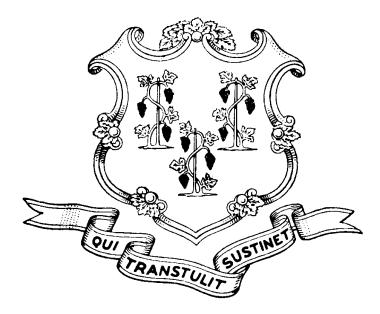
LOOKING TOWARD 2000

AN ASSESSMENT OF HEALTH STATUS AND HEALTH SERVICES



STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH

February 1, 1999

Dear Colleague:

In January of 1998, the Department of Public Health published a working draft of *Looking Toward* 2000 - An Assessment of Health Status and Health Services to comply with Sec. 19a-7a, C.G.S., requiring the Department to determine public health priorities for the state of Connecticut. The Assessment, based on datadriven analyses of the health status and health service needs, presented 25 public health priorities which promote the life expectancy and quality of life for state residents.

Over copies of the draft were distributed to legislators, commissioners, local health officials, community agencies, health care providers, and consumers. We held a series of six public hearings across the state during the Spring of 1998 and solicited feedback from the health professionals and the community at large.

The comments we received during the past year supported our efforts to provide a comprehensive data resource for evaluating Connecticut's health status, health services, and public health infrastructure. The final document is now complete and includes an expanded infrastructure section, an update of the discussion on managed care programs, a new Appendix produced by the Department of Mental Health and Addiction Services, and most significantly, Connecticut's public health priorities are now rank ordered within the categories of health status, health services, and essential public health programs.

Connecticut needs to focus its resources now on those areas of activity that will have the most significant impact on the health of the state. Beyond our commitment to adequately maintain essential public health programs, DPH feels that its policy and program development should emphasize those health conditions that are the most significant for our residents: cardiovascular and cerebrovascular disease, cancer, unintentional injuries, and the modifiable risk factors associated with them: tobacco use, diet and cholesterol, physical inactivity, and the control of hypertension. The priorities described in this *Assessment* can be condensed into four main focus areas for public health action in the next biennium: Cardiovascular disease, Cancer, Injuries, and Surveillance and monitoring.

I am happy to now present you with the final Assessment of Health Status and Health Services.

Sincerely,

Stephen A. Harriman Commissioner

LOOKING TOWARD 2000

AN ASSESSMENT OF HEALTH STATUS AND HEALTH SERVICES

January 1999

Connecticut Department of Public Health Stephen A. Harriman, Commissioner

Office of Policy, Planning, and Evaluation P.O. Box 340308, MS #13PPE Hartford, CT 06134-0308 Telephone: 860 509-7120 Fax: 860 509-7160 E-Mail: webmaster.dph@po.state.ct.us

Special acknowledgments to: Elizabeth Burns, Chief of Staff Marie V. Roberto, Chief, Office of Policy, Planning, and Evaluation Michael J. Hofmann, Director of Research and Planning

The contributions of the following people, who provided support and assistance throughout the development and production of this publication, are gratefully acknowledged. All are staff at the Connecticut Department of Public Health, unless otherwise noted.

Hugh Adams (retired) Mary Adams Federico Amadeo Nancy Barrett Nancy Berger Alfred P. Bidorini² Lenore Blake (retired) Carol Bower Linda Burns⁴ Kenneth Carley Victoria Carlson Matthew Cartter Marcie Cavacas Carol Christoffers (retired) Kathleen Cobb Hector Colon George Cooper Lois Daniels Cynthia Denne Lois Desmarais Deborah Ducoff-Barone Carolyn Jean Dupuy Susan Cole England⁵ Starr-Hope Ertel Mary Lou Fleissner Joan Foland Karen Frost Thomas Furgalack Elise Gaulin-Kremer Jadwiga Goclowski James Hadler Claudette Hastings Elizabeth Hicken Meg Hooper Margie Hudson

Susan Jackman Heidi Jenkins Angela Jimenez Mary Kapp Thomas A. Kirk, Jr., Deputy Commissioner¹ Julianne Konopka Patricia Kucharski (retired) Lyn Lanoue³ Heping Li Joseph Marino Leonard McCain Lisa McCooey Mary Jane Mitchell Phil Mollison Pat Mshar Lloyd Mueller Charles Nathan Lynn Noyes Barbara O'Connell Frederick Pestorius Anthony Polednak Cindy Rankl Vincent Sacco Judith Sartucci Dan Savino Paul Schur (retired) Gordon Shand Ruth Gitchell Shepard (retired) Alan Siniscalchi Janet St. Clair Kristin Sullivan Brian Toal Debra Tommasone Beth Weinstein Ardell Wilson

¹ CT Department of Mental Health and Addiction Services

² CT Department of Mental Health and Addiction Services

³ CT Department of Social Services

⁴ CT Office of Policy and Management

⁵ Office of Health Care Access

Donald Iodice Gerald Iwan Stanton Wolfe Warren Wollschlager

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