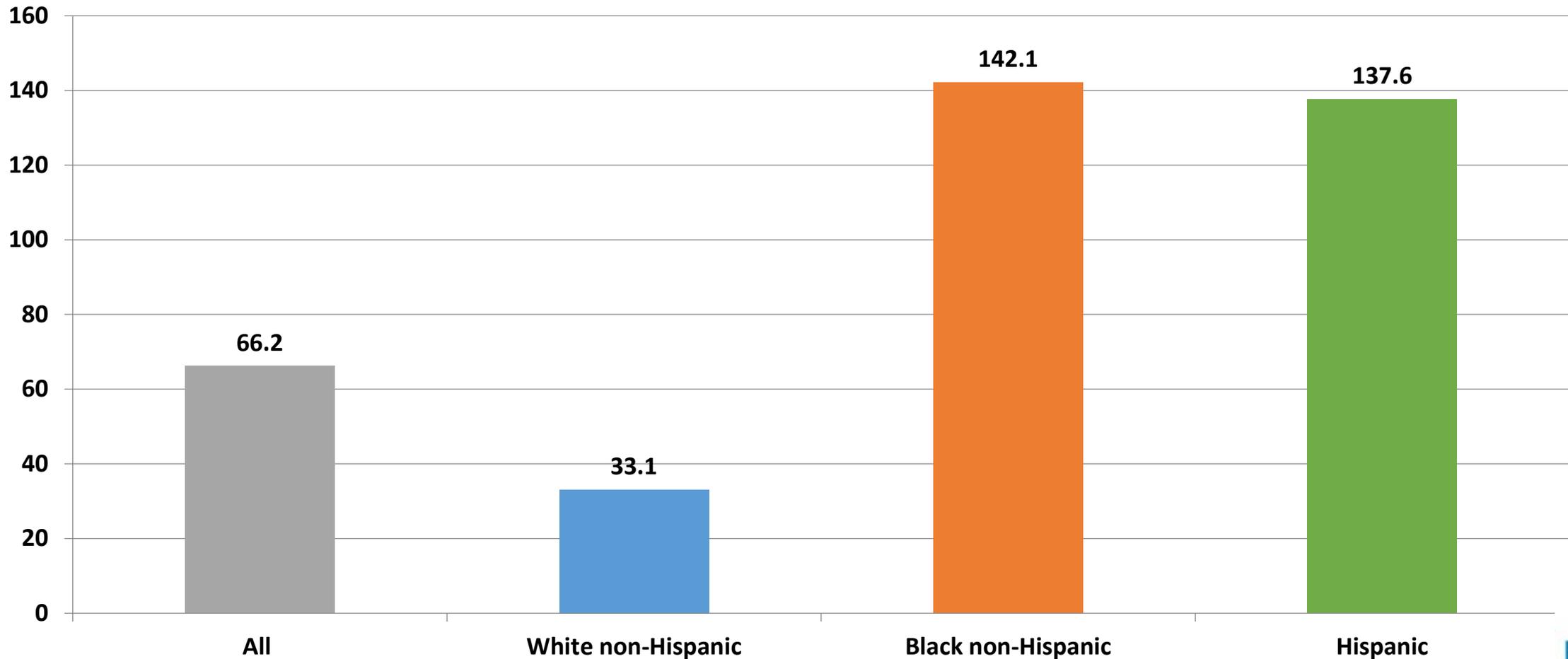
# Male Cancer Screening Behaviors, Connecticut, 2002-2014



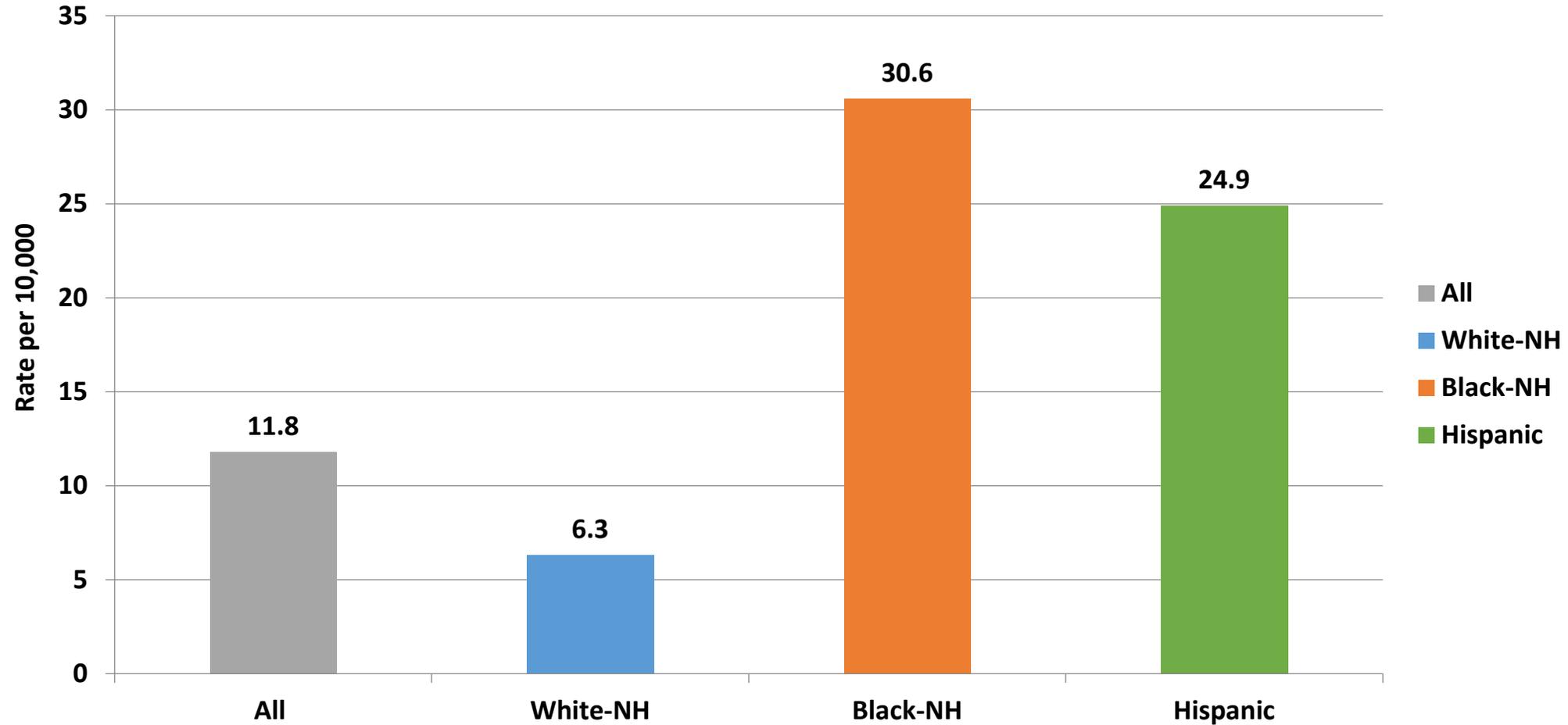
Data Source: BRFSS 2014 ([www.cdc.gov/brfss](http://www.cdc.gov/brfss))



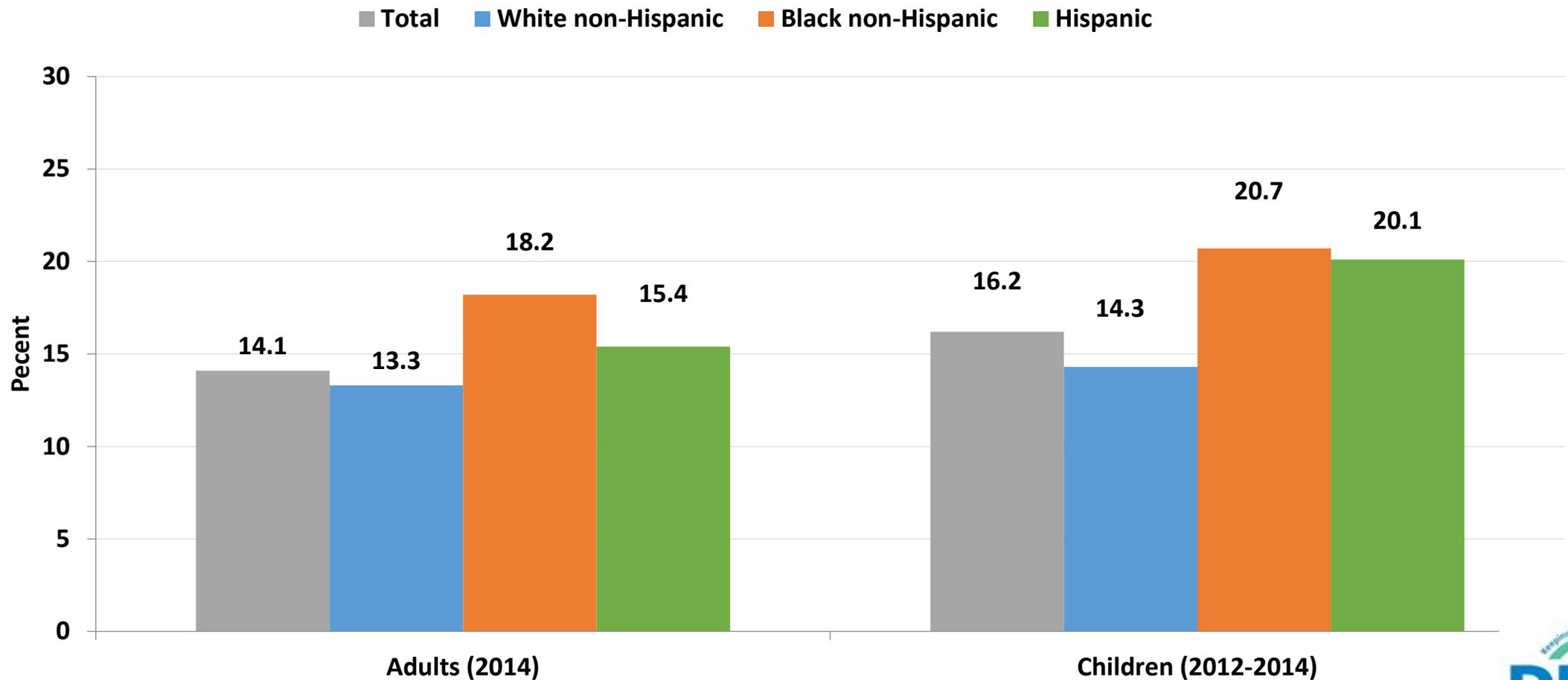
# Rate of Asthma ED Visits, by Race and Ethnicity, Connecticut, 2014



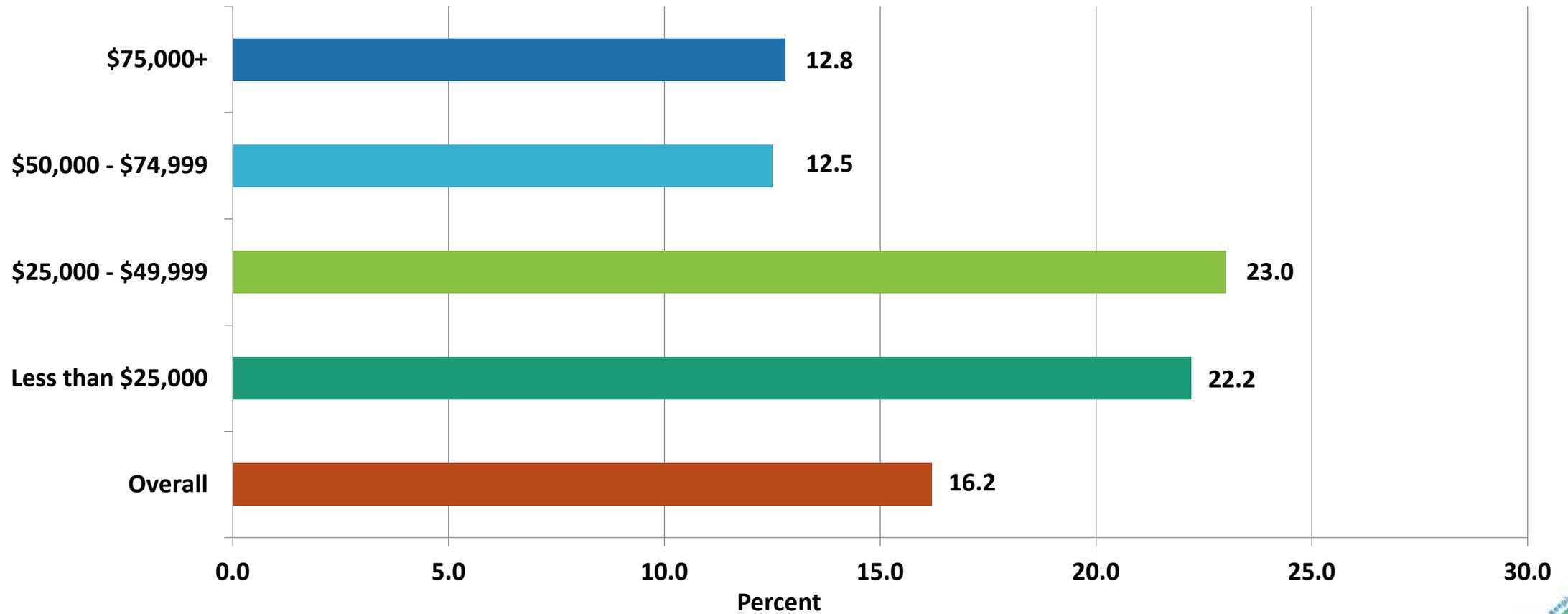
# Rate of Asthma Hospitalizations, by Race and Ethnicity, Connecticut, 2014



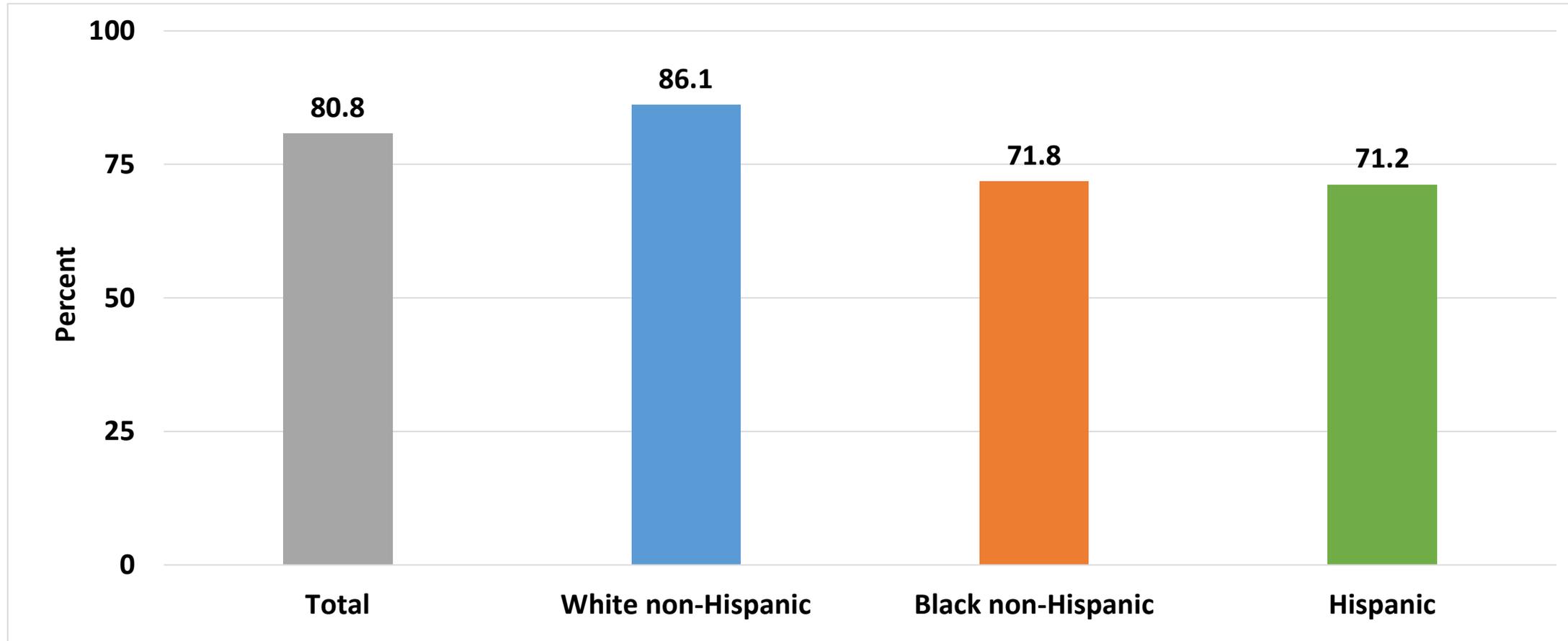
# Percent of Children and Adults Ever Told They Have Asthma, by Race and Ethnicity, Connecticut, 2012-2014



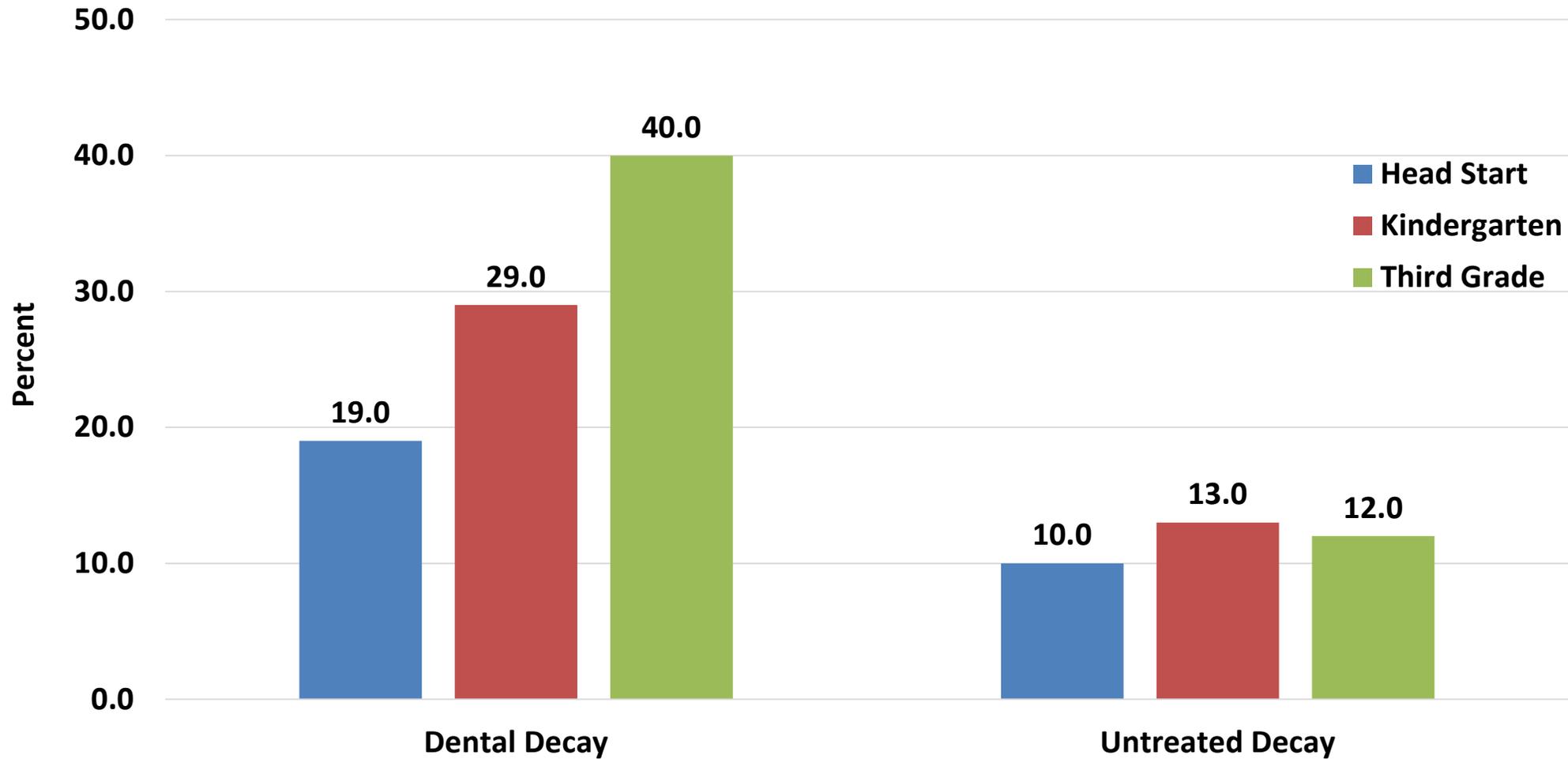
# Percent of Children Ever Told They Have Asthma, by Income, Connecticut, 2012-2014



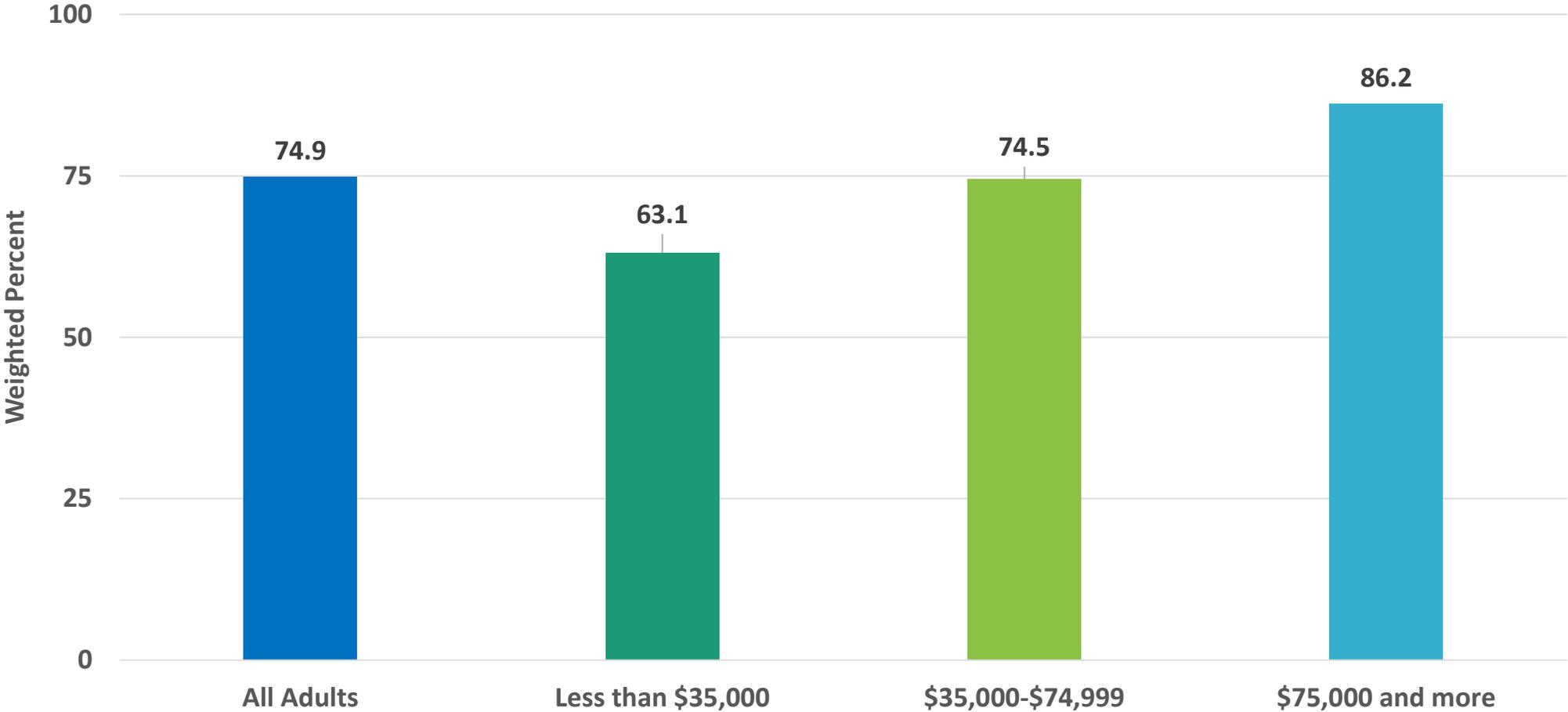
# Percent of High School Students Who Saw a Dentist in the Past 12 Months, by Race and Ethnicity, Connecticut, 2015



# Dental Decay and Untreated Decay, by Grade, Connecticut, 2010-2011



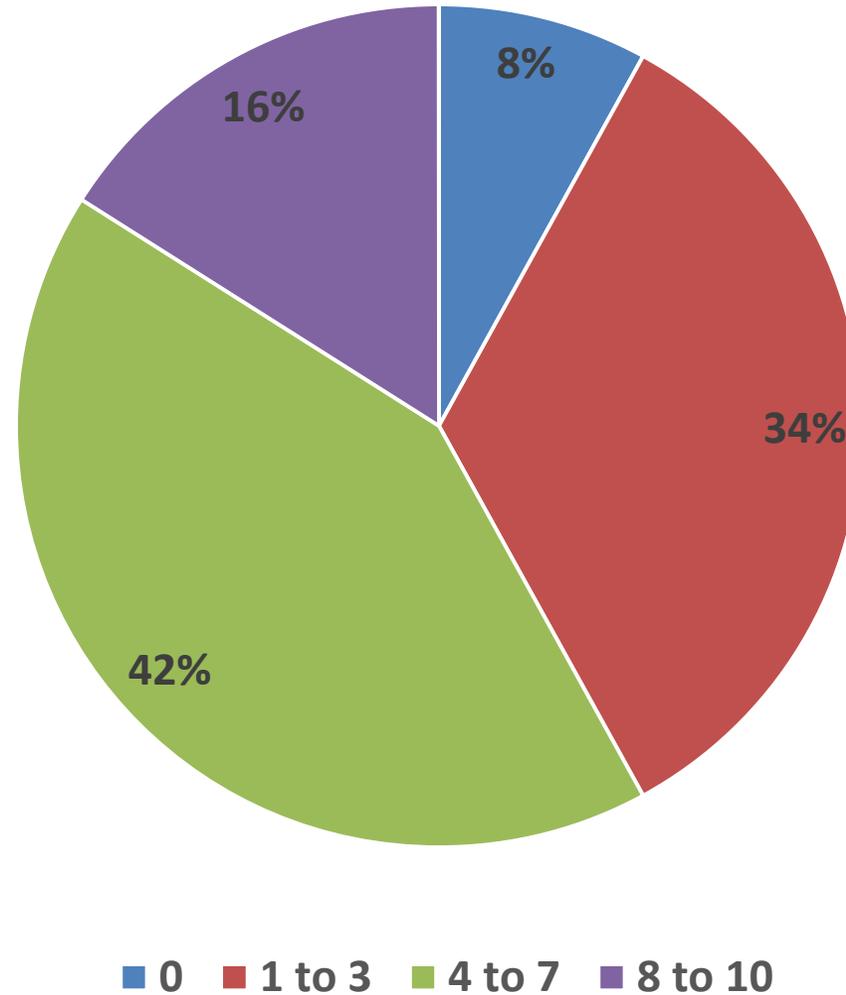
# Adults Who Visited the Dentist or Dental Clinic in the Past Year for any Reason, Connecticut, 2014



Data Source: CT DPH, [http://www.ct.gov/dph/lib/dph/hisr/pdf/brfss2014\\_ct\\_report.pdf](http://www.ct.gov/dph/lib/dph/hisr/pdf/brfss2014_ct_report.pdf), 2016

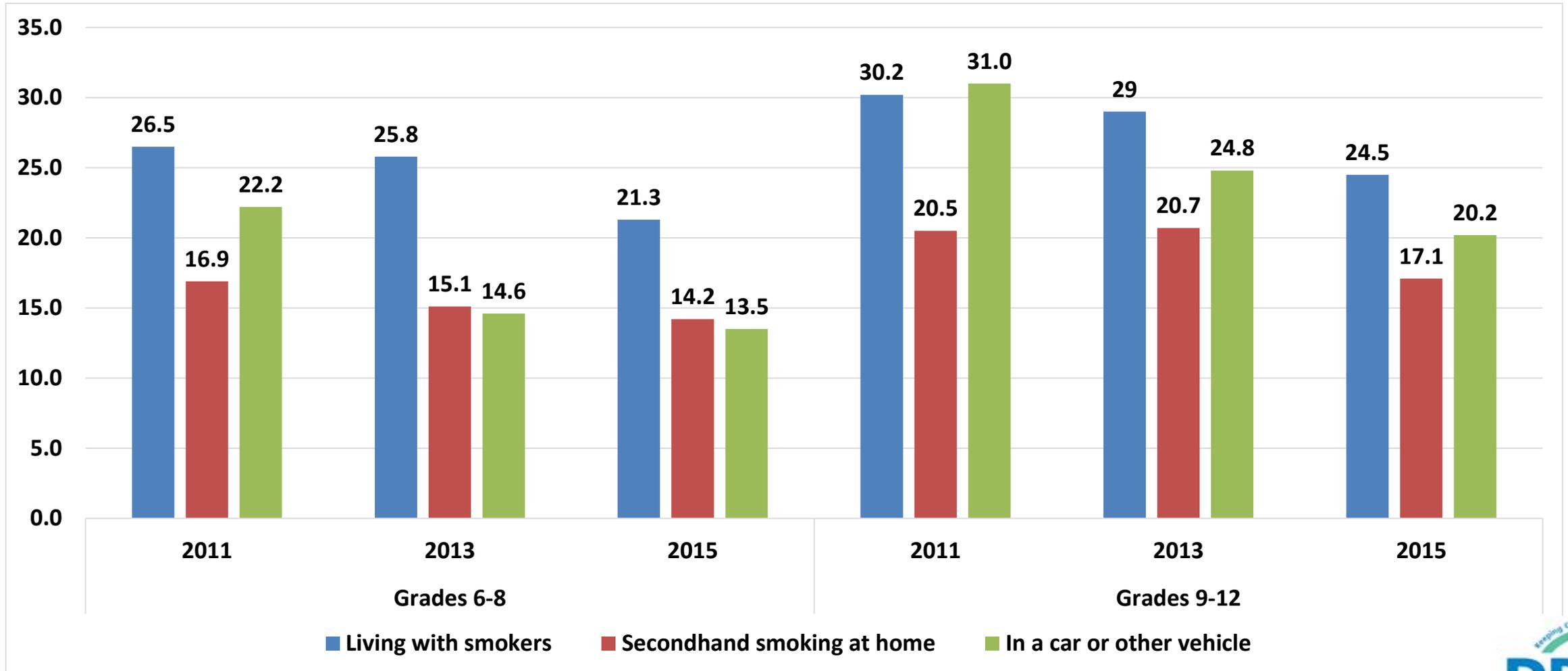


# Arthritis Pain Level, 0 to 10, Connecticut, 2013

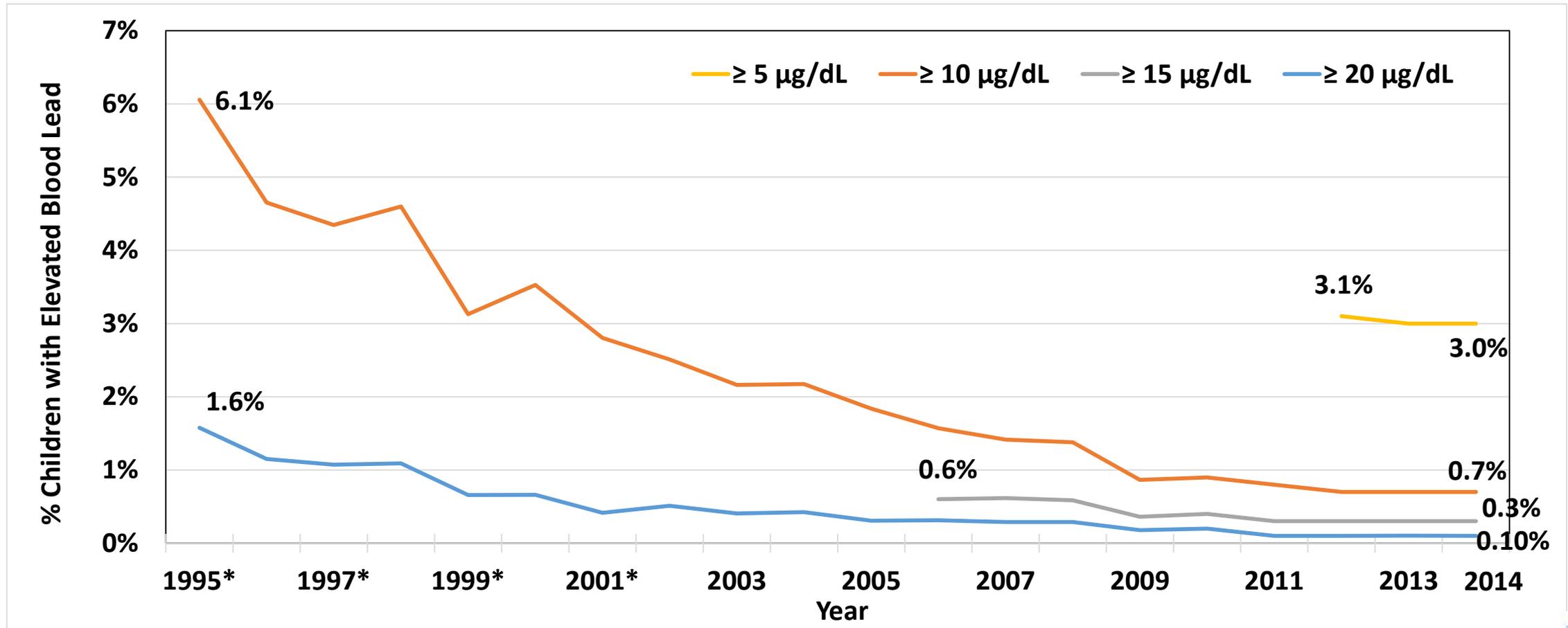


# ENVIRONMENTAL DETERMINANTS OF HEALTH

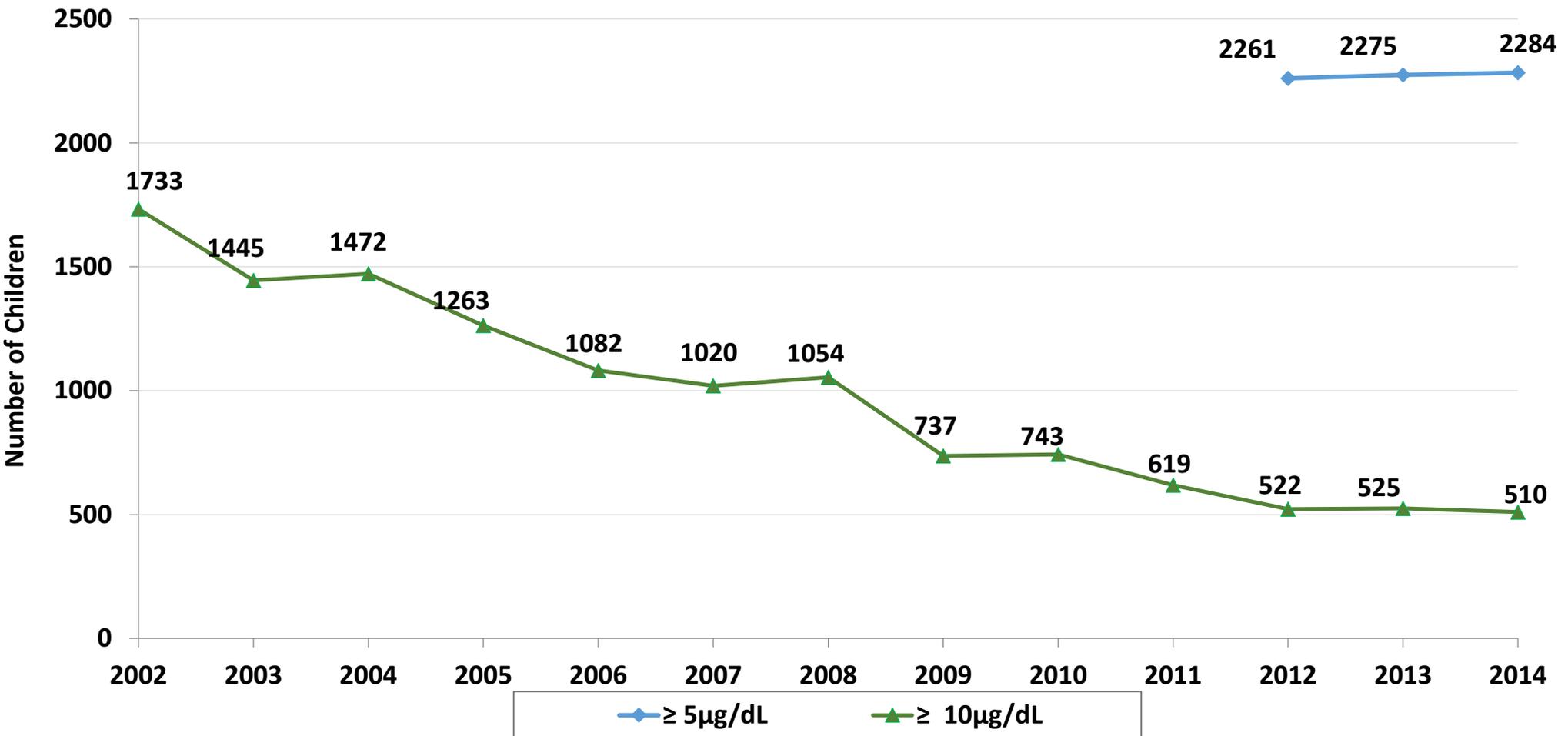
# Secondhand Smoke Exposure Among Connecticut Middle and High School Students, Connecticut, 2011-2015



# Prevalence of Children <6 Years of Age With Blood Lead Levels $\geq 5\mu\text{g}/\text{dL}$ , Connecticut, 1995-2014



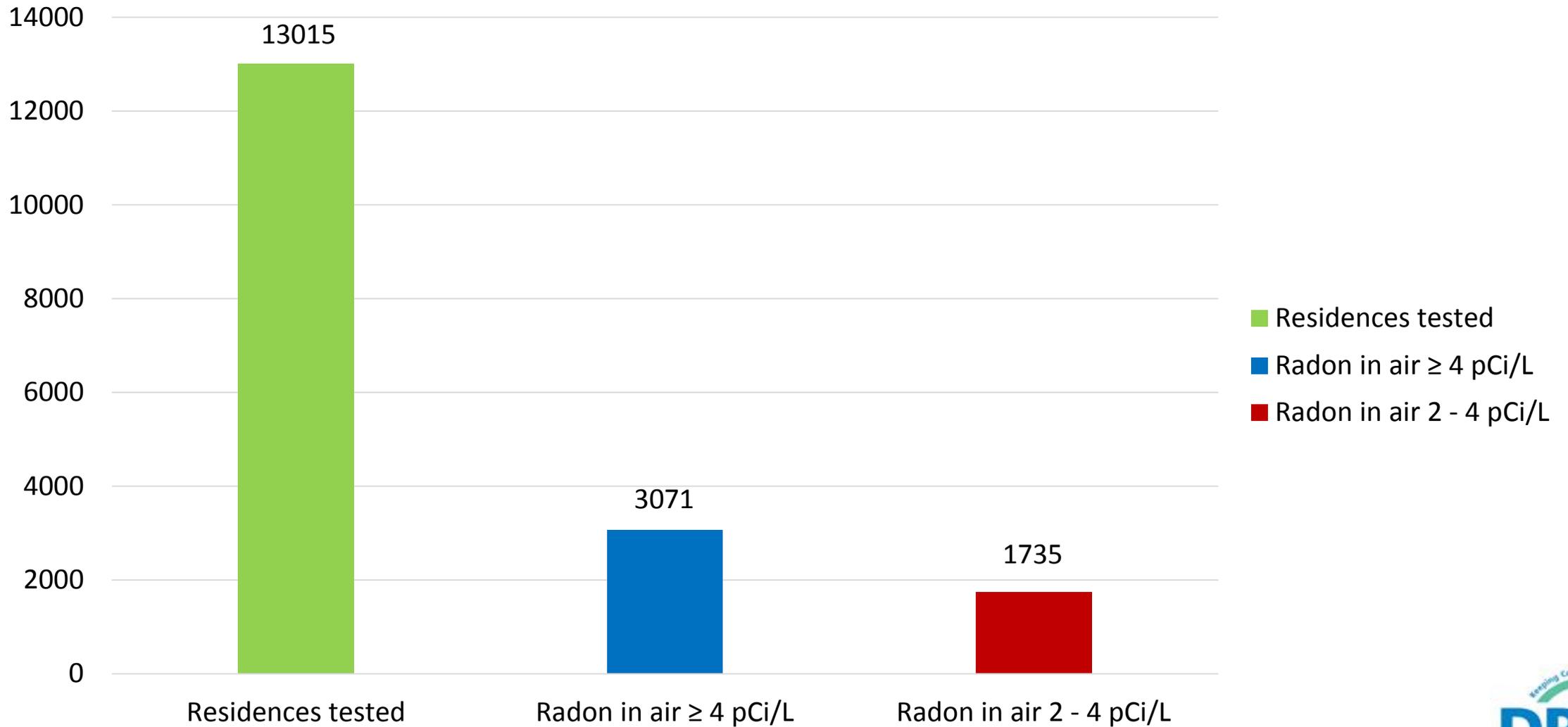
# Number of Children Under 6 Years of Age With Lead Poisoning, Connecticut, 2002-2014



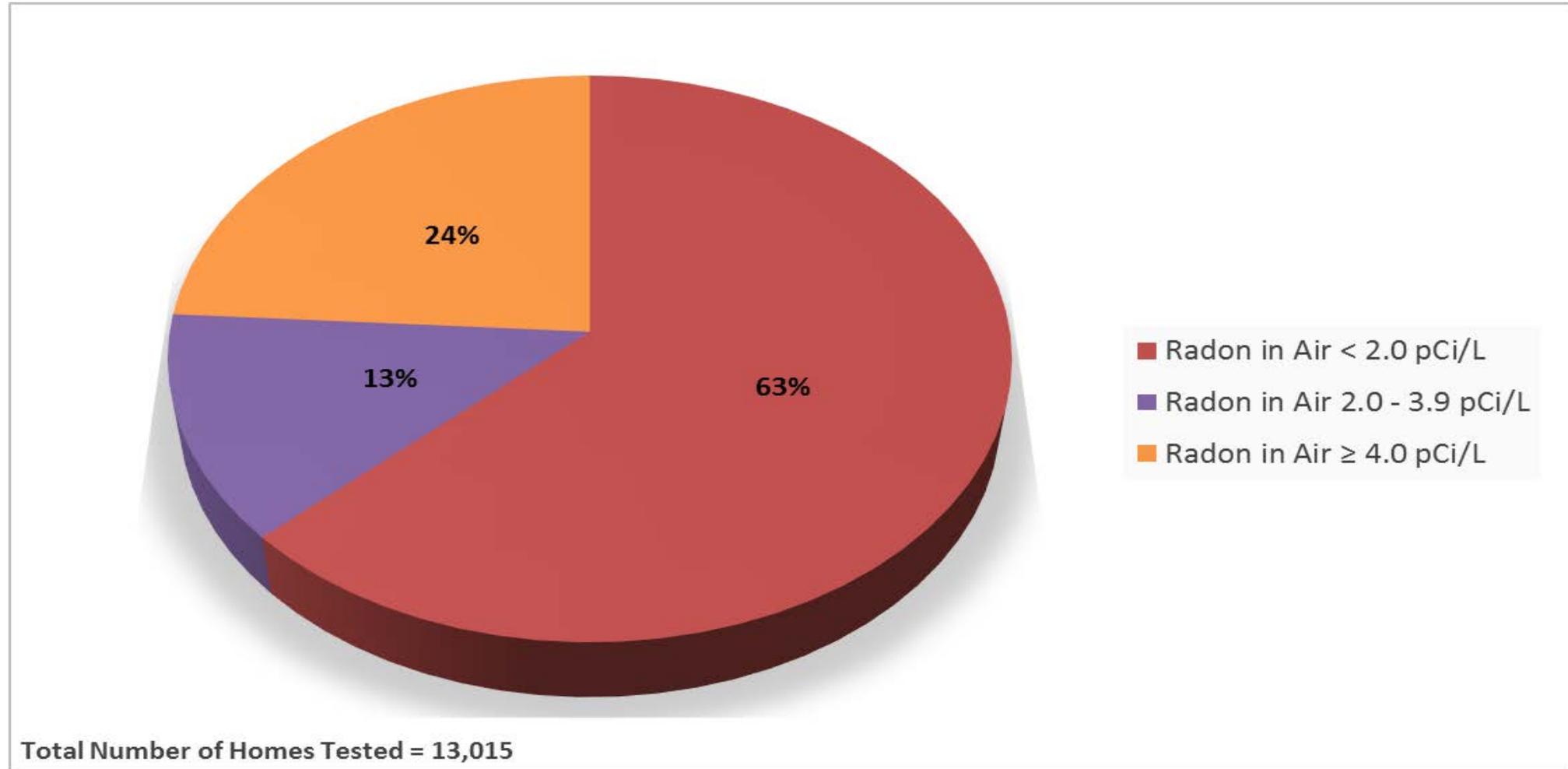
Data Source: Connecticut DPH Lead Surveillance System, 2016



# Residential Radon Air Levels, Connecticut, 1998-2016

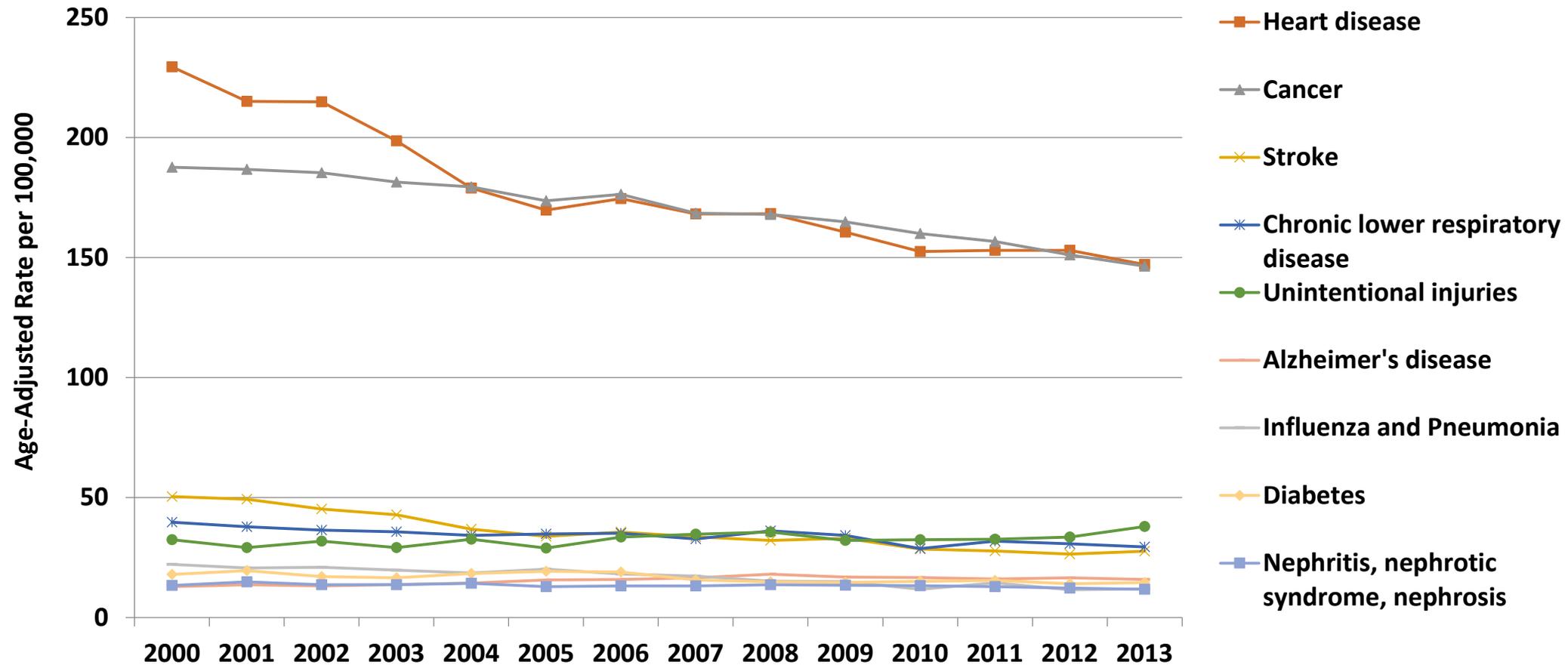


# Residential Radon Air Levels by Percentage of Homes Tested, Connecticut, 1998-2016

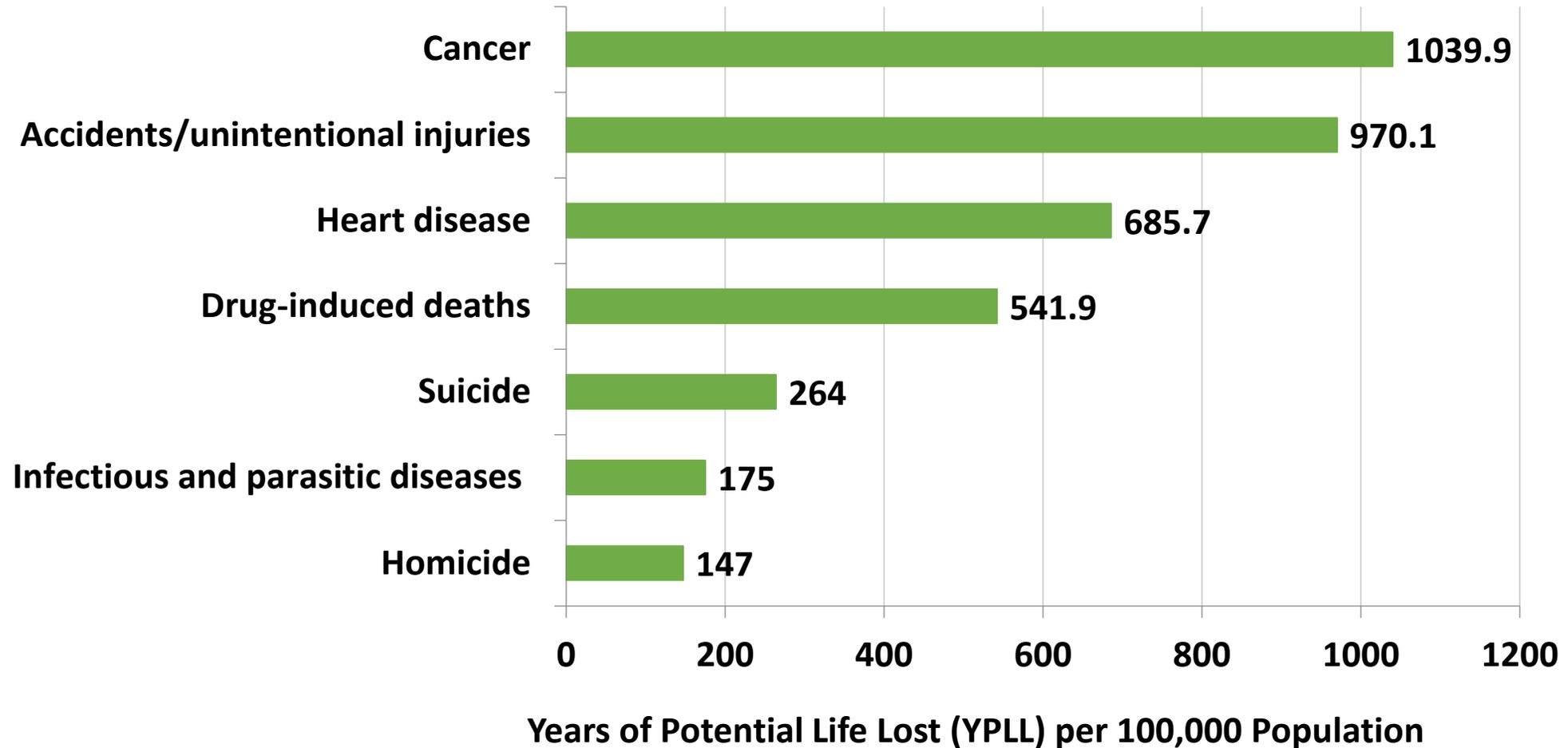


# MORTALITY AND HOSPITALIZATION

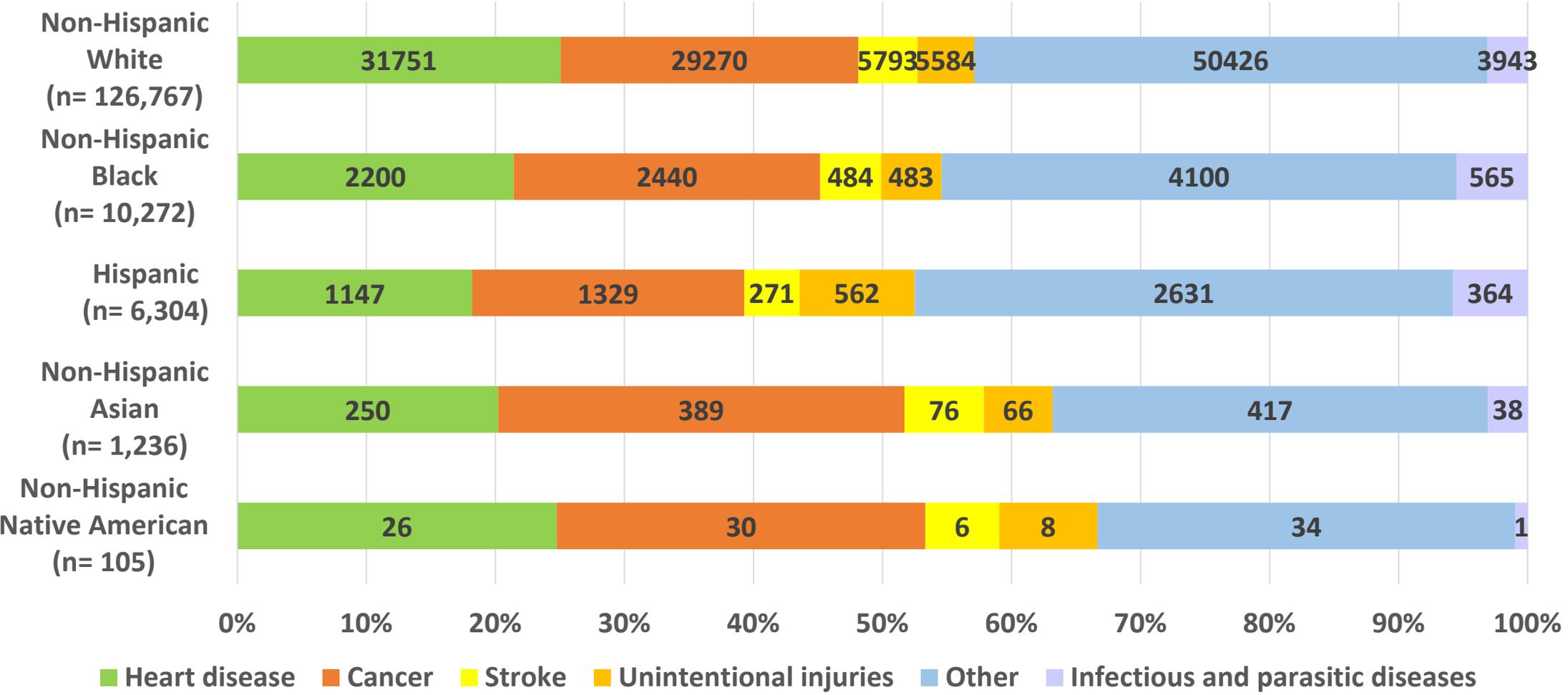
# Age-adjusted Mortality Rate For Leading Causes Of Death, Connecticut, 2000-2013



# Age Adjusted Leading Causes of Premature Mortality (Years of Potential Life Lost Before 75 Years of Age), Connecticut 2013



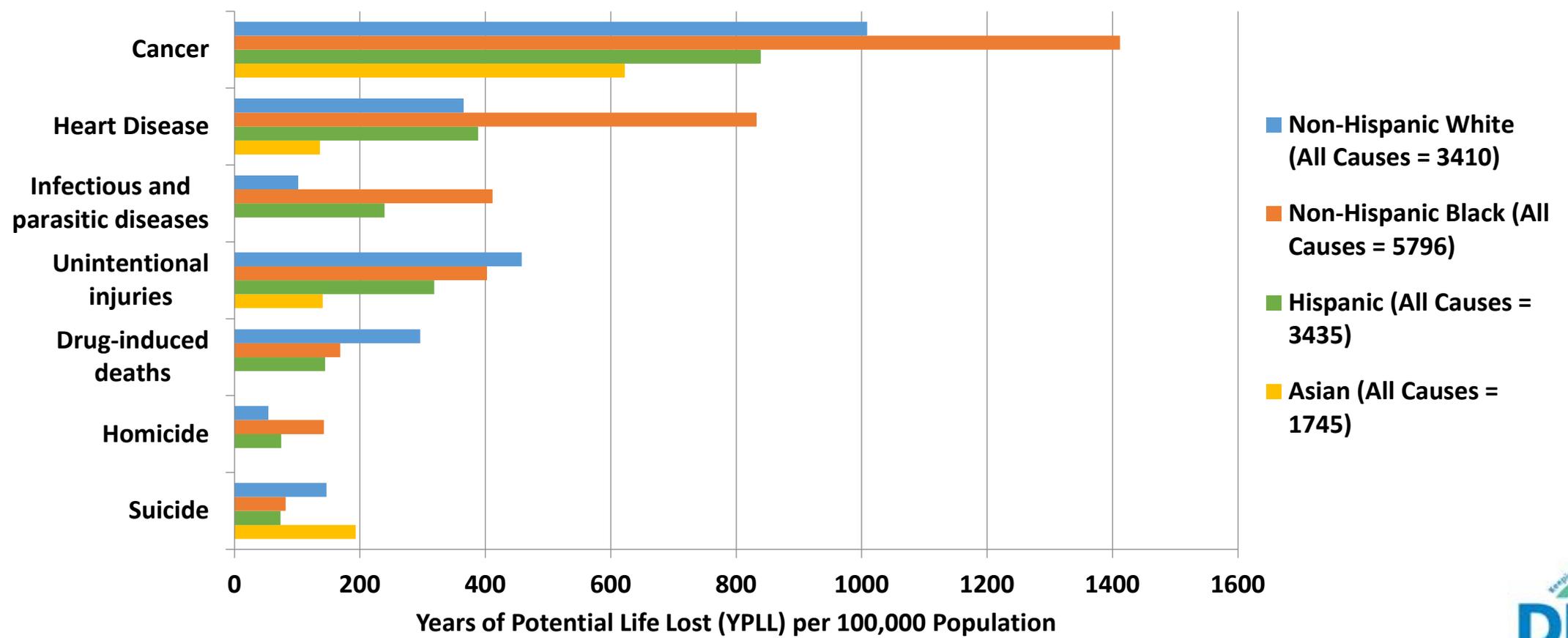
# Number Of Deaths For Leading Causes Of Mortality, by Race And Ethnicity, Connecticut 2009-2013



Data Source: CDPH "AAMR\_State\_RaceEthn\_aggregate\_2009-2013"



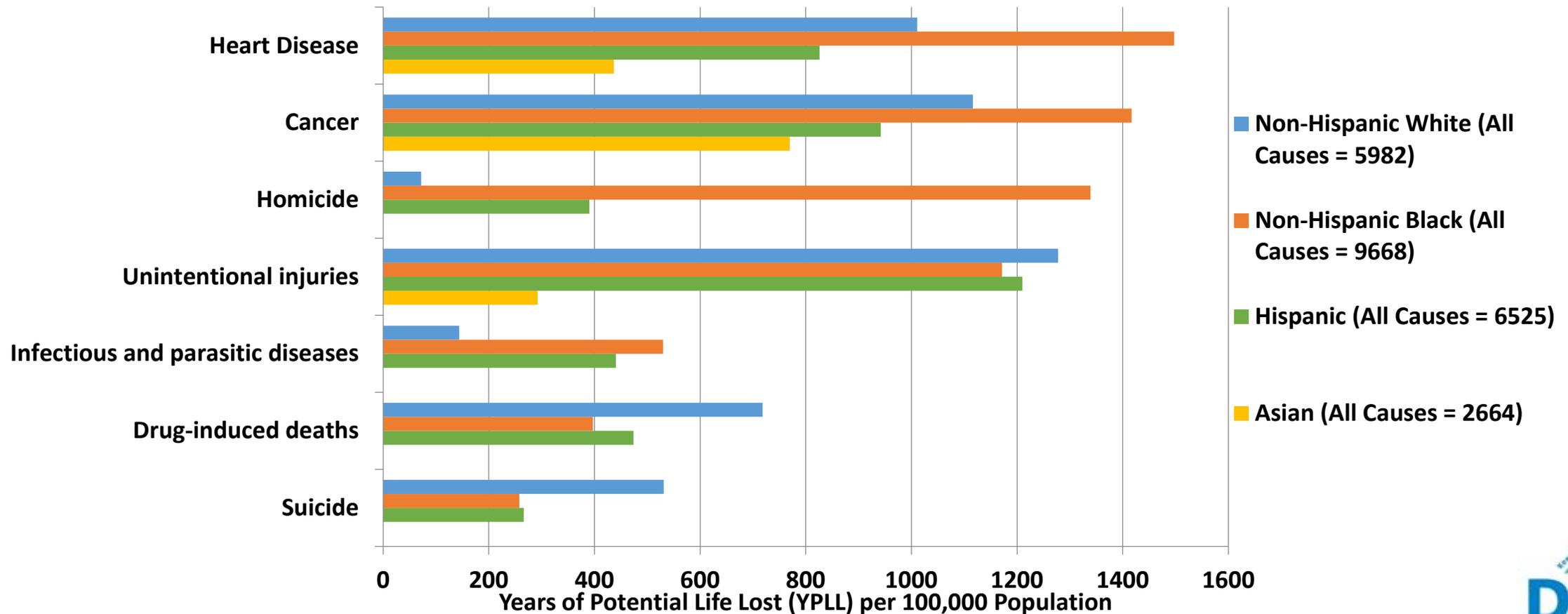
# Age-adjusted Rates For Leading Causes Of Premature Mortality (Years Of Potential Life Lost Before 75 Years Of Age) For Females, Connecticut, 2009-2013



Data source: CDPH Morality Tables, "YPLLreport\_RaceEthn\_2009-2013"

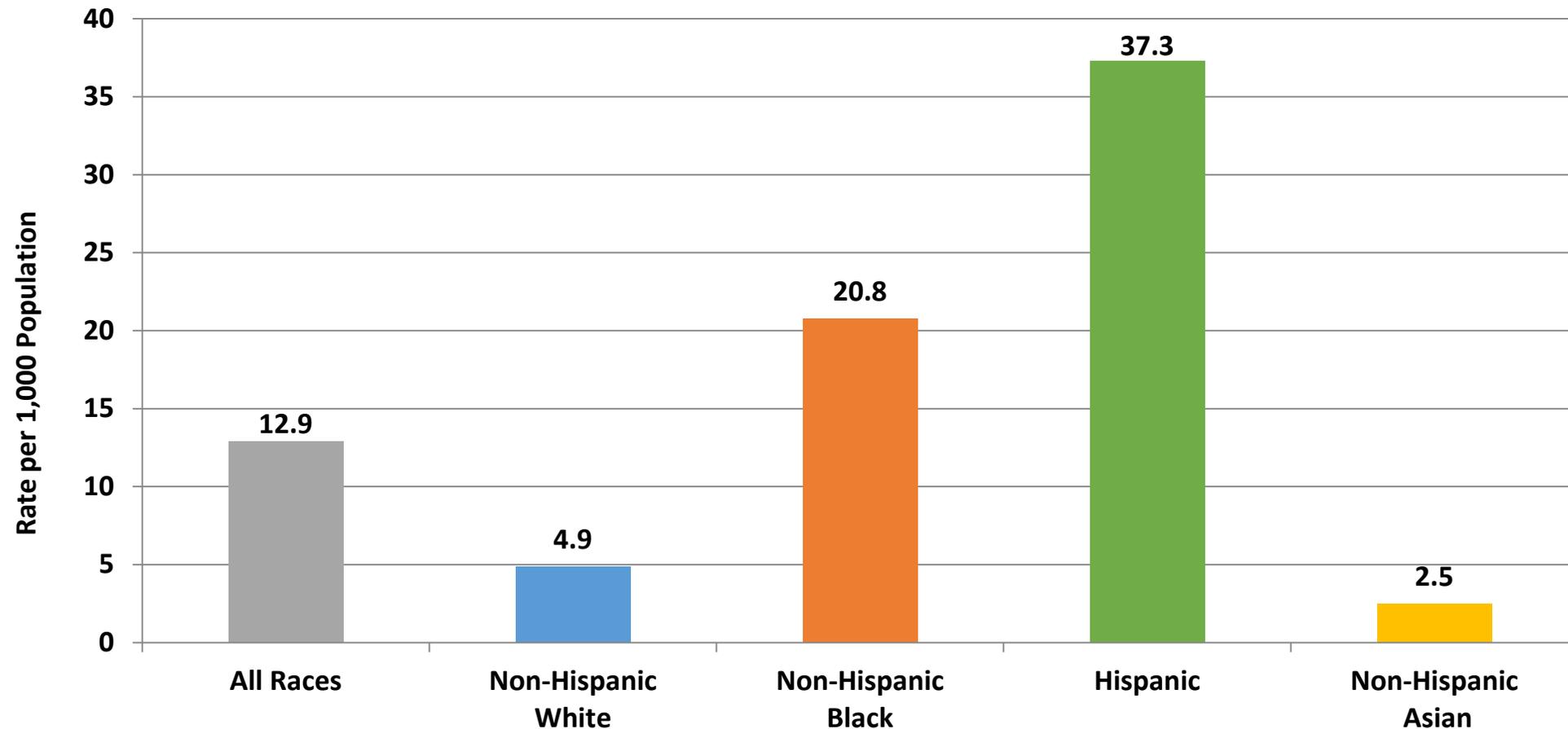


# Age-adjusted Rates For Leading Causes Of Premature Mortality (Years Of Potential Life Lost Before 75 Years Of Age) For Males, Connecticut, 2009-2013

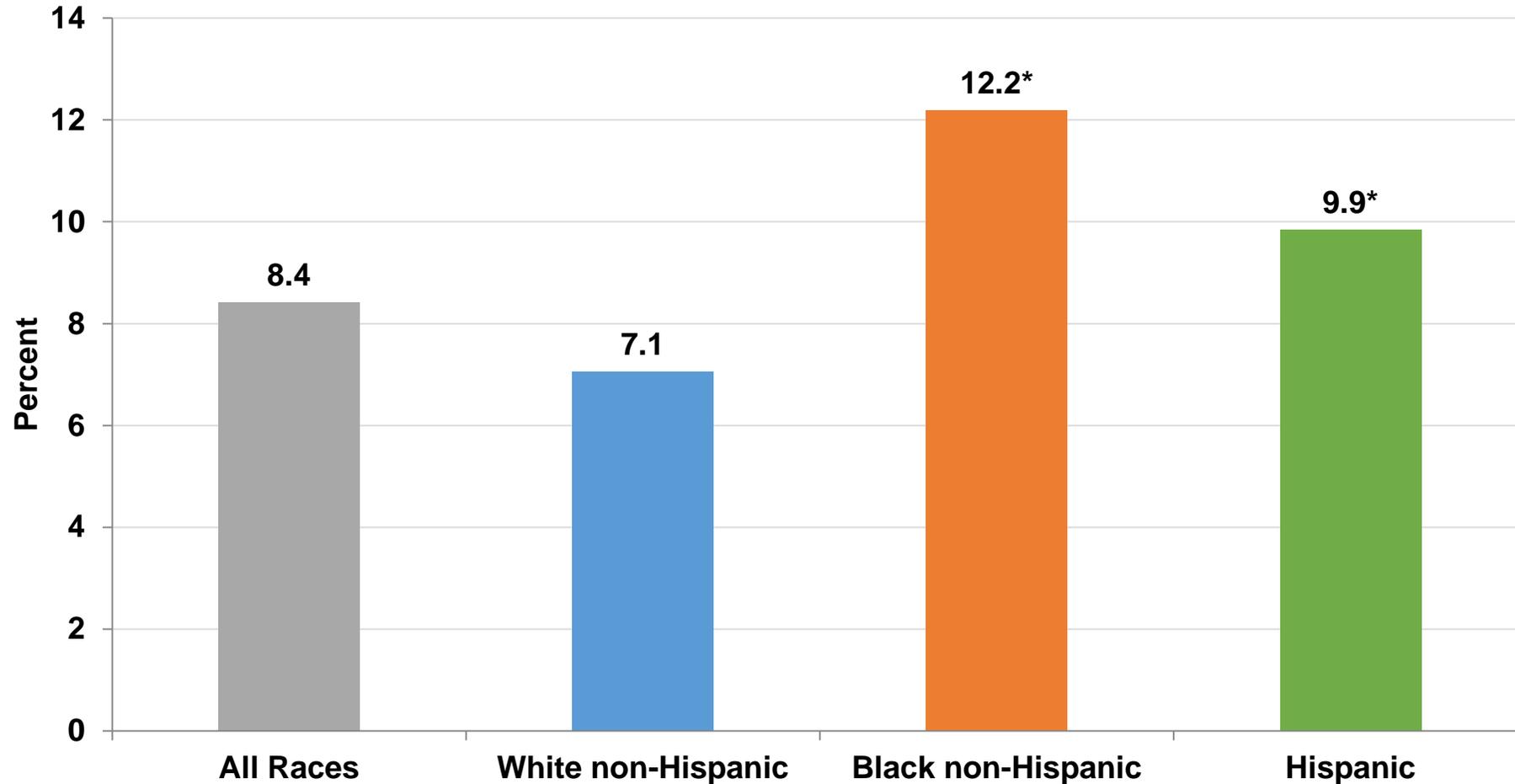


# MATERNAL, INFANT, AND CHILD HEALTH

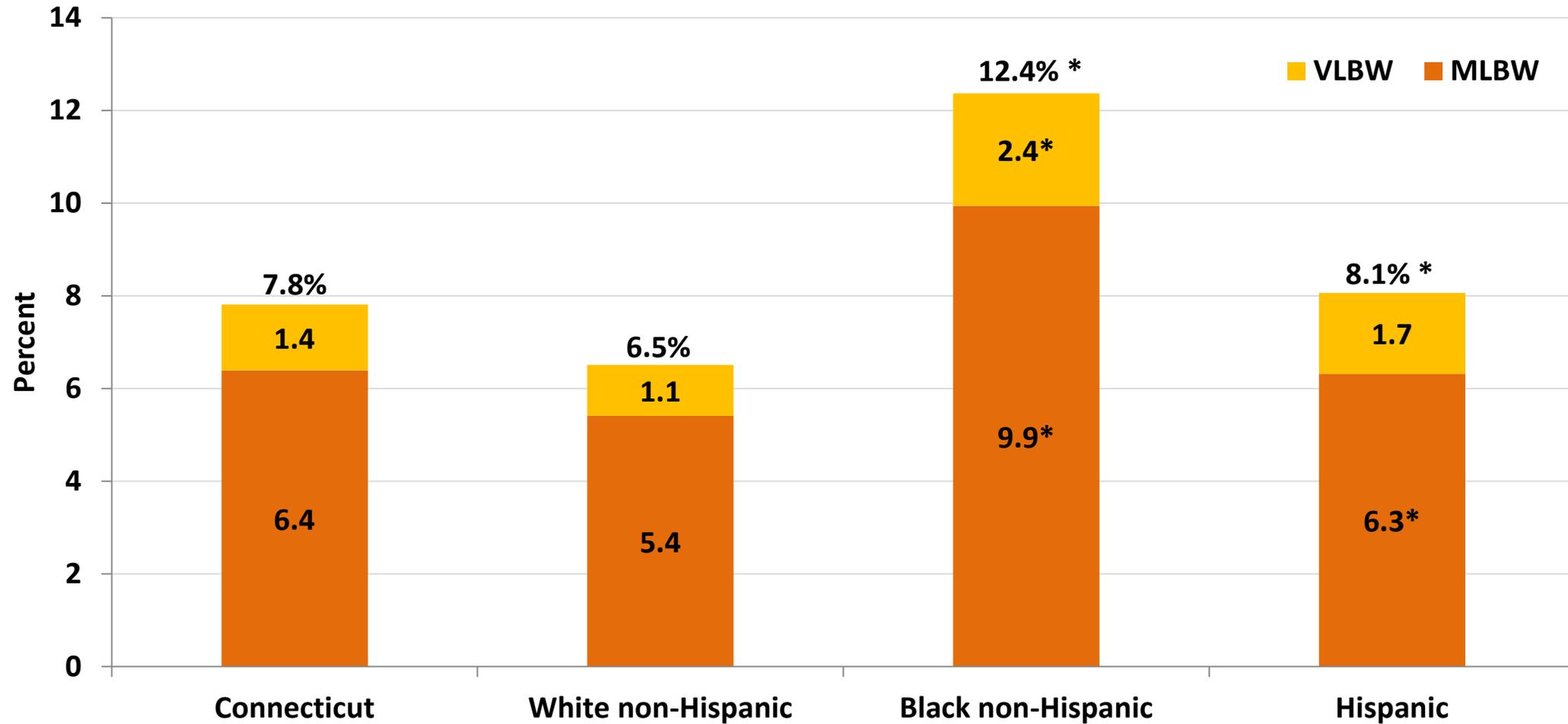
# Birth Rate To Teen Mothers (15-19 Years Of Age), by Race and Ethnicity, Connecticut, 2013



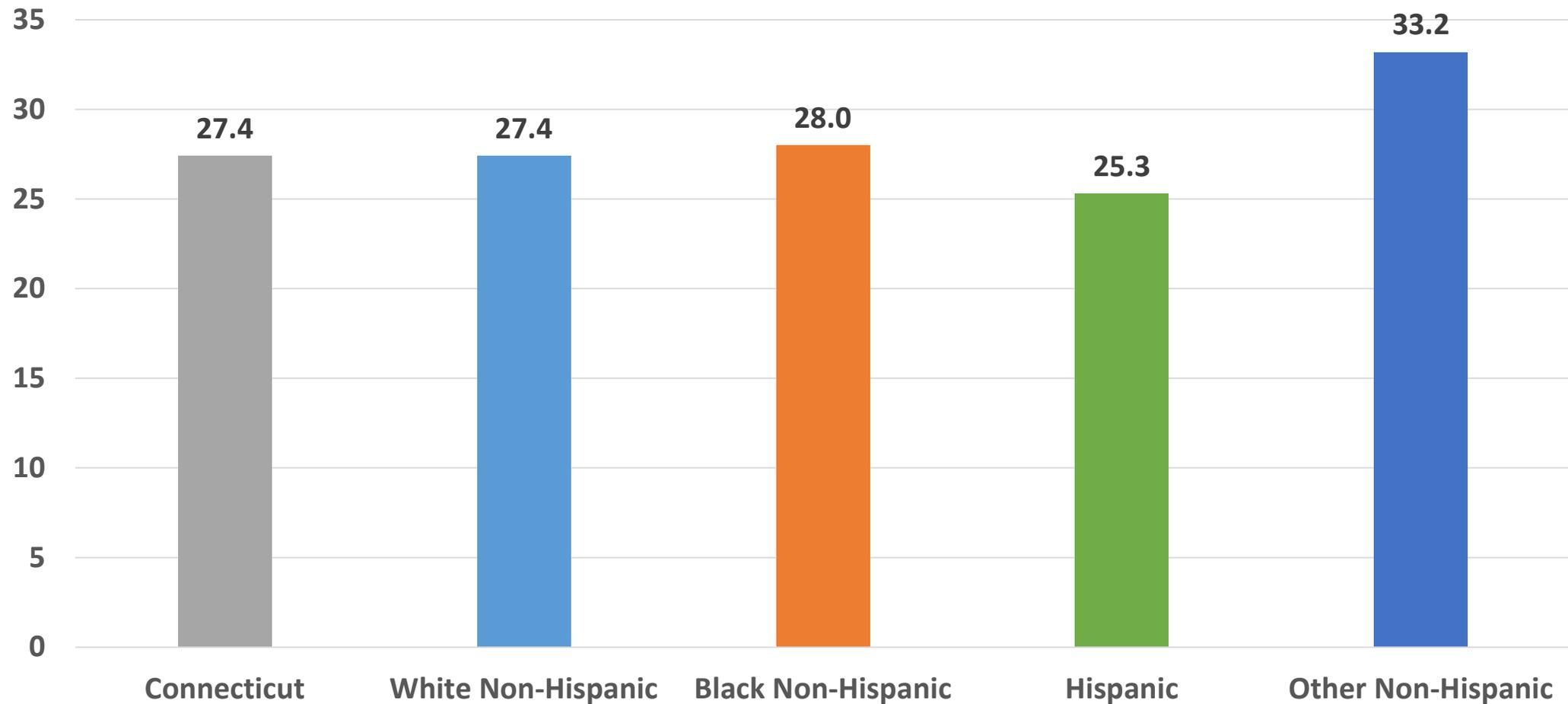
# Percent Of Singleton Pre-Term Births, by Race and Ethnicity, Connecticut, 2013



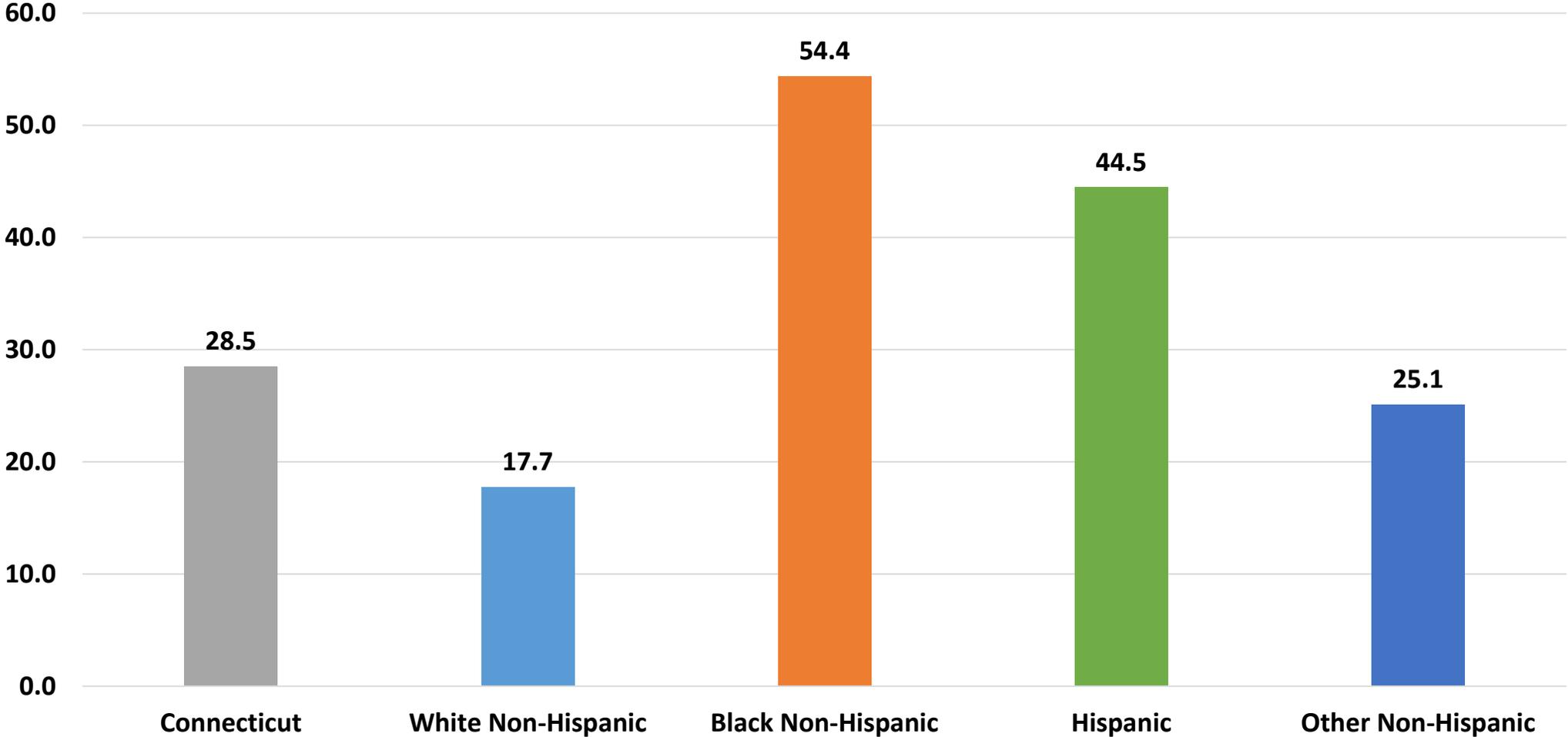
# Low Birthweight: Very Low, Moderate, and Total, by Race and Ethnicity, Connecticut, 2013



# Percent Of Women Who Had A Preconception Health Discussion with a Health Care Provider in the 12 Months Prior to Pregnancy, by Maternal Race and Ethnicity, Connecticut, 2013



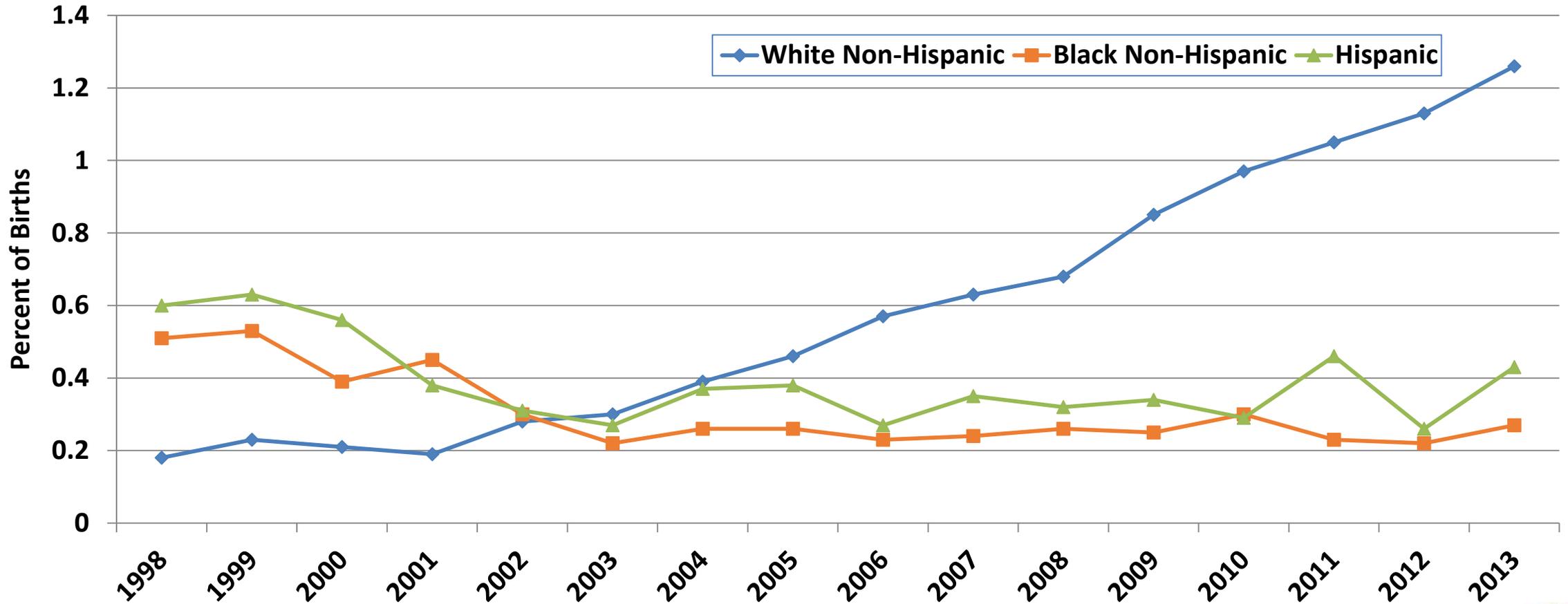
# Percent of Women With An Unplanned Pregnancy, by Maternal Race and Ethnicity, Connecticut, 2013



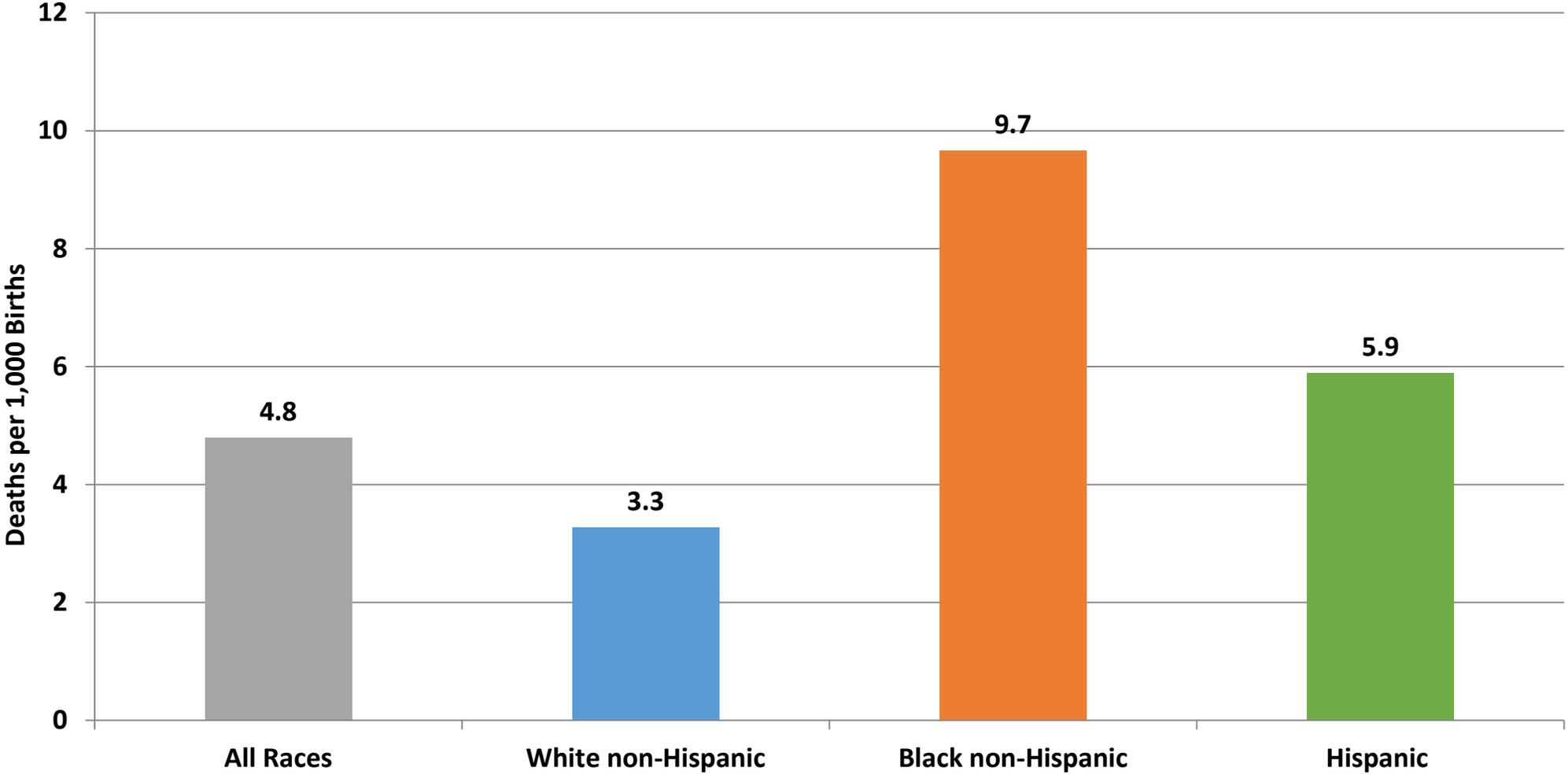
Data Source: CT Pregnancy Risk Assessment Monitoring Systems (PRAMS)



# Percent Of Children Born With Neonatal Abstinence Syndrome, by Race and Ethnicity, Connecticut, 1998-2013



# Infant Mortality Rate, by Mother's Race and Ethnicity, Connecticut, 2011-2013

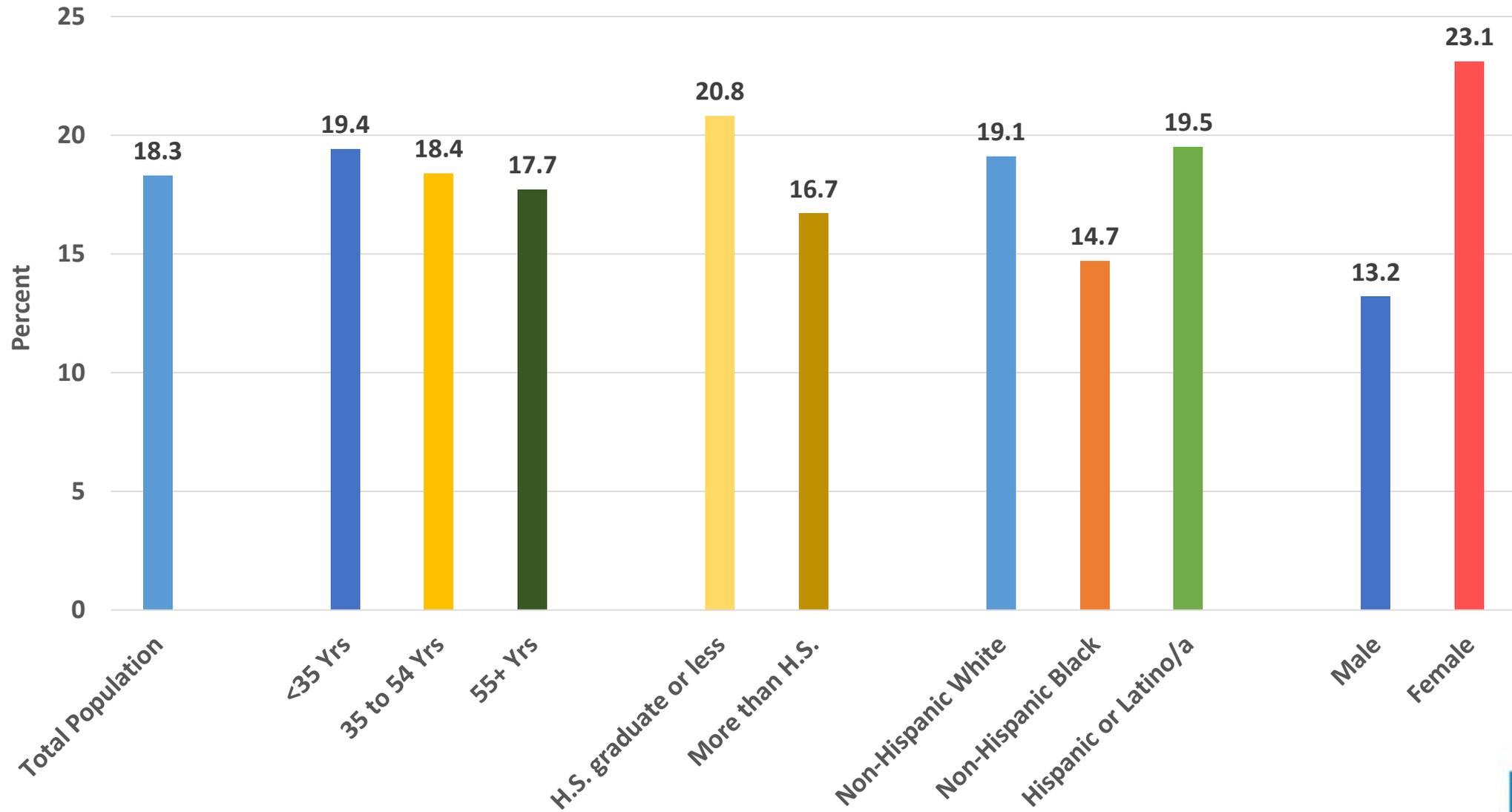


Data Source: CT DPH Vital Statistics, 2016

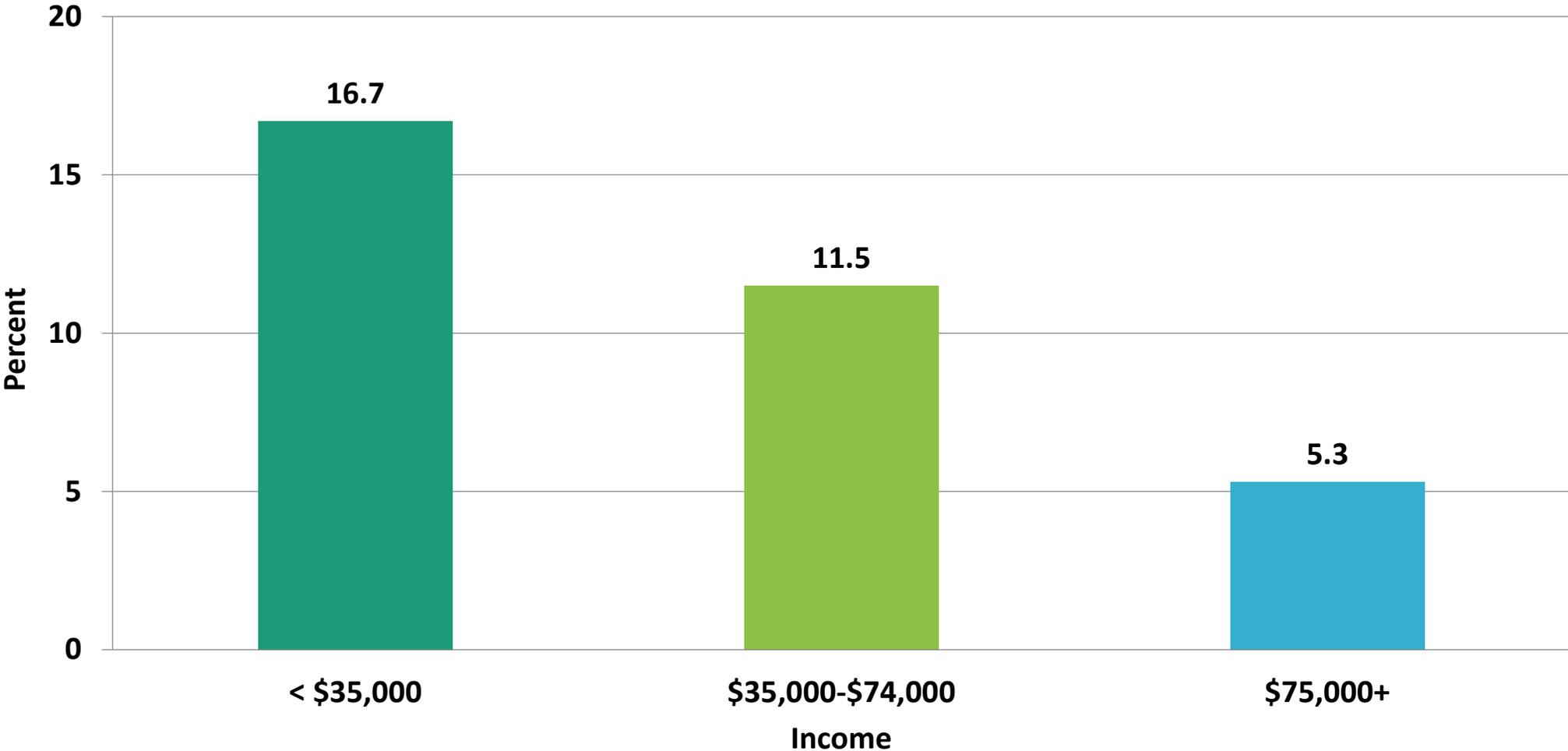


# MENTAL HEALTH, ALCOHOL, AND SUBSTANCE ABUSE

# Percent of Adults with Depressive Disorder, Connecticut, 2014



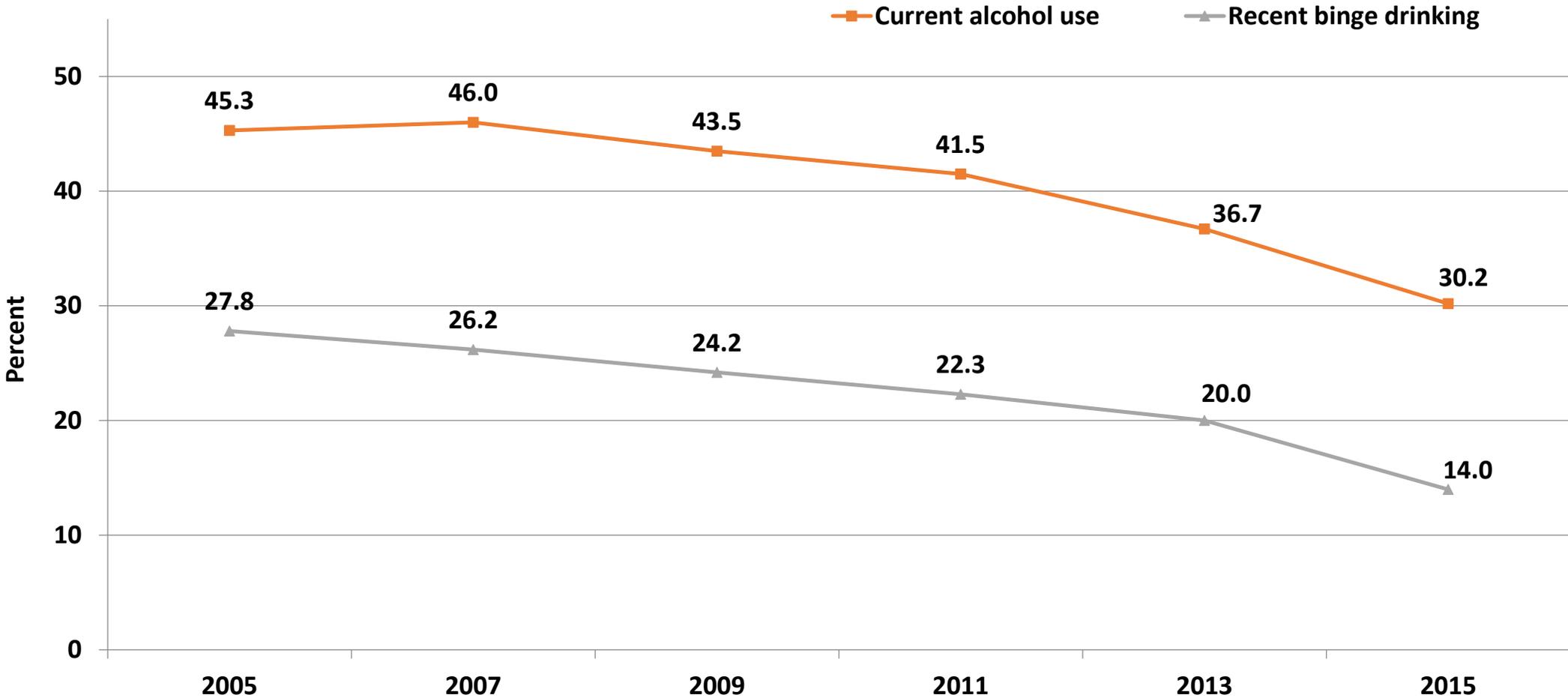
# Percent of Adults Who Had at Least 14 Poor Mental Health Days in the Past Month, by Education, Connecticut, 2014



Data source: CT DPH [http://www.ct.gov/dph/lib/dph/hisr/pdf/brfss2014\\_ct\\_report.pdf](http://www.ct.gov/dph/lib/dph/hisr/pdf/brfss2014_ct_report.pdf) 2016



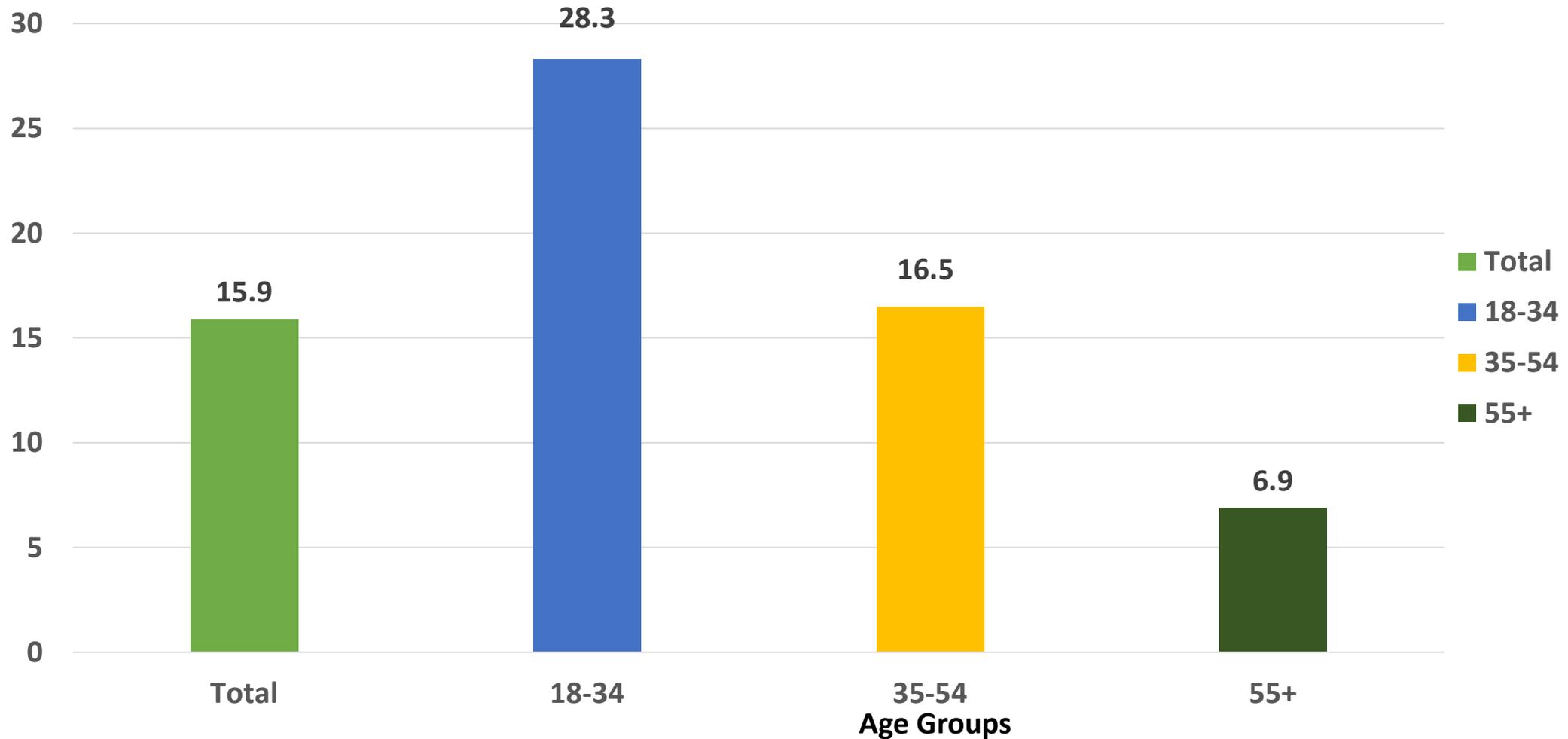
# Current Alcohol Use and Binge Drinking Among Youth (Grades 9-12), Connecticut, 2005-2015



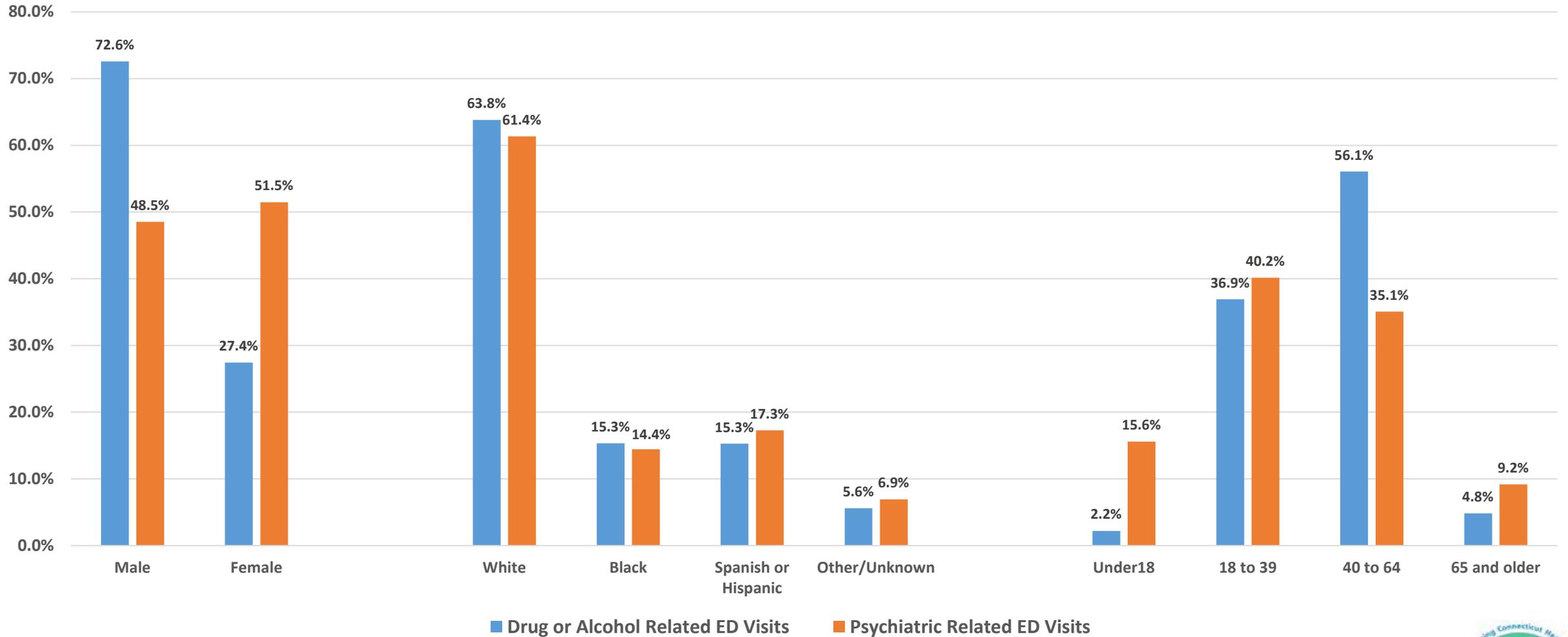
Data Source: Connecticut School Health Survey, Youth Behavior Component (YRBS), 2005 - 2015



# Percent of Adults Who Binge Drink Alcoholic Beverages, by Age Group, Connecticut, 2014

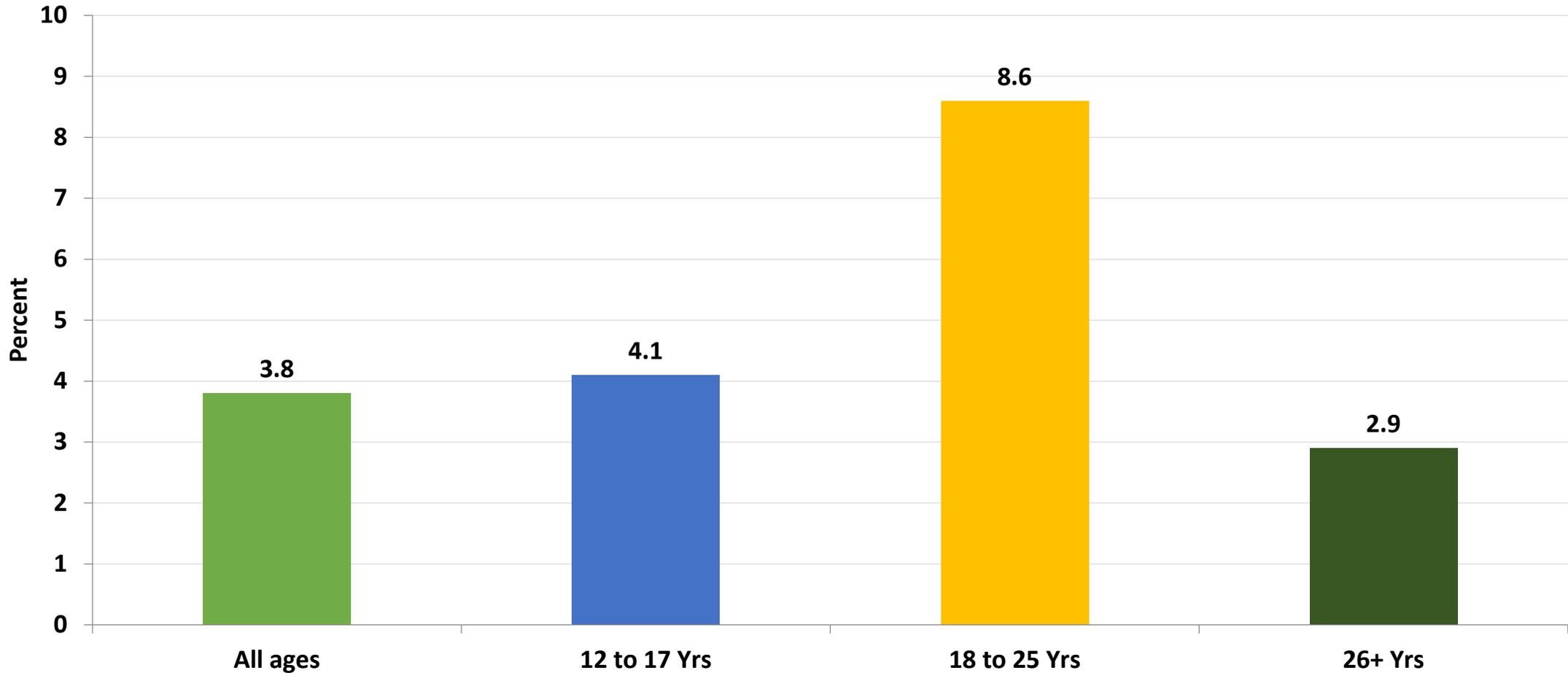


# Emergency Department Visits for Psychiatric and Drug or Alcohol-Related Mental Disorders, Connecticut, 2012 to 2014

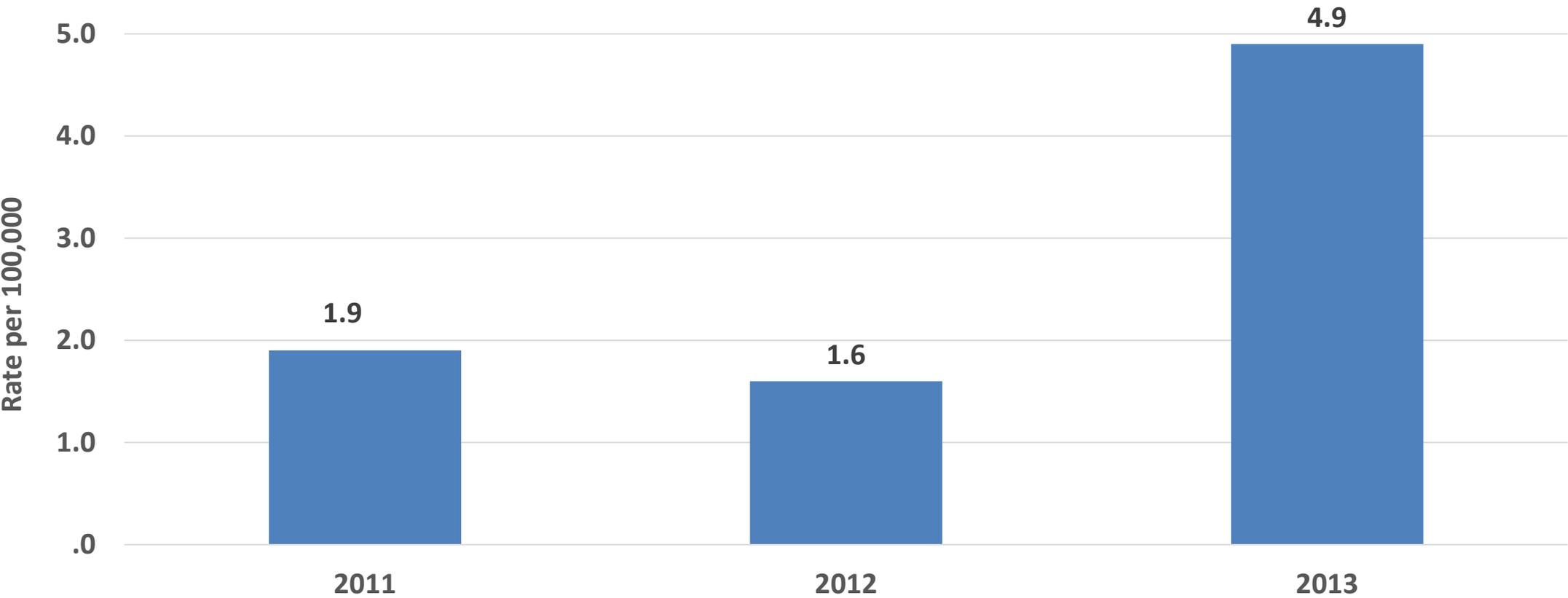


Data Sources: Connecticut Department of Public Health, Office of Health Care Access Acute Care General Hospitals Inpatient Discharge Database System and Connecticut Hospital Association (CHA)/CHIME Emergency Room Database System

# Non-medical Use of Pain Relievers in Past Year, by Age Group, Connecticut, 2013-2014



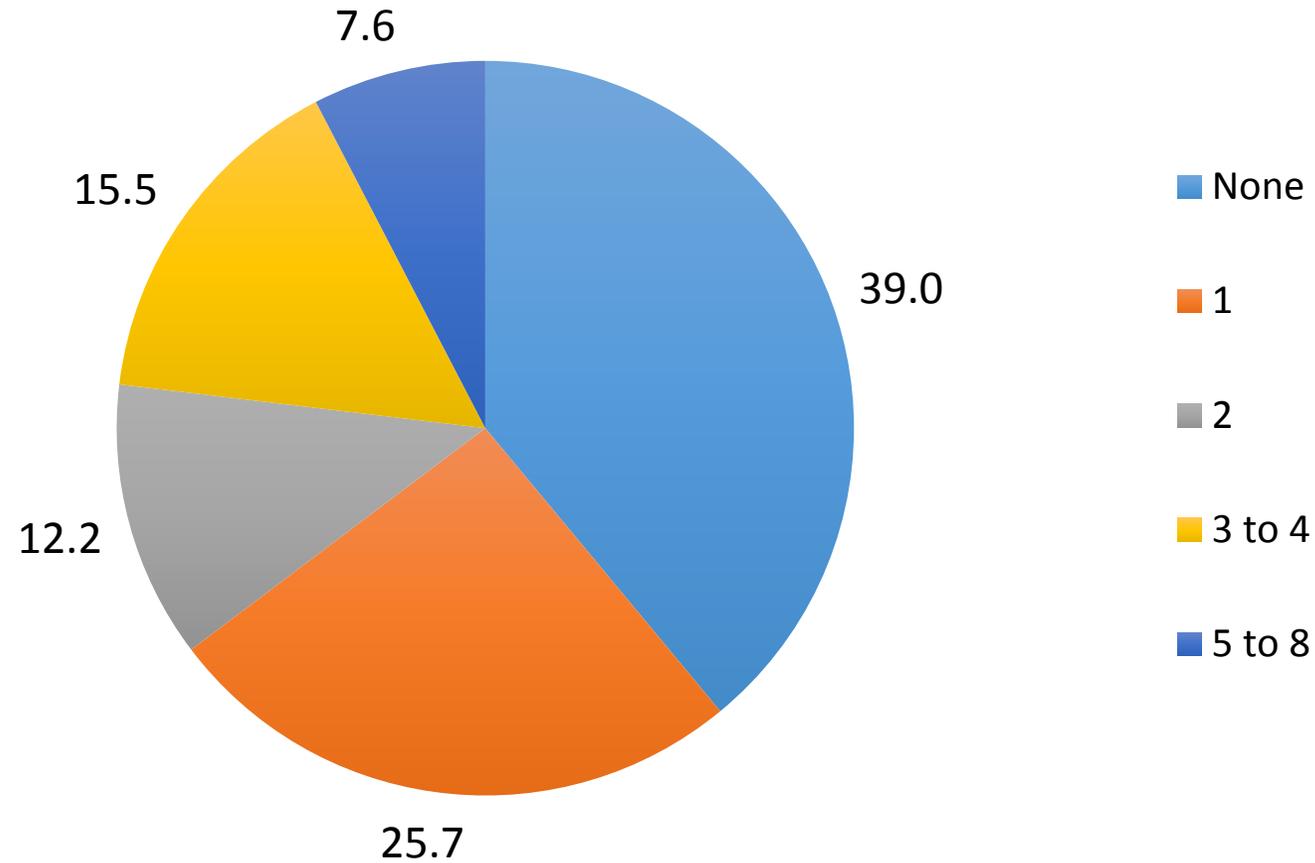
# Rate of Unintentional Prescription Opioid Overdose Deaths per 100,000 Connecticut Residents, 2011-2013



Data Source: CT DPH Office of Injury Prevention, Mortality Data

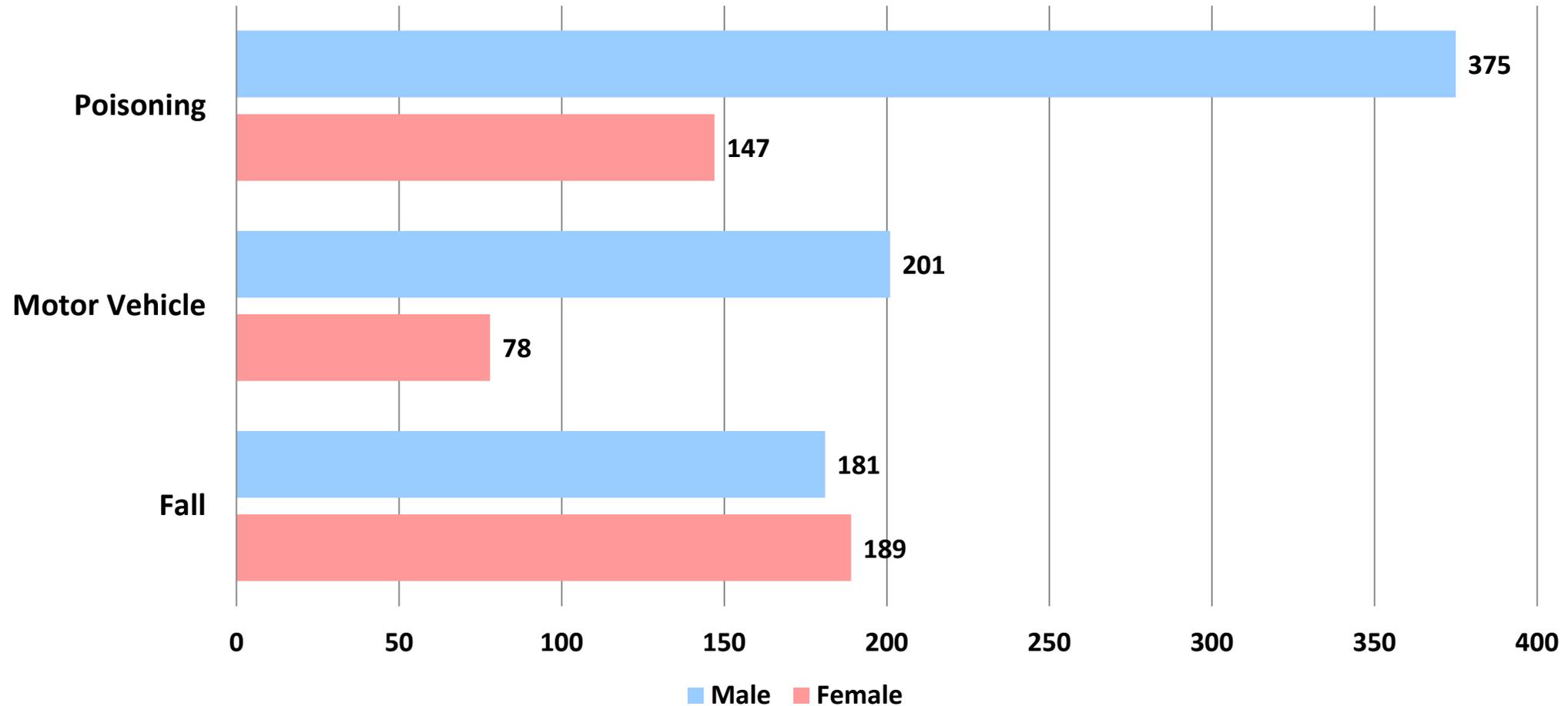


# Percent of Adults Who Report Adverse Childhood Experiences, by Number of Adverse Childhood Experiences, Connecticut, 2013

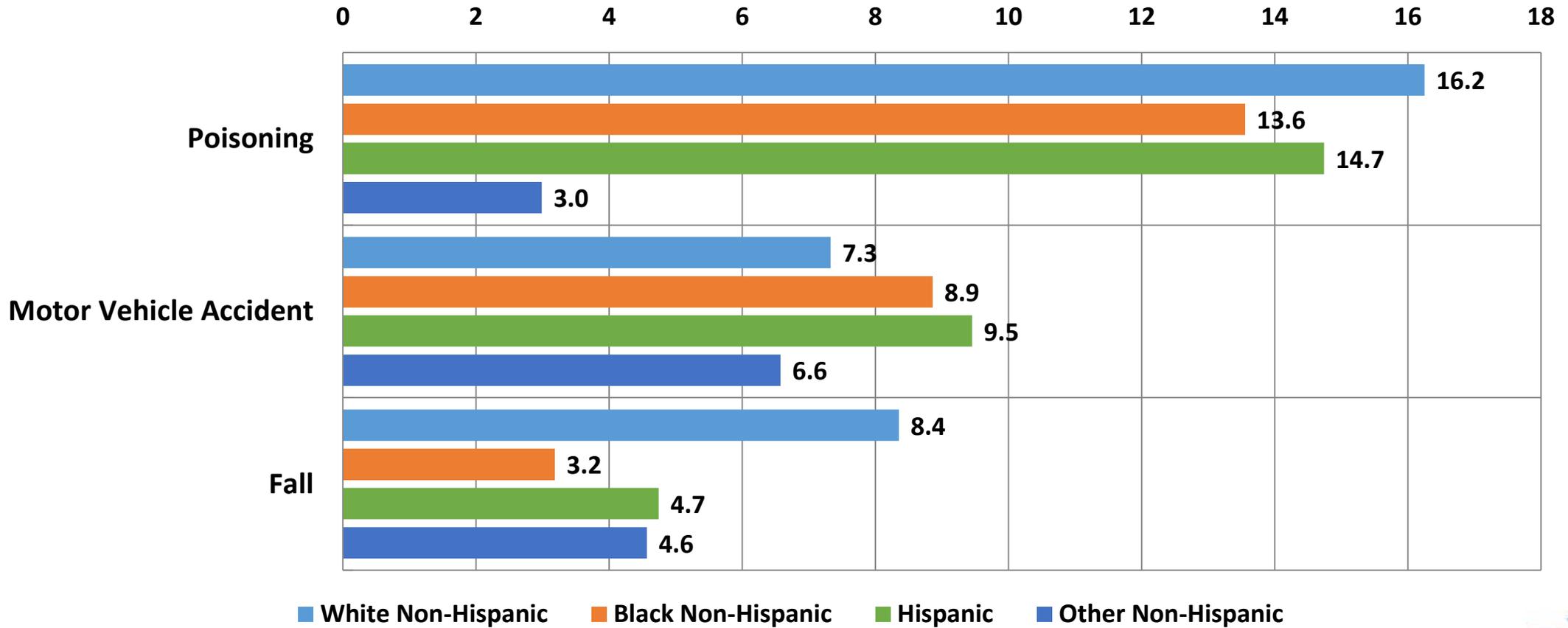


# INJURY AND VIOLENCE PREVENTION

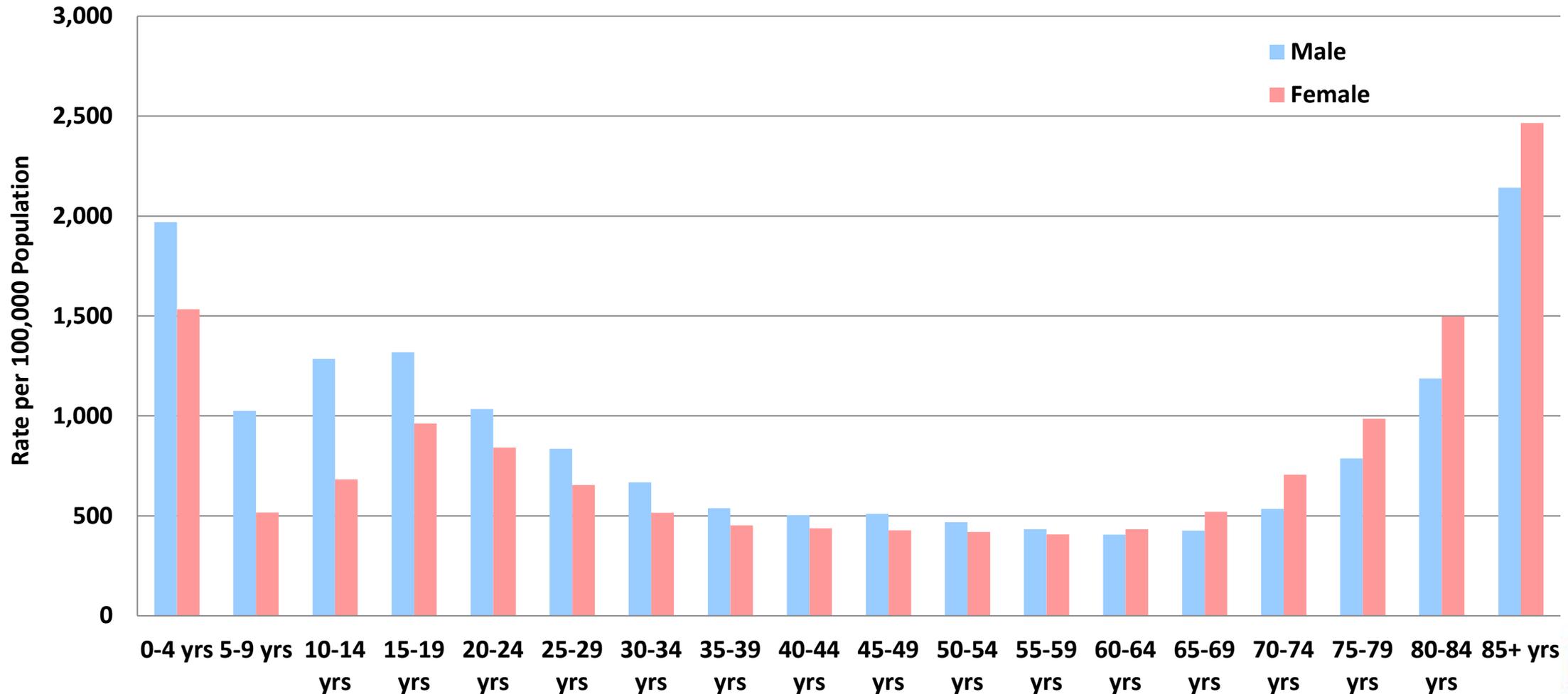
# Number of Unintentional Injury Deaths in Connecticut Residents, by Primary Cause of Death and Sex, 2013



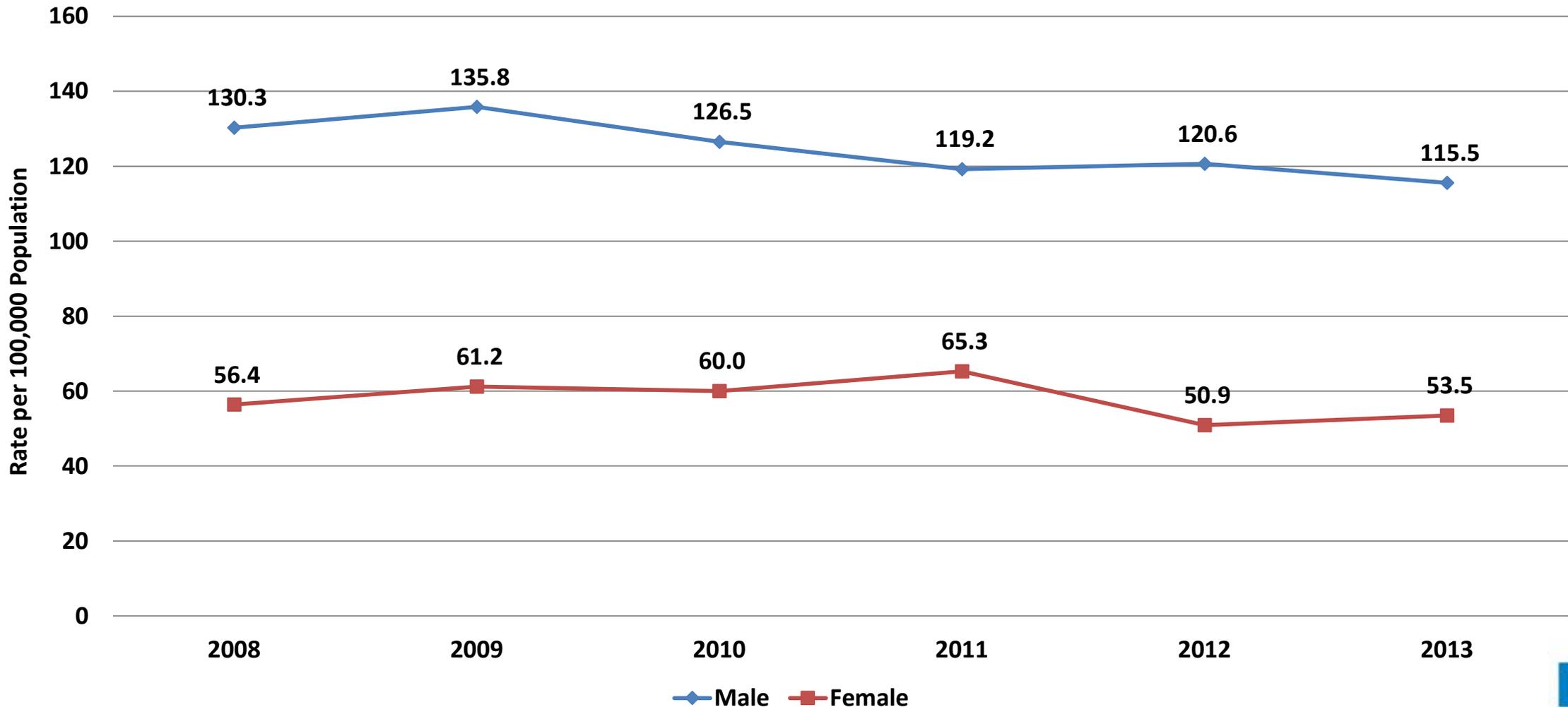
# Age-Adjusted Rate of Unintentional Injury Deaths per 100,000 Connecticut Residents, by Cause of Death and Race and Ethnicity, 2013



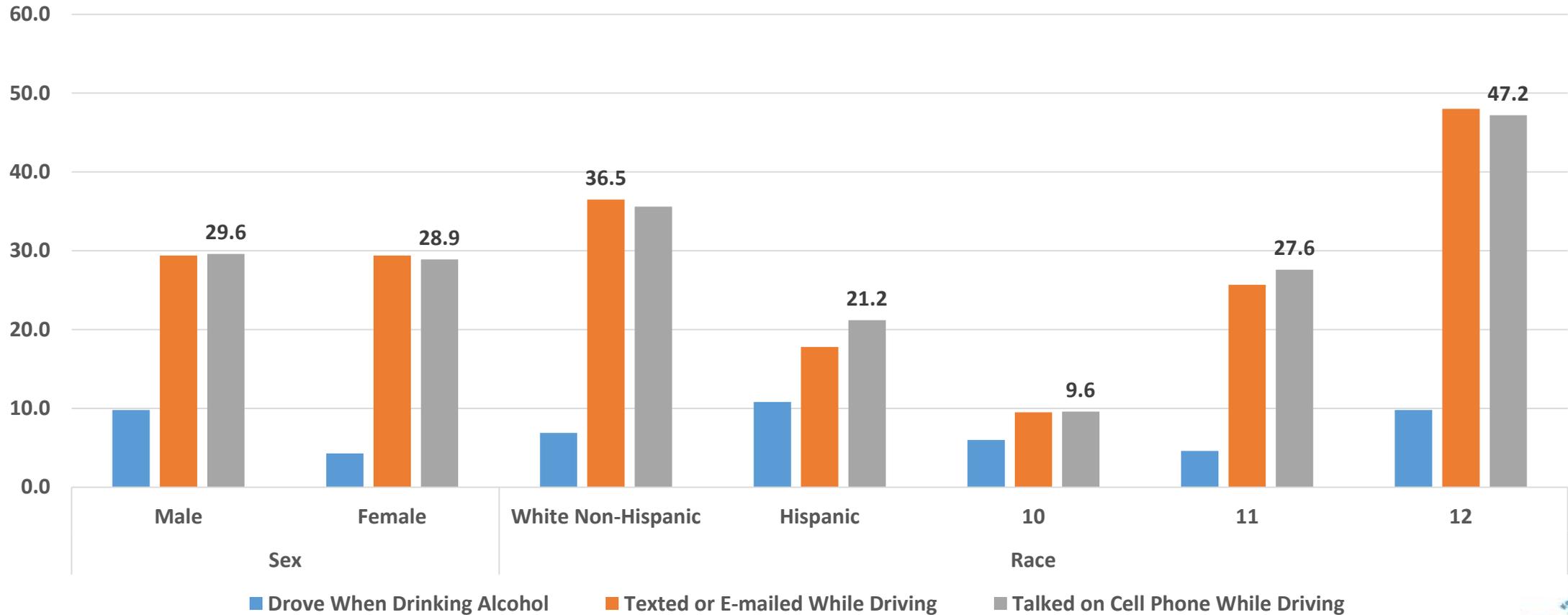
# Average Annual Rate of Traumatic Brain Injury ED Visits per 100,000 Connecticut Residents, by Age and Sex, 2008-2013



# Age-Adjusted Rate of Traumatic Brain Injury Hospitalizations per 100,000 Connecticut Residents, by Sex 2008-2013



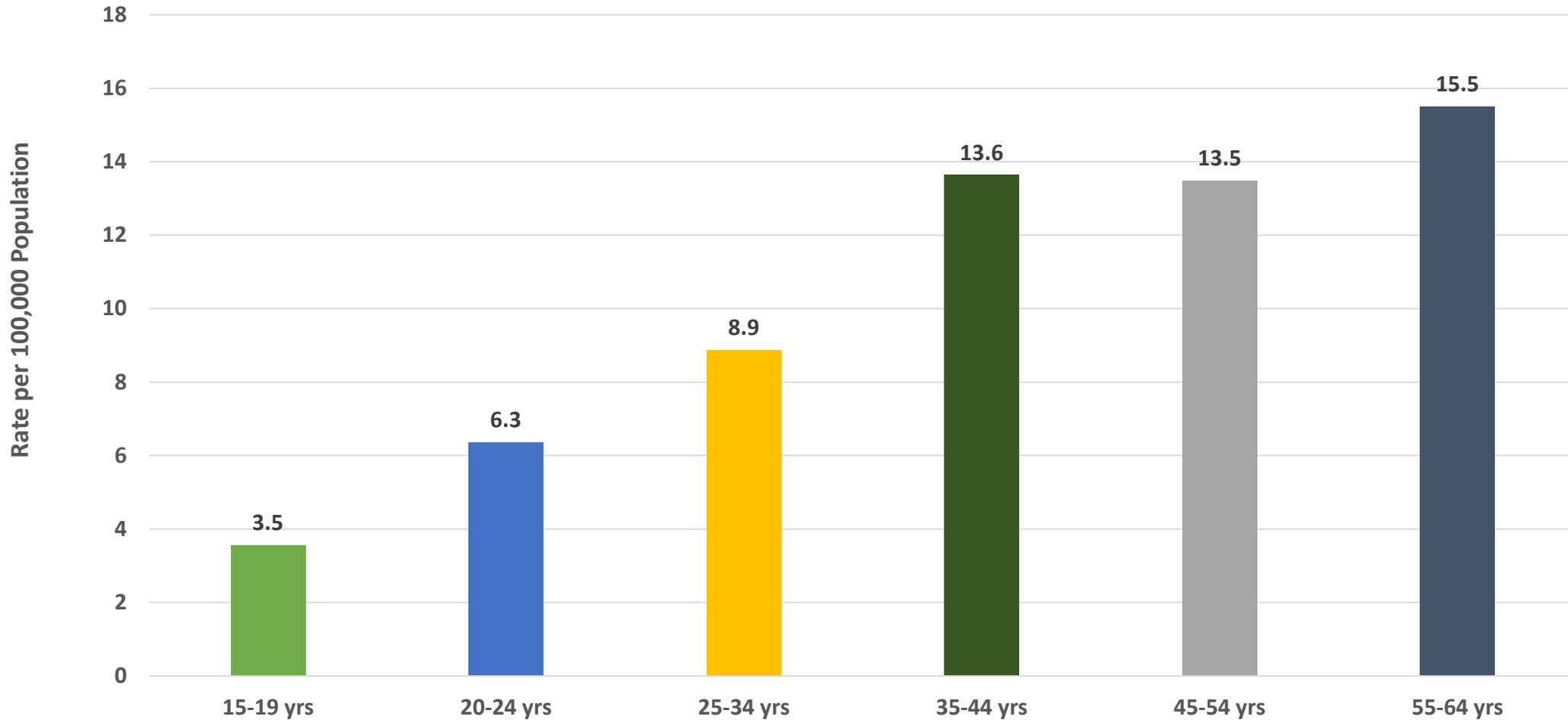
# Percent of Students (Grades 10-12) Who Engaged in Unsafe Driving Among Students Who Drove a Car or Other Vehicle in the Past 30 Days, Connecticut, 2015



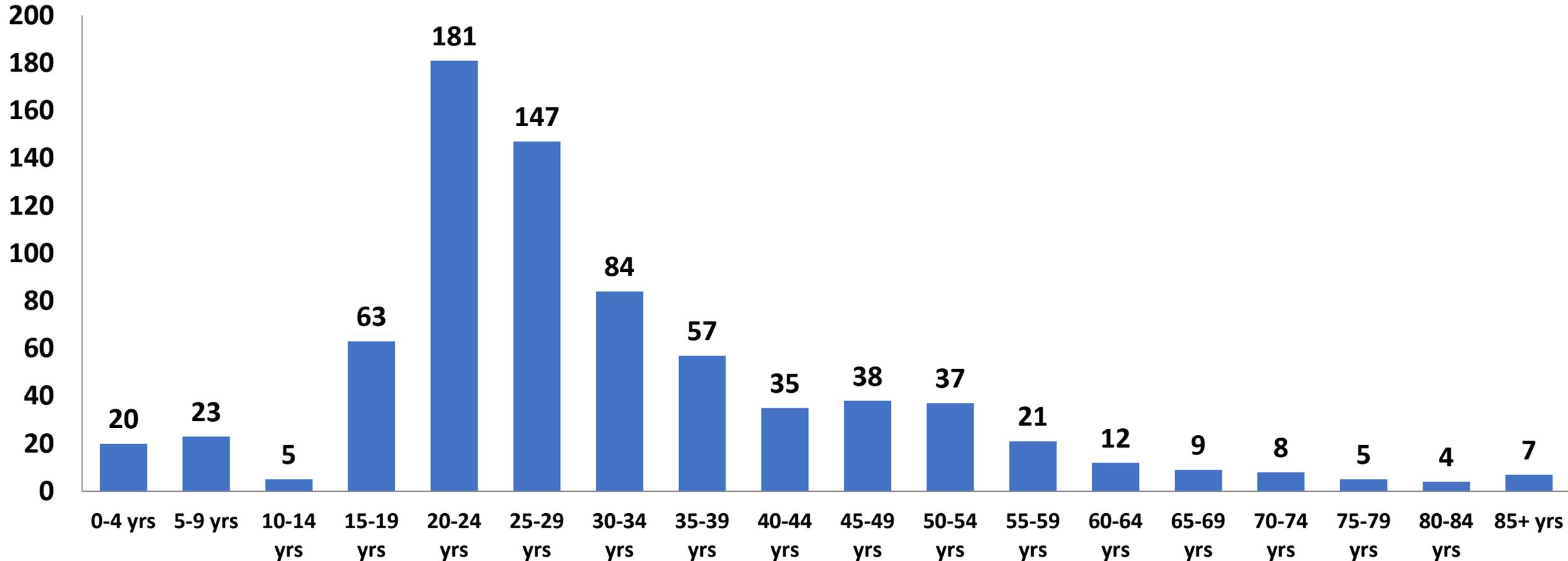
Data Source: 2015 Connecticut School Health Survey, Youth Behavior Component (YRBS)



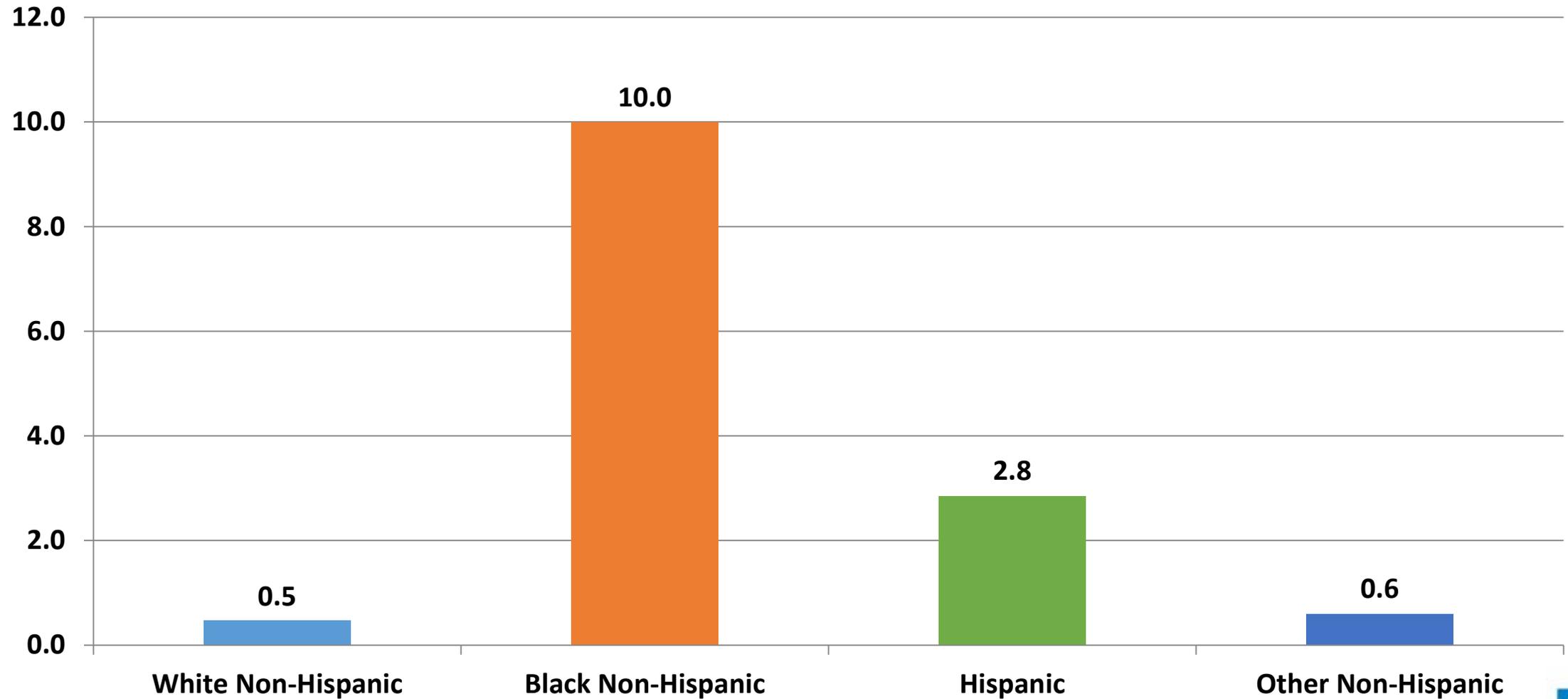
# Rate of Suicides per 100,000 Connecticut Residents, by Selected Age Group, 2013



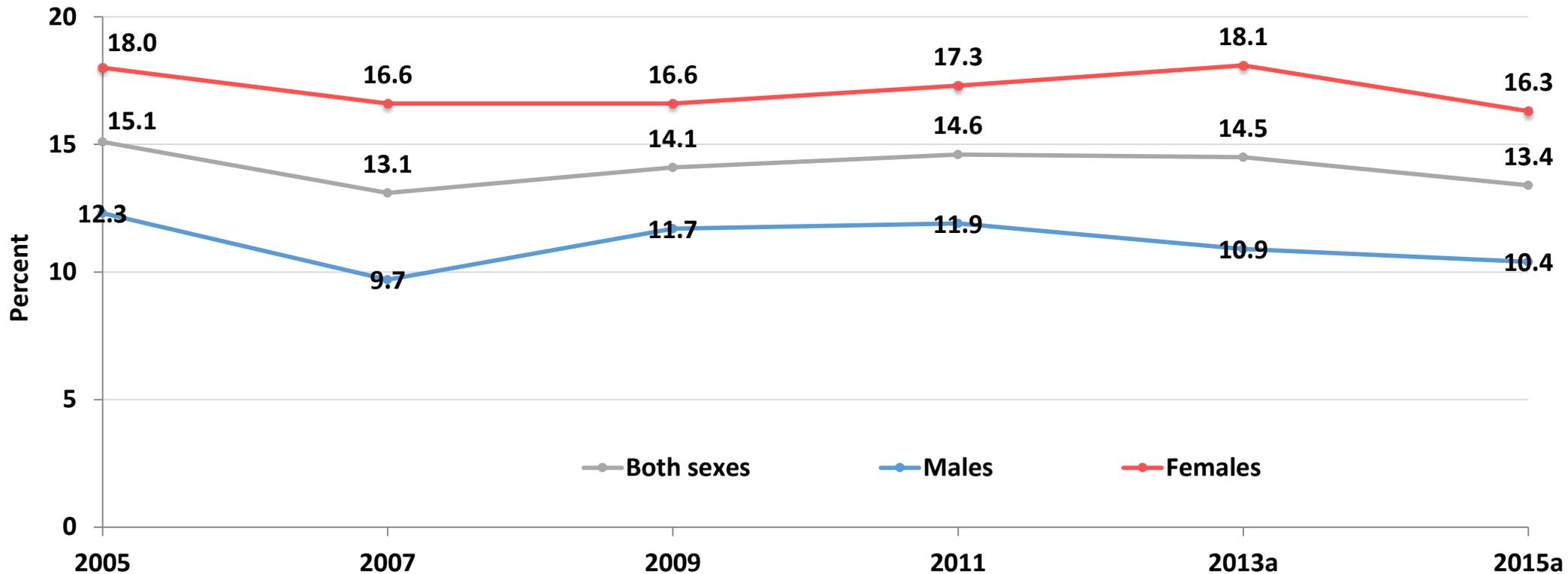
# Number of Homicides in Connecticut, Residents by Age 2008-2013



# Firearm Homicide Crude Rate per 100,000 Connecticut Residents, by Race and Ethnicity, 2013



# Percent of Students (Grades 9-12) Who Reported that they Seriously Considered Attempting Suicide in Past Year, by Sex, Connecticut, 2005-2015

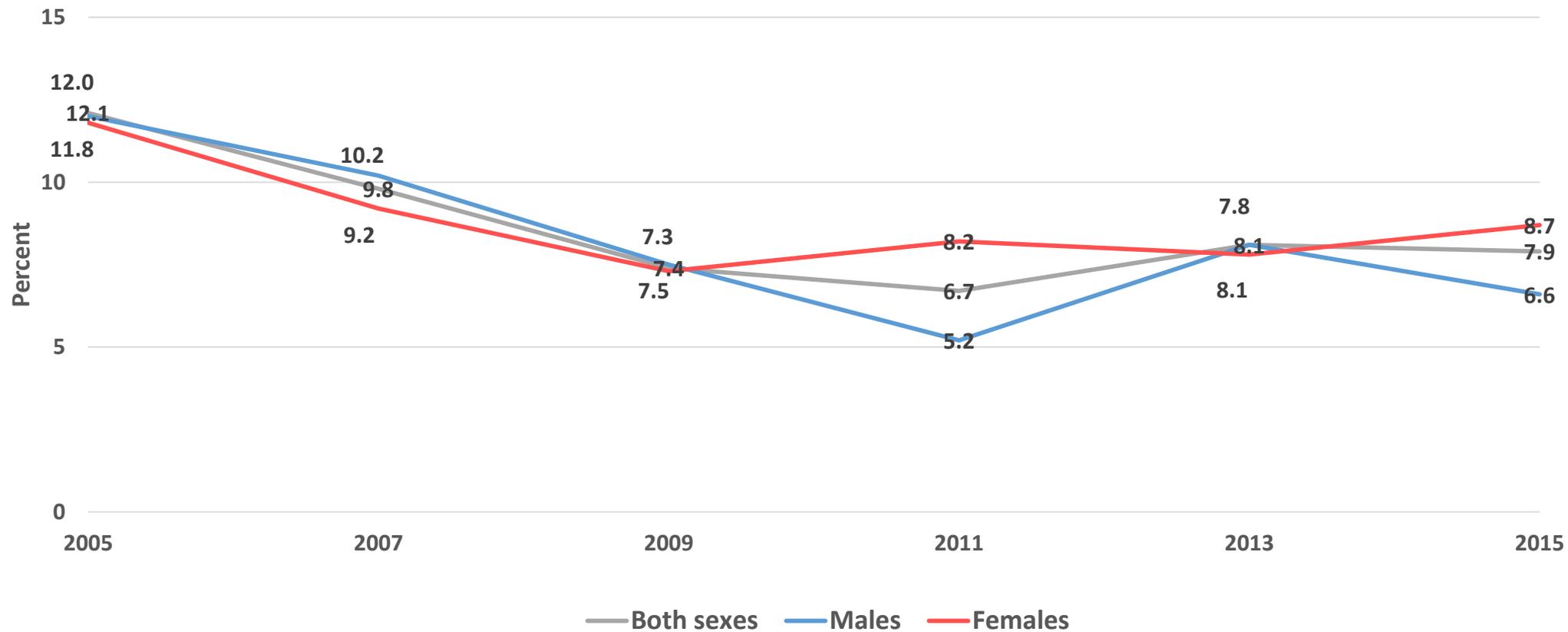


a Females (18.1%) had significantly higher rates than males (10.9%) in 2013 and 2015.  
Hispanic rate of attempted suicide was significantly higher than the White non-Hispanic rates in 2011, 2013, and 2015.

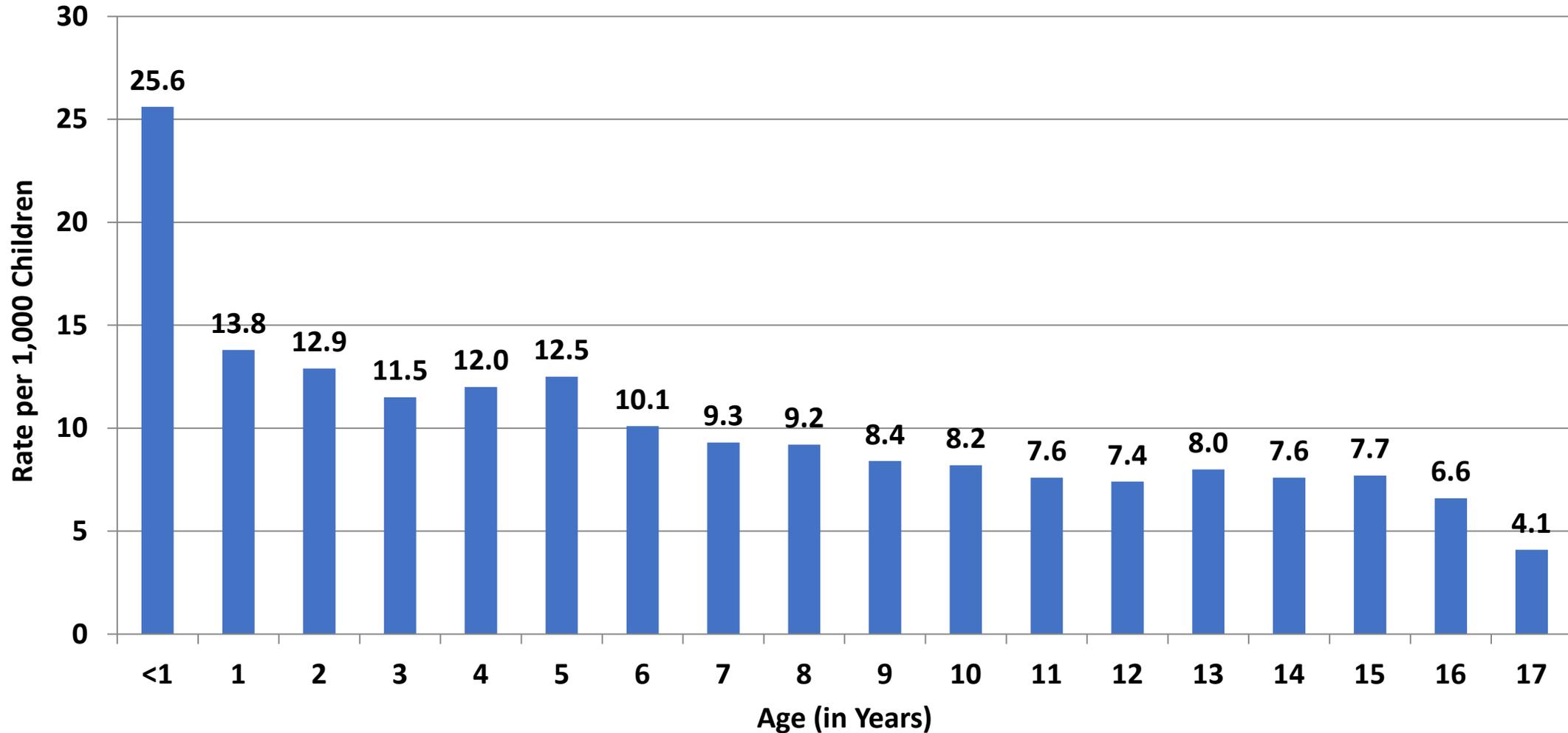
Data Source: Connecticut School Health Survey, Youth Behavior Component (YRBS), 2005 - 2015



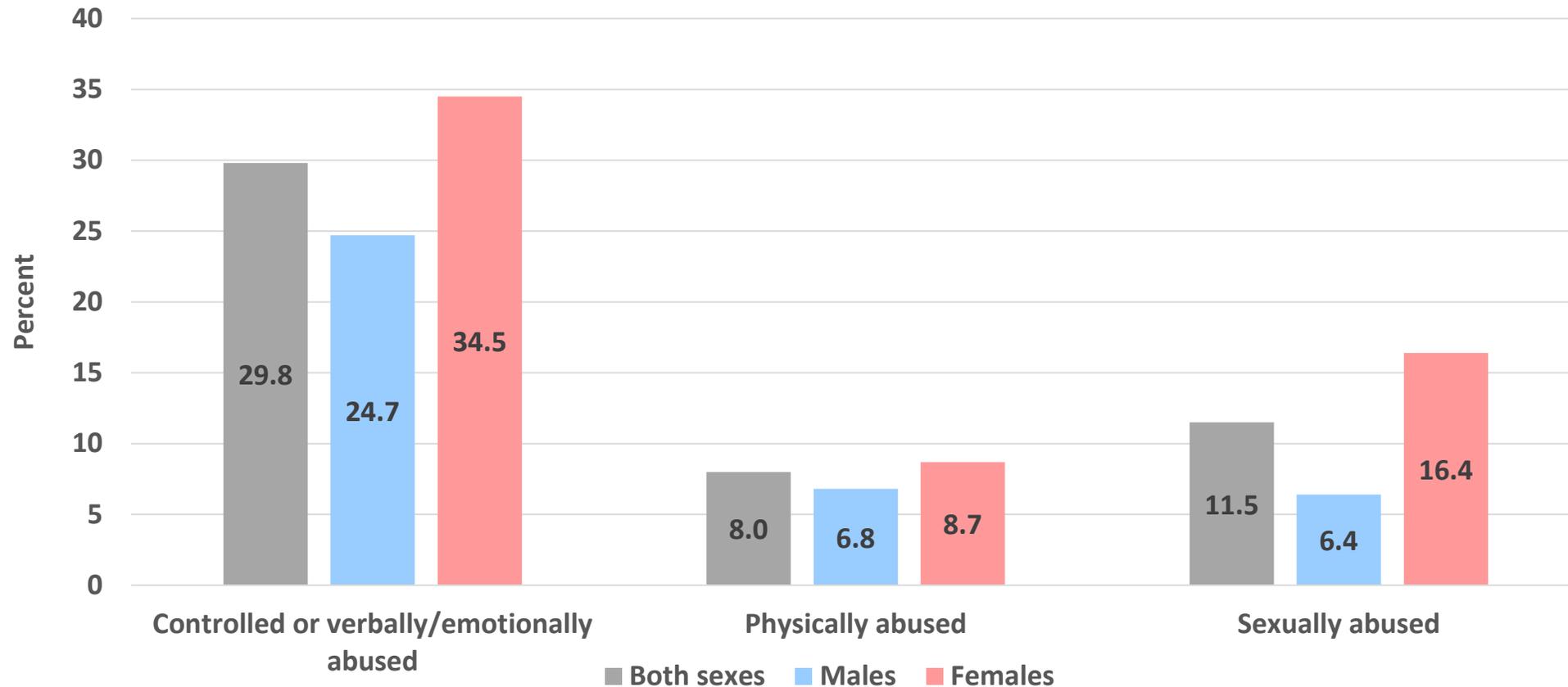
# Percent of Students (Grades 9-12) Who Reported that they Attempted Suicide One or More Times in the Past Year, by Sex, Connecticut, 2005 - 2015



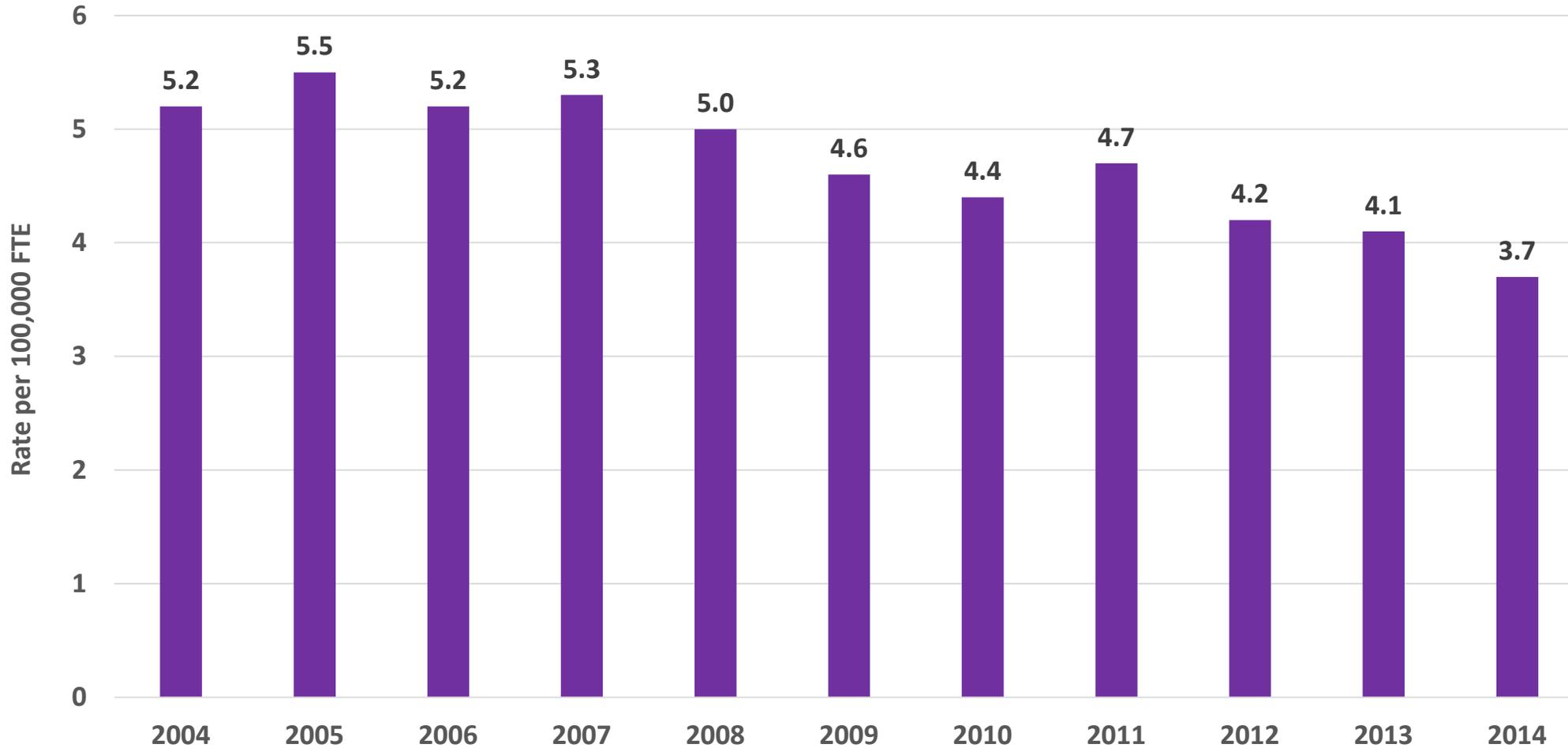
# Rate of Child Abuse or Neglect Victims per 1,000 Children in Connecticut, by Age In Years, 2014



# Percent of Students (Grades 9-12) Who Have Been Verbally, Physically or Sexually Abused by a Boyfriend or Girlfriend, Connecticut, 2015



# Incidence Rates for Work-Related Injuries, Connecticut, 2004-2014

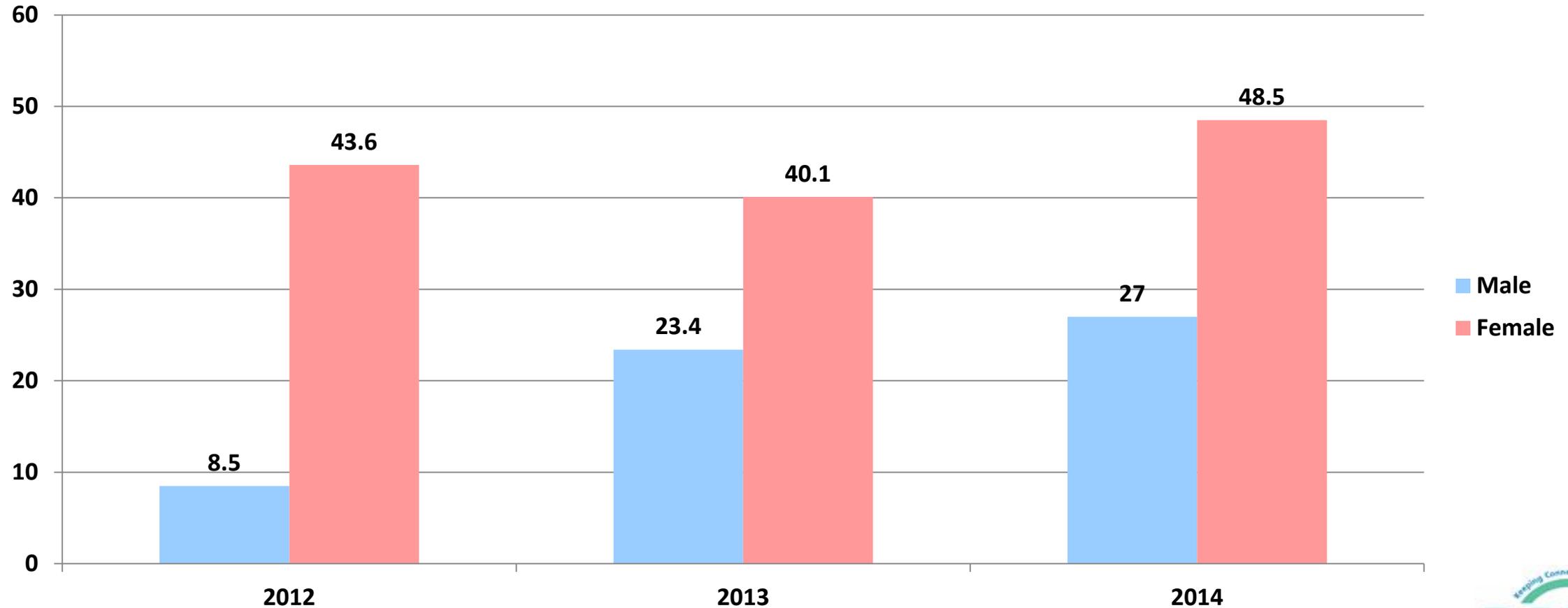


Data Source: Bureau of Labor Statistics, Table 6, Incidence Rates of Nonfatal Occupational Injuries and Illnesses by Industry and Case Types, Connecticut, 2008 & 2011.

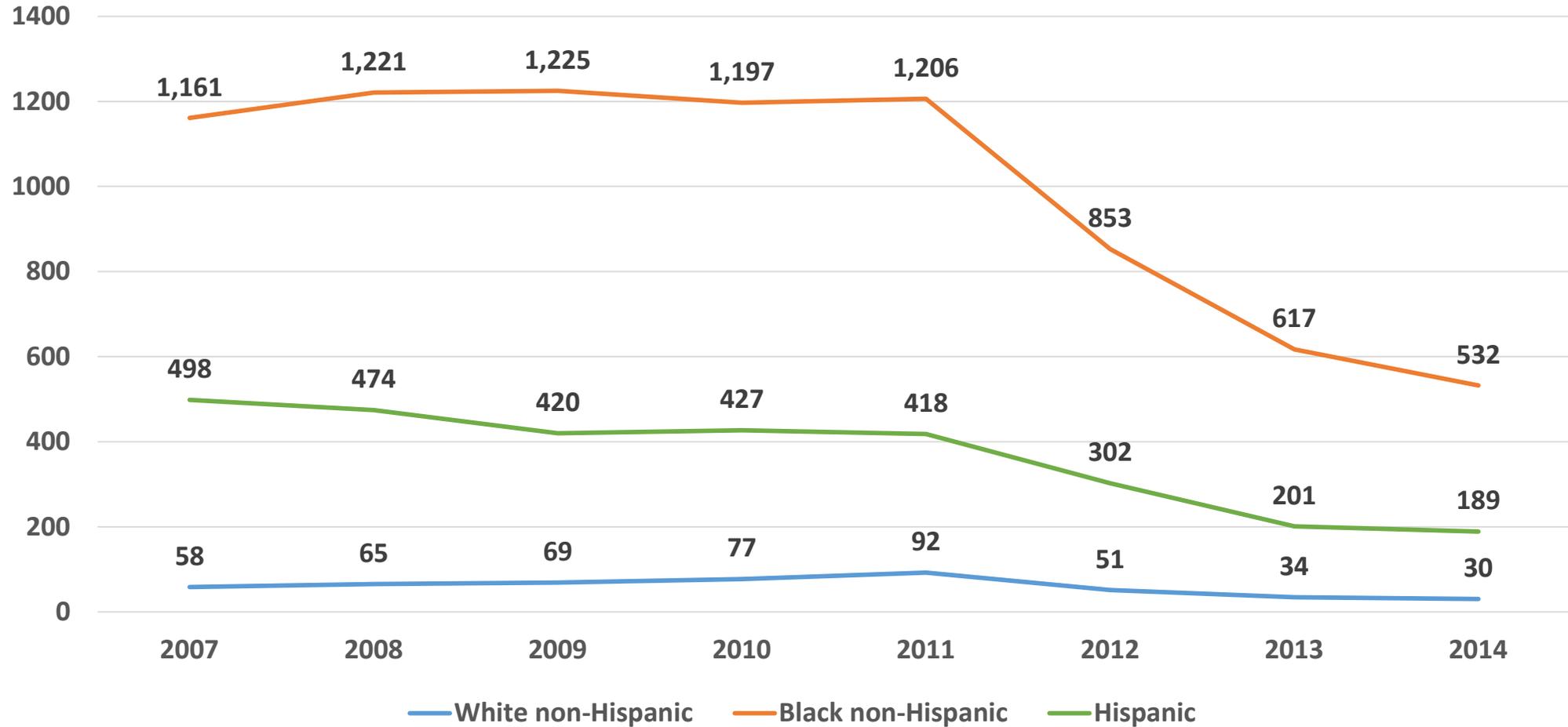


# INFECTIOUS DISEASE PREVENTION AND CONTROL

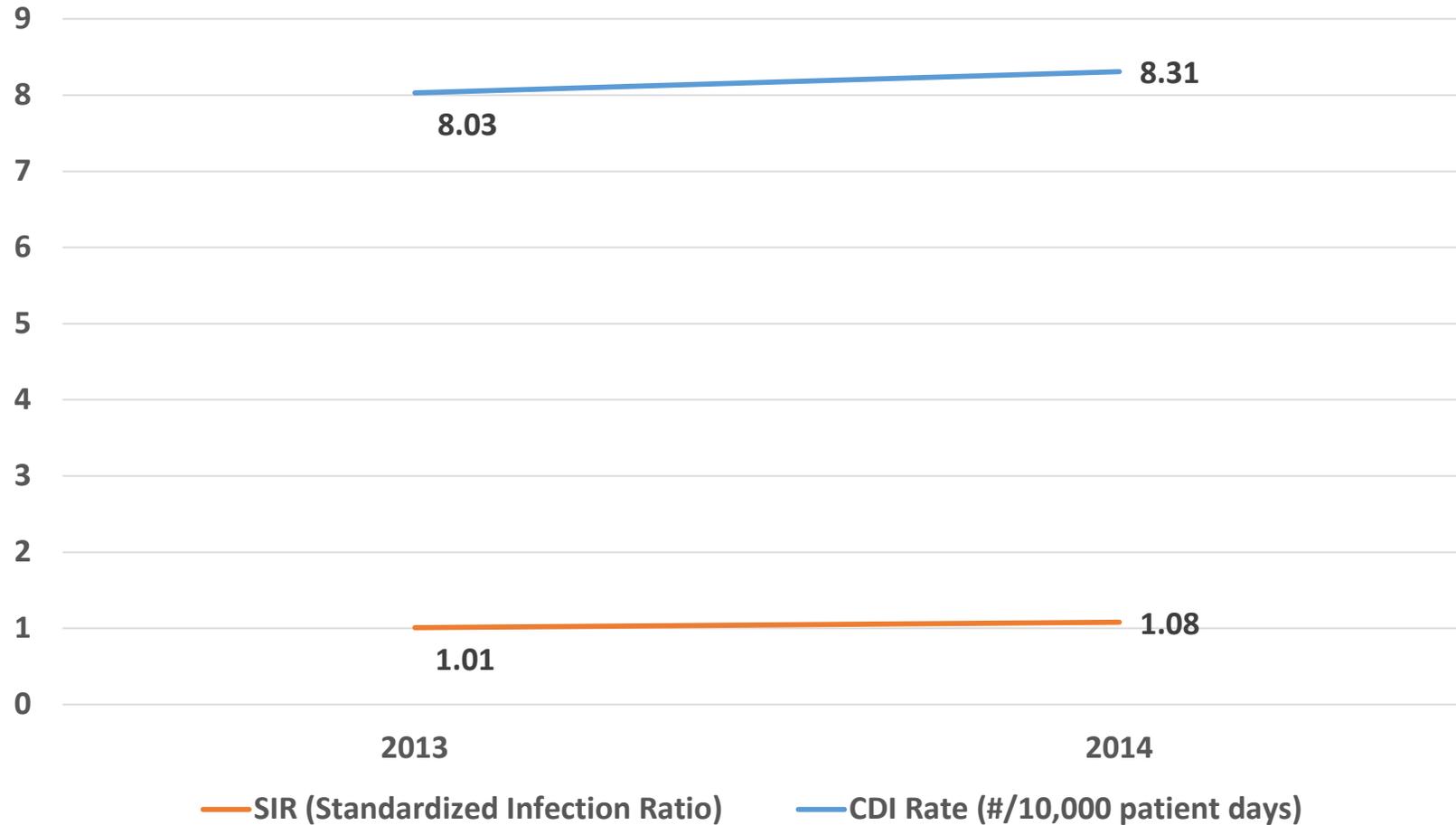
# Percent of Persons 13 To 17 Years of Age Who Have Received at Least 3 Doses of the Human Papillomavirus (HPV) Vaccine, by Sex, Connecticut, 2012-2014



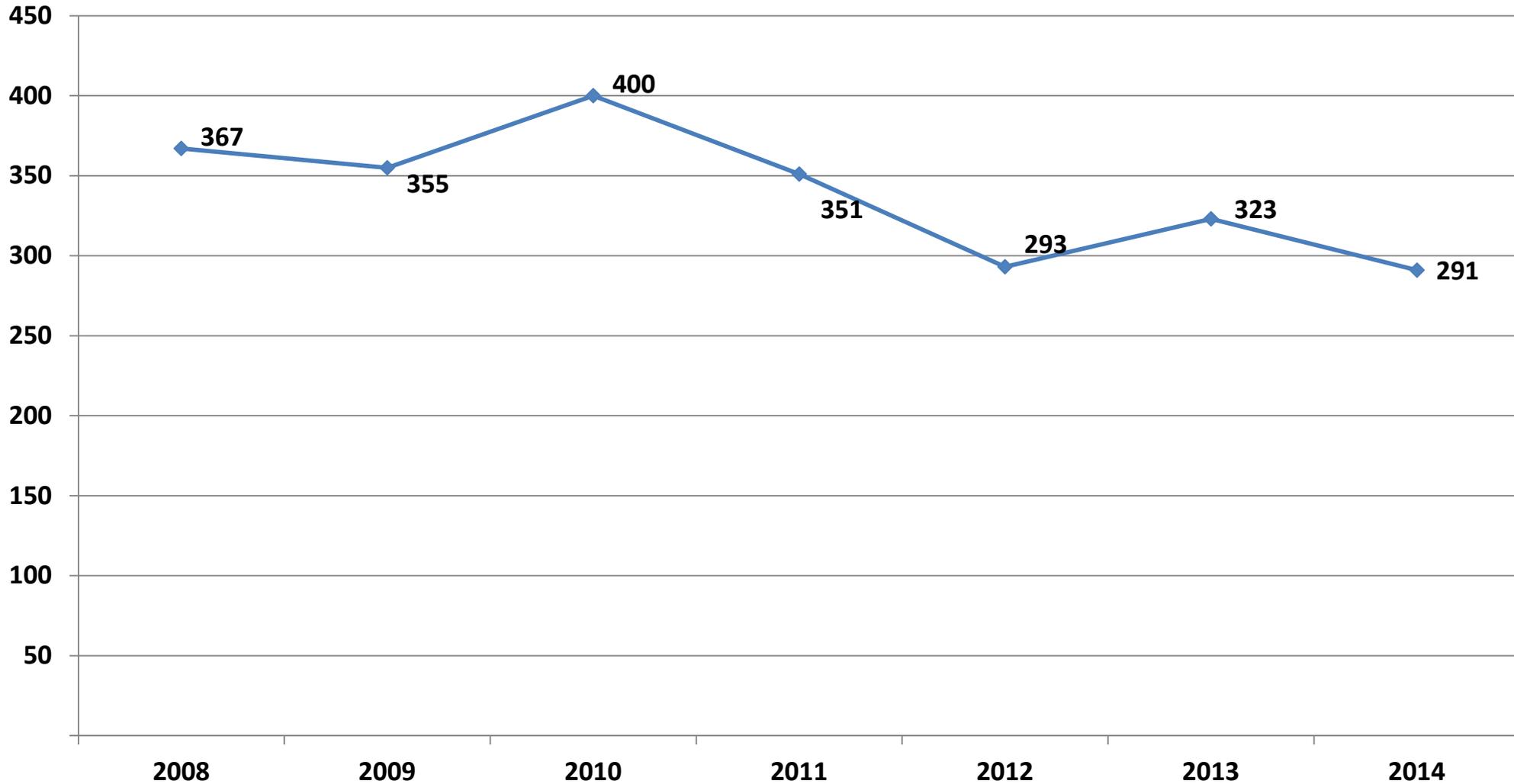
# Rate of New Chlamydia Cases, by Race and Ethnicity, Connecticut, 2007-2014



# Laboratory-Identified *Clostridium difficile* Infection, Acute Care Hospitals, Connecticut, 2014



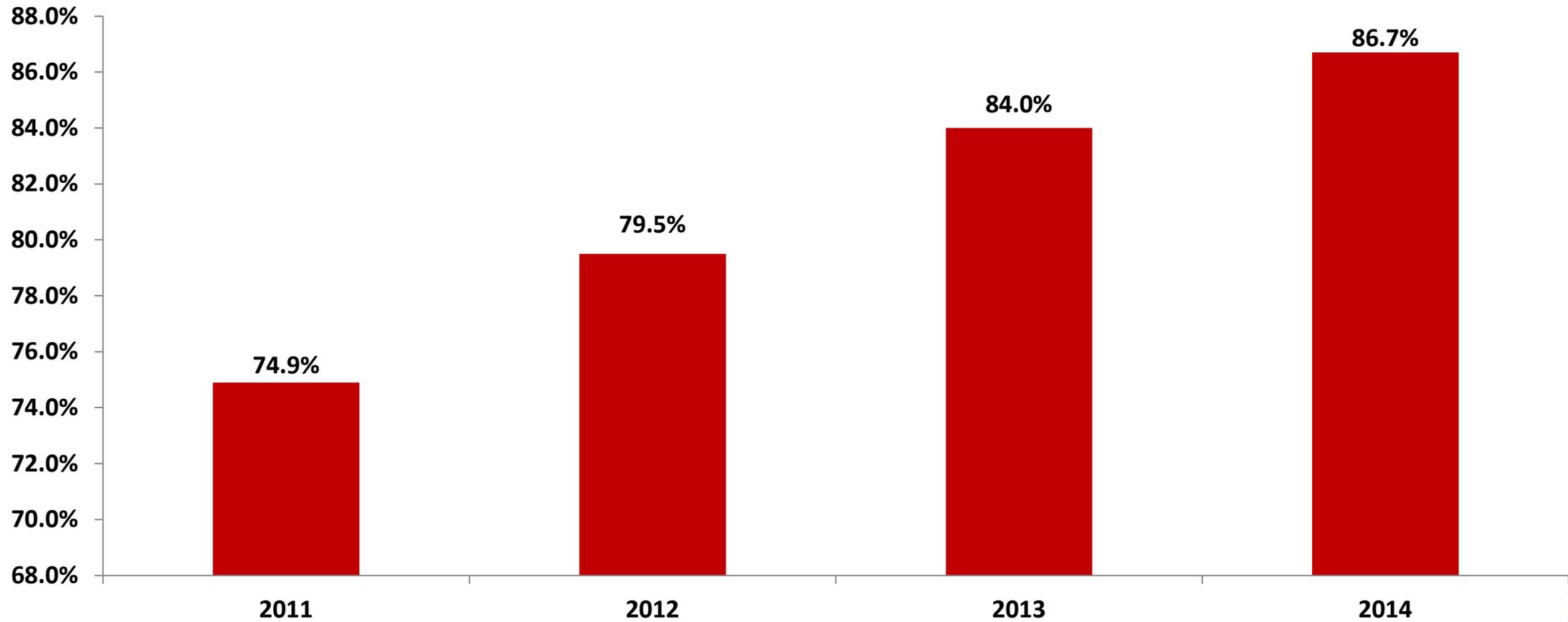
# Number Of New HIV Cases, Connecticut, 2008-2014



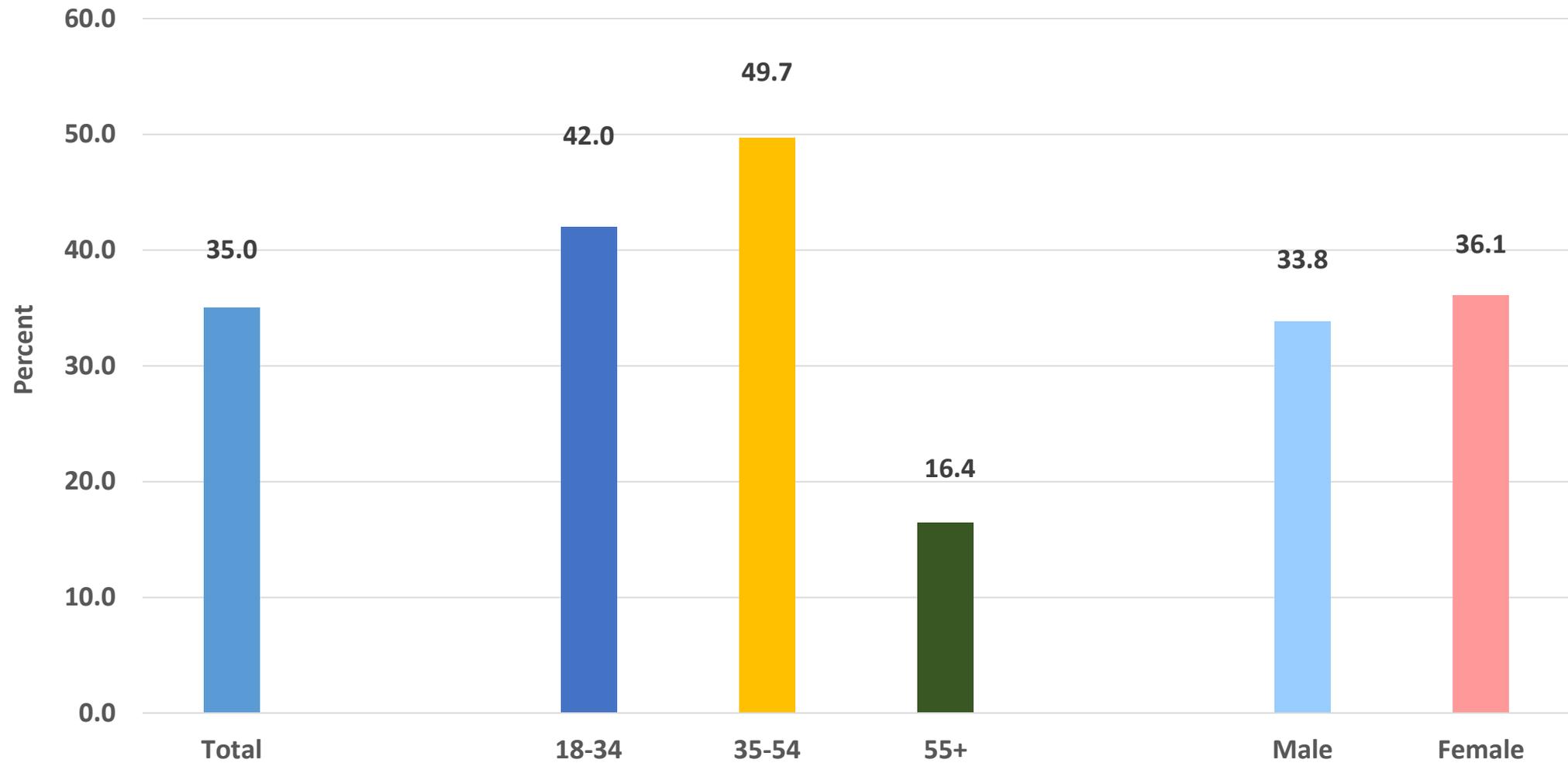
Data Source: CT DPH, eHARS Surveillance Database, 2014



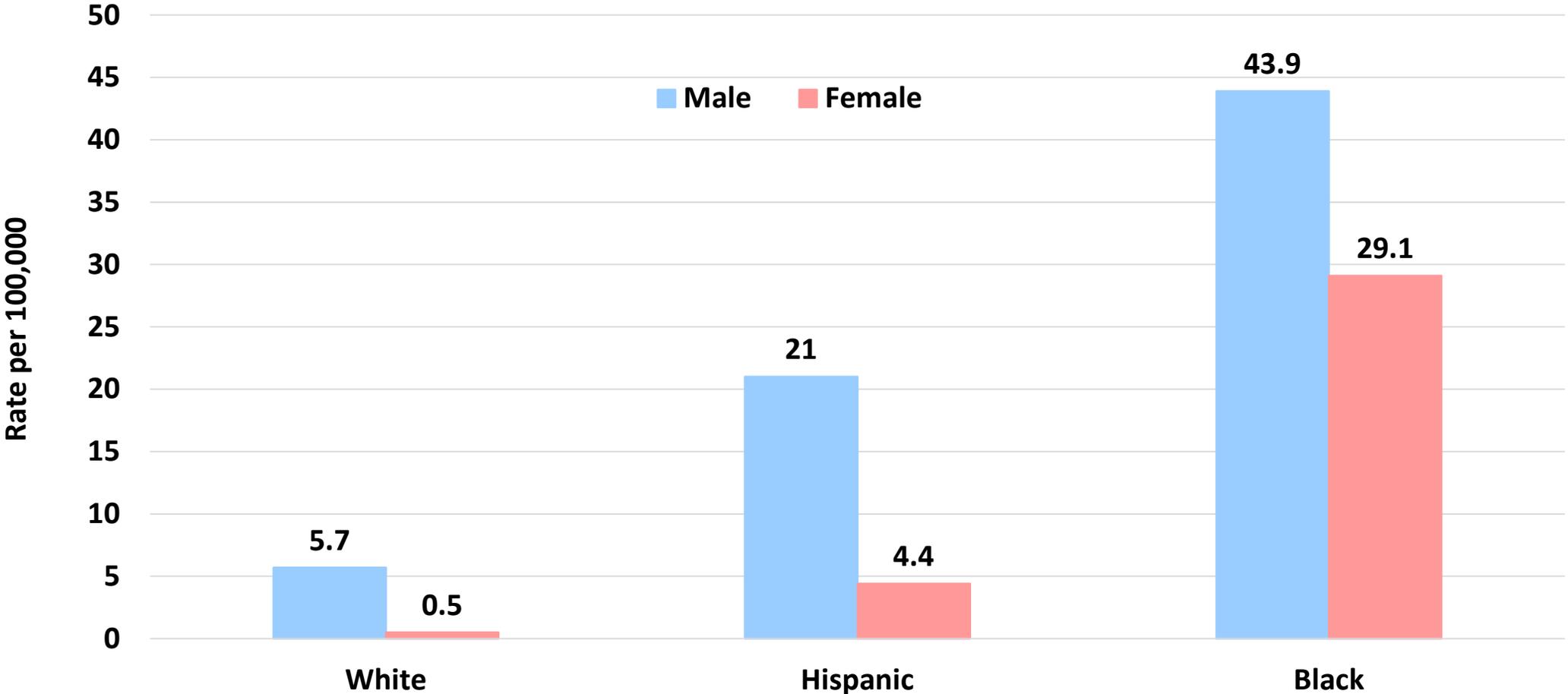
# Proportion of Known HIV-Positive Adolescents and Adults (in care) with Suppressed Viral Loads (i.e., 200 or Less Copies of Virus per Milliliter), 2011-2014



# Percent of People Ever Tested For HIV, Connecticut, 2014



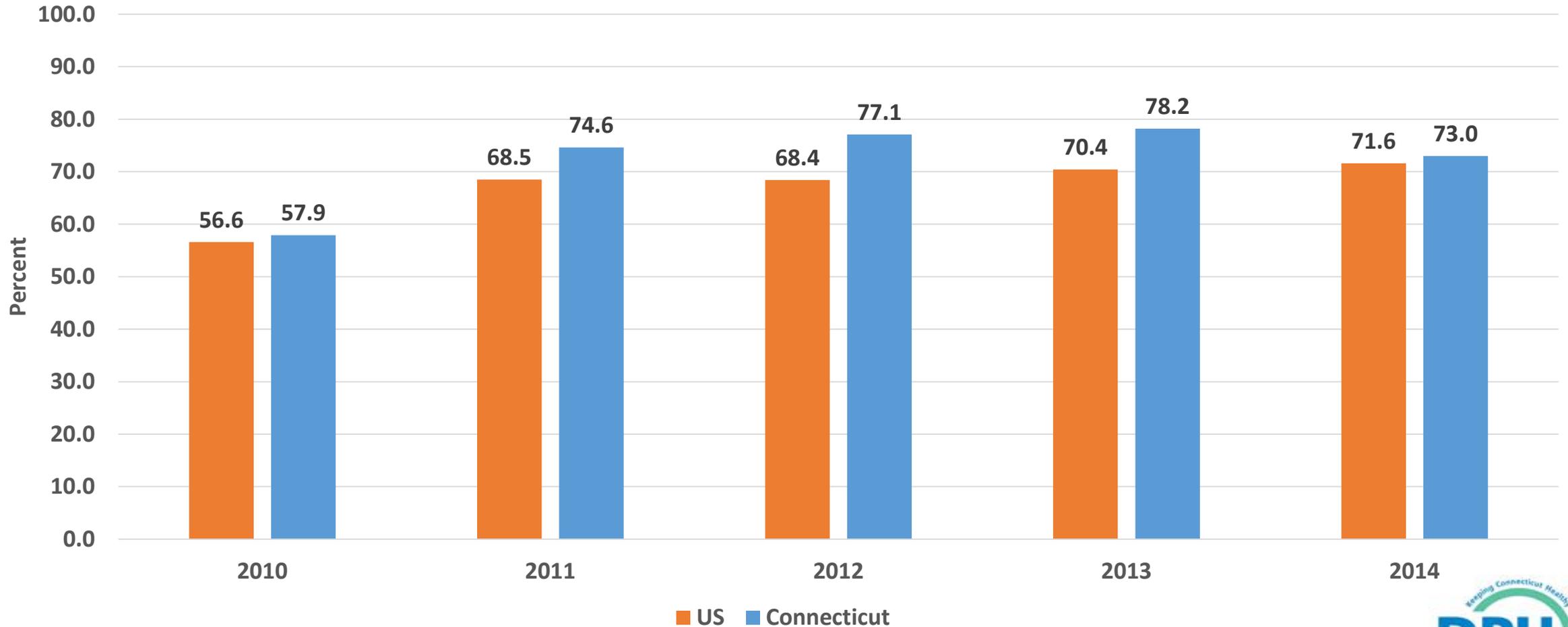
# Rate Of Newly Diagnosed HIV, by Sex And Race and Ethnicity, Connecticut, 2014



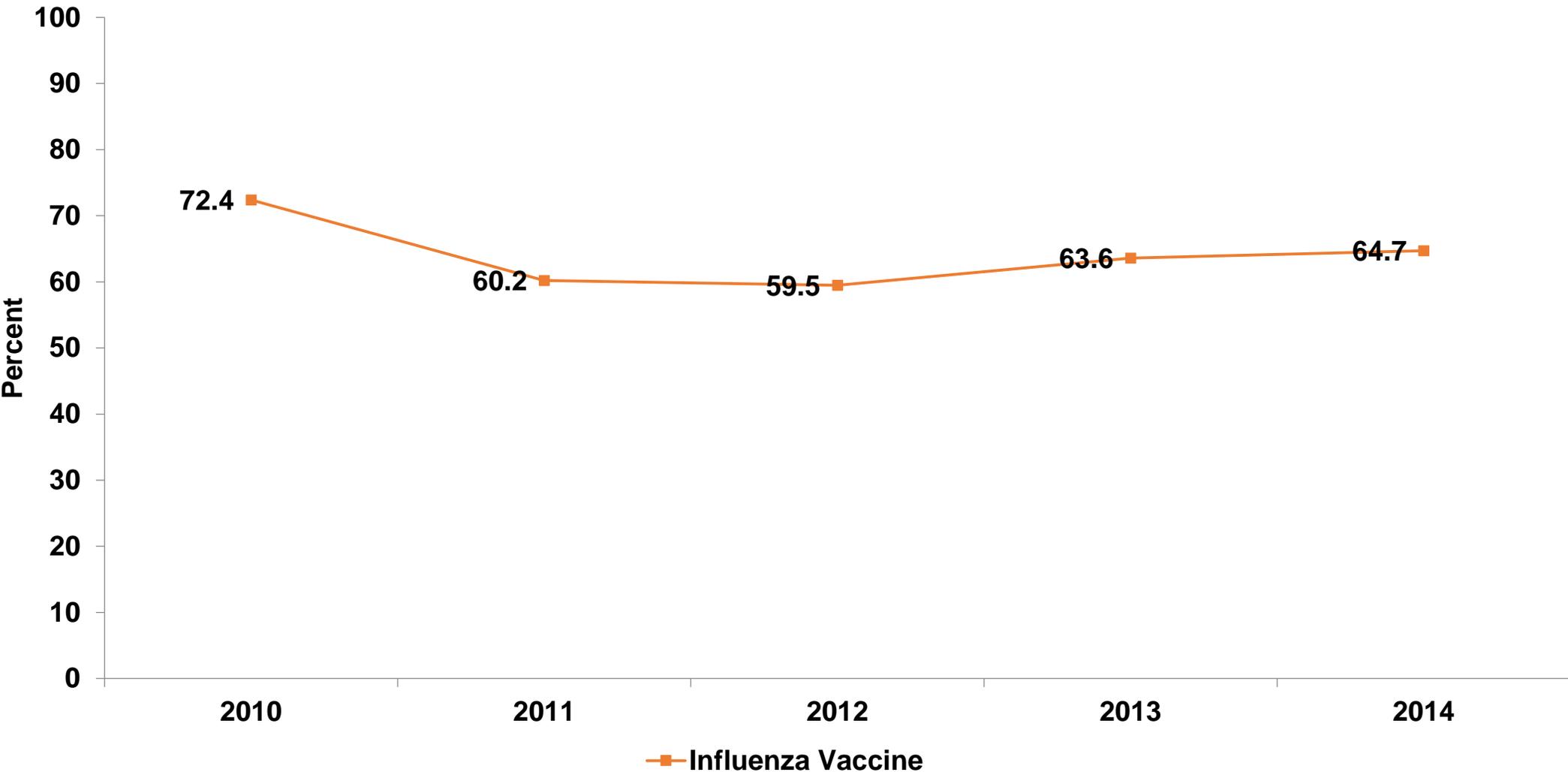
Data Source: DPH HIV Surveillance Registry, eHARS, and State-level Bridged Race estimates for Connecticut, 2014



# Percent of Children (19-35 Months) Who Completed the Recommended Vaccine Series, Connecticut, 2010-2014



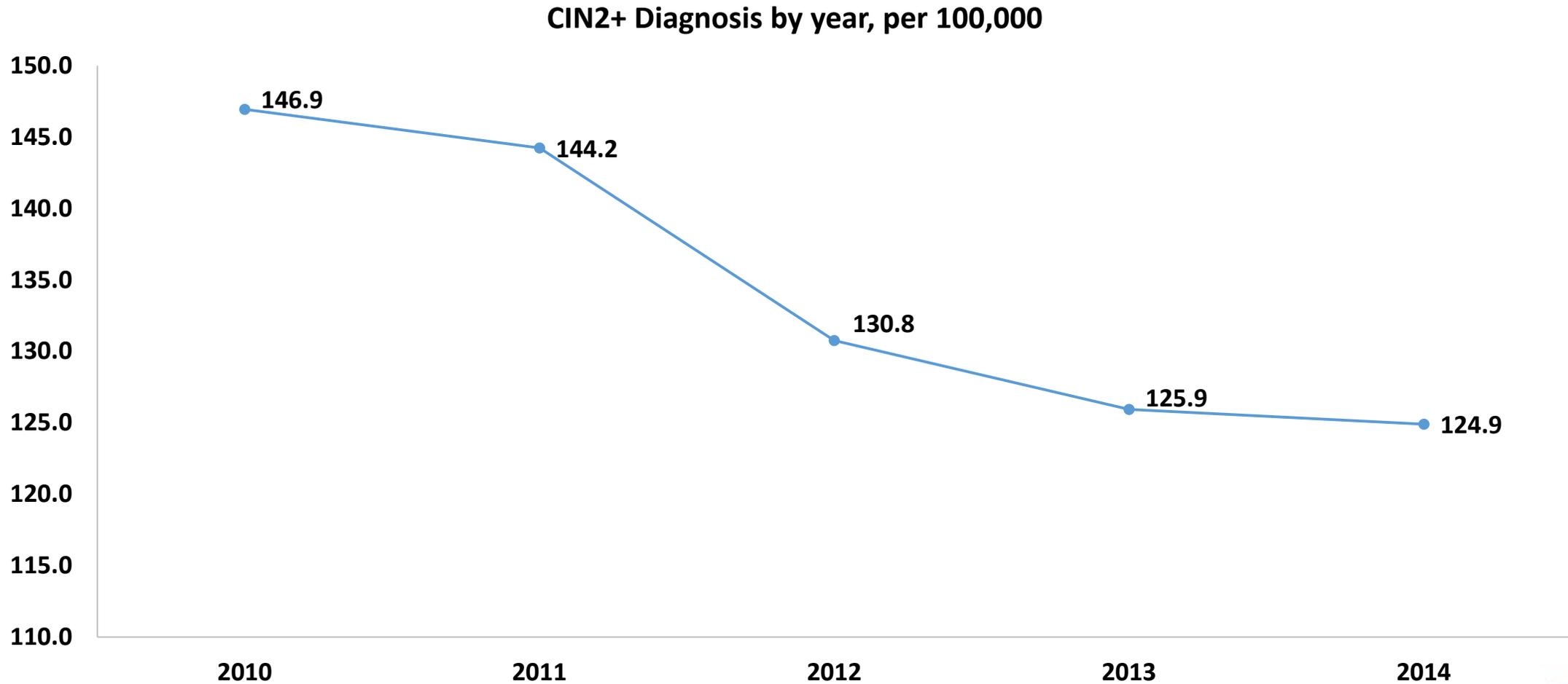
# Percent of Adults (65+ years) in Connecticut Who Are Vaccinated Annually Against Seasonal Influenza, 2010-2014



Data Source: <http://www.cdc.gov/brfss/brfssprevalence/index.html>

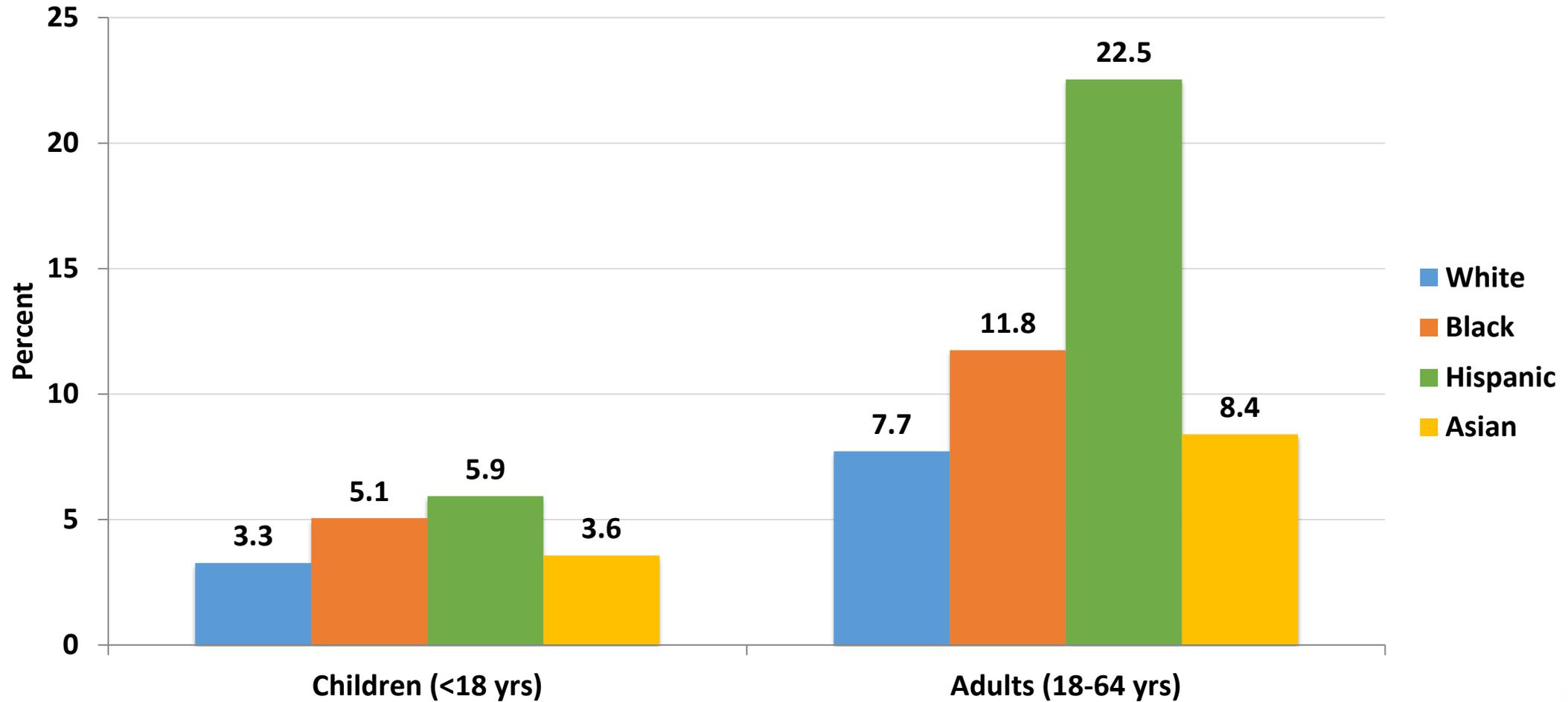


# HPV-Related Diseases: CIN2+ Diagnosis by Year, per 100,000 Connecticut Residents, 2010-2014

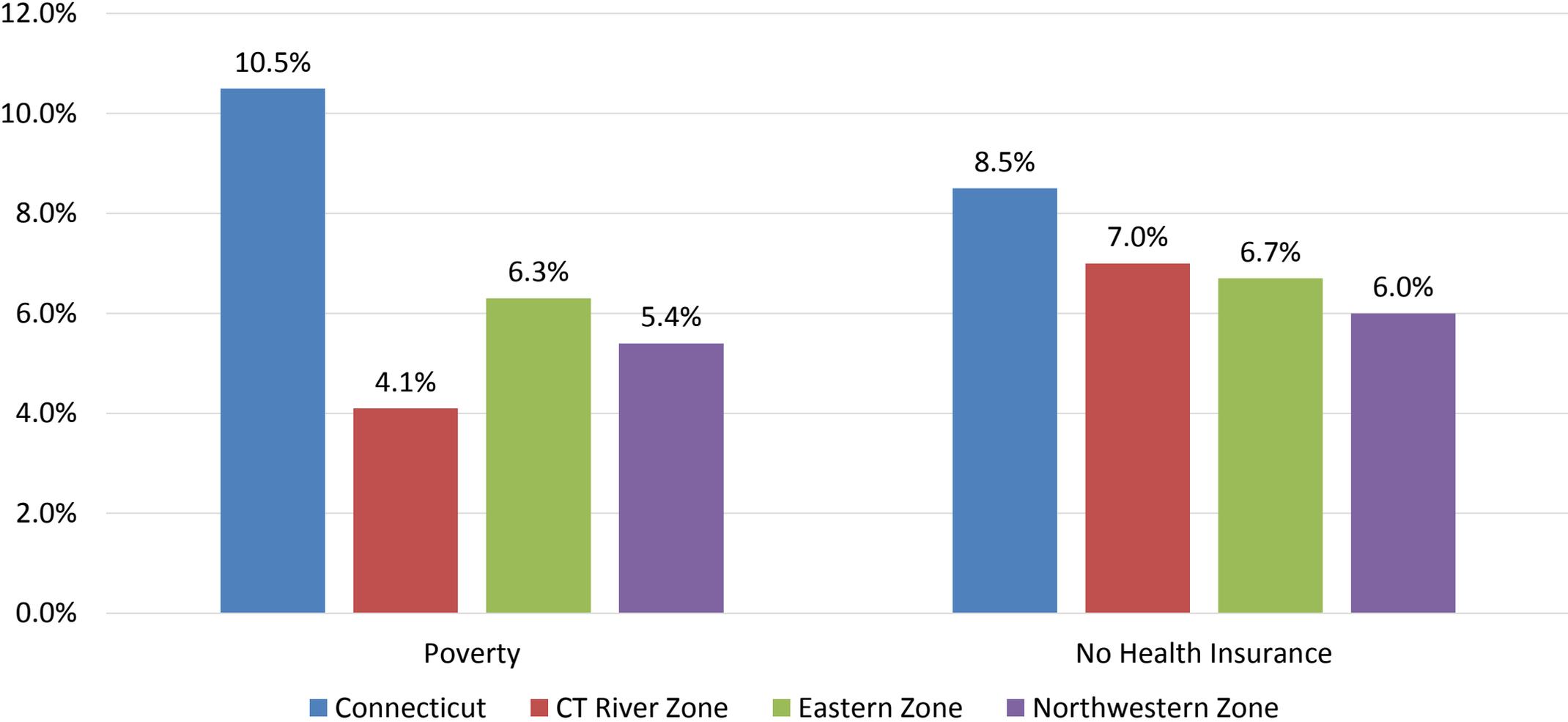


# HEALTH SYSTEMS

# Percent of Uninsured Children and Adults, by Race and Ethnicity, Connecticut, 2014



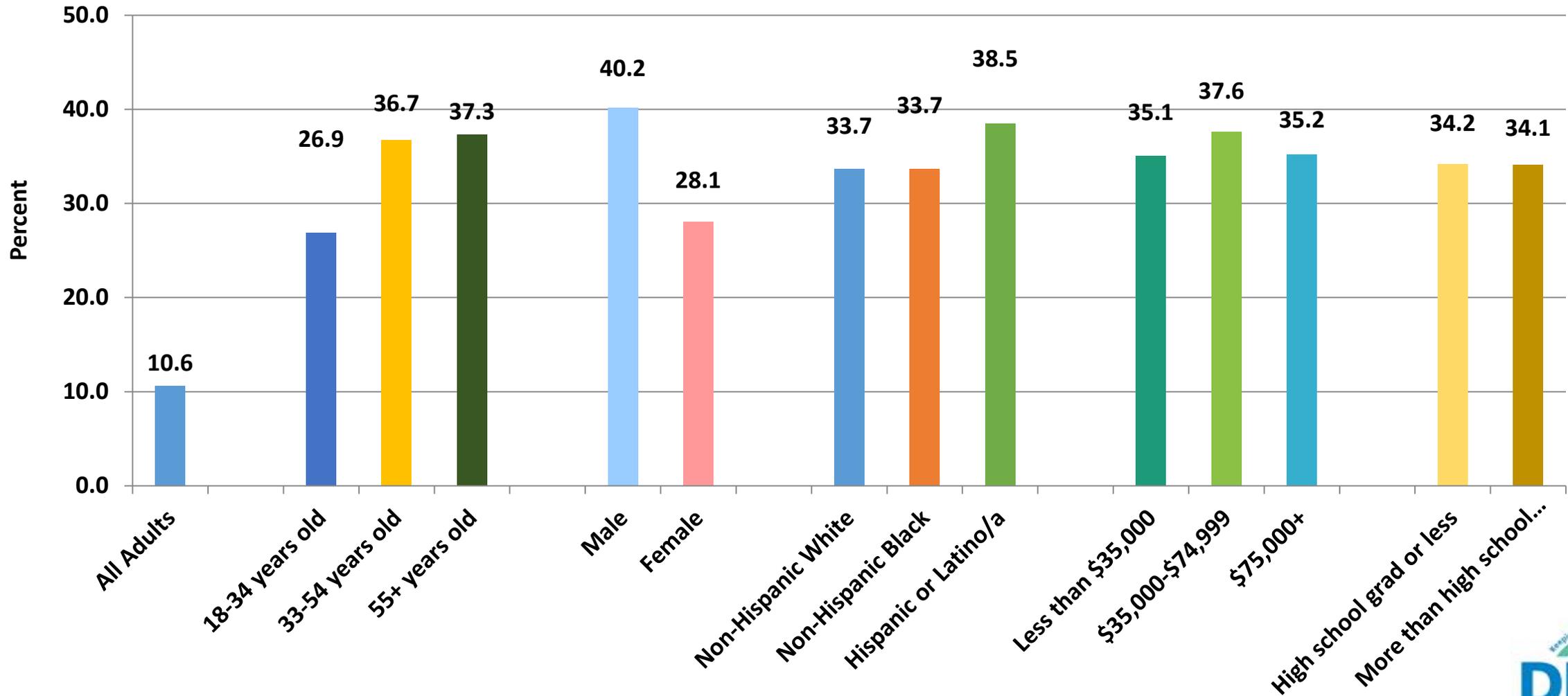
# Percent of Population in Poverty and Without Health Insurance, Connecticut and Rural Zones, 2014



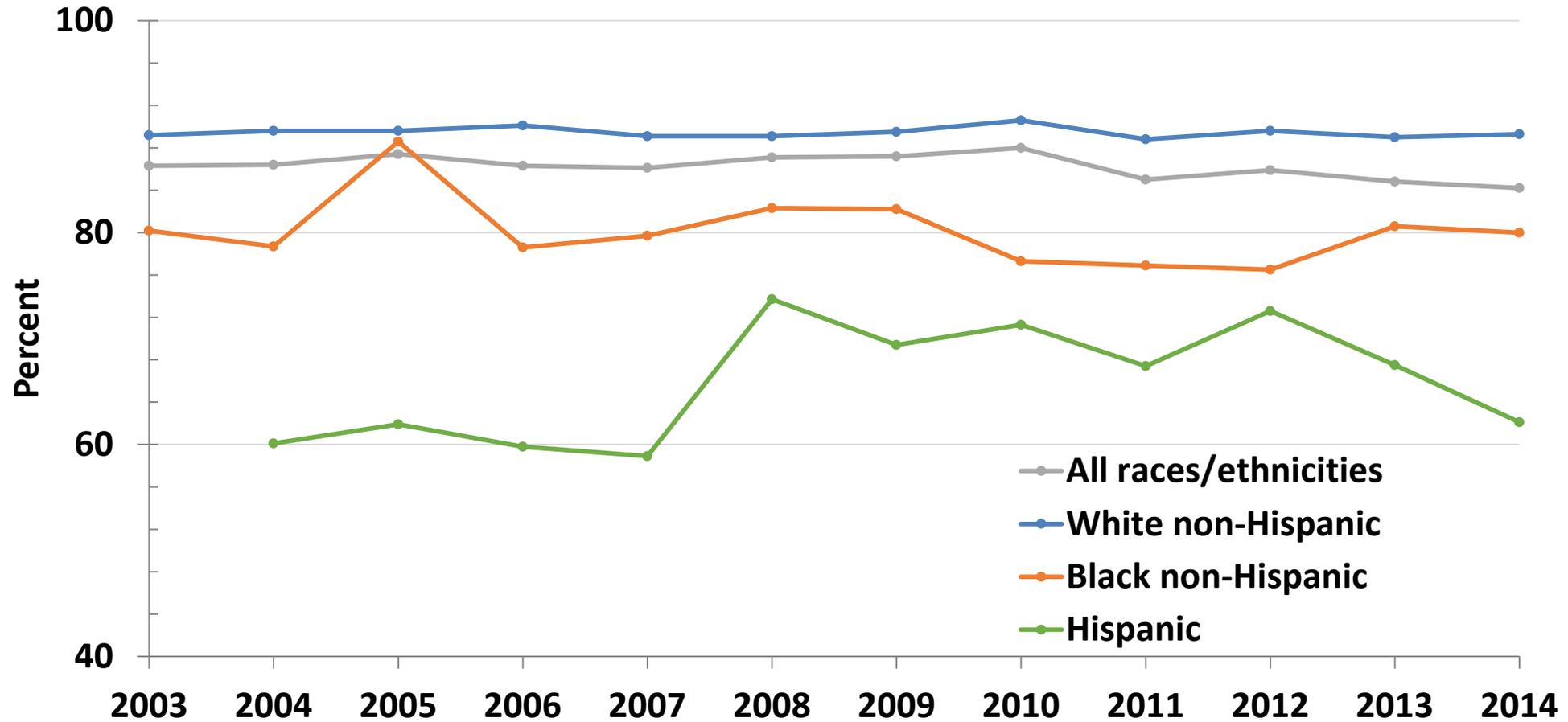
Data Source: American Community Survey, 2010-2014



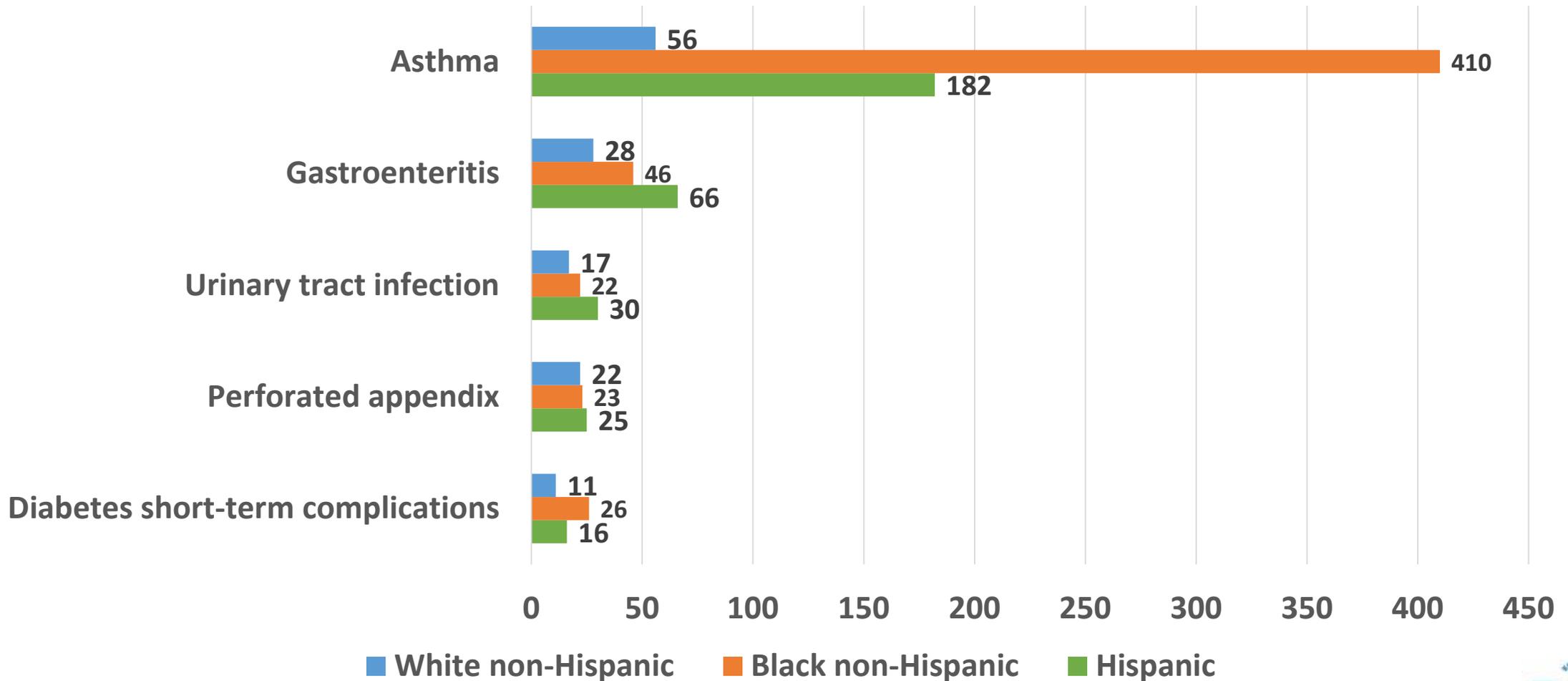
# Percent of Adults With No Primary Health Care Provider, Connecticut, 2014



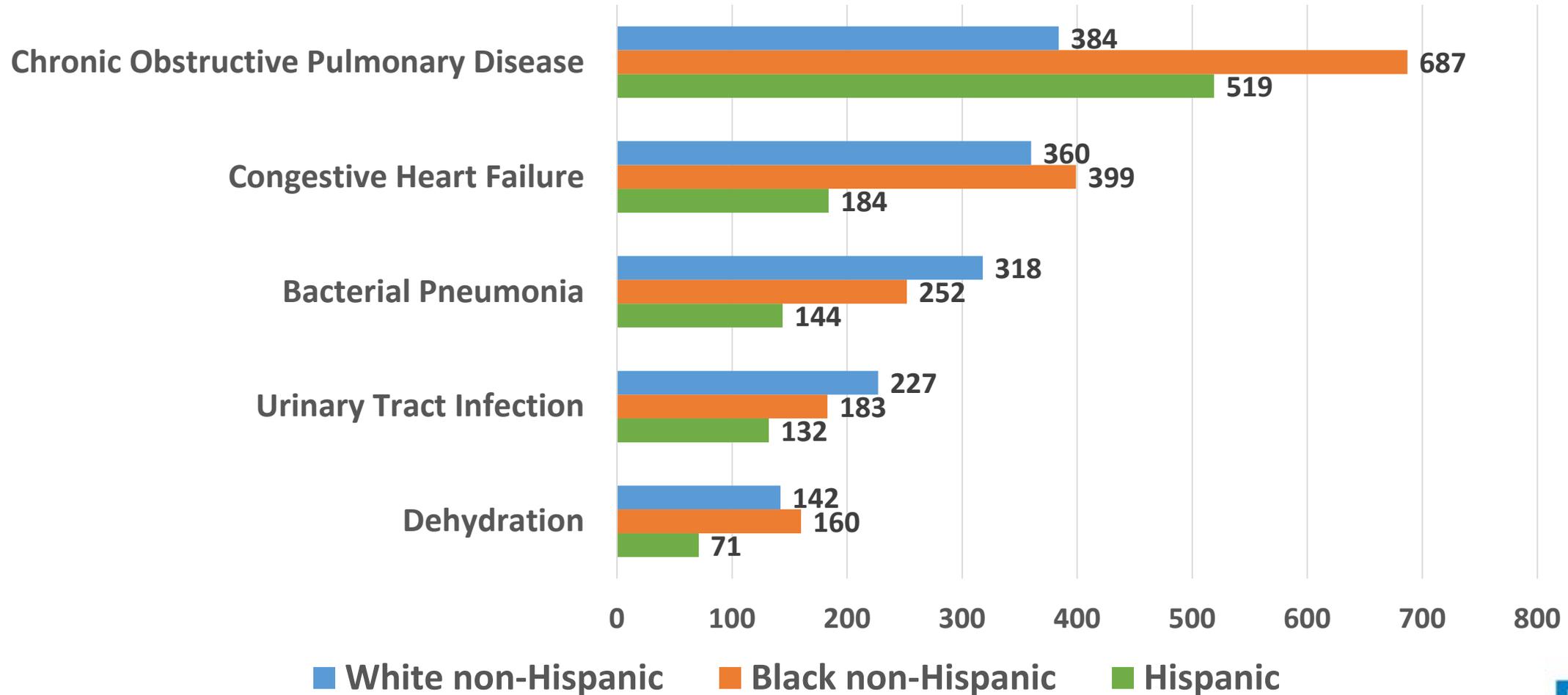
# Adults With At Least One Personal Doctor, by Race and Ethnicity, Connecticut, 2003-2014



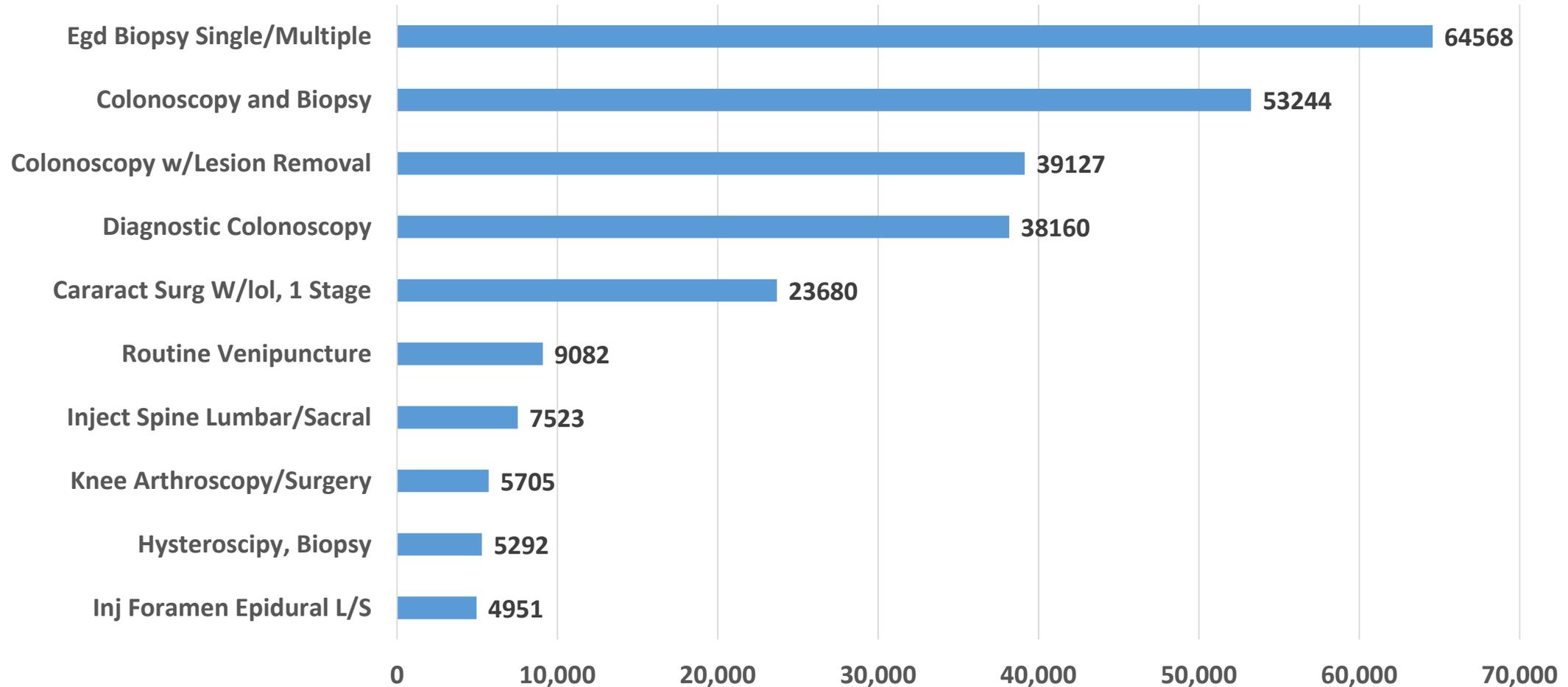
# Pediatric Preventable Hospitalization Rates, by Race and Ethnicity, Connecticut, 2012



# Adult Preventable Hospitalization Rates per 100,000, by Race and Ethnicity, Connecticut, 2012

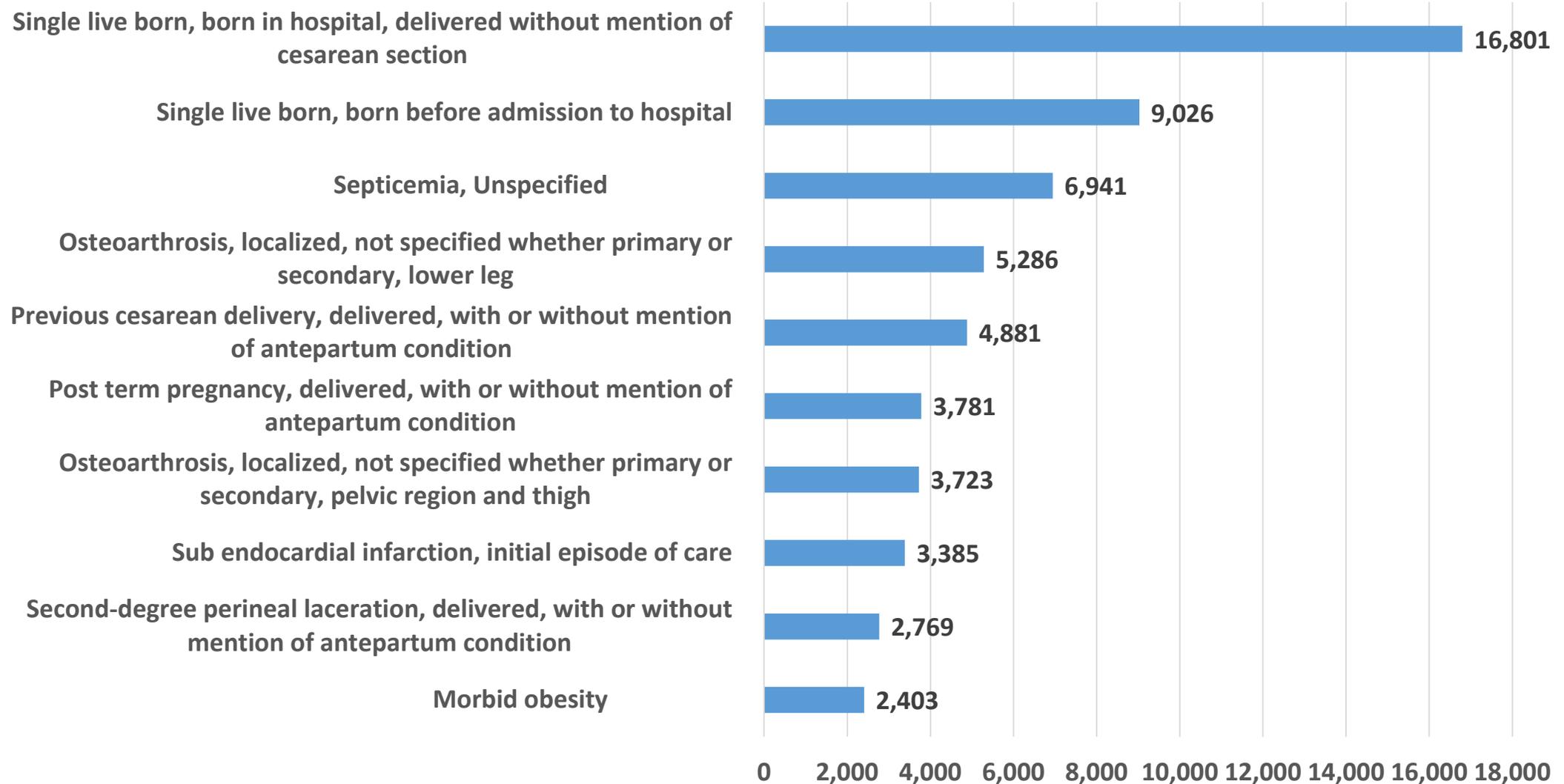


# 10 Most Frequent Outpatient Surgical Procedures Performed in Connecticut, 2015



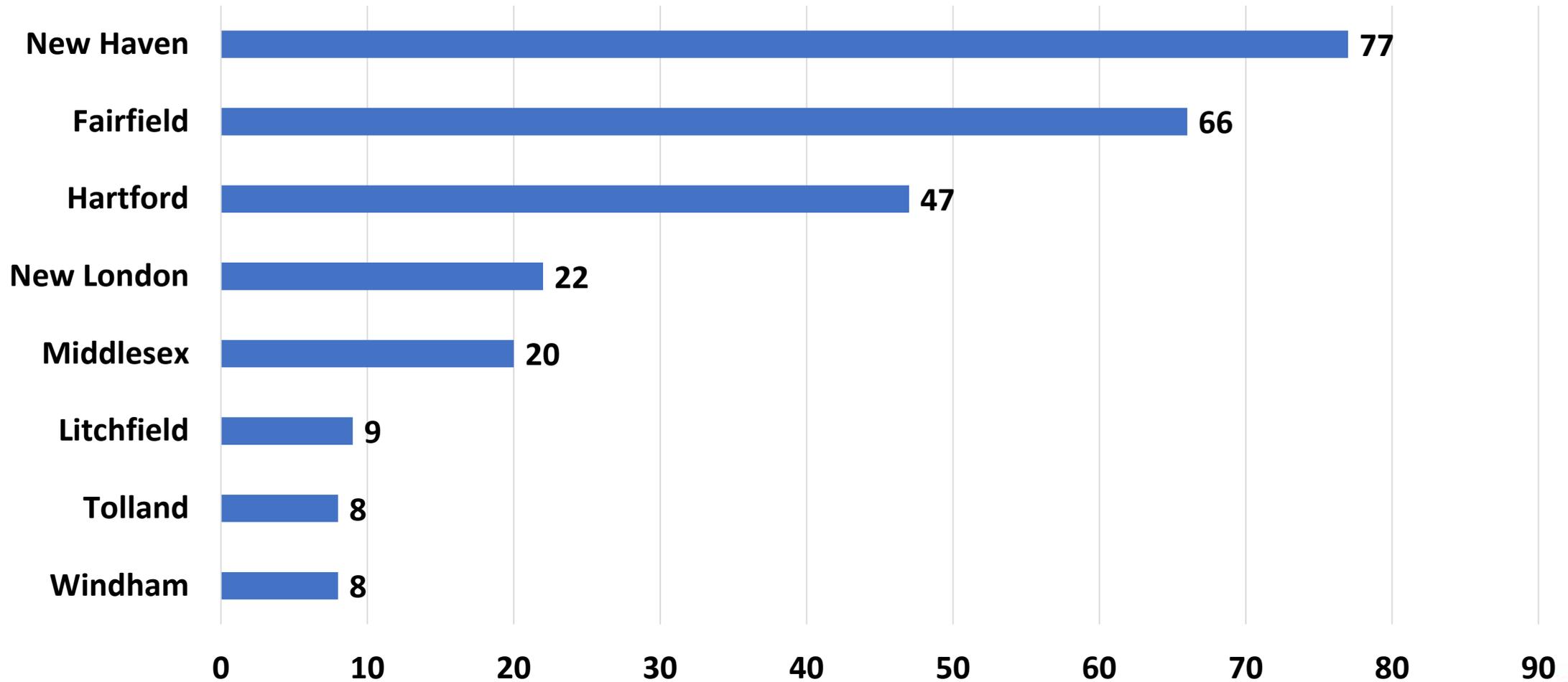
Data Source: CT DPH, Office Health Care Access Outpatient Surgery Database, 2016

# 10 Most Frequently Occurring Acute Care Hospital Inpatient Primary Diagnoses, Connecticut, 2015

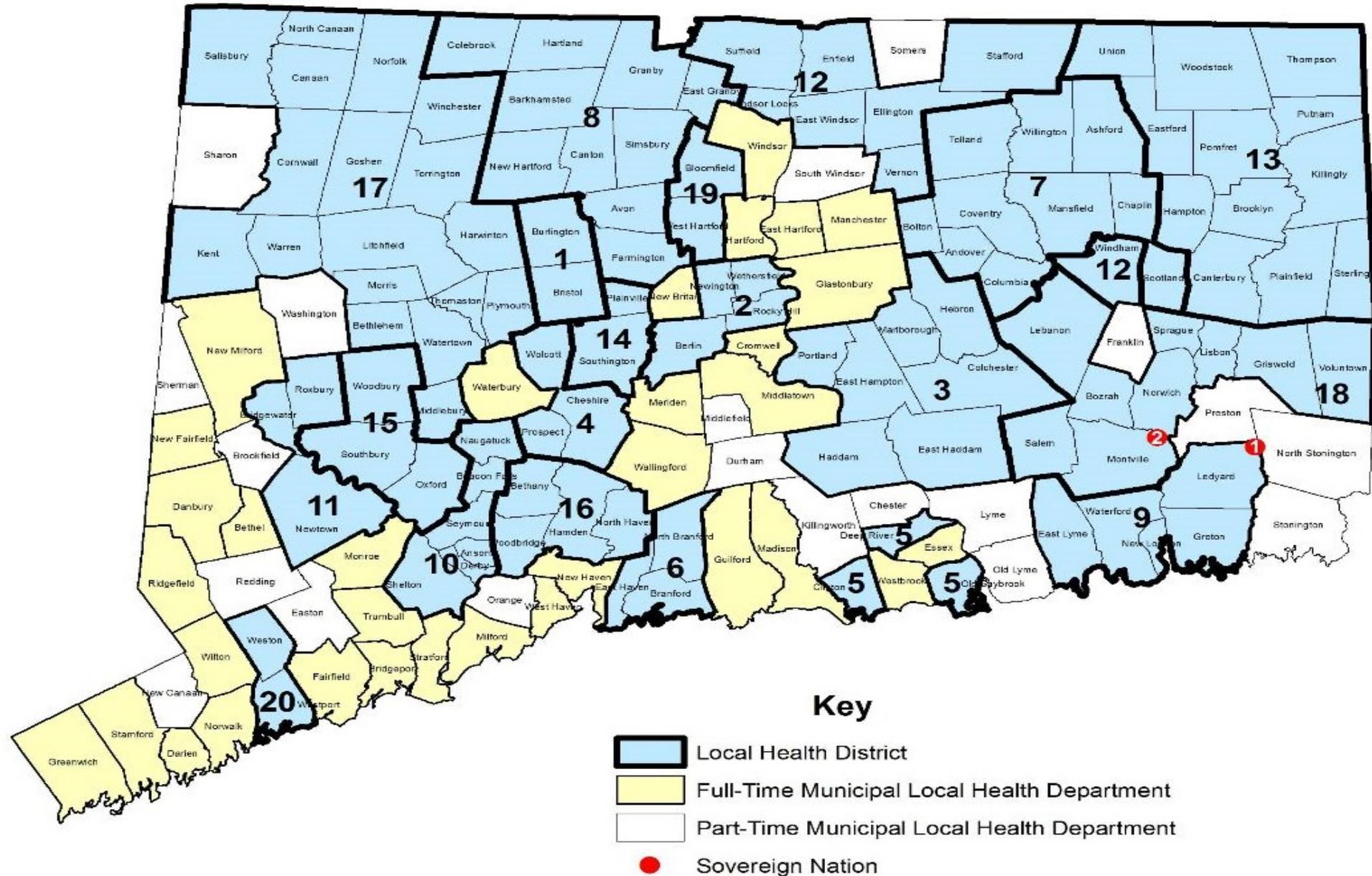


Data Source: CT DPH, Office Health Care Access Acute Care Hospital Inpatient Discharge Database, 2016, Office Health Care Access Outpatient Surgery Database, 2016

# Number of Federally Qualified Health Centers (FQHCs), by County, Connecticut, 2016



# Local Health Departments And Districts, Connecticut, July 2016



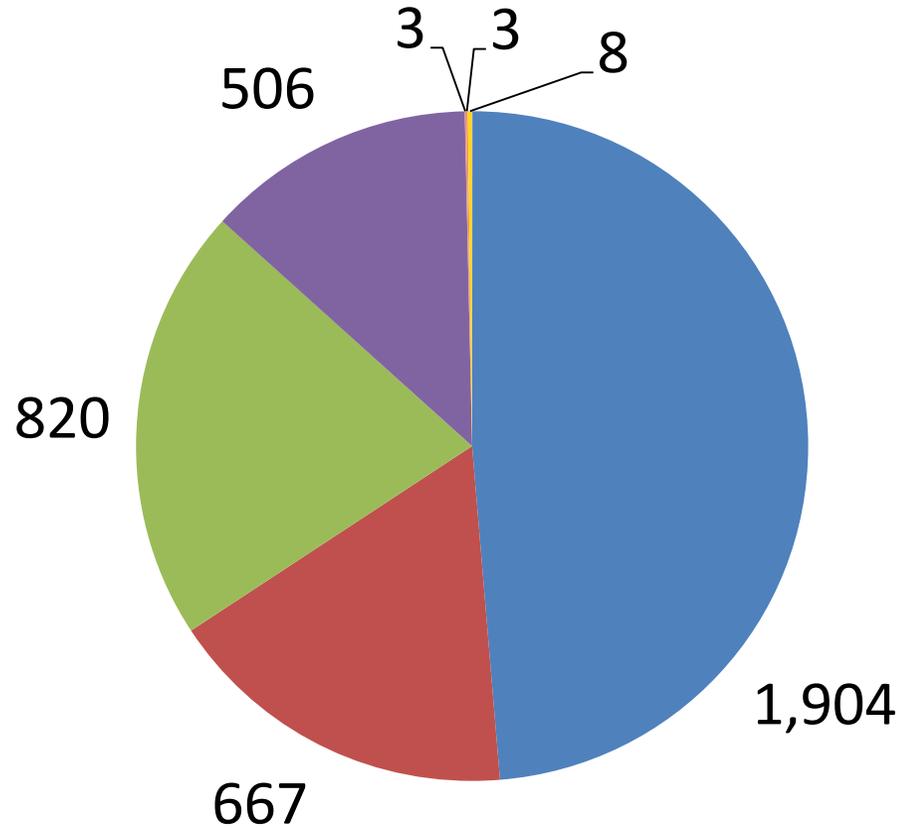
# CHNA: Most Common Areas of Concern

- Older Adult Health Issues
  - Transportation
  - Availability/affordability of senior assisted housing
  - Social support systems
  - Engagement in medical decision-making
  - Repair/maintenance required of them to remain independent in their own homes
  - Burden of chronic diseases
- Access to Care
  - Health Literacy
  - Cost of copays/medications
  - Absence of program/services tailored for special populations (homeless, mentally-ill, teens, ethnic and racial minorities)
  - Challenges navigating the insurance marketplace
- Community Infrastructure
  - Inadequate structures that fail to support physical activity
  - Accessibility to green spaces
  - Food deserts
- Asthma
  - Asthma management and prevention education
  - Environmental and housing conditions
- Mental Health & Substance Abuse Services
  - Ineffective existing programs
  - Limited treatment options (youth psychiatric and behavioral care)
- Obesity
  - Exercise and nutrition education
  - Heart Disease and Diabetes

# SPECIFIC POPULATIONS

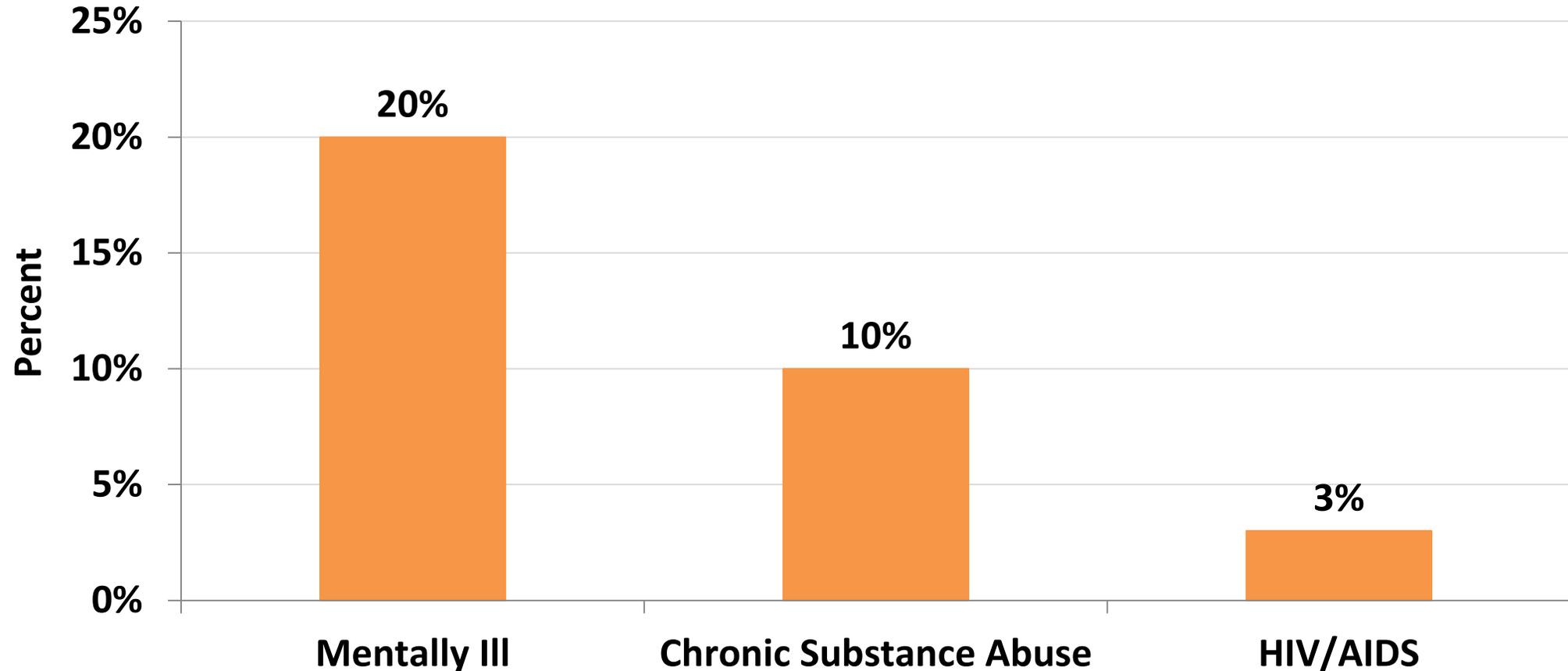
# Homeless Population, Connecticut, 2016

There were an estimated 3,911 homeless persons in Connecticut in 2016.

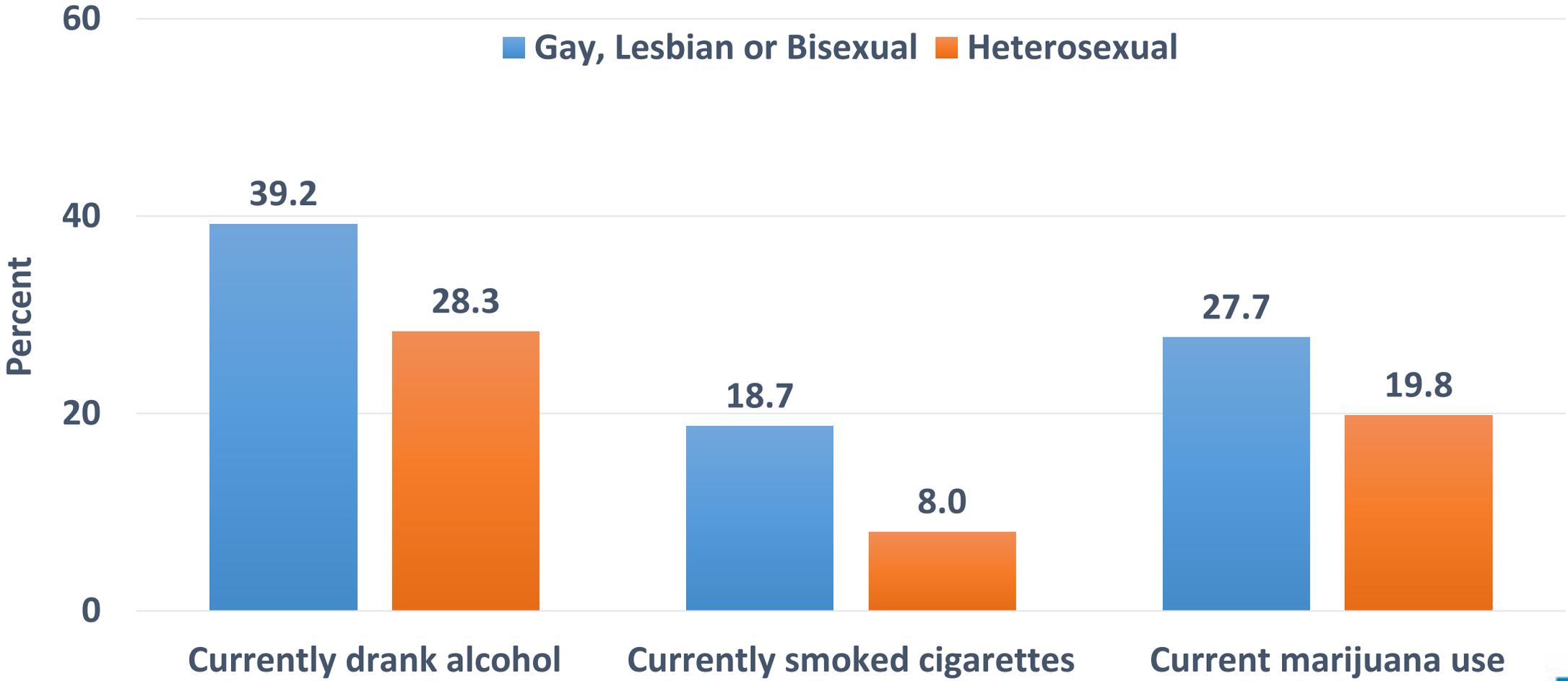


- Sheltered single adults
- Unsheltered single adults
- Children in sheltered families
- Adults in sheltered families
- Children in unsheltered families
- Adults in unsheltered families
- Sheltered unaccompanied children under age 18

# Common Service Needs Shared by a Large Proportion of Individuals Facing Homelessness, Connecticut, 2013



# Percent of Students (Grades 9-12) Who Smoke Cigarettes, Drink Alcohol, or use Marijuana, Connecticut, 2015

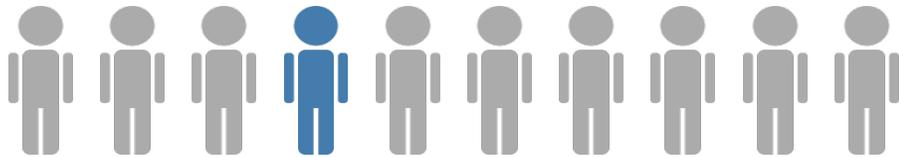


Data Source : 2015 Connecticut School Health Survey, Youth Behavior Component (YRBS)



# Sexual Identity and Health-Risk Behavior Among Students in Grades 9-12, Connecticut, 2015

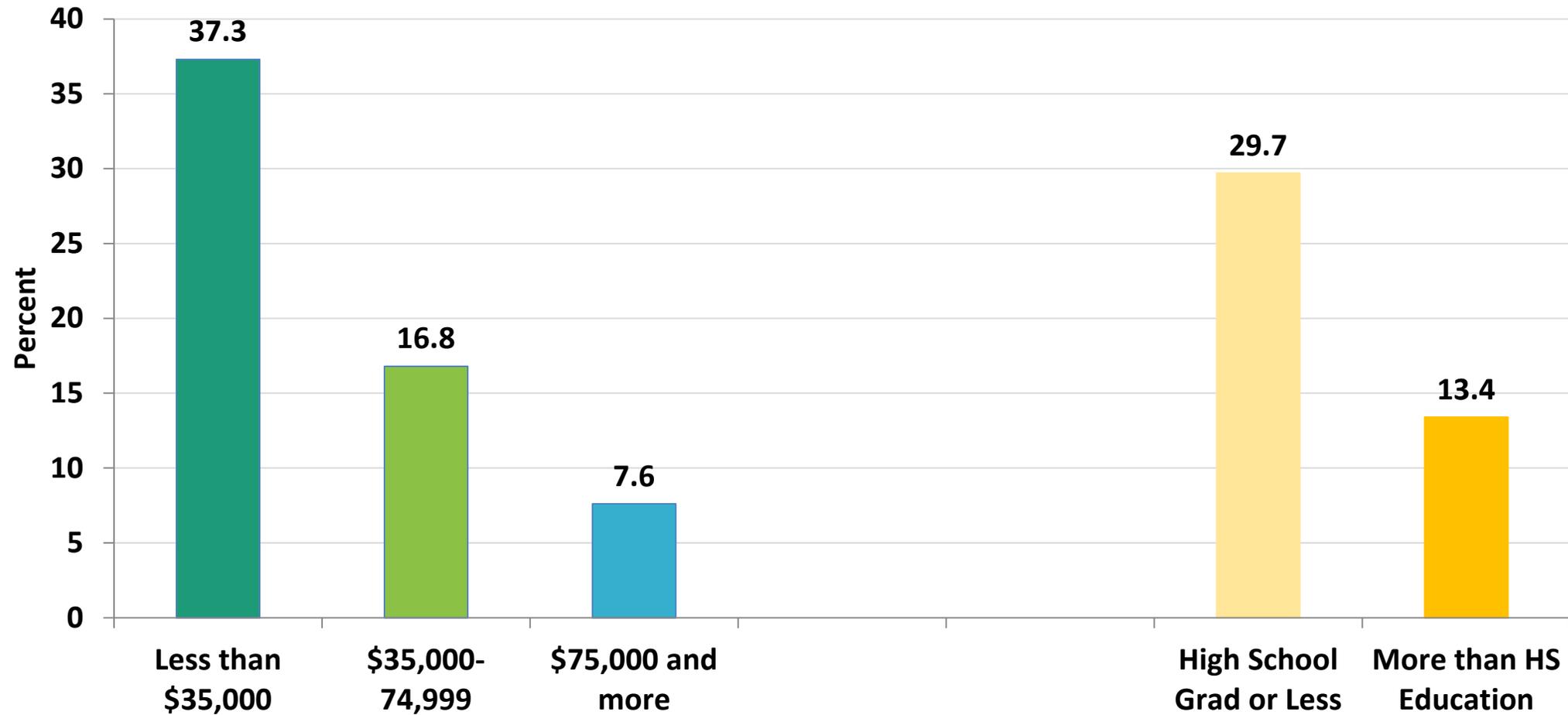
In Connecticut, about 1 out of 10 high school students (9.5%) identifies as gay, lesbian or bisexual



Gay, Lesbian or Bisexual students are more at risk for unhealthy behaviors than heterosexual students

Risk behavior	Gay, Lesbian, Bisexual more likely than Heterosexual
Risky sexual behavior	☑
Victim of bullying	☑
Poor mental health	☑
Cigarette, alcohol, drug abuse	☑
Physical inactivity	☑
Regular soda drinking	☑
Skip breakfast	☑
Lack family support	☑
Housing insecurity	☑
Insufficient sleep	☑
Skip routine well-visits	☑

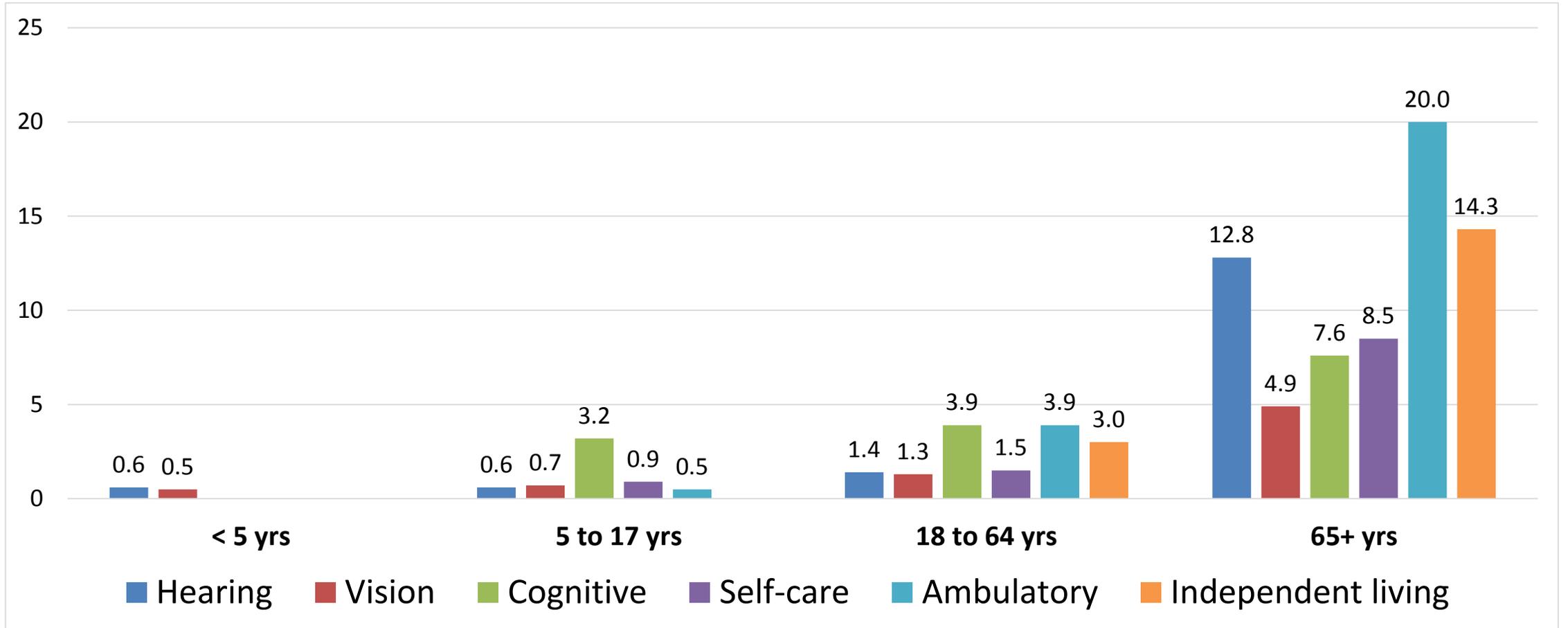
# Percent of Population with Disability, by Income and Education, Connecticut, 2014



Data Source: US Census Bureau, American Community Survey, 1-Year Estimates, 2014, Table S1810.



# Percent of Population With Disability, by Age Group, Connecticut, 2014



Data Source: US Census Bureau, American Community Survey, 1-Year Estimates, 2014, Table S1810.



# Conclusions

- Our population is becoming younger and more diverse, putting them into a high risk category for risk behaviors like smoking, drinking, having unsafe sex, etc.
- Chronic diseases, cancer and accidental injuries top the list of causes of premature death in Connecticut.
- Residents that have lower-income, ethnic minorities, specific age groups such as youth, young adults and older adults are more likely than their counterparts to have risk factors for many diseases.
- Limitations on accessing and collecting data on health costs, specific populations, and in a regional capacity, remain a challenge for planning and policymaking.
- Vulnerable adults, sexual minorities, veterans, and the prison population also have higher prevalence rates for some risk factors and suffer from many conditions at disproportionately high rates.
- Opportunities exist to address obesity, smoking, and other risk factors for chronic diseases, and to prevent accidental and intentional injuries and infectious diseases.