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ACKNOWLEDGMENTS

This Connecticut State Health Assessment was developed by the Connecticut Department of Public Health with the assistance of the Connecticut Health Improvement Coalition, and its Action Teams and Advisory Council.

This Assessment is the result of more than a year of dedicated and collaborative effort of DPH staff, staff from several other State agencies, and subject matter experts throughout the state who analyzed and contributed data and reviewed multiple iterations of this document as it evolved. This Assessment would not have been possible without their expertise and commitment to this project.

We gratefully acknowledge the contributions of our consultant,

Health Resources in Action

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PREFACE



Letter from the Commissioner

To Our Residents and Public Health Partners:

The Connecticut Department of Public Health is pleased to present the *Healthy Connecticut 2025* State Health Assessment. Subject matter experts from the Connecticut Department of Public Health (CT DPH), in collaboration with other state agencies, statewide partners and community organizations, have assembled data reflecting on the health and safety of Connecticut residents. The last such document was published in 2014.

The State Health Assessment establishes the health status of the state, and will inform the prioritization and development of the next *Healthy Connecticut 2025* State Health Improvement Plan (SHIP). This plan will serve as a 5-year roadmap for promoting and advancing population health in our State. Statewide partners from the Connecticut Health Improvement Coalition, along with CT DPH, will begin the collaborative development of the SHIP in January 2020.

While Connecticut is a healthy state overall, this assessment highlights the challenges faced around achieving health equity for all our residents. The Centers for Disease Control and Prevention (CDC) states that health equity is achieved when every person has the opportunity to "attain his or her full health potential" and no one is "disadvantaged from achieving this potential because of social position or other socially determined circumstances." CT DPH is committed to enhancing health equity for our state; this document is an affirmation that equitable access to healthcare and addressing those social conditions that impact health is a basic human right.

The *Healthy Connecticut 2025* initiative will focus on making the connection between social determinants and health outcomes. To experience success with these efforts we must prioritize examining the impact of social, behavioral and environmental factors on health to better inform policies and promote systemic change, while exploring collaborative place-based initiatives with our municipal and local health partners. It is our hope that we continue to work together to address the needs of Connecticut residents and afford every single person the opportunity to be as healthy as possible.

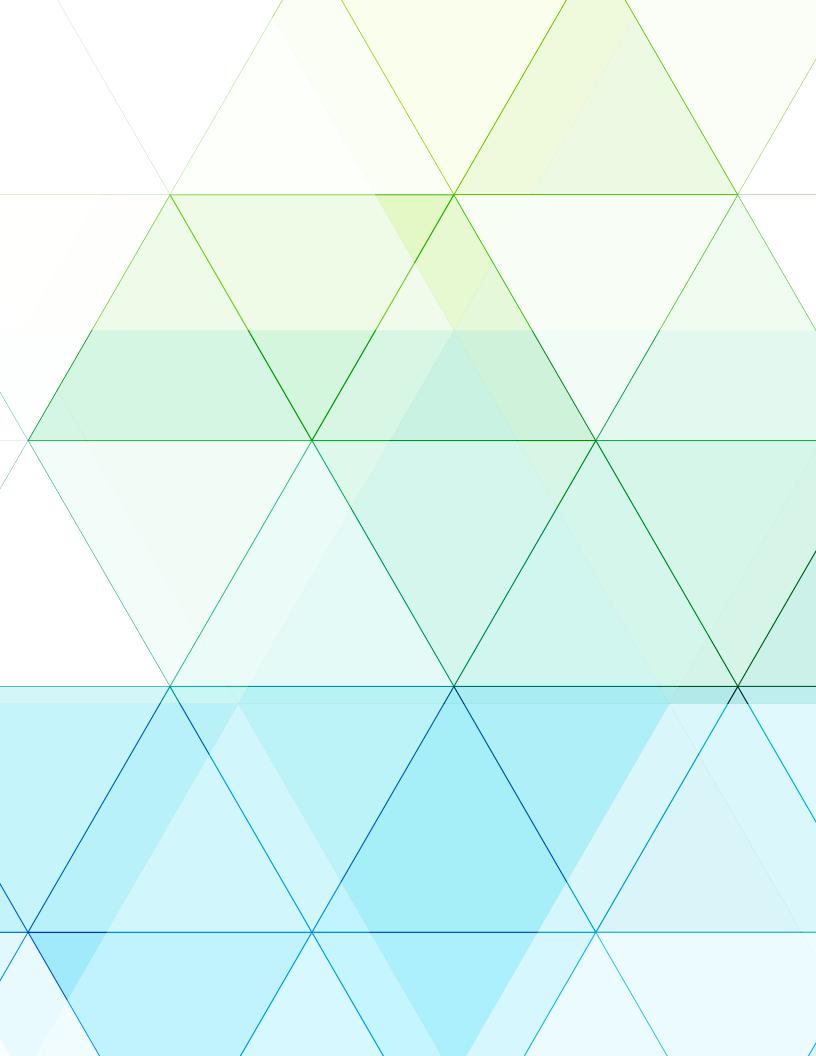
We look forward to collaborating with you in the future on this important work.

Sincerely,

Deidre S. Gifford, MD, MPH

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Acting Commissioner



Introduction & Process



INTRODUCTION AND PROCESS

What is the State Health Assessment?

The 2019 Connecticut State Health Assessment is an update on the health status of Connecticut residents with a focus on the social determinants of health that are having the greatest impact on health outcomes. The assessment provides the basis for the Connecticut State Health Improvement Plan, which together make up the state health planning framework *Healthy Connecticut 2025*.

The purpose of the assessment is to provide the public, policy leaders, partners, and stakeholders with information on the health of the Connecticut population to develop a shared understanding of health issues and inform data-driven decision making and program planning. This state health assessment is an important tool to help identify the underlying conditions and factors that influence health, reflect on existing services and policies, and inform future public health planning for the benefit of all Connecticut communities.

Vision for Health Equity

Connecticut has a bold vision for *Healthy Connecticut 2025*. More specifically, the Connecticut Department of Public Health (CT DPH) and partners envision the following:

Through effective assessment, prevention, and policy development, the Connecticut Department of Public Health and its stakeholders and partners provide every Connecticut resident equitable opportunities to be healthy throughout their lifetimes and are accountable to making measurable improvements toward health equity.

This vision lifts up a number of guiding principles that we uphold to center health equity:

- A focus on every Connecticut resident: We strive for all Connecticut residents to experience optimal health and wellbeing.
- Attention to the health needs of residents **throughout their lifetimes.**
- A need to collaborate as stakeholders and partners:
 No one entity can advance health equity in isolation. A multi-sector and community-engaged approach is necessary to effectively understand the interconnected social determinants that impact health, and effectively address the practices, policies, and systems that support them.
- A multi-pronged approach through assessment, prevention, policy development and accountability to achieve measurable improvements in health equity.

More information about health equity, health disparities, and the Social Determinants of Health can be found in the Describing Connecticut chapter.

Methodology

The Healthy Connecticut 2025: State Health Assessment was ultimately guided by Connecticut's vision for health equity. The health indicators selected to be presented in the assessment reflect the social determinants of health that are impacting residents and highlight where health is experienced differently based on geographic or demographic characteristics.

The development of this assessment incorporated the Mobilizing for Action through Planning and Partnerships (MAPP) framework and Public Health Accreditation Board (PHAB) standards and measures. A cross-disciplinary team of internal and external stakeholders was engaged to develop a vision for *Healthy Connecticut 2025* and to prioritize a list of health indicators for inclusion in the report. In addition, community members were provided opportunities to contribute to the development of the assessment through surveys and focus groups, and finally through a public comment period.

ENGAGEMENT PROCESS

This assessment collected data and feedback from Connecticut residents and partners in several ways: a community survey, targeted focus groups with priority populations of interest, a public comment period, and data presentations to State Health Improvement Coalition ("Coalition") members and local partners.

Community Survey

To gather broad input from as many Connecticut residents as possible, CT DPH developed a 28-question Community Health Priority Survey to identify health issue priorities for their communities. The survey, available both in English and Spanish, was conducted anonymously to encourage respondents to share openly their opinions about community needs and weigh in on where Connecticut should prioritize resources to improve the health of their community. Surveys were distributed online through the Coalition, a diverse partnership of local, regional, and statewide organizations and agencies that forwarded the survey to their networks and partners. Over 1,000 survey responses were collected, with at least one response from 85% of the 169 towns in the state. In addition to the online survey, a shorter 12-question survey was also developed and distributed to populations of focus in collaboration with faculty and students from the University of Connecticut School of Public Health.

These populations of focus included:

- Parents of children with special healthcare needs
- People receiving services from the Connecticut Department of Social Services
- Patients of Federally-Qualified Health Centers (FQHCs)

Community Focus Groups

Fourteen focus groups were conducted in collaboration with faculty and students from the University of Connecticut School of Public Health. The purpose of these focus groups was to identify community health concerns, assets and barriers to health; recommendations to address community health priorities; and residents' vision for the future. Populations represented in focus groups included:

- Aging Adults
- Black/African-American Women
- Families Affected by Alzheimer's

- Families Affected by Autism
- Families of Children with Special Healthcare Needs
- Formerly Incarcerated Persons
- Hispanic Community
- Immigrants and Refugees
- LGBTQ Aging Adults
- LGBTQ Younger Adults
- Veterans and their Families

Public and Partner Input

CT DPH held two data presentations with the Coalition and local health partners to share preliminary findings from the health assessment and solicit feedback on its development. Both presentations occurred in August 2019. In addition, to further ensure that this report represents the perspectives and speaks to the most important needs of our state's residents, CT DPH presented a draft of this assessment report on its website for a public comment period in November of 2019.

The input collected from the community via these various means is detailed in a companion document, "Community Engagement." Companion documents are available on the Coalition website.

ASSETS AND RESOURCES

As CT DPH teams gathered and analyzed data for the assessment, they also compiled a list of programmatic and state-wide assets. Additionally, through an analysis of local community health assessments and hospital health needs assessments, and partner input, community assets were added to develop a comprehensive list. A high level description of community assets and resources is available in Appendix B. A more detailed listing of identified assets, including the analysis of the local community health and hospital health assessments is contained in a companion document "Assets and Resources" available on the Coalition website. This document will serve as a dynamic and continuously updated resource for mapping assets to intentionally developed collaborative strategies.

Kinds of Data Presented in the Assessment

The State Health Assessment presents many kinds of data visualized in graphs, tables, and maps. Here are some examples of data types included in this report and what they mean.

DATA TYPE	ANSWERS THE QUESTION	DEFINITION	EXAMPLE
Census	How many total people are/ have?	An official count or survey of a population, typically recording various details of individuals.	A total of 3.5 million people live in Connecticut
Prevalence	What percentage of people have?	Describes how many people have a disease or condition among an entire group of people. Often you will see this as a rate or percentage.	About 200 of every 100,000 people has diabetes
Incidence	How many new cases of happened in a period of time?	This refers to the number of individuals who develop a specific disease or experience a specific health-related event during a particular time period (such as a month or year).	The incidence of infection went down from X cases per 10,000 to just Y cases.

In this report and for statistical purposes, persons who identify as Hispanic or Latino will be categorized as "Hispanic," regardless of race. Persons who identify as non-Hispanic or Latino will be categorized based on race and noted as non-Hispanic; when abbreviated, it will precede race as "NH." The combining of race and ethnicity allows for the presentation of mutually exclusive categories. Occasionally, data for race but not ethnicity is available and, for these instances, only race is reported and the persons in the race category may overlap with those in the Hispanic or Latino category. The term "persons of color" will be used to represent all races and ethnicities other than non-Hispanic White.

Limitations of assessment

The Healthy Connecticut 2025: State Health Assessment represents a comprehensive view of the current health status of residents and the contexts that enable or hinder attainment of health. However, there are limitations to what is presented in this report. This assessment presents information about a focused list of indicators, which means that some indicators were not included. This decision was made to ensure the report was a reasonable length and presented indicators that represent current trends and opportunities for intervention. Another limitation is that some data are unavailable. Certain indicators were not available by important characteristics or stratifiers, such as income level or geography. Other indicators lacked recent data. Limitations of specific data are mentioned throughout the report. More information about the data sources is available from CT DPH.

Maps are presented in infographic style throughout the report. Below are three reference maps of Connecticut's counties and towns (1); its major highways and cities (2); and major waterways (3).







