Health Indicators and Risk Behaviors in Connecticut: 2020 Results of the Connecticut Behavioral Risk Factor Surveillance Survey (BRFSS)

OCT 2023

Manisha Juthani, MD
Commissioner
Connecticut Department of Public Health
410 Capitol Avenue
Hartford, CT 06134
www.ct.gov/dph/BRFSS

ACKNOWLEDGMENTS

Manisha Juthani, MD
Commissioner
Connecticut Department of Public Health

Work on this project was supported by Centers for Disease Control and Prevention Grant Numbers CDC 5NU58DP006866, Connecticut Behavioral Risk Factor Surveillance System Grant Number 1NB01OT009128, Preventive Health & Health Services Block Grant and Grant Number 6 B04MC31476 Maternal and Child Health Block Grant. The contents of this publication are solely the responsibility of the authors and do not necessarily represent the official views of these federal agencies.

The CT BRFSS team acknowledges with gratitude the time contributed by nearly 9,000 citizen volunteers within the State of Connecticut who responded anonymously to the 2020 BRFSS. The results presented in this report would not be possible without their participation.

This report was prepared by:
Xi Zheng, M.P.H., M.S.
Epidemiologist
Health Statistics and Surveillance Section
Connecticut Department of Public Health

ADDITIONAL RESOURCES

For questions or comments about this report, please contact:

Celeste Jorge, M.P.H.
Epidemiologist
Health Statistics and Surveillance Section
Connecticut Department of Public Health
410 Capitol Ave.,
Hartford, CT 06134
Phone: (860) 509-7695
Celeste.Jorge@ct.gov

Xi Zheng, M.P.H., M.S.
BRFSS Epidemiologist
Health Statistics and Surveillance Section
Connecticut Department of Public Health
410 Capitol Ave.
Hartford, CT 06134
Phone: (860) 509-7670
Xi.Zheng@ct.gov

Find more BRFSS fact sheets, reports, and publications at the Connecticut Department of Public Health BRFSS website:
www.ct.gov/dph/BRFSS

Suggested citation:

Zheng X., Jorge C. (2023) Health Indicators and Risk Behaviors in Connecticut: 2020. Results of Connecticut Behavioral Risk Factor Surveillance Survey (BRFSS), Connecticut Department of Public Health, Hartford, Connecticut (www.ct.gov/dph/BRFSS).

CONTENTS

ACKNOWLEDGMENTS i

ADDITIONAL RESOURCES ii

SUMMARY 1

DEMOGRAPHICS 4

1. STATE OF THE STATE 8

Connecticut Comparison to the United States in 2020 12

Connecticut Comparison to Other States in 2020 12

2. VULNERABLE POPULATIONS IN CONNECTICUT 14

3. HEALTH STATUS INDICATORS 17

General Health Status 17

Disability 18

Poor Mental Health 19

Poor Physical Health 20

Adult Weight Status 21

Health Care Access 22

Health Insurance Coverage (18-64 years old) 25

Dental Insurance 28

4. RISK BEHAVIOR INDICATORS 29

Adult Physical Activity 29

Motor Vehicle Safety 30
Inadequate Sleep 31
Falls 32
Current Cigarette Smoking 33
E-cigarette Use 34
Alcohol Consumption 35
5. CLINICAL PREVENTIVE PRACTICES 38
Routine Check-Up 38
Adult Oral Health 39
Periodontal Disease 41
Adult Influenza 42
Pneumococcal Vaccinations (65+) 43
HPV Vaccinations 44
Human Immunodeficiency Virus (HIV) Screening 45
Human Papilloma Virus (HPV) Test 46
Cervical Cancer Screening for Women 21-65 years 47
Breast Cancer Screening for Women, 50-74 years 48
Prostate Cancer Screening for Men 40 and Over 49
Colorectal Cancer Screening 50-75 years 50
6. CHRONIC CONDITIONS 51
Asthma 51
Chronic Obstructive Pulmonary Disease (COPD) 52
Arthritis 53

Cardiovascular Disease and Stroke 54
Pre-Diabetes 55
Diabetes 56
Kidney Disease 57
Depression 58
7. CHILD HEALTH 59
Child Weight Status 59
Breastfeeding 60
Child Screen Time 61
Child Soda and Fast Food Consumption 62
Child Oral Health 64
Child Asthma 67
8. END NOTES 68

LIST OF FIGURES

Figure 1: SELECTED ADULT HEALTH INDICATORS IN CONNECTICUT VERSUS THE U.S. AND TERRITORIES, 2020. 8
Figure 2: SELECTED ADULT MODIFIABLE RISK FACTORS IN CONNECTICUT VERSUS THE U.S. AND TERRITORIES, 2020. 9
Figure 3: CONNECTICUT STATE RANKING FOR SELECTED ADULT HEALTH INDICATORS, BRFSS, 2020. 13
Figure 4: PREVALENCE OF FAIR OR POOR OVERALL HEALTH, CT 2016-2020. 17
Figure 5: PERCENTAGE OF CT RESIDENTS REPORTING POOR OR FAIR OVERALL HEALTH, CT 2020. 17
Figure 6: PREVALENCE OF DISABILITY, CT 2016-2020. 18
Figure 7: PERCENTAGE OF CT RESIDENTS REPORTING A DISABILITY, CT 2020 18
Figure 8: PREVALENCE OF POOR OR FAIR MENTAL HEALTH, CT 2016-2020 19
Figure 9: PERCENTAGE OF CT RESIDENTS REPORTING POOR OR FAIR MENTAL HEALTH, CT 2020. 19
Figure 10: PREVALENCE OF POOR OR FAIR PHYSICAL HEALTH, CT 2016-2020. 20
Figure 11: PERCENTAGE OF CT RESIDENTS REPORTING POOR PHYSICAL HEALTH, CT 2020 20
Figure 12: POOR PHYSICAL OR MENTAL HEALTH AS A BARRIER TO LIFE'S ACTIVITIES, CT 2020. 20
Figure 13: PREVALENCE OF OBESITY, CT 2016-2020. 21
Figure 14: ADULT WEIGHT STATUS, CT 2020. 21
Figure 15: PREVALENCE OF OBESITY AMONG CT ADULTS, CT 2020 21
FIGURE 16: PREVALENCE OF AT LEAST ONE PRIMARY HEALTH CARE PROVIDER, CT 2016-2020. 22
FIGURE 17: AT LEAST ONE PRIMARY HEALTH CARE PROVIDER, CT 2020 22
FIGURE 18: PREVALENCE OF NO HEALTH CARE ACCESS DUE TO COST, CT 2016-2020 23
FIGURE 19: NO HEALTH CARE ACCESS DUE TO COST, CT 2020 23
Figure 20: NO ACCESS TO PRESCRIPTION DRUG DUE TO COST, CT 2020 24
Figure 21: CT ADULTS 18-64 YEARS OLD WITH NO HEALTH INSURANCE, CT 2016-2020 25
Figure 22: NO INSURANCE COVERAGE (18-64 YEARS OLD), CT 2020. 25
Figure 23: PRIVATE INSURANCE, ADULTS 18-64 YEARS OLD, CT 2020 26
Figure 24: MEDICAID COVERAGE, ADULTS 18-64 YEARS OLD, CT 2020 26
Figure 25: MEDICARE COVERAGE, ADULTS 18-64 YEARS OLD, CT 2020 27
Figure 26: PREVALENCE OF NO DENTAL INSURANCE, CT 2016-2020 28
Figure 27: NO DENTAL INSURANCE, CT 2020. 28
Figure 28: PREVALENCE OF NO LEISURE TIME PHYSICAL ACTIVITY, CT 2016-2020 29
Figure 29: DID NOT ENGAGE IN LEISURE OR RECREATIONAL PHYSICAL ACTIVITY, CT 2020. 29
Figure 30: PREVALENCE OF ALWAYS OR NEARLY ALWAYS USED A SEATBELT, CT 2016-2020. 30

Figure 31: FREQUENCY OF SEATBELT USE, CT 2020 30
Figure 32: ALWAYS OR NEARLY ALWAYS USED A SEATBELT, CT 2020..... 30
Figure 33: PREVALENCE OF INADEQUATE SLEEP, CT 2016=2020 31
Figure 34: INADEQUATE SLEEP (LESS THAN 7 HOURS),CT 2020. 31
Figure 35: PREVALENCE OF FALL IN PAST YEAR (45 AND OLDER), CT 2016-2020. 32
Figure 36: FALL IN PAST YEAR (45 AND OLDER), CT 2020 32
Figure 37: PREVALENCE OF CURRENT SMOKER, CT 2016-2020. 33
Figure 38: SMOKING STATUS, CT 2020. 33
Figure 39: CURRENT CIGARETTE SMOKING, CT 2020 33
Figure 40: EVER TRIED E-CIGARETTES, CT 2016-2020. 34
Figure 41: E-CIGARETTE USE STATUS (AMONG EVER TRIED E-CIGARETTES), CT 2020. 34
Figure 42: EVER TRIED VAPOR OR VAPE PEN OR E-CIGARETTES, CT 2020 34
Figure 43: EXCESSIVE ALCOHOL CONSUMPTION, CT 2016-2020. 35
Figure 44: EXCESSIVE ALCOHOL CONSUMPTION, CT 2020. 35
Figure 45: BINGE DRINKING, CT 2020 36
Figure 46: PREVALENCE OF BINGE DRINKING, CT 2016-2020. 36
Figure 47: PREVALENCE OF HEAVY DRINKING, CT 2016-2020. 37
Figure 48: HEAVY DRINKING, CT 2020 37
Figure 49: ROUTINE CHECKUP IN PAST YEAR, CT 2016-2020. 38
Figure 50: TIME SINCE LAST ROUTINE CHECK-UP, CT 2020 38
Figure 51: ROUTINE CHECK-UP IN THE PAST YEAR, CT 2020 38
Figure 52: VISITED DENTIST IN THE PAST YEAR, CT 2016-2020 39
Figure 53: VISITED DENTIST IN THE PAST YEAR, CT 2020. 39
Figure 54: ADULTS HAD ANY PERMANENT TEETH EXTRACTED, CT 2016-2020..... 40
Figure 55: ADULTS HAD ANY PERMANENT TEETH EXTRACTED, CT 2020. 40
Figure 56: EVER BEING TOLD HAVE PERIODONTAL DISEASE, CT 2016-2020..... 41
Figure 57: EVER BEING TOLD HAVE PERIODONTAL DISEASE, CT 2020. 41
Figure 58: FLU VACCINE IN THE PAST YEAR, CT 2016-2020 42
Figure 59: FLU VACCINE IN THE PAST YEAR, CT 2020. 42
Figure 60: EVER HAD PNEUMOCOCCAL VACCINATION (65+), CT 2016-2020..... 43
Figure 61: EVER HAD PNEUMOCOCCAL VACCINATION (65+), CT 2020. 43
Figure 62: HPV VACCINATION, CT 2020 44

Figure 63: EVER TESTED FOR HIV, CT 2016-2020 45
Figure 64: EVER TESTED FOR HIV, CT 2020. 45
Figure 65: PREVALENCE OF EVER HAD HPV TEST AMONG WOMAN, CT 2016-2020.. 46
Figure 66: EVER HAD HPV TEST AMONG CT WOMEN, CT 2020 46
Figure 67: CERVICAL CANCER SCREENING WITHIN PAST THREE YEARS (WOMEN 21-65), CT 2012-2016. 47
Figure 68: CERVICAL CANCER SCREENING WIHTIN PAST THREE YEARS (WOMEN 21-65), CT 2020 47
Figure 69: BREAST CANCER SCREENING (WOMEN 50-74), CT 2016-2020 48
Figure 70: BREAST CANCER SCREENING IN THE PAST TWO YEARS (WOMEN 50-74), CT 2020 48
Figure 71: PROSTATE CANCER SCREENING WITHIN PAST 2 YEARS (MEN 40+), CT2016-2020 49
Figure 72: PROSTATE CANCER SCREENING (MEN 40+), CT 2020. 49
Figure 73: MET USPSTF RECOMMENDATION (50-75), CT 2016-2020. 50
Figure 74: MET USPSTF RECOMMENDATION (50-75) SCREENING, CT 2020 50
Figure 75: PREVALENCE OF CURRENT ASTHMA, CT 2016-2020 51
Figure 76: ADULT ASTHMA STATUS, CT 2020.. 51
Figure 77: CURRENT ASTHMA, CT 2020. 51
Figure 78: PREVALENCE OF COPD, CT 2016-2020. 52
Figure 79: CHRONIC OBSTRUCTIVE PULMONARY DISEASE, CT 2020 52
Figure 80: PREVALENCE OF ARTHRITIS, CT 2016-2020. 53
Figure 81: PREVALENCE OF ARTHRITIS, CT 2020 53
Figure 82: PREVALENCE OF CARDIOVASCULAR DISEASES OR STROKE, CT 2016-2020 54
Figure 83: PREVALENCE OF CARDIOVASCULAR DISEASES OR STROKE, CT 2020. 54
Figure 84: PREVALENCE OF PRE-DIABETES, CT 2016-2020 55
Figure 85: PREVALENCE OF PRE-DIABETES, CT 2020. 55
Figure 86: PREVALENCE OF DIABETES, CT 2016-2020 56
Figure 87: PREVALENCE OF DIABETES, CT 2020. 56
Figure 88: PREVALENCE OF KIDNEY DISEASE, CT 2016-2020 57
Figure 89: PREVALENCE OF KIDNEY DISEASE, CT 2020. 57
Figure 90: PREVALENCE OF DEPRESSION, CT 2016-2020. 58
Figure 91: PREVALENCE OF DEPRESSION, CT 2020. 58
Figure 92: CHILD WEIGHT (5-17 YEARS OLD), CT 2016-2020. 59
Figure 93: CHILD WEIGHT STATUS, CT 2020. 59
Figure 94: CHILD OBESITY (5-17 YEARS OLD), CT 2020. 59

Figure 95: CHILD EVER BREASTFED, CT 2016-2020. 60
Figure 96: LENGTH OF BREASTFEEDING PERIOD (MONTH), CT 2020. 60
Figure 97: CHILD EVER BREASTFED, CT 2020 60
Figure 98: PREVALENCE OF CHILD EXCESSIVE SCREEN TIME, CT 2016-2020. 61
Figure 99: PREVALENCE OF CHILD EXCESSIVE SCREEN TIME, CT 2020 61
Figure 100: PREVALENCE OF CHILD DRINKING SSBS AT LEAST ONCE DAILY, CT 2016-2020. 62
Figure 101: DRANK SUGAR SWEETENED BEVERAGES AT LEAST ONCE DAILY, CT 2020 62
Figure 102: PREVALENCE OF ATE FAST FOOD TWO OR MORE TIMES WEEKLY, CT 2016-2020 63
Figure 103: ATE FAST FOOD TWO OR MORE TIMES WEEKLY, CT 2020. 63
Figure 104: CHILD DENTIST VISIT IN PAST YEAR, CT 2016-2020 64
Figure 105: CHILD DENTIST VISIT IN PAST YEAR, CT 2020. 64
Figure 106: PREVALENCE OF CHILD RECEIVED DENTAL SEALANT (5-17 YEARS OLD), CT 2016-2020. 65
Figure 107: RECEIVED DENTAL SEALANT (CHILDREN 5-17 YEARS OLD), CT 2020 65
Figure 108: PREVALENCE OF CHILD DENTAL DECAY, CT 2016-2020. 66
Figure 109: CHILD DENTAL DECAY (CAVITIES IN PAST 12 MONTHS), CT 2020 66
Figure 110: PREVALENCE OF CURRENT ASTHMA AMONG CT CHILDREN, CT 2016-2020. 67
Figure 111: CHILD ASTHMA, CT 2020. 67
Figure 112: CURRENT CHILD ASTHMA, CT 2020. 67

LIST OF TABLES

Table 1: ADULTS LIVING IN CONNECTICUT, CT 2020 4
Table 2: CHILDREN LIVING IN CONNECTICUT, CT 2020 6
Table 3: SELECTED ADULT HEALTH INDICATORS IN CONNECTICUT VERSUS THE UNITED STATES AND TERRITORIES, CT 2020. 10
Table 4: SELECTED ADULT MODIFIABLE RISK FACTORS IN CONNECTICUT VERSUS THE UNITED STATES AND TERRITORIES, CT 2020. 10

SUMMARY

The Connecticut Behavioral Risk Factor Surveillance System (CT BRFSS) is an ongoing statewide voluntary phone survey of Connecticut citizen volunteers aged 18 and over. The CT BRFSS questionnaire (http://www.ct.gov/dph/BRFSS) changes somewhat from year to year to provide information on emerging health issues in the state and to address state-specific priorities.

Data from the CT BRFSS have been used to inform the development of state health plans, such as the State Health Improvement Plan,[1] the Connecticut coordinated chronic disease plan;[2] to track online adult and child state health priorities[3,4] and included in chronic disease dashboards.[5] In addition, understanding factors that affect vulnerable populations in Connecticut is important for identifying and addressing health disparities. The CT BRFSS continues to have a significant role in the CT State Health Assessment process, by providing health indicators specific to race, disability status, health insurance status, and other factors. Data from the CT BRFSS also inform health programs for their work to improve and promote the health of all Connecticut residents.

In this report, a section named State of the State compares selected adult health indicators in Connecticut during calendar year 2020, with median results from 2020 for the United States and its territories. In addition, 41 selected health indicators are discussed in five chapters: 1) health status indicators, 2) risk behavior indicators, 3) clinical preventive practices, 4) chronic conditions, and 5) child health.

METHODOLOGY

The population for the Connecticut Behavioral Risk Factor Surveillance System (CT BRFSS) consists of the total non-institutionalized English and Spanish-speaking adult population. In 2020, the CT BRFSS collected 2,855 landline interviews and 6,127 cell phone interviews, totaling 8,982 interviews. If any children lived in the same household as the respondent, one child was randomly selected, and the adult respondent provided information about that child. A total of 1,953 interviews about children were completed. The landline sample was a disproportionate stratified random digit dial (RDD) sample, stratified by geography and listed status. Within each contacted household, one adult was selected at random to be interviewed. The cell phone sample was an unstratified RDD sample drawn from dedicated cellular telephone banks with equal probability. An adult contacted by cell phone was eligible to complete the survey if he or she lived in a private residence or college housing.

Landline and cell phone data were combined and weighted by the Centers for Disease Control and Prevention (CDC) to adjust for differential selection probabilities. The weighted data were then adjusted to the distribution of the Connecticut adult population using iterative proportional fitting or raking. Raking adjustments were made by telephone type, race/ethnicity, education, marital status, age by gender, gender by race/ethnicity, age by race/ethnicity, and renter/owner status. This weighting methodology was adopted by CDC in 2011 to accommodate the inclusion of cell phone interviews and to allow for adjustments to more demographics. As a result of these methodological changes, BRFSS data for 2011 and forward are not comparable to BRFSS data prior to 2011.

Prevalence estimates and 95% confidence intervals were computed using SAS PROC SURVEYFREQ, which can properly compute variances for complex sampling plans. Any responses of "Not known/Not sure" or "Refused" were classified as missing. The coefficients of variation (CV) were used to assess the validity of each estimate. Prevalence estimates with a CV of between 15.0% and 20.0%, inclusive, are marked with a "†"; prevalence estimates with a CV greater than 30.0% are suppressed due to poor validity. Prevalence estimates with a CV between 20.1% and 30.0%, inclusive, are marked with "††", to indicate caution should be exercised when interpreting these estimates.

Each health indicator was analyzed at the statewide level, and was evaluated by age, gender, race/ethnicity, household income,

whether the adult had health care coverage, whether the adult had a disability, and the adult's educational attainment. Race and ethnicity were defined by three categories: non-Hispanic White, non-Hispanic Black or African American, and Hispanic or Latino/a. A fourth category, non-Hispanic respondents of other or multiple races, was excluded from analysis because the CV was too large for most estimates in this category to allow reporting. Indicators concerning children were analyzed by the age of the child, gender of the child, race/ethnicity of the child, household income, and the adult proxy's health insurance status and educational attainment. Significant increases or decreases compared to the United States were evaluated by a one-population two-tailed binomial test. Change in the prevalence of selected health indicators from years 2016 to 2020 was evaluated using a two population two-tailed chi-squared test for significant increase or decrease. Statistical significance testing was only conducted in prevalence estimates with a CV less than 0.15. Significance testing by demographic characteristic was evaluated using a two population two-tailed chi-squared test for significant increase or decrease in risk/protection or prevalence (alpha=0.05); only significant results are discussed in this report.

DEMOGRAPHICS

TABLE 1: ADULTS LIVING IN CONNECTICUT, CT 2020

Demographic Characteristics	Survey Respondents	Estimated Weighted Population	Estimated Weighted % of Population
Total	8,982	2,843,000	**100**
Age			
18-34 years old	1,408	783,000	28.3
35-54 years old	2,575	847,000	30.6
55 and over	4,739	1,141,000	41.2
Gender			
Male	4,096	1,371,000	48.2
Female	4,886	1,472,000	51.8
Race/Ethnicity			
Non-Hispanic White	6,443	1,853,000	67.2
Non-Hispanic Black	650	277,000	10.0
Hispanic	1,107	441,000	16.0
Other	511	187,000	6.8
Income			
Less than $35,000	1,895	577,000	26.3
$35,000-$74,999	1,857	582,000	26.5
$75,000 and more	3,389	1,039,000	47.3
Health Insurance Status			
Insured	8,345	2,575,000	91.5
Not Insured	579	240,000	8.5
Disability Status			
Disabled	2,041	598,000	22.2
Non-disabled	6,447	2,092,000	77.8
Education			
HS graduate or less	2,716	1,062,000	37.6
More than HS education	6,210	1,766,000	62.4

ADULT DEMOGRAPHICS IN CONNECTICUT

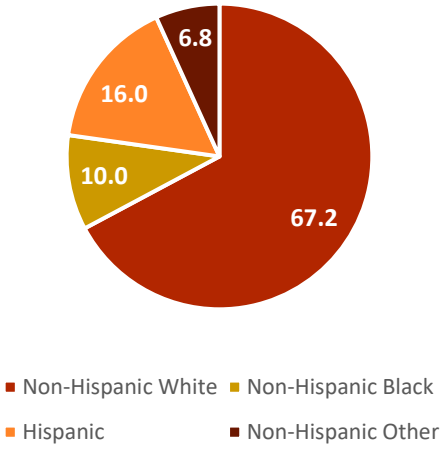
2,843,000

Adults 18 or older lived in Connecticut in 2020

Data Source: CT BRFSS, 2020

Race & Ethnicity

7 in **10** adults were non-Hispanic White.
1 in **6** adults were Hispanic.
1 in **10** adults were non-Hispanic Black.

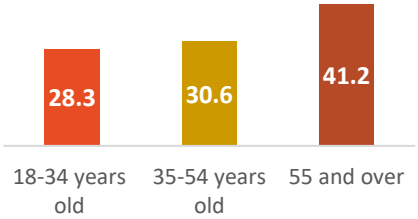


Gender

Male and female adults were equally distributed (48.2% vs 51.8%).

Household Income

Age



91.5% Connecticut adults had health insurance coverage.

One in four Connecticut adults had a disability (22.2%).

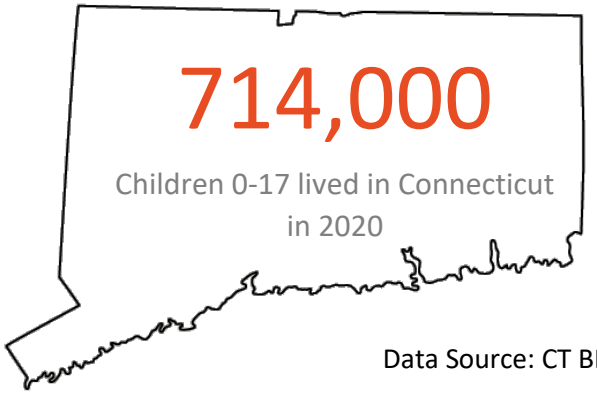
62.4% Connecticut adults had more than high school education

Note: To be representative of the adult population of Connecticut, all the estimates reported are calculated with weighted 2020 CT BRFSS data.

TABLE 2: CHILDREN LIVING IN CONNECTICUT, CT 2020

Demographic Characteristics	Survey Respondents	Estimated Weighted Population	Estimated Weighted % of Population
Total	1,953	714,000	**100**
Age			
0-4 years old	325	183,000	29.0
5-11 years old	551	212,000	33.7
12-17 years old	755	234,000	37.2
Gender			
Male	964	352,000	50.8
Female	895	340,000	49.2
Race/Ethnicity			
Non-Hispanic White	1,022	334,000	49.2
Non-Hispanic Black	189	84,000	12.4
Hispanic	429	192,000	28.3
Other	176	69,000	10.1
Household Income			
Less than $35,000	432	174,000	27.5
$35,000-$74,999	352	107,000	16.9
$75,000 and more	912	352,000	55.6
Caregiver's Health Insurance Status			
Insured	1,741	641,000	90.1
Not Insured	199	71,000	9.9
Caregiver's Education Attainment			
HS graduate or less	601	218,000	30.7
More than HS education	1,343	492,000	69.3

CHILD DEMOGRAPHICS IN CONNECTICUT



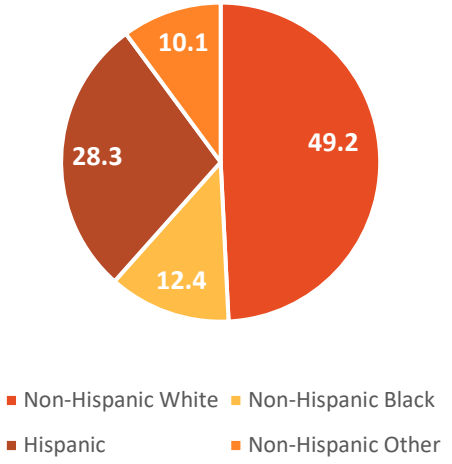
714,000

Children 0-17 lived in Connecticut in 2020

Data Source: CT BRFSS, 2020

Race & Ethnicity

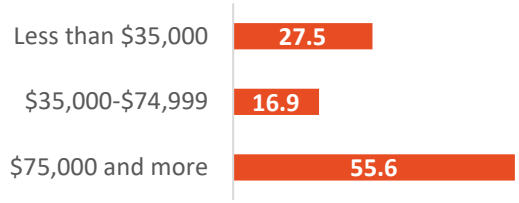
1 in **2** children were non-Hispanic White.
1 in **4** children were Hispanic.
1 in **8** children were non-Hispanic Black.



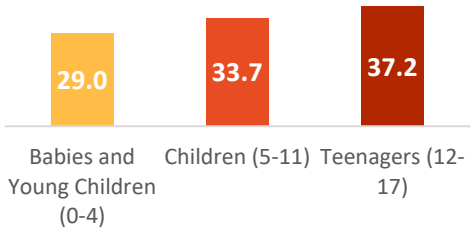
Gender

Male and female children were equally distributed (50.8% vs 49.2%).

Household Income



Age



90.1%

Connecticut children had an insured adult caregiver

69.3%

Connecticut children had an adult caregiver with more than a high school education

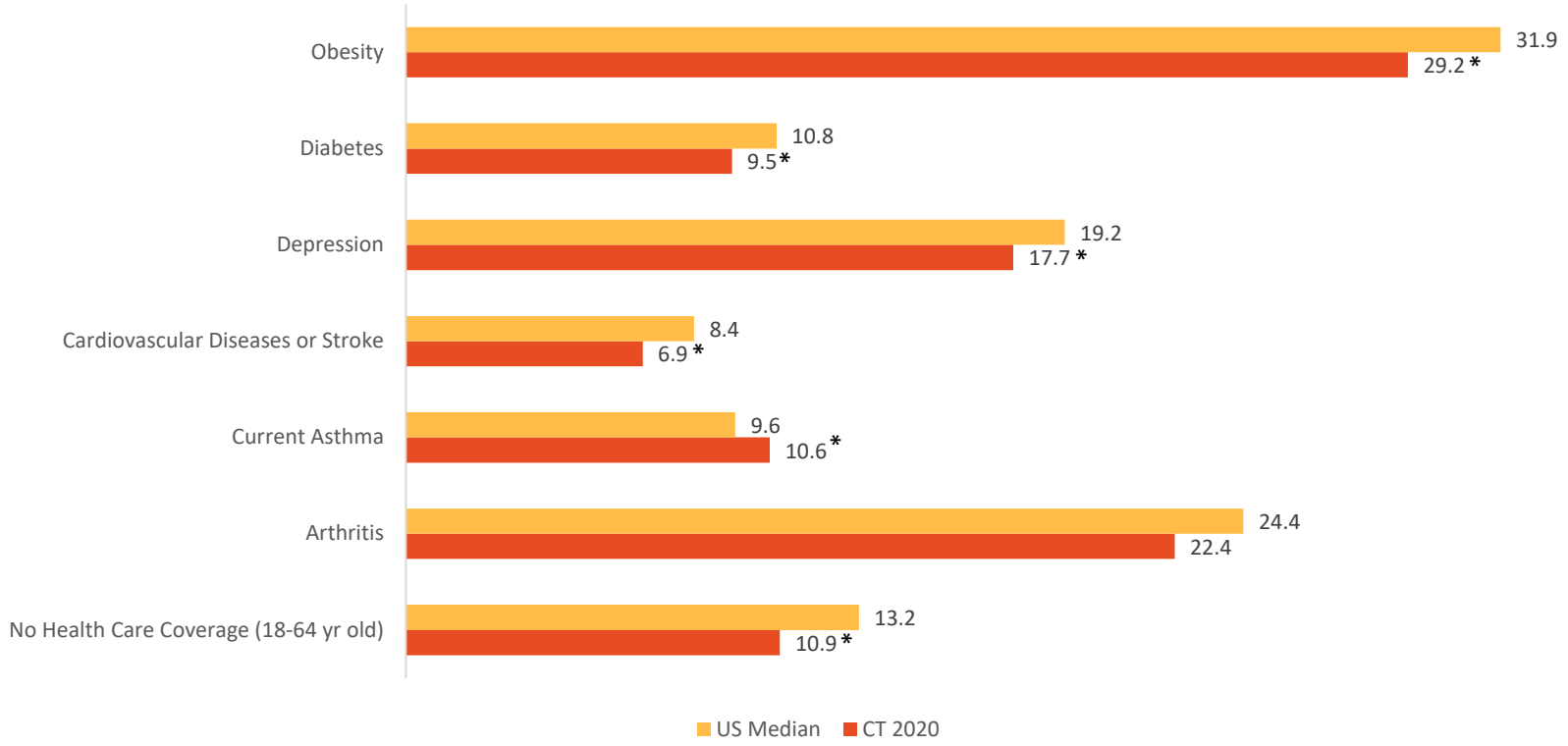
Note: To be representative of the adult population of Connecticut, all the estimates reported are calculated with weighted 2020 CT BRFSS data.

1. STATE OF THE STATE

CONNECTICUT COMPARISON TO THE UNITED STATES IN 2020

Figure 1 and Table 3 highlight selected adult health indicators in Connecticut during calendar year 2020, compared to median results from 2020 for the United States and its territories.

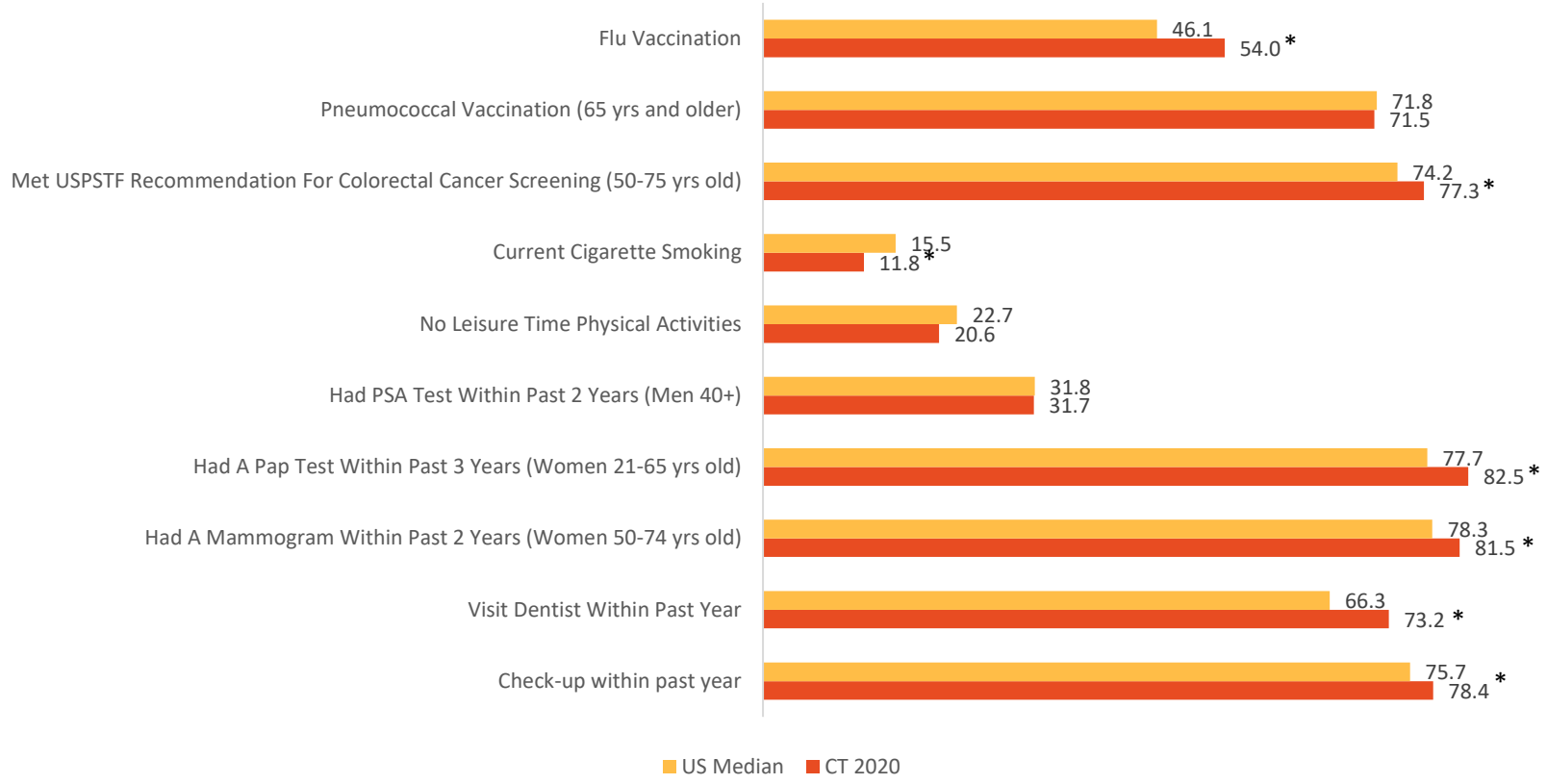
FIGURE 1: SELECTED ADULT HEALTH INDICATORS IN CONNECTICUT VERSUS THE U.S. AND TERRITORIES, 2020.



*= significance < 0.05

Figure 2 and Table 4 highlight selected adult modifiable risk factors in Connecticut during 2020, compared to median results from 2020 for the U.S. and its territories. More information on these indicators is located within this report.

FIGURE 2: SELECTED ADULT MODIFIABLE RISK FACTORS IN CONNECTICUT VERSUS THE U.S. AND TERRITORIES, 2020.



*= significance < 0.05

TABLE 3: SELECTED ADULT HEALTH INDICATORS IN CONNECTICUT VERSUS THE UNITED STATES AND TERRITORIES, CT 2020.

Health Indicator	CT 2020	U.S. Median	Risk Difference	Significantly Greater or Less Risk/Protection
Adult Obesity	29.2%	31.9%	-2.7%	Less Risk
Diabetes	9.5%	10.8%	-1.3%	Less Risk
Depression	17.7%	19.2%	-1.5%	Less Risk
Cardiovascular Diseases or Stroke	6.9%	8.4%	-1.5%	Less Risk
Current Asthma	10.6%	9.6%	1.0%	More Risk
Arthritis	22.4%	24.4%	-2.0%	NS
No Health Care Coverage (18-64 years old)	10.9%	13.2%	-2.3%	Less Risk

TABLE 4: SELECTED ADULT MODIFIABLE RISK FACTORS IN CONNECTICUT VERSUS THE UNITED STATES AND TERRITORIES, CT 2020.

Health Indicator	CT 2020	U.S. Median	Risk Difference	Significantly Greater or Less Risk/Protection
Flu Vaccination	54.0%	46.1%	7.9%	More Protection
Pneumococcal Vaccination (65 years and older)	71.5%	71.8%	-0.3%	NS
Met USPSTF Recommendation for Colorectal Cancer Screening (50-75 years old)	77.3%	74.2%	3.1%	More Protection
Current Cigarette Smoking	11.8%	15.5%	-3.7%	Less risk
Excessive Alcohol Consumption	16.2%	15.7%	0.5%	NS
No Leisure Time Physical Activities	20.6%	22.7%	-2.1%	NS
Had PSA Test Within Past 2 Years (Men 40+)	31.7%	31.8%	-0.1%	NS
Had A Pap Test Within Past Three Years (Women 21-65 years old)	82.5%	77.7%	4.8%	More Protection
Had A Mammogram Within Past Two Years (Women 50-74 years old)	81.5%	78.3%	3.2%	More Protection
Visit Dentist Within Past Year	73.2%	66.3%	6.9%	More Protection
Check-up Within Past Year	78.4%	75.7%	2.7%	More Protection

Note: Prevalence in 2020 of selected adult health indicators/ modifiable risk factors were obtained from the Behavioral Risk Factor Surveillance System for Connecticut (www.ct.gov/dph/brfss) and the United States and its territories (www.cdc.gov/brfss). Risk differences for Connecticut versus the United States and its territories were tested for significantly greater or lesser risk using two-tailed one sample z-test against the U.S. Median.

Statistical significance is indicated with the following: * - significance < 0.05; NS - not significantly different. Text in green indicates less risk/more protection and red indicates higher risk/less protection

Seventeen selected health indicators and modifiable risk factors were compared to estimates for the United States and its territories during 2020 (Figures 1 and 2 and Tables 3 and 4). More information about these statewide indicators can be found elsewhere in this report.

Compared to the United States and its territories, Connecticut adult risk was significantly less, and prevalence ranked significantly better, for 11 of the 17 health indicators:

- Obesity
- Diabetes
- Depression
- No Health Care Coverage (18-64 years old)
- Cardiovascular Diseases or Stroke
- Women who had a mammogram within past two years (50-74 years old)
- Women who had a Pap test within past three years (21-65 years old)
- Met USPSTF Recommendation For Colorectal Cancer Screening (50-75 yrs)
- Flu vaccination
- Visit dentist within past year
- Check-up within past year
- Current cigarette smoking

Compared to the United States and its territories, Connecticut adult risk was significantly more, and prevalence ranked significantly worse, for only one health indicator:

- Current Asthma

Adult risk in Connecticut for the remaining 5 health indicators was not significantly different from the United States:

- Arthritis
- Pneumococcal Vaccination (65 years old and older)
- Men who had a PSA test within past two years (40+ years old)
- Excessive alcohol consumption
- No leisure time physical activities

CONNECTICUT COMPARISON TO OTHER STATES IN 2020

Connecticut's ranking compared to other states and U.S. territories for selected health indicators is shown in Figure 3.

For 21 selected health indicators, and compared to all states in the United States and its territories, Connecticut ranked among the best 10 states in the country for 9 indicators (marked as **turquoise circles** in Figure 3):

- Check Up in the Past 12 Months
- Fall in Past Year
- Cardiovascular Diseases or stroke (45+)
- Dentist Visit in Past Year
- Women had Mammogram Within Past 2 Years (50-74 years old)
- Current Cigarette Use
- Women 40+ Years Old Had PAP Test Within Past 3 Years
- Healthcare Access (barriers to care due to cost)
- Flu vaccination

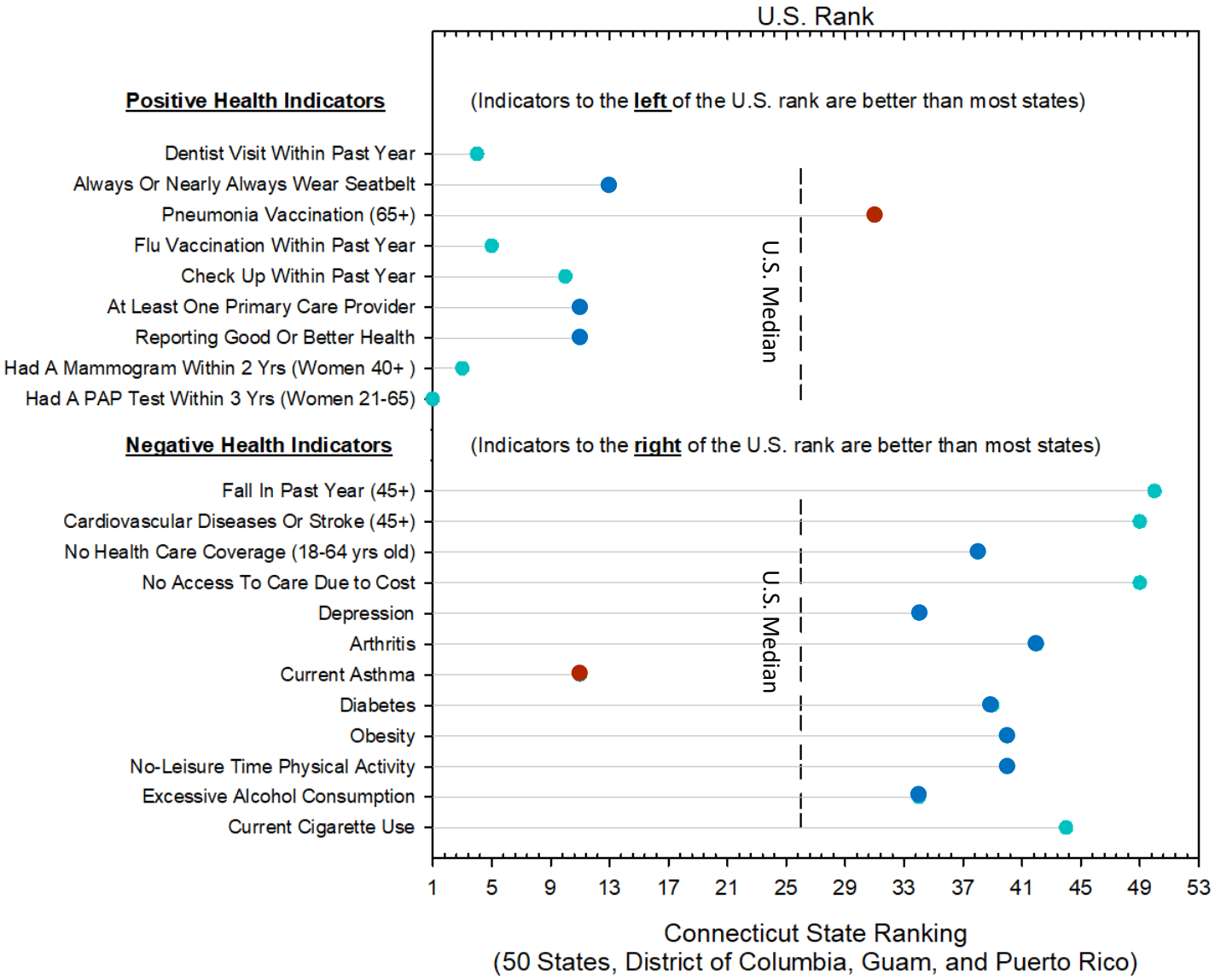
Among all 21 selected health indicators, Connecticut ranked better than half among all states in the United States and its territories for all except three indicators (marked as **blue circles** in Figure 3):

- Seatbelt Use
- Excessive Alcohol Consumption
- Arthritis
- Diabetes
- No Leisure Time Physical Activity
- Obesity
- Depression
- Health Care Coverage
- Reporting Good Or Better Health
- At Least One Primary Care Provider

For two indicators, Connecticut ranked worse than most states and territories (marked as **red circles** in Figure 3):

- Current Asthma
- Pneumonia Vaccination (65+)

FIGURE 3: CONNECTICUT STATE RANKING FOR SELECTED ADULT HEALTH INDICATORS, BRFSS, 2020.



2. VULNERABLE POPULATIONS IN CONNECTICUT

Connecticut is one of the healthiest states in the nation and is ranked well for most selected health indicators in this report compared to other states; however, health disparities were found by further adjustments for social determinants of health (e.g., age, sex, race/ethnicity, income, disability status, and education level). In 2020, certain groups had significantly higher prevalence of poor health outcomes:

Non-Hispanic Black (compared to NH White)	**Hispanic** (compared to NH White)
• Fair/poor health • Disability • Obesity • No leisure time physical activity • No dental visit in past year • Had any permanent teeth extracted • No flu vaccine • Ever had HIV test • Arthritis • Pre-diabetes	• Fair/poor health • Disability • Obesity • No primary doctor • No access to care due to cost • No insurance (18-64 years old) • No leisure time physical activity • No dental insurance • No dental visit in past year • No flu vaccine • Not met USPSTF recommendation for colorectal cancer screening • Depression

Annual Income Less than $35,000 (compared to higher incomes)	Adults Without Health Insurance
• Fair/poor health • Disability • Poor mental health • Disability • Obesity • No primary doctor • No access to care due to cost • No insurance (18-64 years old) • Ever use E-cigarette • No dental visit in past year • Had any permanent teeth extracted • No flu vaccine • Ever had HIV test • No cervical cancer screening (Women 21-65) • No breast cancer screening (Women 50-74 years old) • No leisure time physical activity • Inadequate sleep • Fall in past year • Current cigarette smoking • No prostate cancer screening (Men 40+) • Arthritis • COPD • Cardiovascular disease or stroke • Diabetes • Depression • Child consumption of sugar-sweetened beverages	• Fair/poor health • No primary doctor • No access to care due to cost • No access to prescription drug due to cost • No dentist visit in past year • Routine annual check-up • No dental insurance • No HPV test • Ever had HIV test • Not met USPSTF recommendation for colorectal cancer screening • Arthritis • No flu vaccine • Child ever breastfed

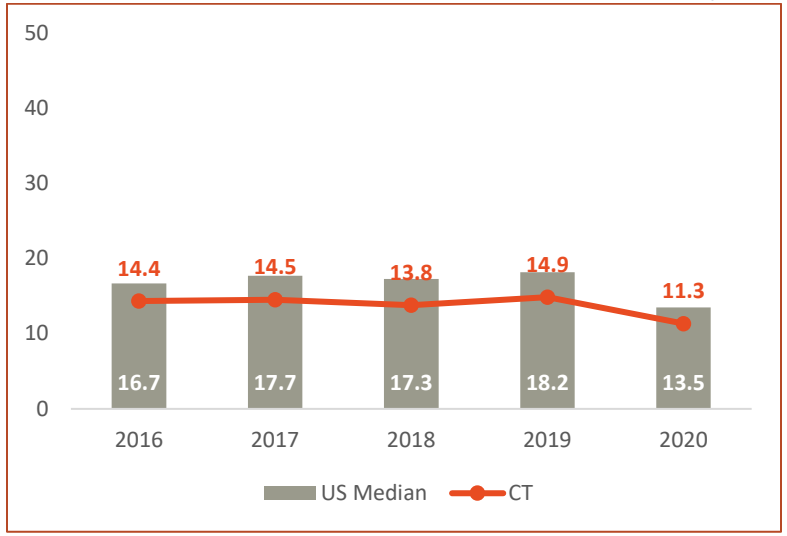
Disabled Adults	Less Than High School Education
• Fair/poor health • Poor mental health • Poor physical health • Obesity • No access to care due to cost • No leisure time physical activity • Inadequate sleep • No dental visit in past year • Had any permanent teeth extracted • Current cigarette smoking • Ever use E-cigarette • No dental insurance • Periodontal disease • No cervical cancer screening (Women 21-65) • No breast cancer screening (Women 50-74 years old) • Current asthma • COPD • Arthritis • Cardiovascular disease or stroke • Pre-diabetes • Diabetes • Depression	• Fair/poor health • Disability • Poor mental health • Poor physical health • Obesity • No primary doctor • No access to care due to cost • No access to prescription drug due to cost • No insurance (18-64 years old) • No dentist visit in past year • Inadequate sleep • Current cigarette smoking • No leisure time physical activity • Current cigarette smoking • Ever use E-cigarette • No dental insurance • No dental visit in past year • Had any permanent teeth extracted • No HPV vaccination • No flu vaccine • No prostate cancer screening (Men 40+) • Not met USPSTF recommendation for colorectal cancer screening • COPD • Arthritis • Cardiovascular disease or stroke • Diabetes • Child consumption of sugar-sweetened beverages

3. HEALTH STATUS INDICATORS

GENERAL HEALTH STATUS

One in **nine** Connecticut adults rated their health as either **fair or poor** in 2020.

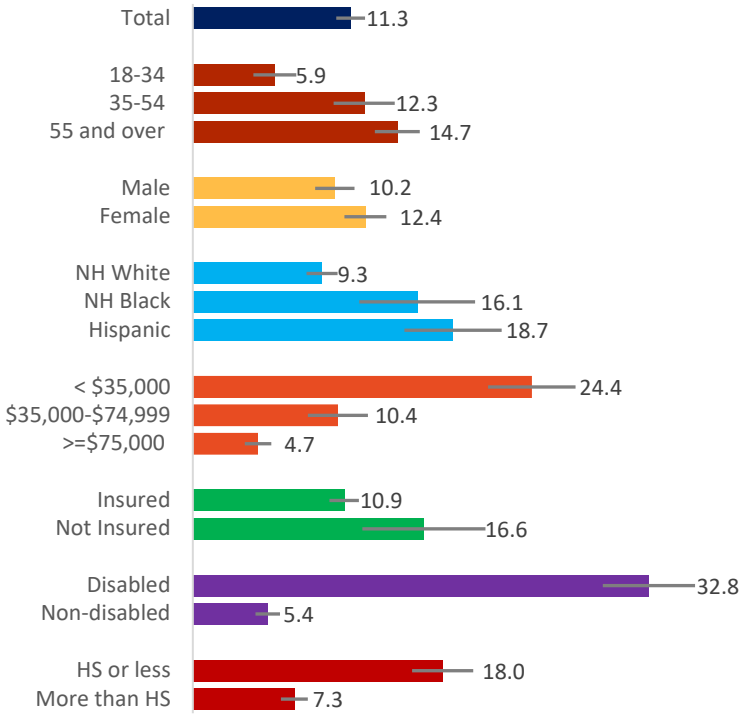
FIGURE 4: PREVALENCE OF FAIR OR POOR OVERALL HEALTH, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of having **fair or poor health** among adults in Connecticut was significantly greater for:

- Adults 55 years and older (14.7%) and adults 35–54 years old (12.3%);
- Hispanic (18.7%) and non-Hispanic Black (16.1%) adults;
- Adults from households earning less than $35,000 (24.4%) and $35,000–$74,999 (10.4%);
- Adults without health insurance (16.6%);
- Disabled adults (32.8%); and
- Adults with no more than a high school education (18.0%).

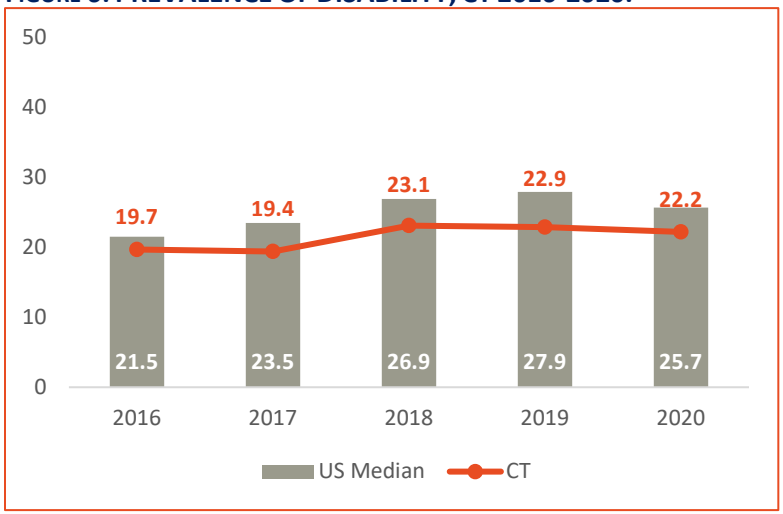
FIGURE 5: PERCENTAGE OF CT RESIDENTS REPORTING POOR OR FAIR OVERALL HEALTH, CT 2020



DISABILITY

Nearly **one** in **four** adults in Connecticut reported that they **have a disability** in 2020.

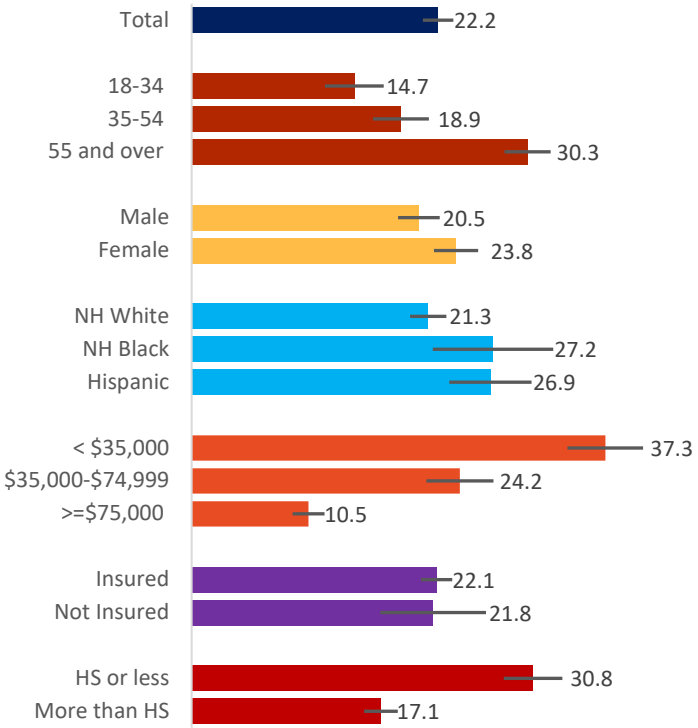
FIGURE 6: PREVALENCE OF DISABILITY, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of **being disabled** among adults in Connecticut was significantly greater for:

- Adults 55 years and older (30.3%);
- Females (23.8%);
- Hispanic adults (26.9%) compared to non-Hispanic White adults (21.3%);
- Adults from households earning less than $35,000 (37.3%) and $35,000–$74,999 (24.2%); and
- Adults with no more than a high school education (30.8%).

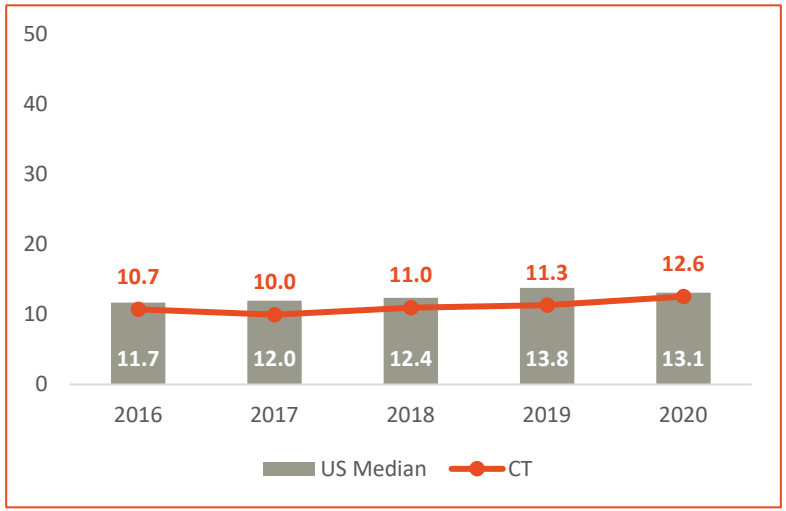
FIGURE 7: PERCENTAGE OF CT RESIDENTS REPORTING A DISABILITY, CT 2020



POOR MENTAL HEALTH

One in **eight** Connecticut adults reported **poor mental health** in 2020. *This measure defines adults as being in poor mental health if they reported 14 or more days (within the past 30 days) for which their mental health was "not good."*

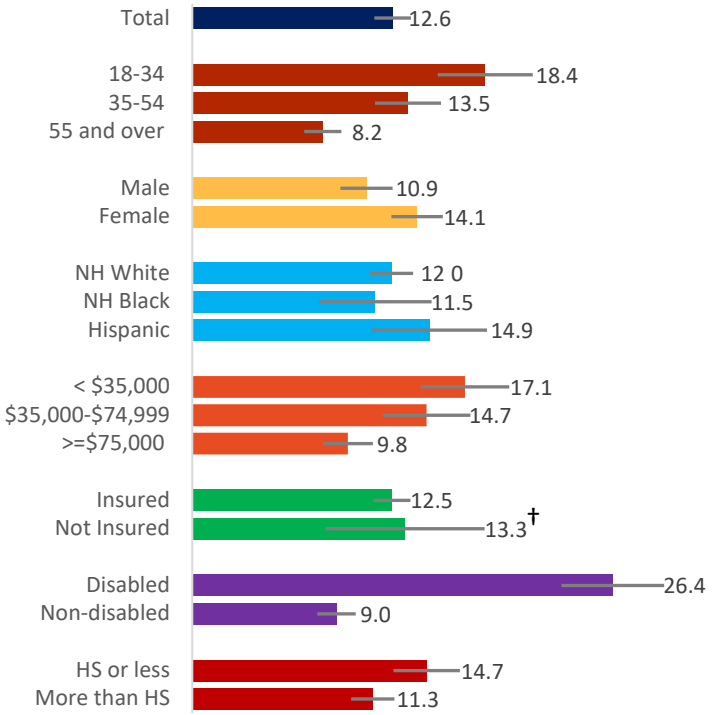
FIGURE 8: PREVALENCE OF POOR OR FAIR MENTAL HEALTH, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of **poor mental health** among adults in Connecticut was significantly greater for:

- Adults 18-34 years of age (18.4%) and adults 35–54 years old (13.5%);
- Females (14.1%);
- Adults from households earning less than $35,000 (17.1%) and $35,000-$74,999 (14.7%);
- Adults with a disability (26.4%); and
- Adults with no more than a high school education (14.7%).

FIGURE 9: PERCENTAGE OF CT RESIDENTS REPORTING POOR OR FAIR MENTAL HEALTH, CT 2020

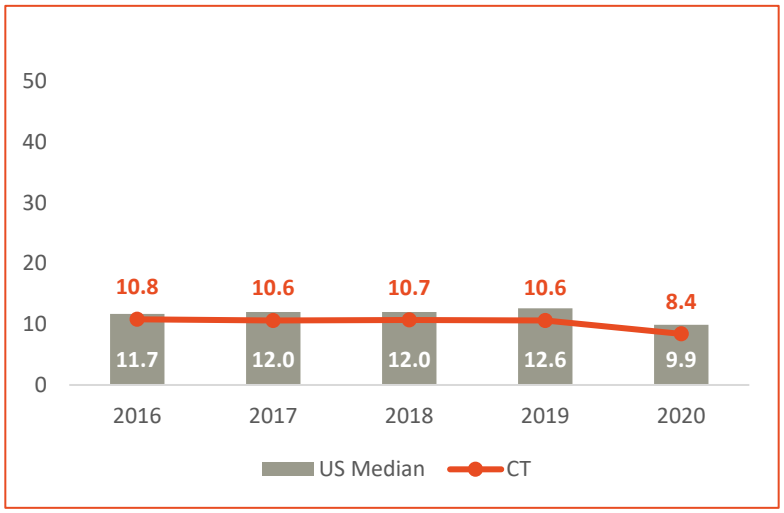


Estimates marked with a "†" have a CV between 15.0% and 20.0%.

POOR PHYSICAL HEALTH

One in **12** Connecticut adults reported **poor physical health** in 2020.

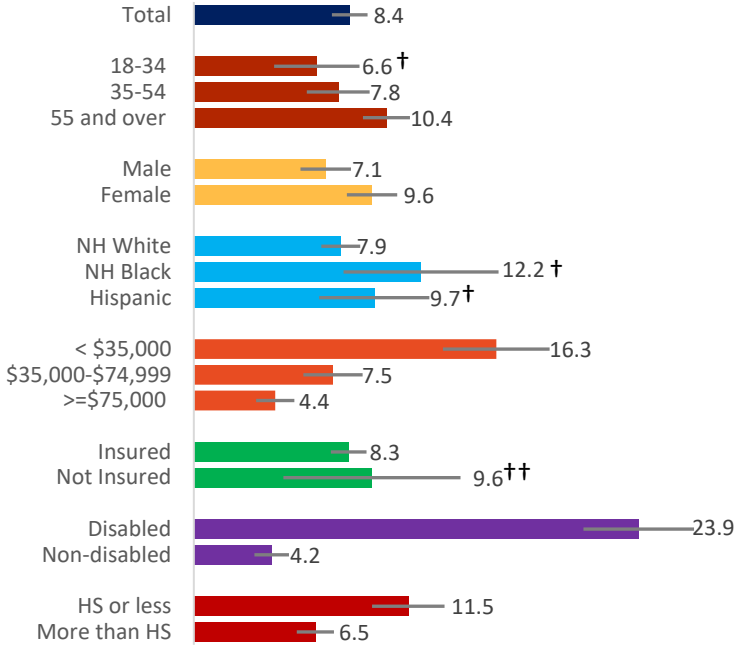
FIGURE 10: PREVALENCE OF POOR OR FAIR PHYSICAL HEALTH, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of **poor physical health** among adults in Connecticut was significantly greater for:
Adults 55 years and older (10.4%) compared to adults 35–54 years old (7.8%);

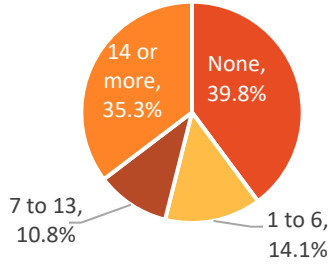
- Females (9.6%);
- Adults from household with annual household incomes less than $35,000 (16.3%) and $35,000-$74,999 (7.5%);
- Adults with a disability (23.9%); and
- Adults with no more than a high school education (11.5%).

FIGURE 11: PERCENTAGE OF CT RESIDENTS REPORTING POOR PHYSICAL HEALTH, CT 2020



Estimates marked with a "†" have a CV between 15.0% and 20.0%, estimates marked with a "††" have a CV between 20.1% and 30.0%.

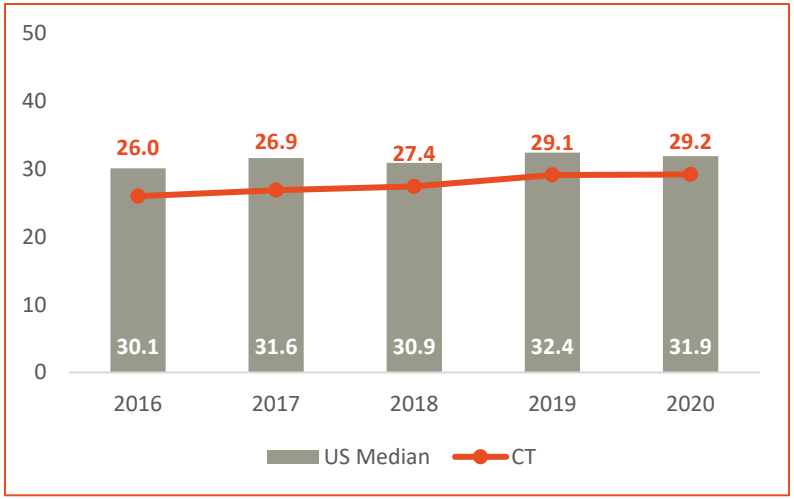
FIGURE 12: NUMBER OF POOR PHYSICAL OR MENTAL HEALTH DAYS AS A BARRIER TO LIFE'S ACTIVITIES, CT 2020.



ADULT WEIGHT STATUS

In Connecticut, **one** in **three** CT adults were **overweight**, and **one** in **three** CT adults were **obese** in 2020.

FIGURE 13: PREVALENCE OF OBESITY, CT 2016-2020.



Compared with their counterparts in the state, the prevalence of being **obese** among Connecticut residents was significantly greater for:

- Adults 35–54 years old (34.6%) and 55 years and older (29.3%);
- Non-Hispanic Black (40.6%) and Hispanic (36.8%) adults;
- Adults from households earning less than $35,000 (36.1%) and $35,000-$74,999 (32.5%);
- Adults with a disability (39.3%); and
- Adults with no more than a high school education (36.3%).

FIGURE 14: ADULT WEIGHT STATUS, CT 2020.

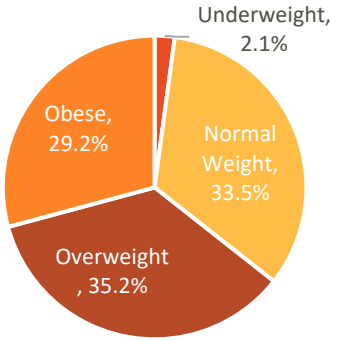
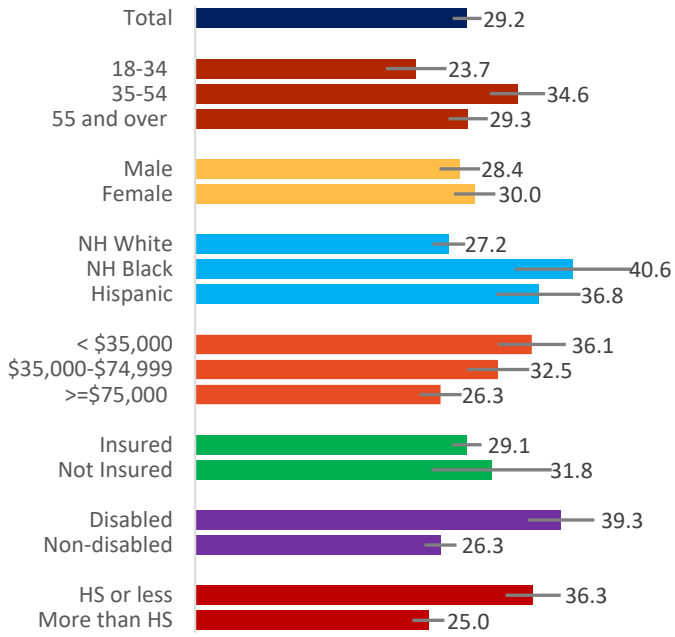


FIGURE 15: PREVALENCE OF OBESITY AMONG CT ADULTS, CT 2020



In 2020, **eight** in **ten** CT adults reported they had **at least one primary health care provider**.

FIGURE 16: PREVALENCE OF AT LEAST ONE PRIMARY HEALTH CARE PROVIDER, CT 2016-2020.

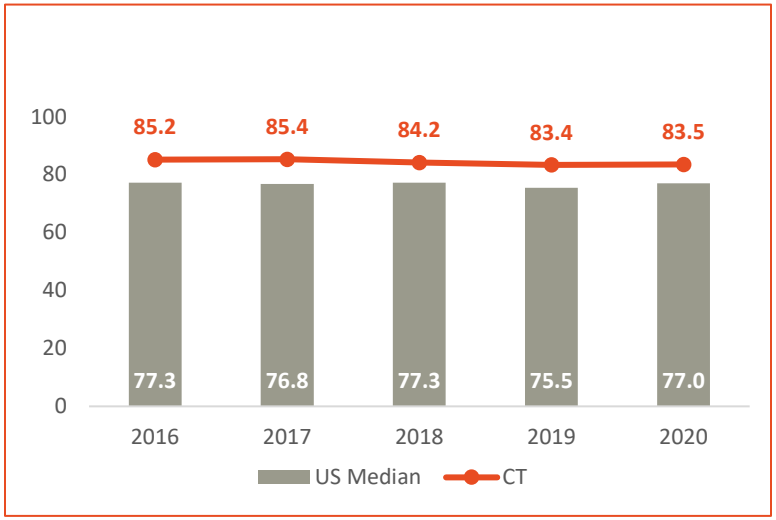
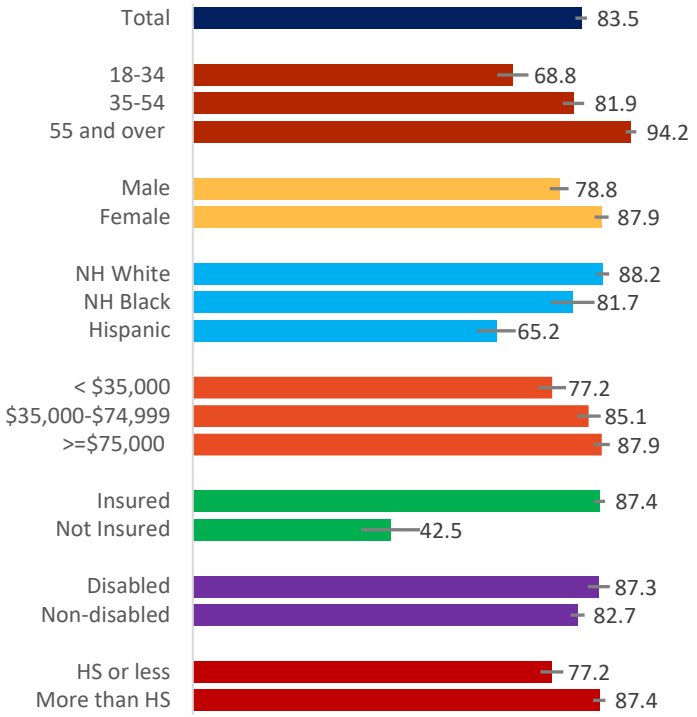


FIGURE 17: AT LEAST ONE PRIMARY HEALTH CARE PROVIDER, CT 2020



Compared to their counterparts in the state, the prevalence of having **at least one primary health care provider** was significantly greater for:

- Adults 55 years and older (81.9%) and adults 35–54 years old (94.2%);
- Females (87.9%);
- Non-Hispanic White adults (88.2%) and Non-Hispanic Black adults (81.7%);
- Adults from households earning at least $75,000 (87.9%) and $35,000–$74,999 (85.1%);
- Adults with health insurance (87.4%);
- Disabled adults (87.3%); and
- Adults with more than a high school education (87.4%).

In 2020, **one** in **13** CT adults reported that they had **no health care access due to costs**.

FIGURE 18: PREVALENCE OF NO HEALTH CARE ACCESS DUE TO COST, CT 2016-2020

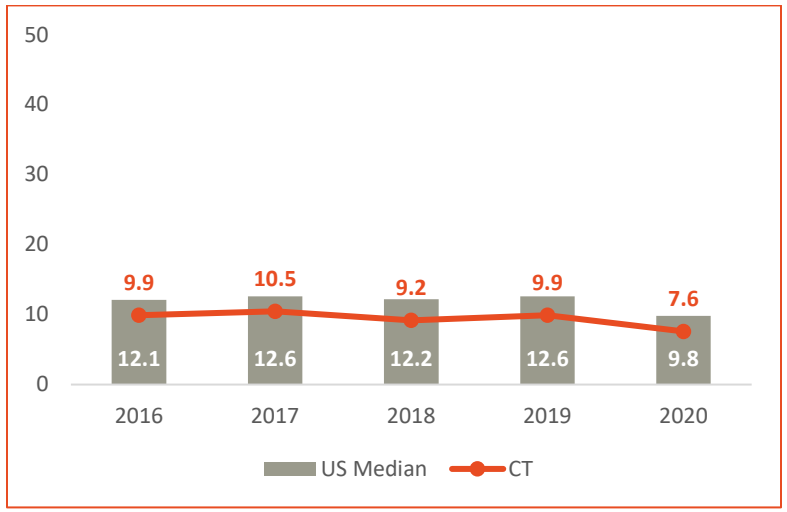
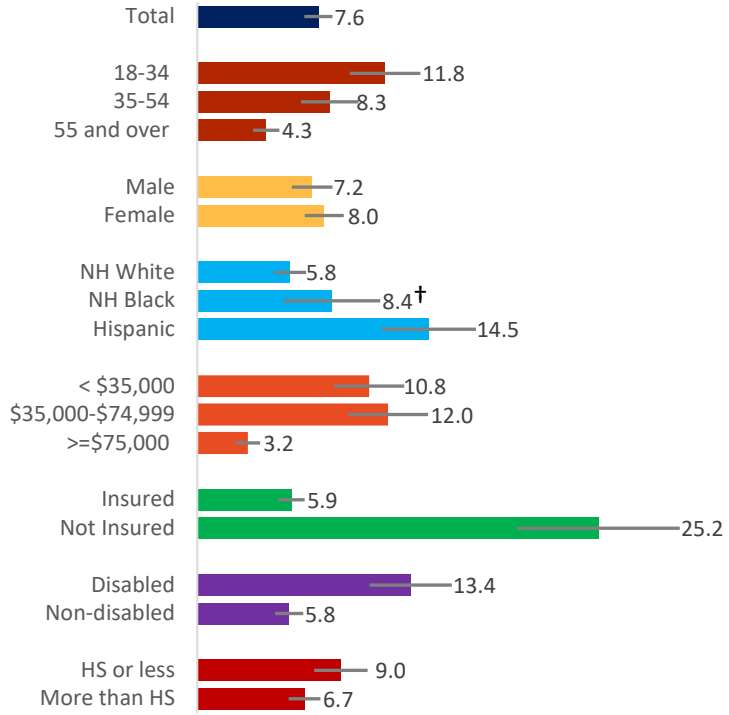


FIGURE 19: NO HEALTH CARE ACCESS DUE TO COST, CT 2020



Estimates marked with a "†" have a CV between 15.0% and 20.0%.

Compared to their counterparts in the state, the prevalence of having **no access to care due to cost** among adults in Connecticut was significantly greater for:

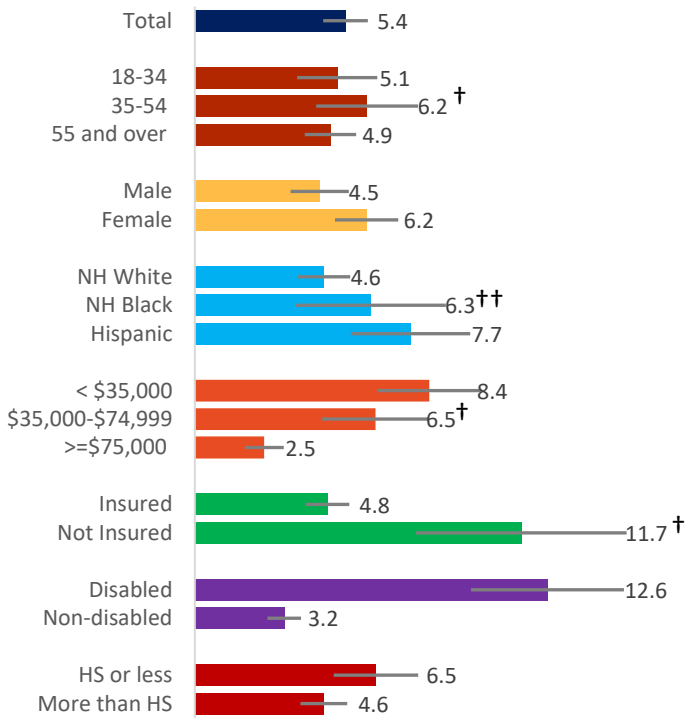
- Adults 18–34 years old (11.8%) and 35–54 years old (8.3%);
- Hispanic adults (14.5%) compared to non-Hispanic White adults (5.8%);
- Adults from households earning less than $35,000 (10.8%) and $35,000–$74,999 (12.0%);
- Adults without health insurance (25.2%);
- Adults with a disability (13.4%); and
- Adults with no more than a high school education (9.0%).

In 2020, **one** in **19** CT adults reported they **did not take their medication** as prescribed **because of cost**.

Compared to their counterparts in the state, the prevalence of having **not taking medication as prescribed due to cost** among adults in Connecticut was significantly greater for:

- Hispanic adults (7.7%) compared to non-Hispanic White adults (4.6%);
- Adults from households earning less than $35,000 (8.4%) compared to from at least $75,000 (2.5%); and
- Adults with a disability (12.6%).

FIGURE 20: NO ACCESS TO PRESCRIPTION DRUG DUE TO COST, CT 2020

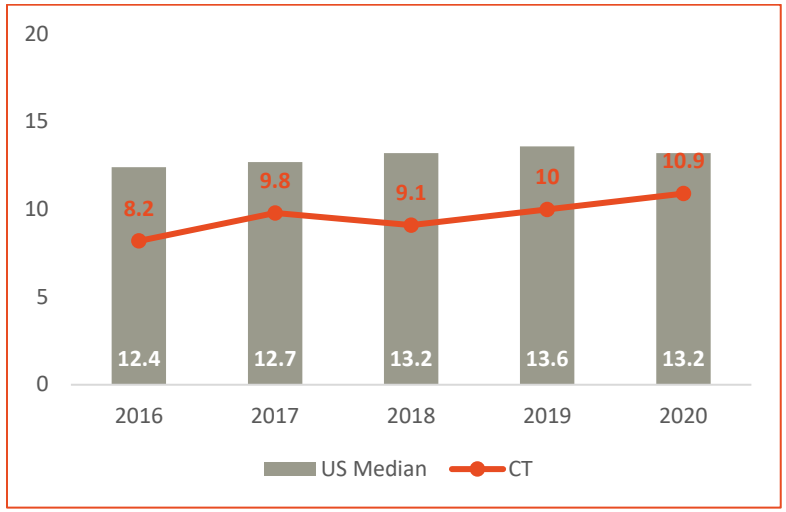


Estimates marked with a "†" have a CV between 15.0% and 20.0%; estimates marked with a "††" have a CV between 20.1% and 30.0%.

HEALTH INSURANCE COVERAGE (18-64 YEARS OLD)

In 2020, **one** in **9** CT adults 18-64 years old reported that they had **no** health insurance coverage, **six** in **ten** reported that they had **private** health insurance coverage, **one** in **eight** had **Medicaid** coverage, and **one** in **17** had **Medicare** coverage.

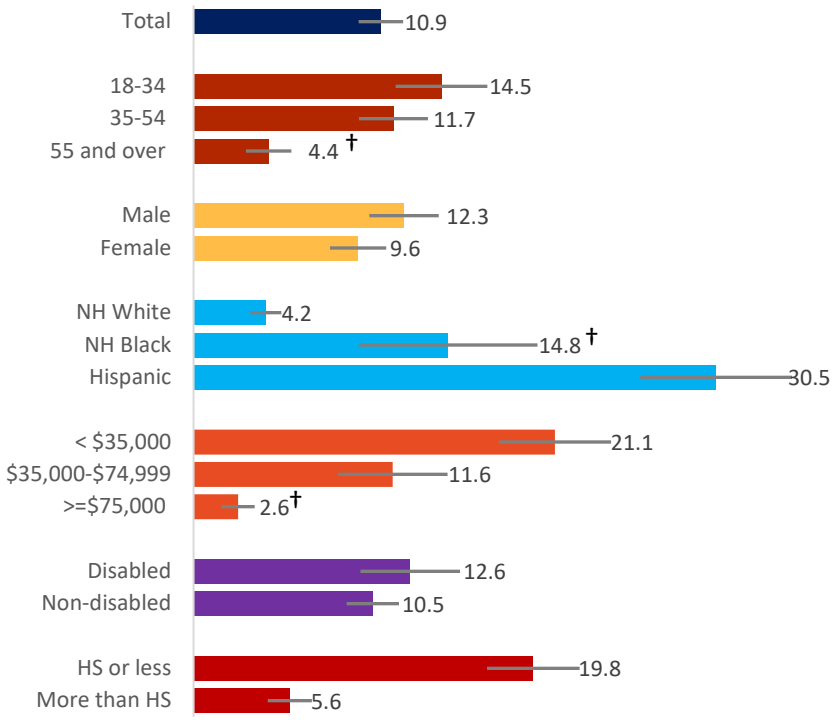
FIGURE 21: CT ADULTS 18-64 YEARS OLD WITH NO HEALTH INSURANCE, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of having **no health insurance coverage** among adults aged 18–64 years old was significantly greater for:

- Hispanic adults (30.5%) compared to non-Hispanic White (4.2%) adults;
- Adults from households earning less than $35,000 (21.1%) compared to $35,000–$74,999 (11.6%); and
- Adults with no more than a high school education (19.8%).

FIGURE 22: NO INSURANCE COVERAGE (18-64 YEARS OLD), CT 2020

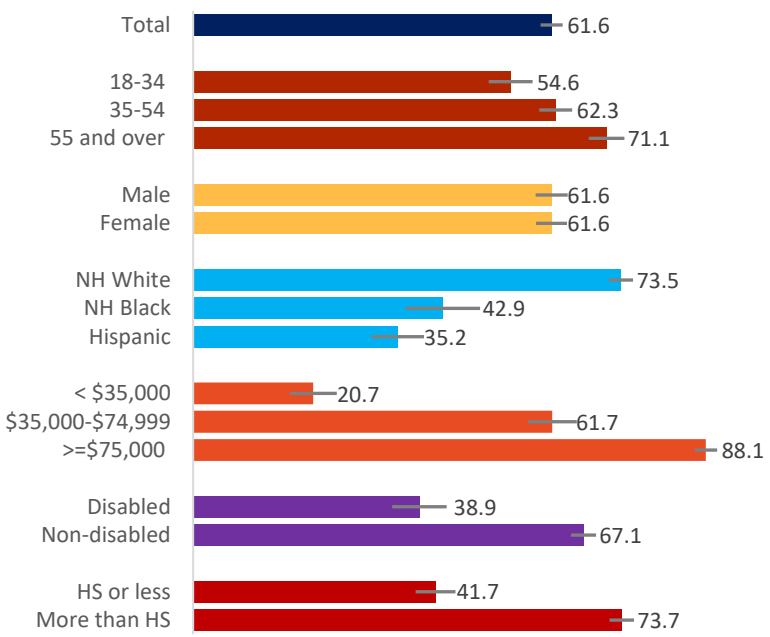


Estimates marked with a "†" have a CV between 15.0% and 20.0%.

Compared to their counterparts in the state, the prevalence of adults with **private health insurance coverage** among adults aged 18–64 years old was significantly greater for:

- Adults 55-64 (71.1%) and 35–54 years old (62.3%);
- Non-Hispanic White adults (73.5%);
- Adults from households earning at least $75,000 (88.1%) and$35,000–$74,999 (61.7%);
- Adults witho a disability (67.1%); and
- Adults with more than a high school education (73.7%).

FIGURE 23: PRIVATE INSURANCE, ADULTS 18-64 YEARS OLD, CT 2020

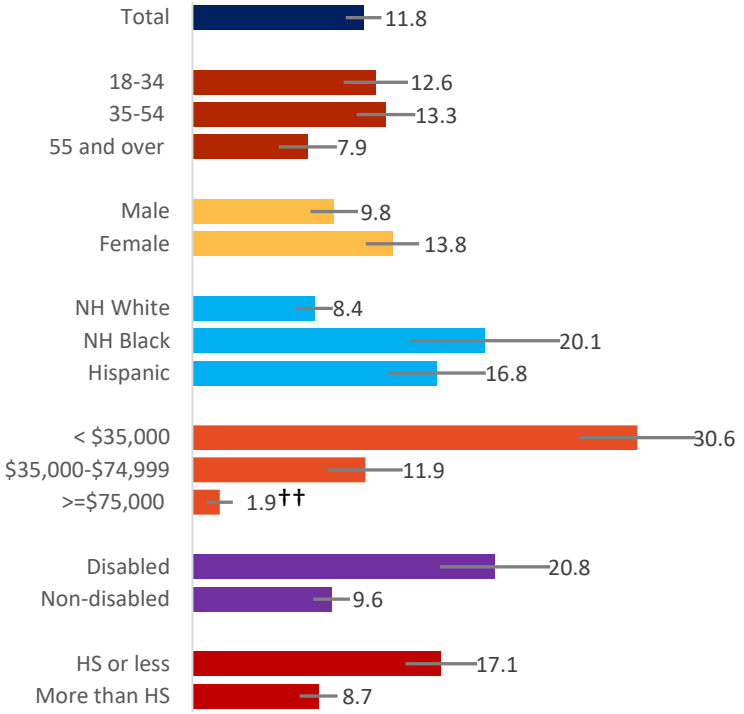


Estimates marked with a "††" have a CV between 20.1% and 30.0%.

Compared to their counterparts in the state, the prevalence of adults who had **Medicaid coverage** among adults aged 18–64 years old was significantly greater for:

- Adults 18–34 years old (12.6%) and 35-54 years old (13.3%);
- Females (13.8%);
- Non-Hispanic Black (20.1%) and Hispanic adults (16.8%);
- Adults from households earning less than $35,000 (30.6%) compared to from $35,000–$74,999 (11.9%);
- Adults with a disability (20.8%); and
- Adults with no more than a high school education (17.1%).

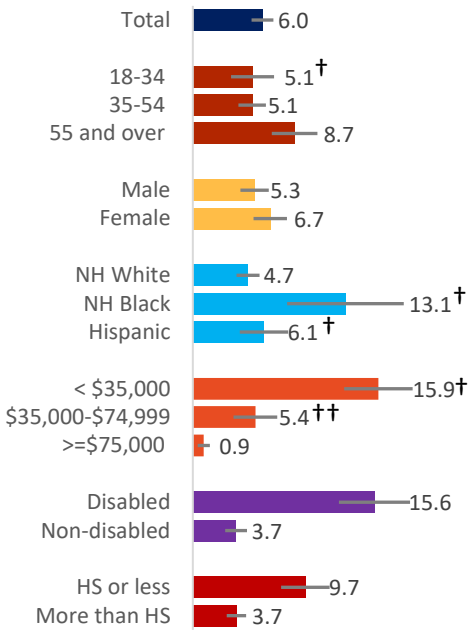
FIGURE 24: MEDICAID COVERAGE, ADULTS 18-64 YEARS OLD, CT 2020



Compared to their counterparts in the state, the prevalence of adults who had **Medicare coverage** among adults aged 18–64 years old was significantly greater for:

- Adults 55 and over (8.7%) compared to 35-54 years old (5.1%);
- Adults with a disability (15.6%); and
- Adults with no more than a high school education (9.7%).

FIGURE 25: MEDICARE COVERAGE, ADULTS 18-64 YEARS OLD, CT 2020



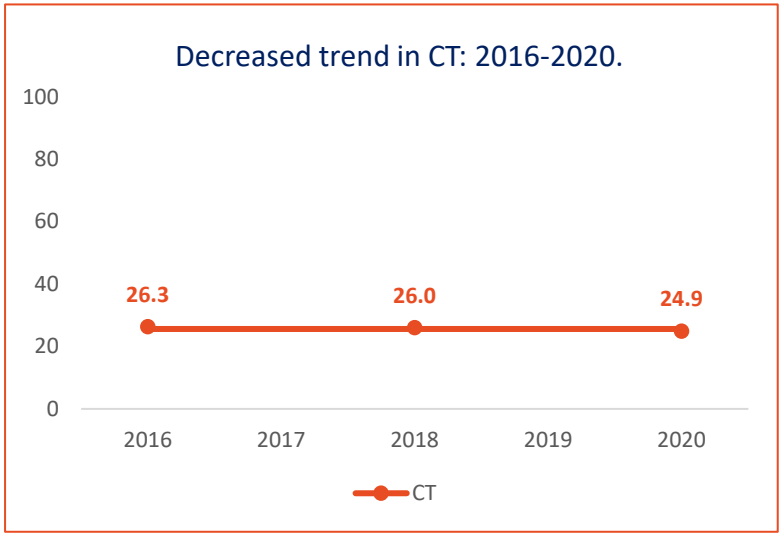
Estimates marked with a "†" have a CV between 15.0% and 20.0%.

Note: Generally, Medicare is available for people age 65 or older, younger people with disabilities and people with End Stage Renal

DENTAL INSURANCE

One in **four** Connecticut adults in 2020 had **no dental insurance**.

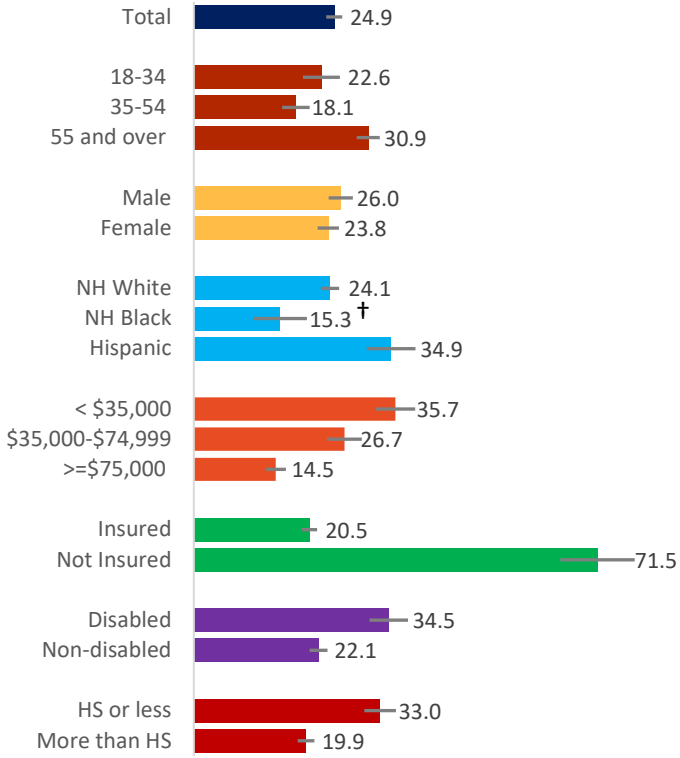
FIGURE 26: PREVALENCE OF NO DENTAL INSURANCE, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of having **no dental insurance** among Connecticut adults was significantly greater for:

- Adults 55 years and older (30.9%);
- Hispanic adults (34.9%) compared to non-Hispanic White adults (24.1%);
- Adults from households earning at least $75,000 (35.7%) and from $35,000-$74,999 (26.7%);
- Adults witho health insurance (71.5%);
- Adults with a disability (34.5%); and
- Adults with more than a high school education (33.0%).

FIGURE 27: NO DENTAL INSURANCE, CT 2020

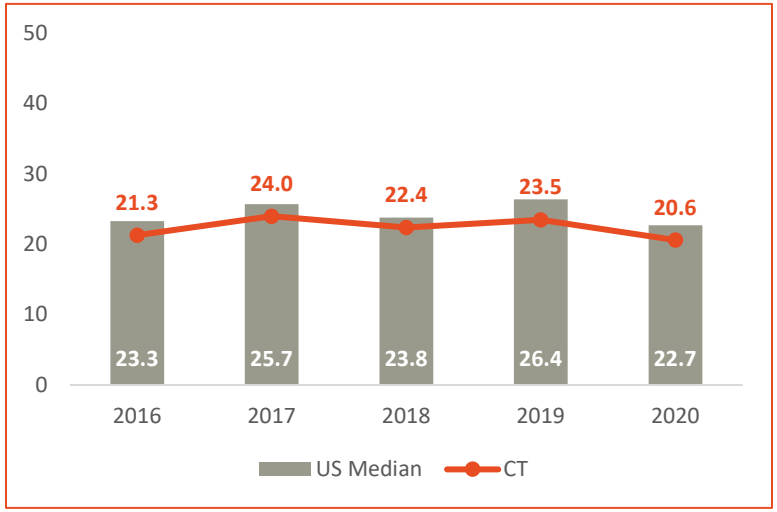


4. RISK BEHAVIOR INDICATORS

ADULT PHYSICAL ACTIVITY

One in **five** Connecticut adults in 2020 did **not engage** in any recreational **physical activity** outside of work.

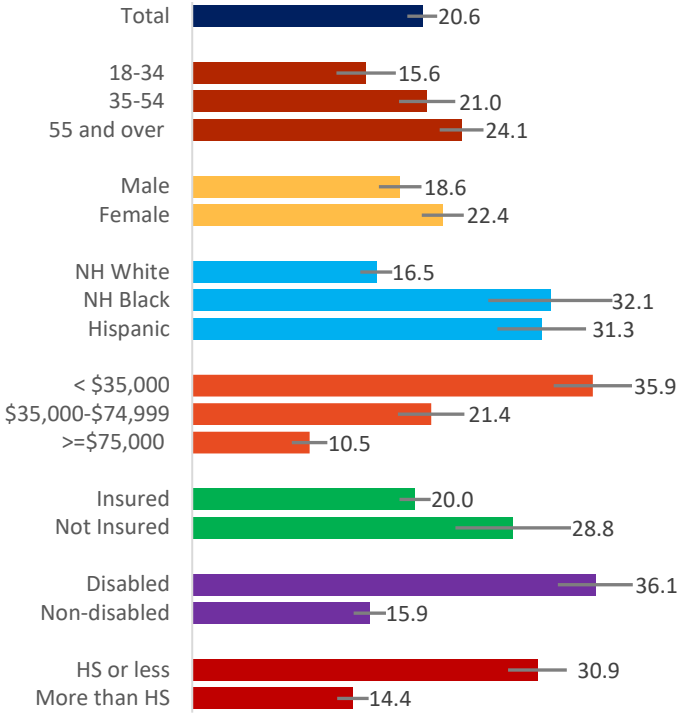
FIGURE 28: PREVALENCE OF NO LEISURE TIME PHYSICAL ACTIVITY, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of **no leisure-time activity** among adults in Connecticut was significantly greater for:

- Adults 55 years and older (24.1%) and adults 34-54 years old (21.0%);
- Females (22.4%);
- Hispanic (31.3%) and non-Hispanic Black (32.1%) adults;

FIGURE 29: DID NOT ENGAGE IN LEISURE OR RECREATIONAL PHYSICAL ACTIVITY, CT 2020

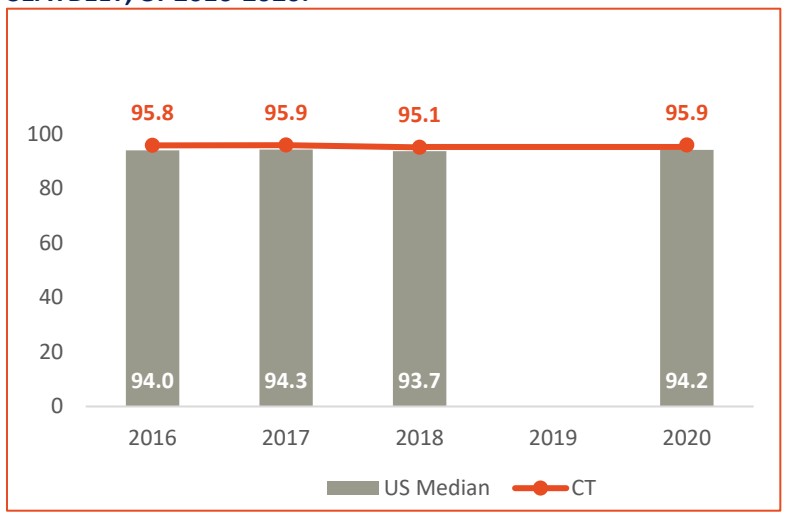


- Adults from households earning less than $35,000 (35.9%) and $35,000–$74,999 (21.4%);
- Adults without health insurance (28.8%);
- Adults with a disability (36.1%); and
- Adults with no more than a high school education (30.9%).

MOTOR VEHICLE SAFETY

In 2020, **95%** of Connecticut adults reported **using a seatbelt all the time**. Approximately **2.1 %** of Connecticut adults reported having driven at least once when perhaps had too much to drink.

FIGURE 30: PREVALENCE OF ALWAYS OR NEARLY ALWAYS USED A SEATBELT, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of **always or nearly always wearing a seatbelt** when they drove or rode in a car was significantly greater for:

- Females (96.8%);
- Adults from household with annual incomes at least $75,000 (96.7%) compared to from less than $35,000 (94.4%);
- Adults without a disability (96.6%); and
- Adults with more than a high school education (97.3%).

FIGURE 31: FREQUENCY OF SEATBELT USE, CT 2020

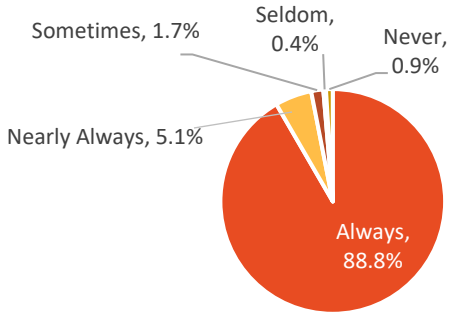
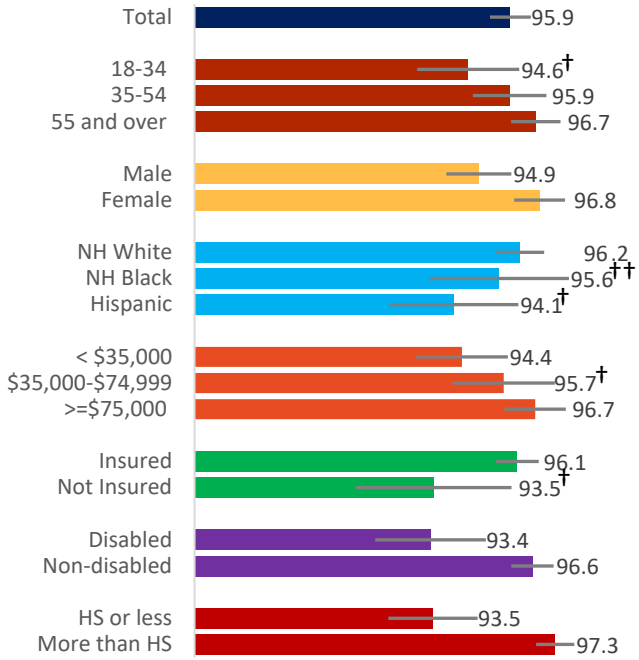


FIGURE 32: ALWAYS OR NEARLY ALWAYS USED A SEATBELT, CT 2020

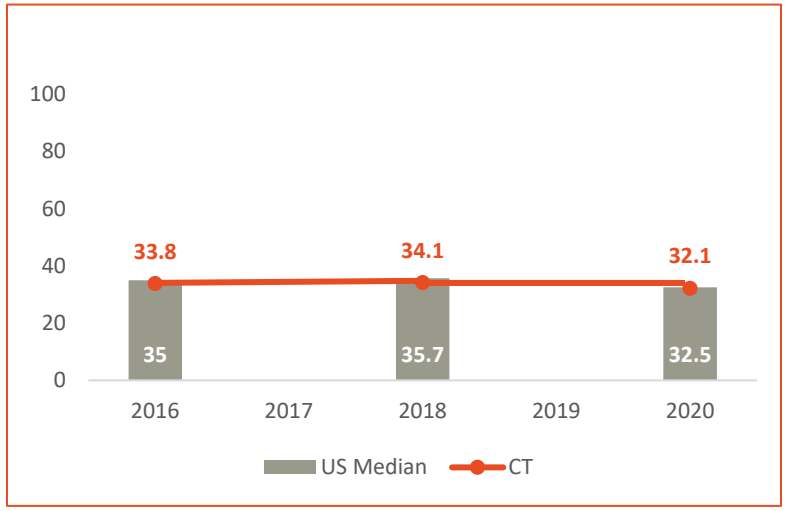


Estimates marked with a "†" have a CV between 15.0% and 20.0%; estimates marked with a "††" have a CV between 20.1% and 30.0%.

INADEQUATE SLEEP

One in three of Connecticut adults got **less than seven** hours of **sleep** per night in 2020.

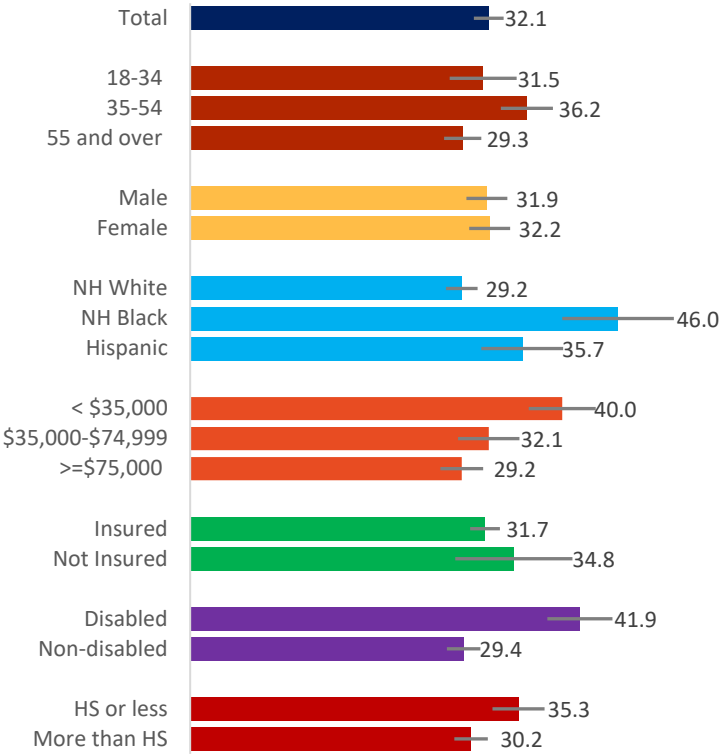
FIGURE 33: PREVALENCE OF INADEQUATE SPLEEP, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of adults who **had inadequate sleep** was significantly greater for:

- Adults 35–54 years old (36.2%) compared to adults 55 and over (29.3%);
- Non-Hispanic Black (46.0%) and Hispanic (35.7%) adults;
- Adults from households earning less than $35,000 (40.0%);
- Adults with disability (41.9%); and
- Adults with no more than a high school education (35.3%).

FIGURE 34: INADEQUATE SLEEP (LESS THAN 7 HOURS), CT 2020



FALLS

In 2020, **one** in **five** Connecticut adults aged 45 years and older, and **one** in **four** CT adults 65 and over reported had a fall in the past 12 months. Of those who **had fallen** at least once in the past 12 months, **one** in **three** suffered an **injury** (36.0%) and **one** in **four** received **fall prevention guidance** from a doctor (26.0%).

FIGURE 35: PREVALENCE OF FALL IN PAST YEAR (45 AND OLDER), CT 2016-2020.

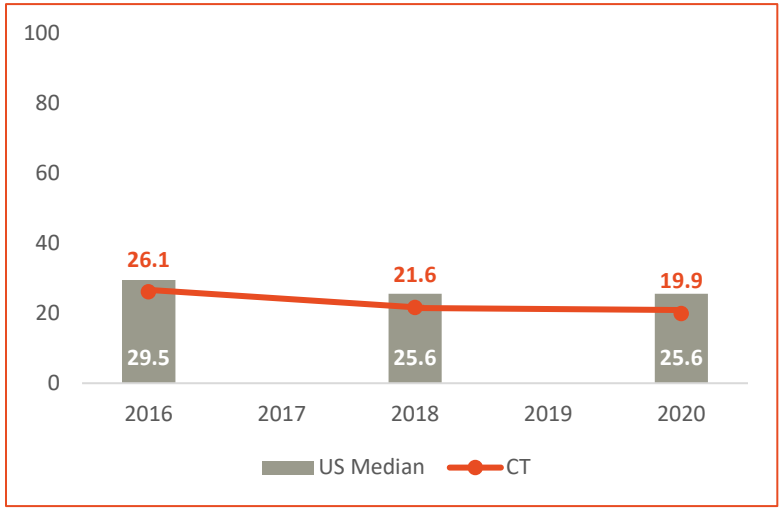
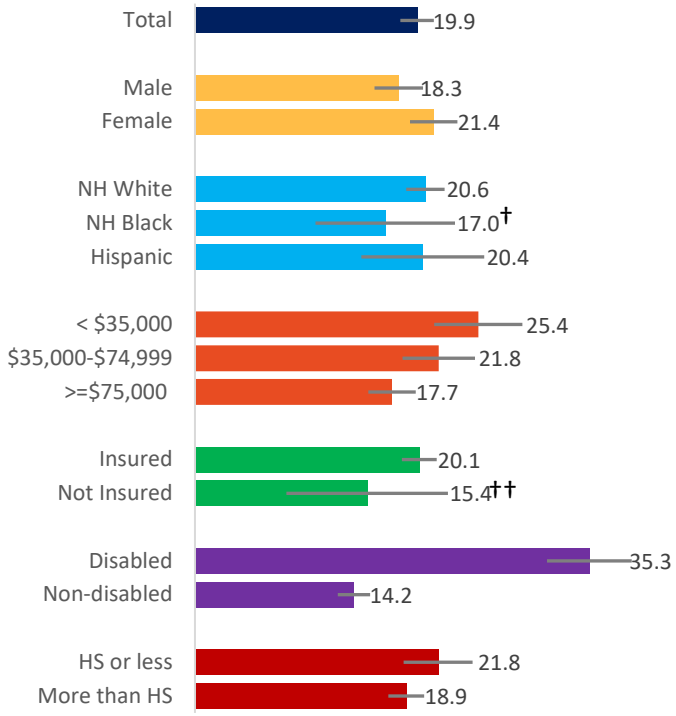


FIGURE 36: FALL IN PAST YEAR (45 AND OLDER), CT 2020



Estimates marked with a "†" have a CV between 15.0% and 20.0%; estimates marked with a "††" have a CV between 20.1% and 30.0%.

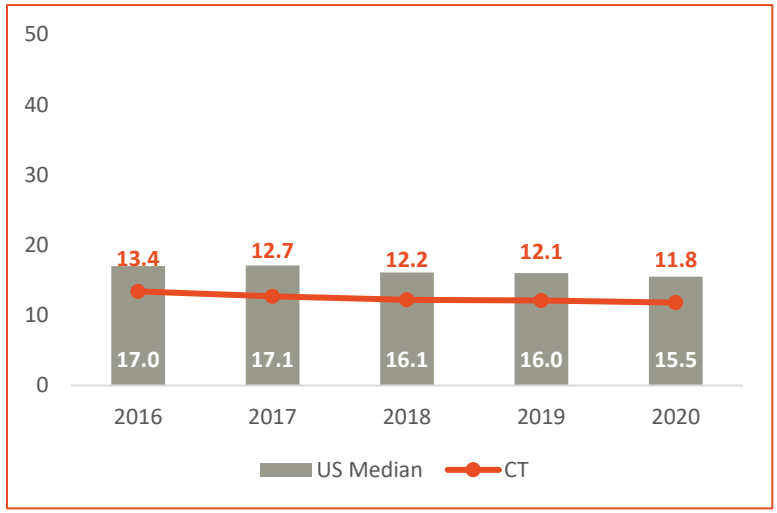
Compared to their counterparts in the state, the prevalence of **falling** was significantly greater for:

- Adults from households earning less than $35,000 (25.4%) compared to at least $75,000 (17.7%); and
- Adults with a disability (35.3%).

CURRENT CIGARETTE SMOKING

One in **eight** Connecticut adults in 2020 were **current smokers**, smoked cigarettes “every day” or “some days” in the past month.

FIGURE 37: PREVALENCE OF CURRENT SMOKER, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of **current cigarette smoking** was significantly greater for:

- Adults 35–54 years old (15.8%);
- Males (13.3%);
- Adults from households earning less than $35,000 (21.9%) and $35,000-$74,999 (13.4%);
- Adults with a disability (19.5%); and
- Adults with no more than a high school education (18.9%).

FIGURE 38: SMOKING STATUS, CT 2020.

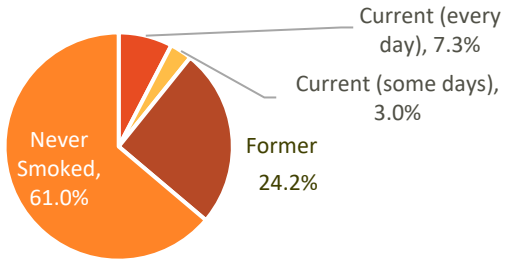
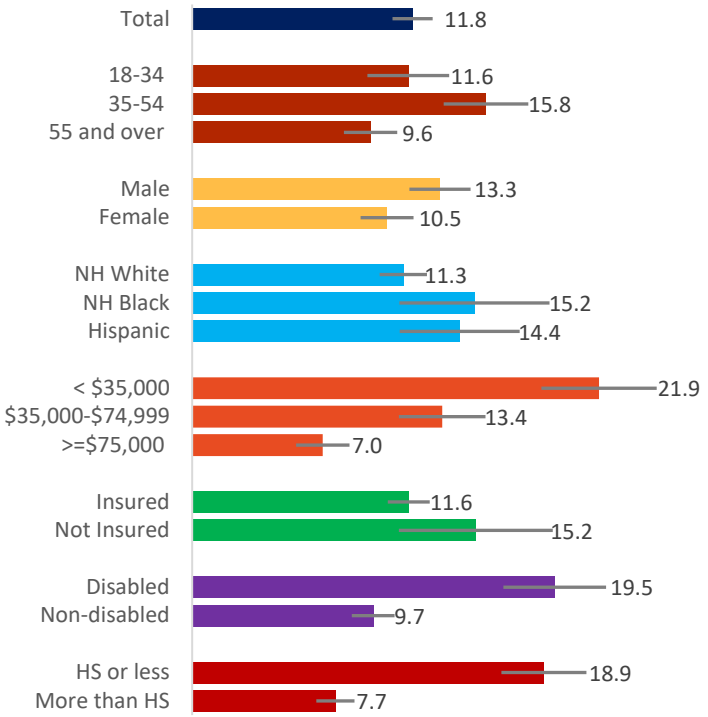


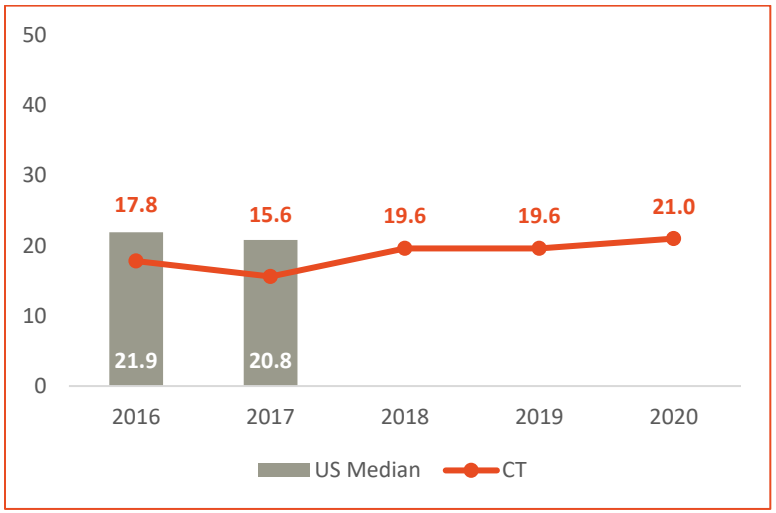
FIGURE 39: CURRENT CIGARETTE SMOKING, CT 2020



E-CIGARETTE USE

One in **five** CT adults in 2020 had tried vapor, vape pen or **e-cigarettes**.

FIGURE 40: EVER TRIED E-CIGARETTES, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of **using vapor, vape pens, or e-cigarettes** was significantly greater for:

- Adults 18–34 years old (41.8%) and 35–54 years old (20.6%);
- Males (23.8%);
- Adults from households earning less than $35,000 (24.0%) compared to at least $75,000 (19.1%);
- Adults with a disability (24.7%); and
- Adults with no more than high school education (23.7%).

FIGURE 41: E-CIGARETTE USE STATUS (AMONG EVER TRIED E-CIGARETTES), CT 2020.

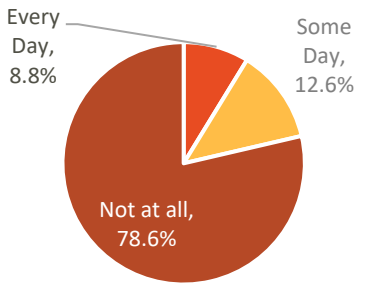
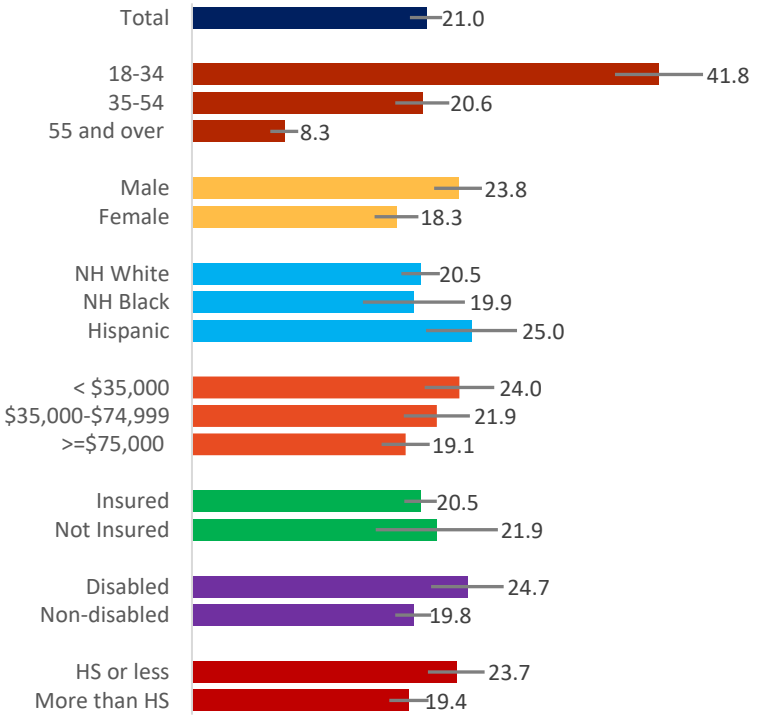


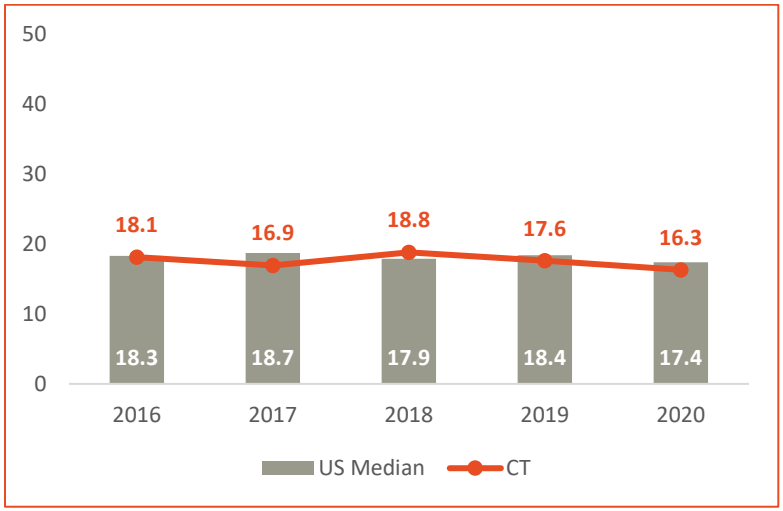
FIGURE 42: EVER TRIED VAPOR OR VAPE PEN OR E-CIGARETTES, CT 2020



ALCOHOL CONSUMPTION

One in **six** CT adults report **excessive alcohol consumption** in 2020. Approximately **one** in **seven** CT adults engaged in **binge drinking**, while **one** in **16** engaged in **heavy drinking**.

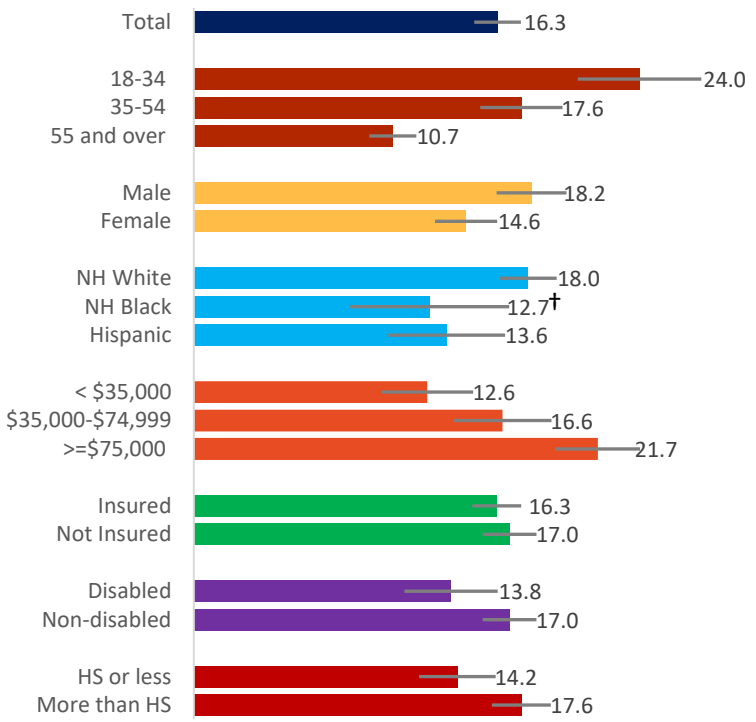
FIGURE 43: EXCESSIVE ALCOHOL CONSUMPTION, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of **excessive alcohol consumption** was significantly greater for:

- Adults 18–34 years old (24.0%) and 35–54 years old (17.6%);
- Males (18.2%);
- Non-Hispanic White adults (18.0%) compared to Hispanic adults (13.6%);
- Adults from households earning at least $75,000 (21.7%); and
- Adults with more than a high school education (17.6%).

FIGURE 44: EXCESSIVE ALCOHOL CONSUMPTION, CT 2020.



Estimates marked with a "†" have a CV between 15.0% and 20.0%.

Compared to their counterparts in the state, the prevalence of **binge drinking** was significantly greater for:

- Adults 18–34 years old (22.9%) and 35–54 years old (16.1%);
- Males (17.0%); and
- Adults from households earning at least $75,000 (19.1%).

FIGURE 45: PREVALENCE OF BINGE DRINKING, CT 2016-2020.

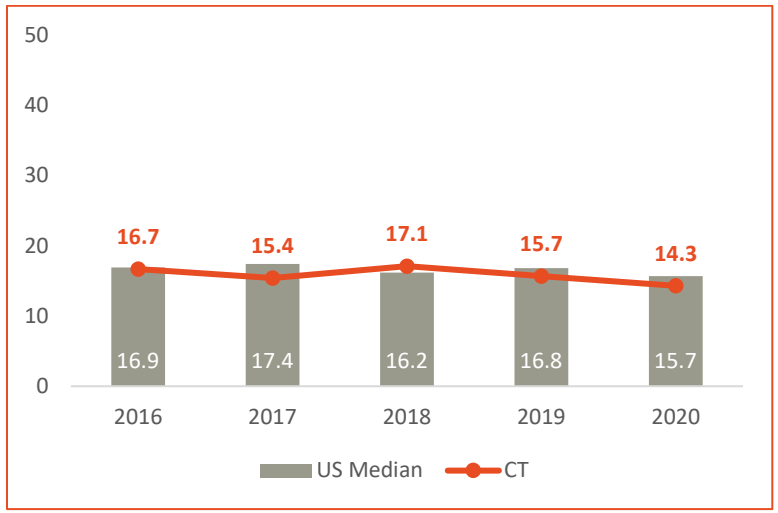
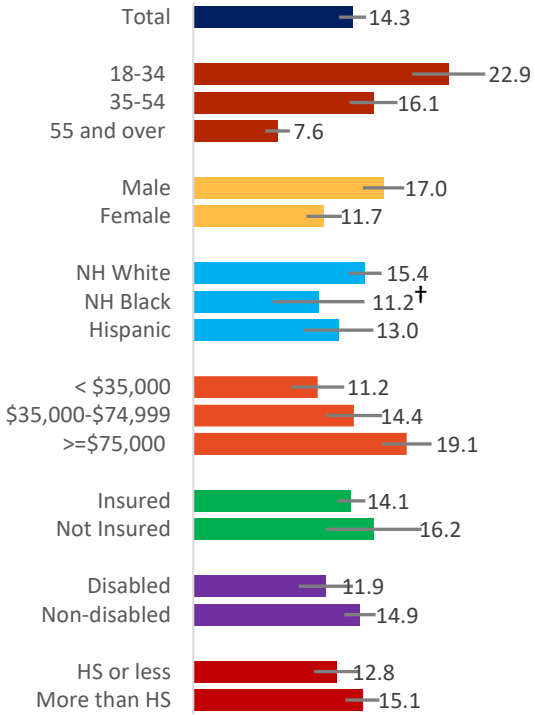


FIGURE 46: BINGE DRINKING, CT 2020



Estimates marked with a "†" have a CV between 15.0% and 20.0%.

Compared to their counterparts in the state, the prevalence of **heavy drinking** was significantly greater for:

- Females (7.1%).

FIGURE 47: PREVALENCE OF HEAVY DRINKING, CT 2016-2020.

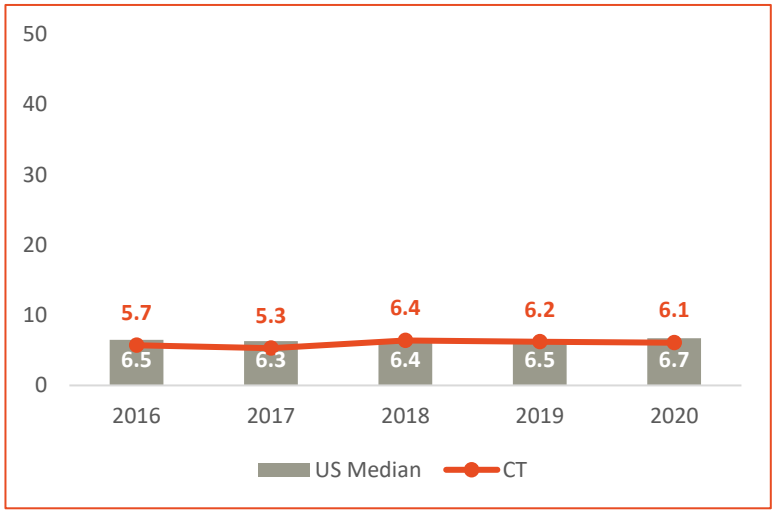
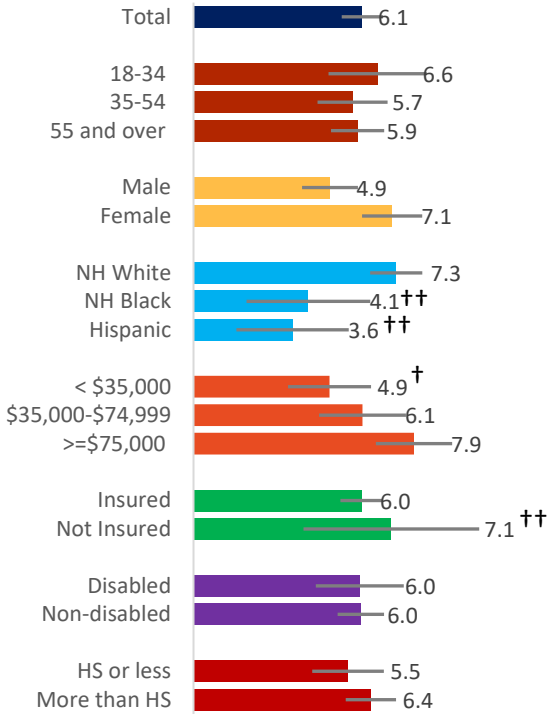


FIGURE 48: HEAVY DRINKING, CT 2020



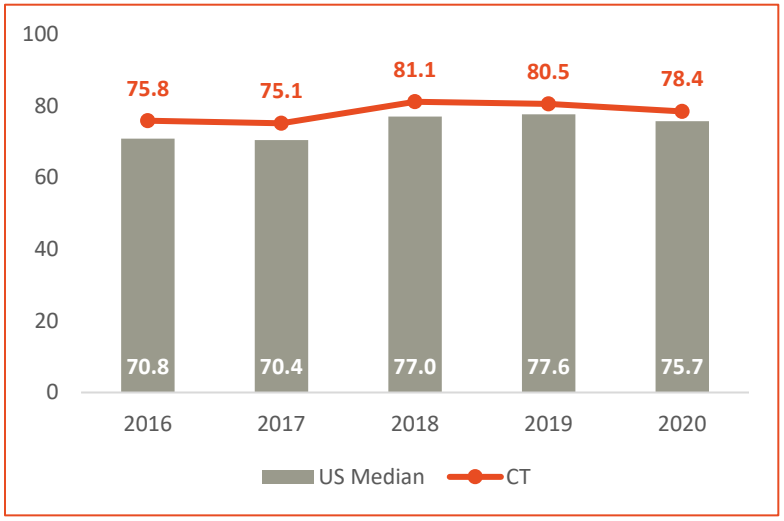
Estimates marked with a "†" have a CV between 15.0% and 20.0%; estimates marked with a "††" have a CV between 20.1% and 30.0%.

5. CLINICAL PREVENTIVE PRACTICES

ROUTINE CHECK-UP

Four in five of Connecticut adults in 2020 had a **routine check-up** in the previous year.

FIGURE 49: ROUTINE CHECKUP IN PAST YEAR, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of having a **routine check-up within the past year** was significantly greater for:

- Adults 55 years and older (86.8%) and 35-54 years old (74.8%);
- Females (82.3%);
- Non-Hispanic White (79.5%) and non-Hispanic Black (82.8%) adults;
- Adults with health insurance (80.7%); and
- Adults with a disability (83.5%).

FIGURE 50: TIME SINCE LAST ROUTINE CHECK-UP, CT 2020

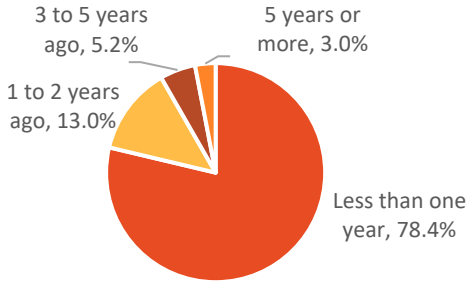
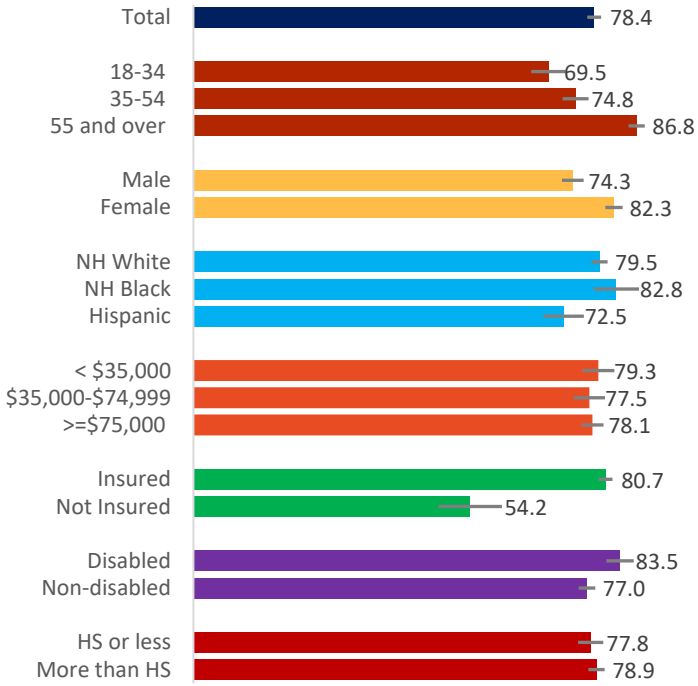


FIGURE 51: ROUTINE CHECK-UP IN THE PAST YEAR, CT 2020



ADULT ORAL HEALTH

Seven in **ten** Connecticut adults in 2020 had a **dental visit** in the previous year.

FIGURE 52: VISITED DENTIST IN THE PAST YEAR, CT 2016-2020.

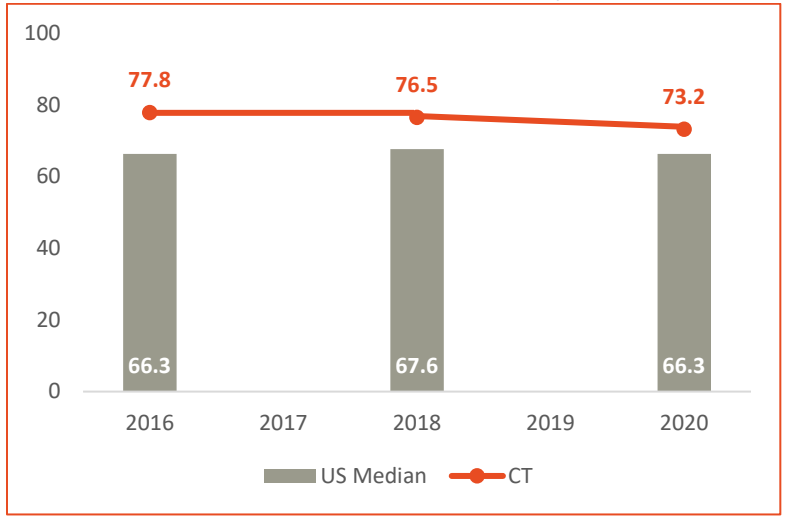
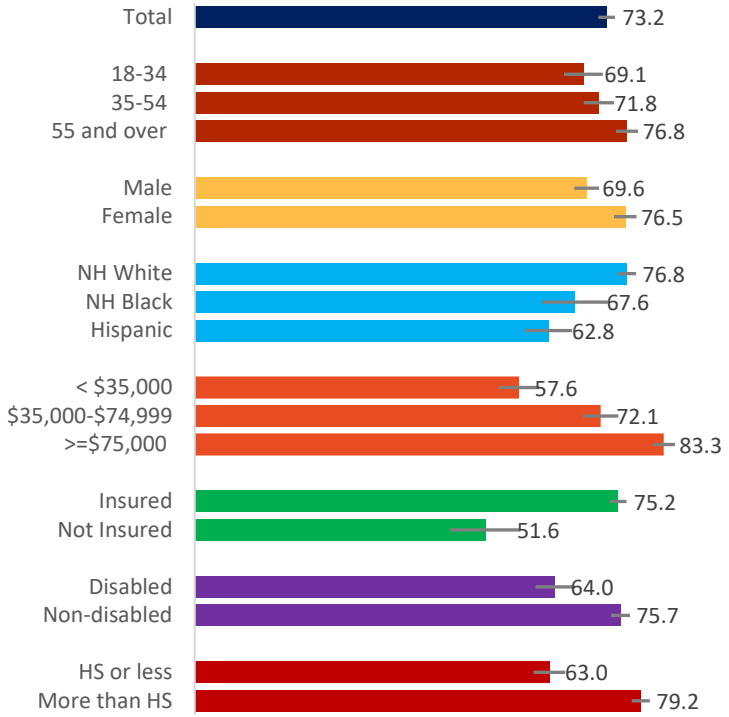


FIGURE 53: VISITED DENTIST IN THE PAST YEAR, CT 2020



Compared to their counterparts in the state, the prevalence of having had a **dental visit in the previous** year among Connecticut adults was significantly greater for:

- Adults 55 years and older (76.8%);
- Females (76.5%);
- Non-Hispanic White adults (76.8%);
- Adults from households earning at least $75,000 (83.3%) and from $35,000-$74,999 (72.1%);
- Adults with health insurance (75.2%);
- Adults witho a disability (75.7%); and
- Adults with more than a high school education (79.2%).

Compared to their counterparts in the state, the prevalence of having **had any permanent teeth extracted** among Connecticut adults was significantly greater for:

- Adults 55 years and older (55.7%) and adults 35–54 years old (35.4%);
- Non-Hispanic Black adults (48.7%) compared to Non-Hispanic White adults (37.2%);
- Adults from households earning less than $35,000 (54.6%) and $35,000-$74,999 (44.2%);
- Adults without health insurance (46.3%);
- Adults with a disability (58.2%); and
- Adults with less than a high school education (50.8%).

FIGURE 54: ADULTS HAD ANY PERMANENT TEETH EXTRACTED, CT 2016-2020.

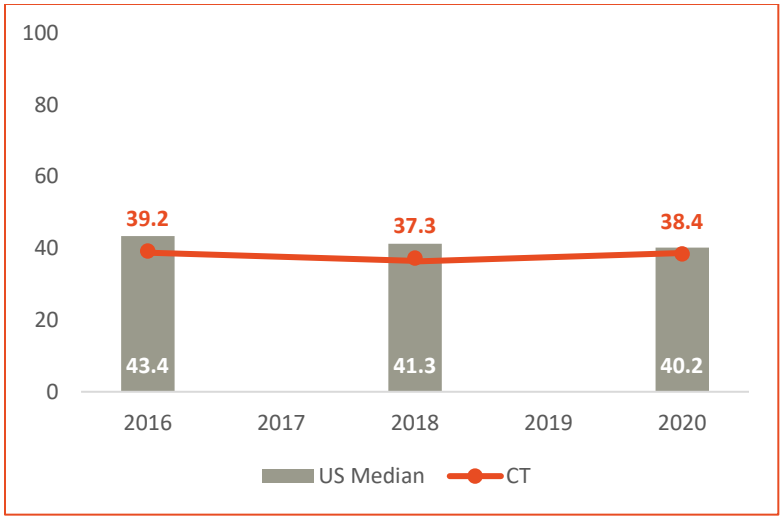
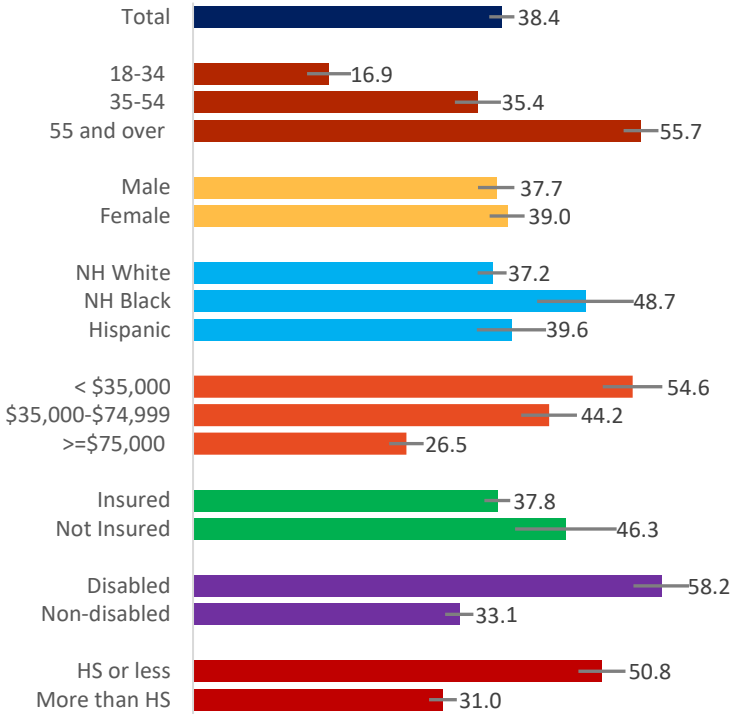


FIGURE 55: ADULTS HAD ANY PERMANENT TEETH EXTRACTED, CT 2020



PERIODONTAL DISEASE

One in **eight** of Connecticut adults in 2020 reported having ever been told they had **periodontal disease**, and **one** in **six** Connecticut adult residents had **received treatment** for their periodontal disease.

FIGURE 56: EVER BEING TOLD HAVE PERIODONTAL DISEASE, CT 2016-2020.

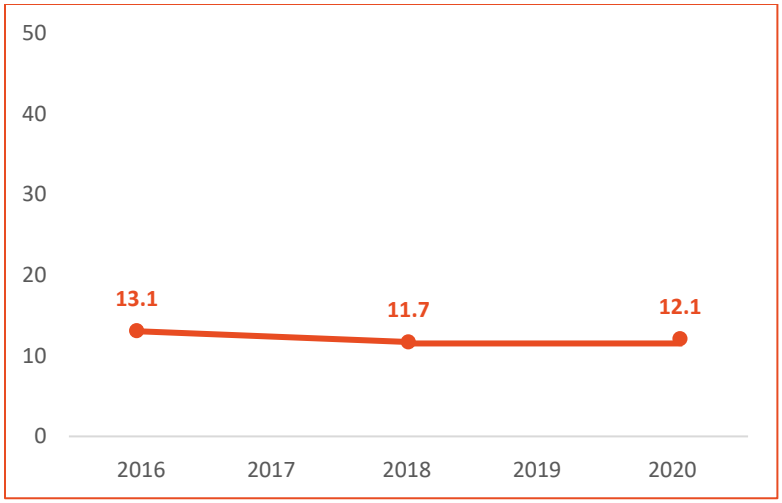
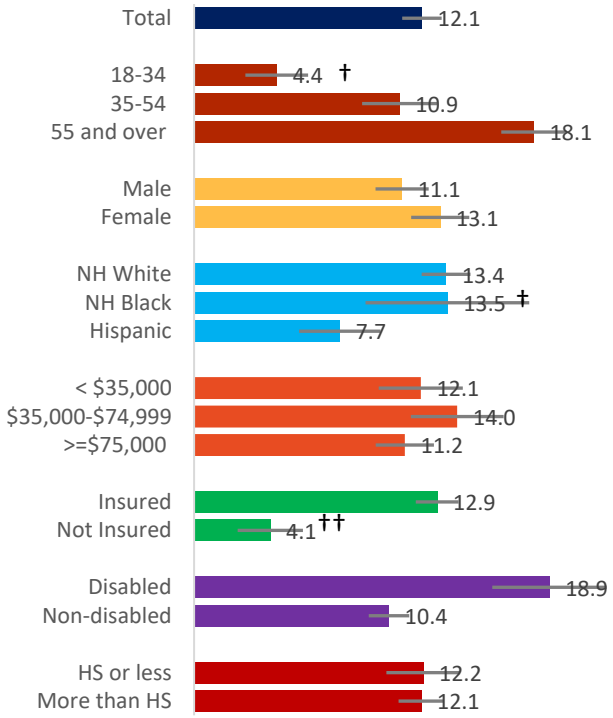


FIGURE 57: EVER BEING TOLD HAVE PERIODONTAL DISEASE, CT 2020



Compared to their counterparts in the state, the prevalence of **ever being told they have periodontal disease** was significantly greater for:

- Adults 55 years and older (18.1%) compared to adults 35–54 years old (10.9%);
- Non-Hispanic White adults (13.4%) compared to Hispanic adults (7.7%); and
- Adults with a disability (18.9%).

Estimates marked with a '†' have a CV between 15.0% and 20.0%, estimates marked with a "††" have a CV between 20.1% and 30.0%.

ADULT INFLUENZA

In 2020, more than **half** of CT adults (54.0%) in 2020 had **a flu vaccine** in the past year, and **three** in **four** CT adults aged 65 and over had a flu vaccine in the past year (74.0%).

FIGURE 58: FLU VACCINE IN THE PAST YEAR, CT 2016-2020.

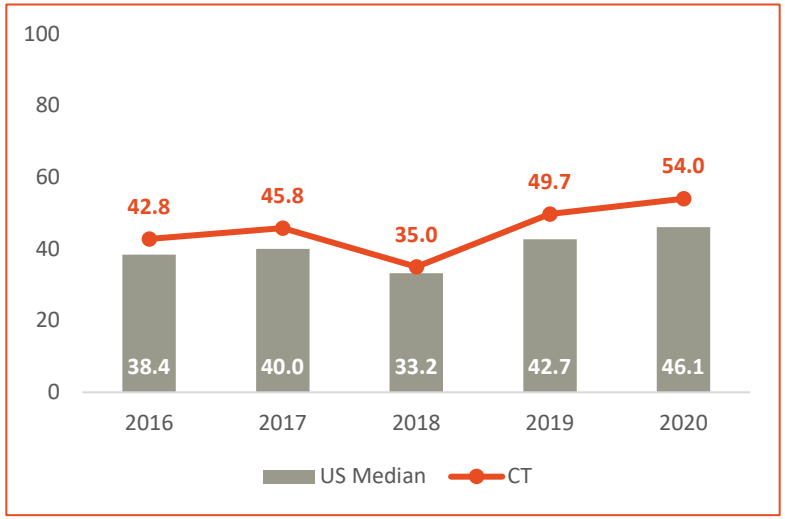
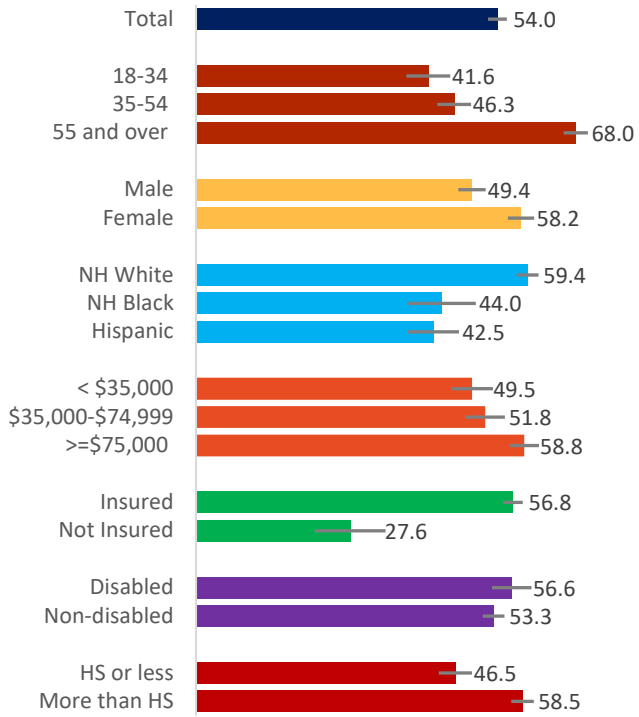


FIGURE 59: FLU VACCINE IN THE PAST YEAR, CT 2020



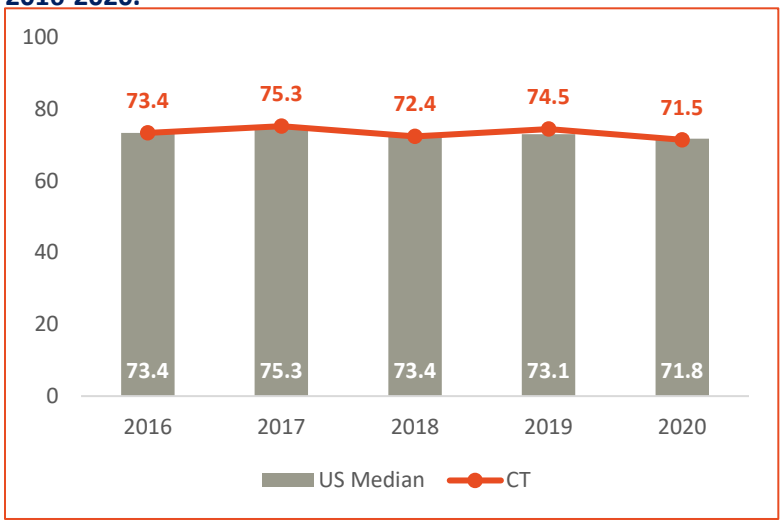
Compared to their counterparts in the state, the prevalence of having an **influenza vaccination in the past year** among Connecticut adults was significantly greater for:

- Adults 55 years and older (68.0%);
- Females (58.2%);
- Non-Hispanic White adults (59.4%);
- Adults from household earning at least $75,000 annually (58.8%);
- Adults with health insurance (56.8%); and
- Adults with more than a high school education (58.5%).

PNEUMOCOCCAL VACCINATIONS (65+)

In 2020, **seven** in **ten** CT adults reported that they ever had pneumococcal vaccination.

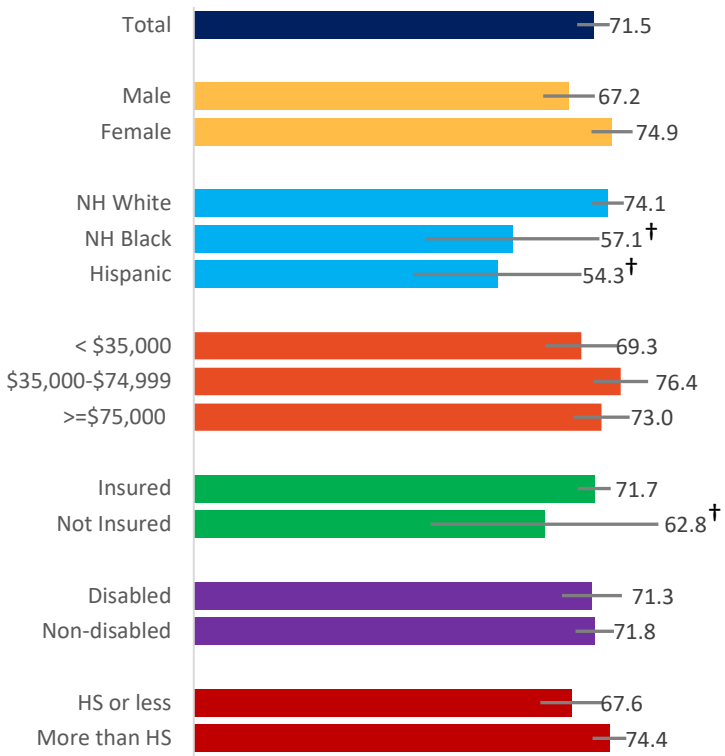
FIGURE 60: EVER HAD PNEUMOCOCCAL VACCINATION (65+), CT 2016-2020.



Compared to their counterparts in the state, the prevalence of ever having a **pneumococcal vaccination** among Connecticut adults 65 and older was significantly greater for:

- Females (74.9%).

FIGURE 61: EVER HAD PNEUMOCOCCAL VACCINATION (65+), CT 2020



Estimates marked with a '†' have a CV between 15.0% and 20.0%.

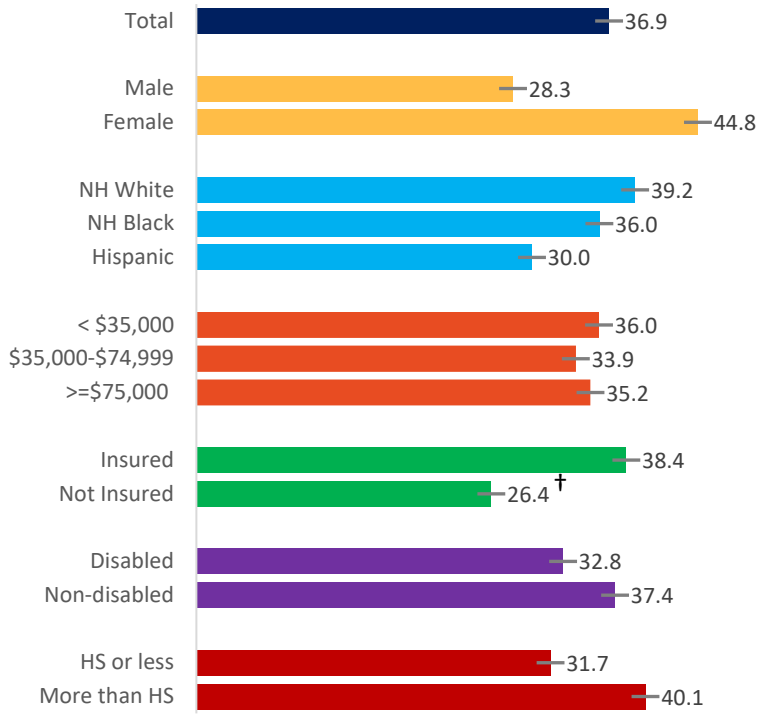
HPV VACCINATIONS

In 2020, **one** in **three** CT adults reported that they ever had adult **human papillomavirus (HPV) vaccination**.

Compared to their counterparts in the state, the prevalence of ever having an **HPV vaccination** among Connecticut adults was significantly greater for:

- Females (44.8%);
- Non-Hispanic White adults (39.2%) compared to Hispanic (30.0%) adults; and
- Adults with more than a high school education (40.1%).

FIGURE 62: HPV VACCINATION, CT 2020

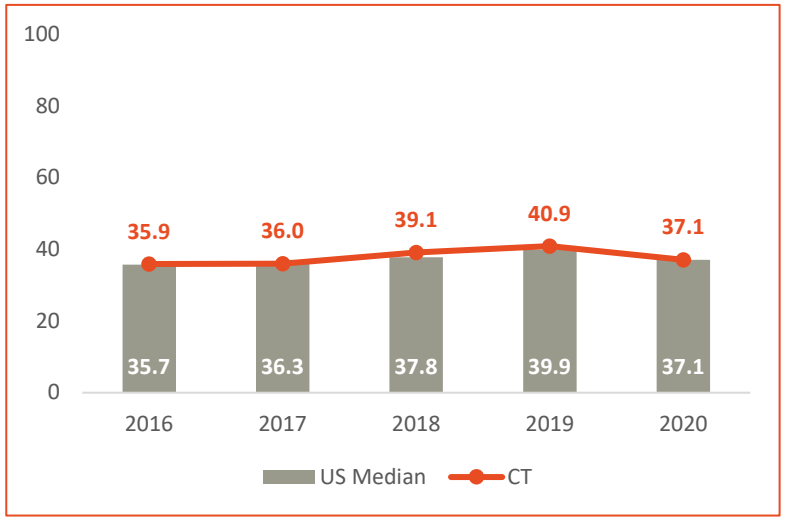


Estimates marked with a '†' have a CV between 15.0% and 20.0%.

HUMAN IMMUNODEFICIENCY VIRUS (HIV) SCREENING

One in **three** Connecticut adults in 2020 reported having been **tested for HIV**.

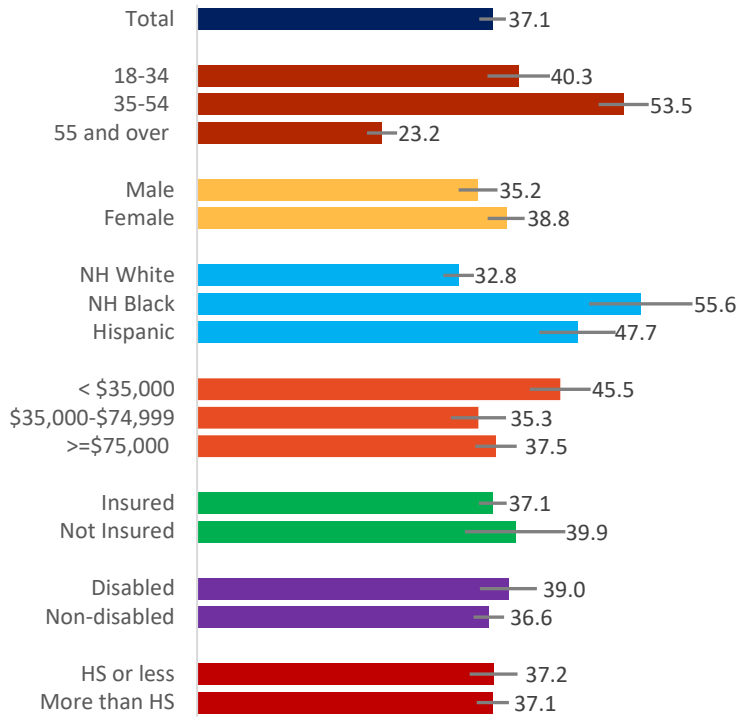
FIGURE 63: EVER TESTED FOR HIV, CT 2016-2020.



Compared with their counterparts in the state, the prevalence of being **tested for HIV** was significantly greater for:

- Adults 35–54 years old (53.5%) and adults 18–34 years old (40.3%);
- Non-Hispanic Black (55.6%) and Hispanic (47.7%) adults; and
- Adults from household earning less than $35,000 (45.5%).

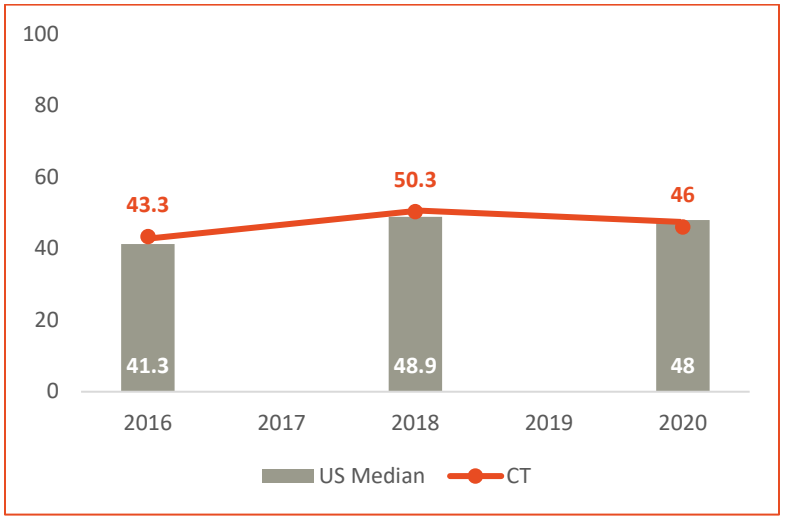
FIGURE 64: EVER TESTED FOR HIV, CT 2020



HUMAN PAPILLOMA VIRUS (HPV) TEST

Nearly **half** of Connecticut women reported they **ever had an HPV test** in 2020.

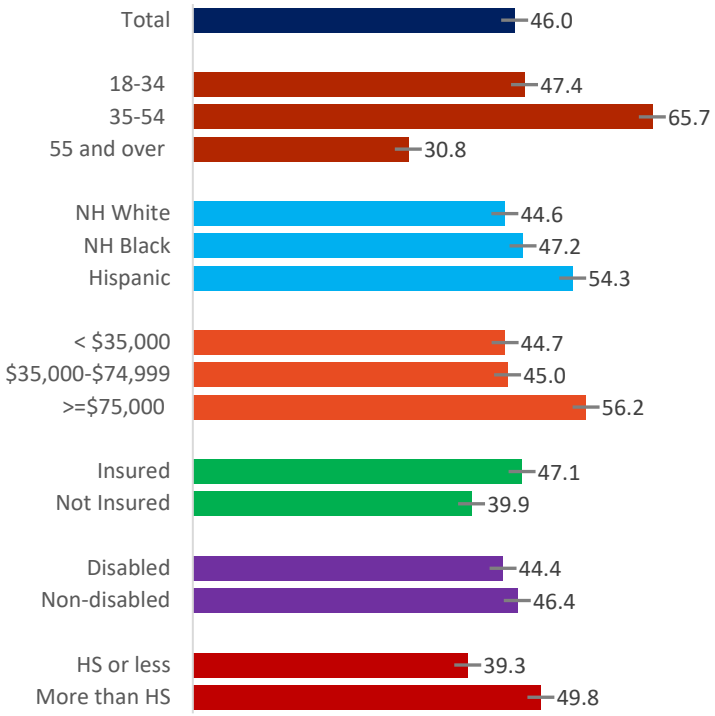
FIGURE 65: PREVALENCE OF EVER HAD HPV TEST AMONG WOMAN, CT 2016-2020.



Compared with their counterparts in the state, the prevalence of women who reported that they **ever had an HPV test** was significantly greater for:

- Women 18-34 (47.4%) and 35-54 (65.7%);
- Hispanic women (54.3%) compared to non-Hispanic White women (44.6%);
- Women from household earning at least $75,000 (56.2%); and
- Women with more than a high school education (49.8%).

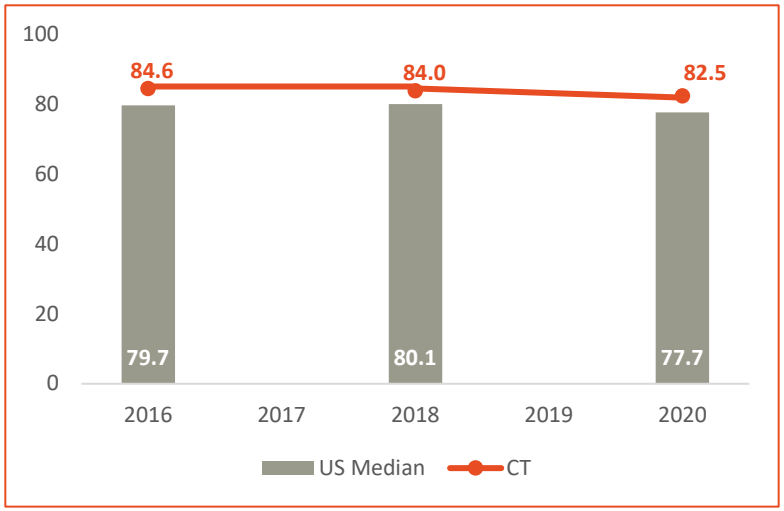
FIGURE 66: EVER HAD HPV TEST AMONG CT WOMEN, CT 2020.



CERVICAL CANCER SCREENING FOR WOMEN 21-65 YEARS

In 2020, **eight in ten** women 21-65 years old in Connecticut had a **Pap test** in the **last three years**.

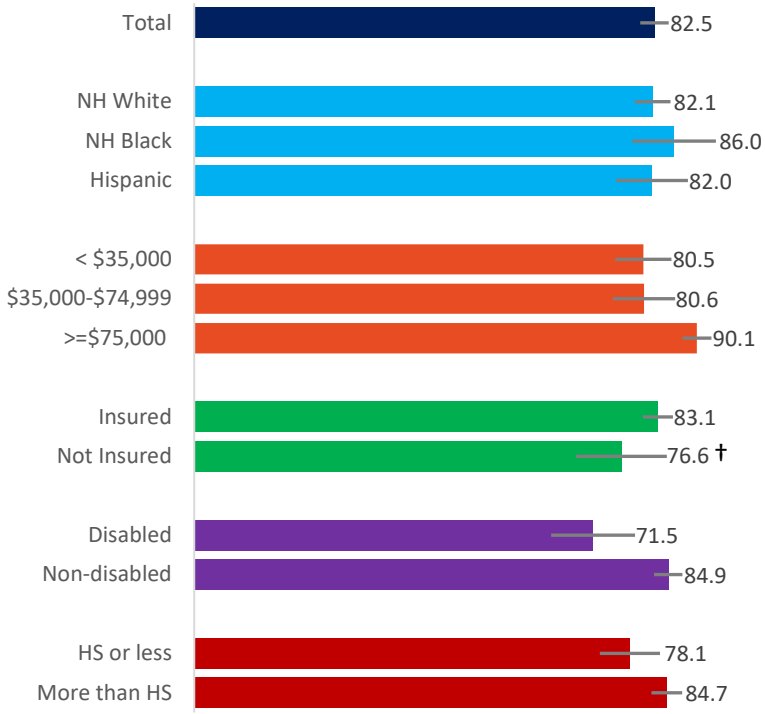
FIGURE 67: CERVICAL CANCER SCREENING WITHIN PAST THREE YEARS (WOMEN 21-65), CT 2012-2016.



Compared to their counterparts in the state, the prevalence of Connecticut adults 21-65 years old having an appropriately times **(within past three years) Pap test** was significantly greater for:

- Adults from household earning at least $75,000 (90.1%); and
- Adults without a disability (84.9%).

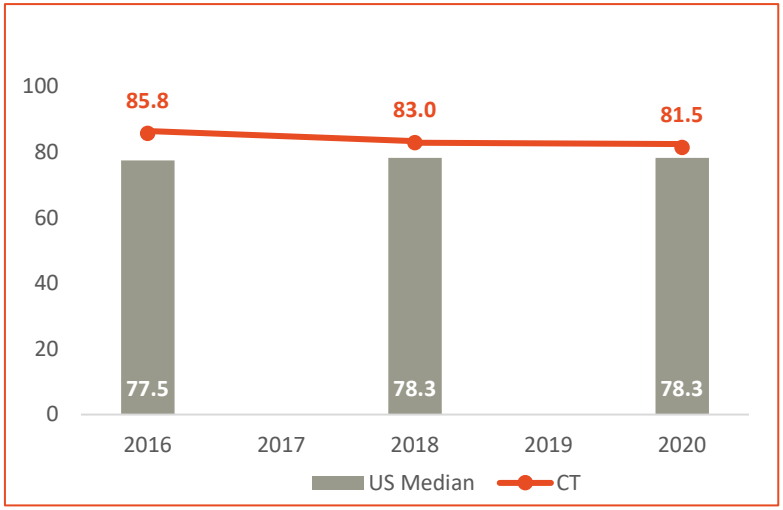
FIGURE 68: CERVICAL CANCER SCREENING WIHTIN PAST THREE YEARS (WOMEN 21-65), CT 2020



BREAST CANCER SCREENING FOR WOMEN, 50-74 YEARS

In 2020, **eight in ten** CT women aged 50-74 years old **had a mammogram** in the **past two years**.

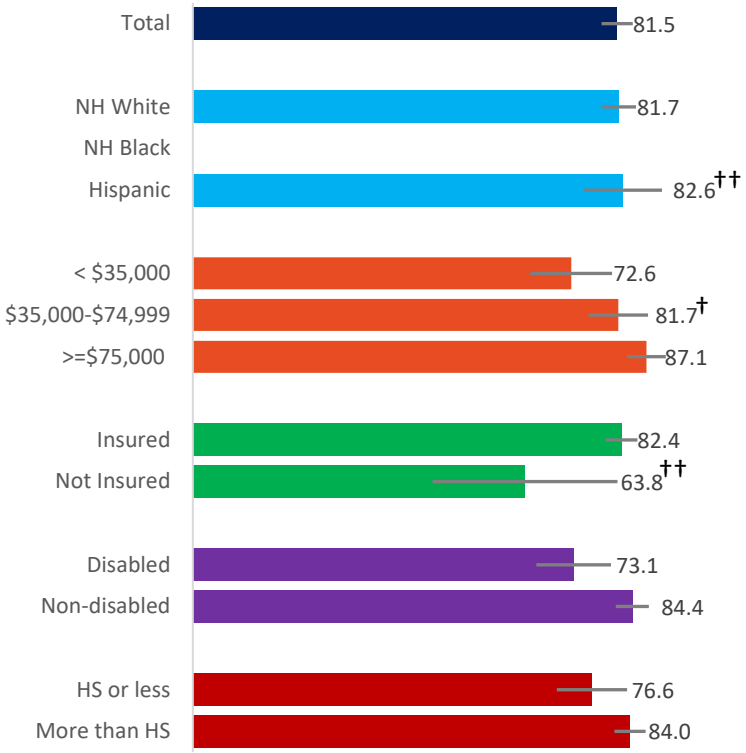
FIGURE 69: BREAST CANCER SCREENING IN THE PAST TWO YEARS (WOMEN 50-74), CT 2016-2020



Compared with their counterparts in the state, the prevalence of having a **mammogram in the past two years** among CT women was significantly greater for:

- Women living in household with annual income at least $75,000 (87.1%) compared to less than $35,000 (72.6%); and
- Women without a disability (84.4%).

FIGURE 70: BREAST CANCER SCREENING (WOMEN 50-74), CT 2020

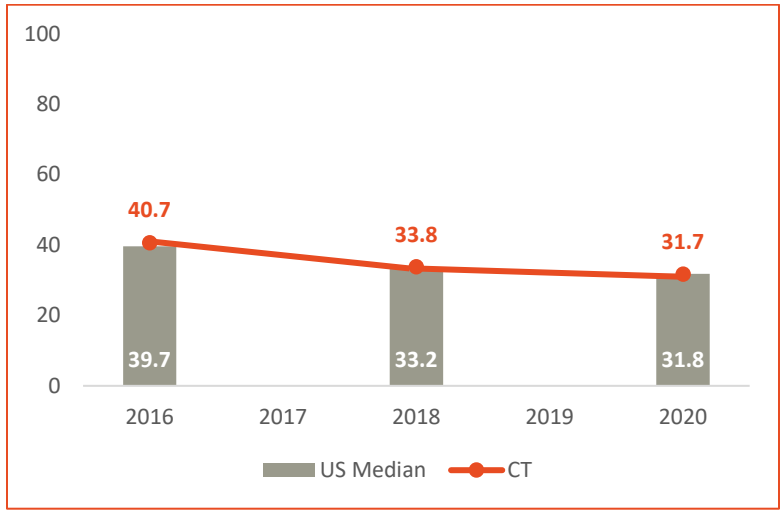


Estimates marked with a "†" have a CV between 15.0% and 20.0%; estimates marked with a "††" have a CV between 20.1% and 30.0%; estimates with CV greater than 30.0% were suppressed.

PROSTATE CANCER SCREENING FOR MEN 40 AND OVER

In 2020, **one** in **three** Connecticut men aged 40 years and older reported had **PSA test** within **past 2 years**.

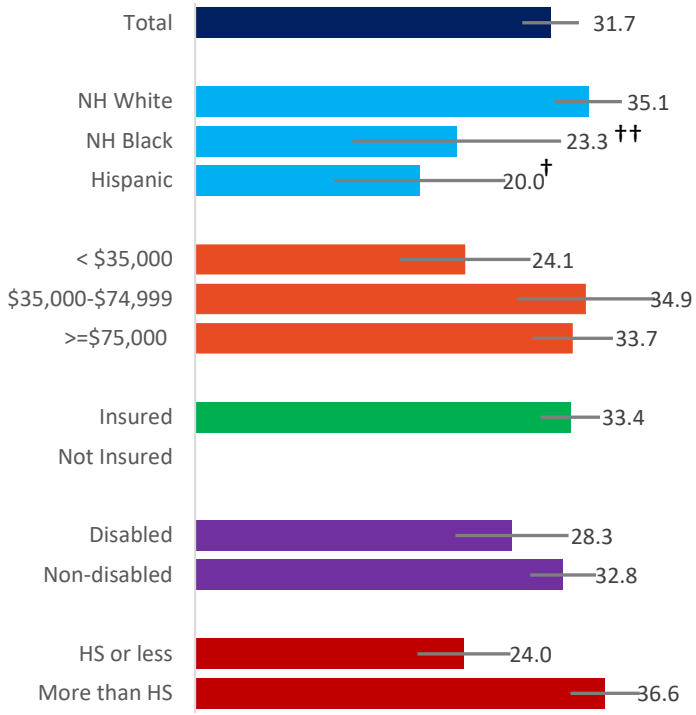
FIGURE 71: PROSTATE CANCER SCREENING WITHIN PAST 2 YEARS (MEN 40+), CT2016-2020.



Compared with their counterparts in the state, the prevalence of having a **PSA test in the past two years** among men 40 and over was significantly greater for:

- Adults from households earning at least $75,000 (34.9%) and $35,000-$74,999 (33.7%); and
- Adults with more than a high school education (36.6%).

FIGURE 72: PROSTATE CANCER SCREENING (MEN 40+), CT 2020



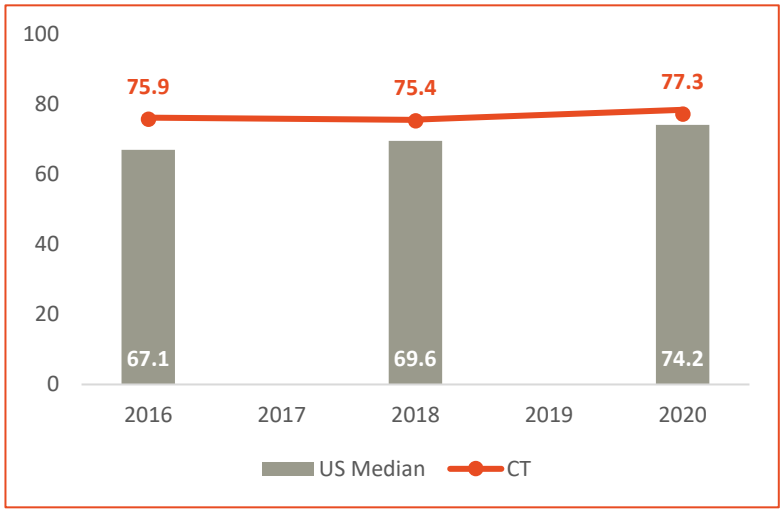
Estimates marked with a "†" have a CV between 15.0% and 20.0%; estimates marked with a "††" have a CV between 20.1% and 30.0%; estimates with CV greater than 30.0% were suppressed.

COLORECTAL CANCER SCREENING 50-75 YEARS

In 2020, **three in four** CT adults 50-75 years old had **fully met the USPSTF recommendations** for colorectal cancer screening.

Have at least one of the recommended colorectal cancer screening tests within the recommended time interval: (1) guaiac-based fecal occult blood test (gFOBT) once a year, or fecal immunochemical test (FIT) once a year or FIT-DNA test once every three year; or (2) sigmoidoscopy every 5 years or every 10 years with a FIT every year; or (3) virtual colonoscopy every 5 years.

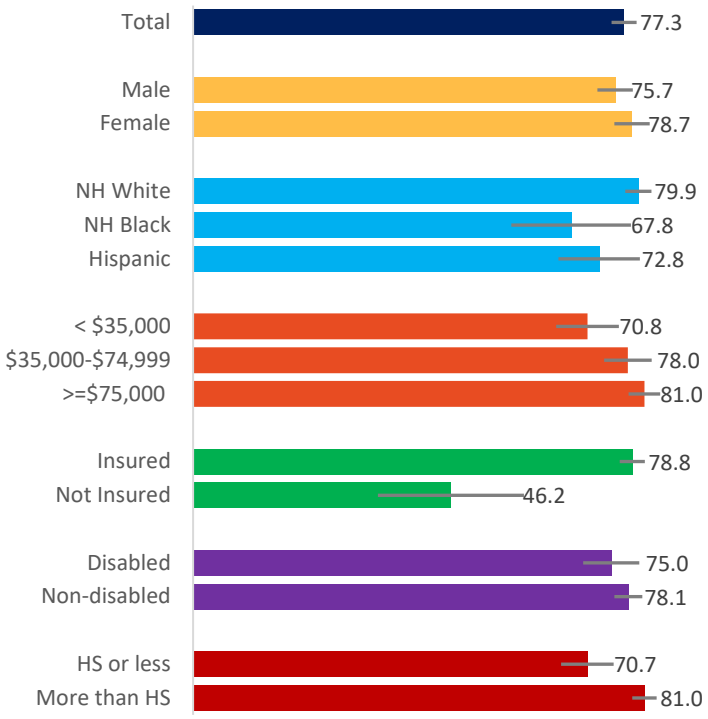
FIGURE 73: MET USPSTF RECOMMENDATION (50-75), CT 2016-2020.



Compared with their counterparts in the state, the prevalence of **met USPSTF recommendation for colorectal cancer** among adults 50-75 years old was significantly greater for:

- Non-Hispanic White adults (79.9%) compared to Hispanic adults (72.8%);
- Adults from households earning at least $75,000 (81.0%) compared to less than $35,000 (70.8%);
- Adults with insurance (78.8%); and
- Adults with more than a high school education (81.0%).

FIGURE 74: MET USPSTF RECOMMENDATION (50-75) SCREENING, CT 2020

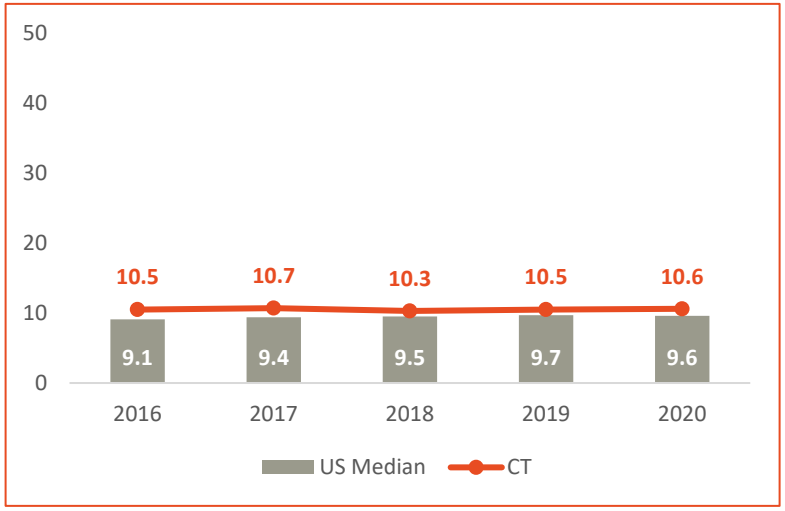


6. CHRONIC CONDITIONS

ASTHMA

In 2020, **one** in **nine** Connecticut adults reported **currently** having **asthma**.

FIGURE 75: PREVALENCE OF CURRENT ASTHMA, CT 2016-2020.



Compared to their counterparts in the state, the risk of having **current asthma** was significantly greater for:

- Females (12.9%); and
- Adults with a disability (18.2%).

Estimates marked with a '†' have a CV between 15.0% and 20.0%, estimates marked with a "††" have a CV between 20.1% and 30.0%.

FIGURE 76: ADULT ASTHMA STATUS, CT 2020.

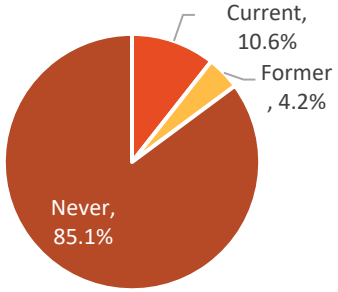
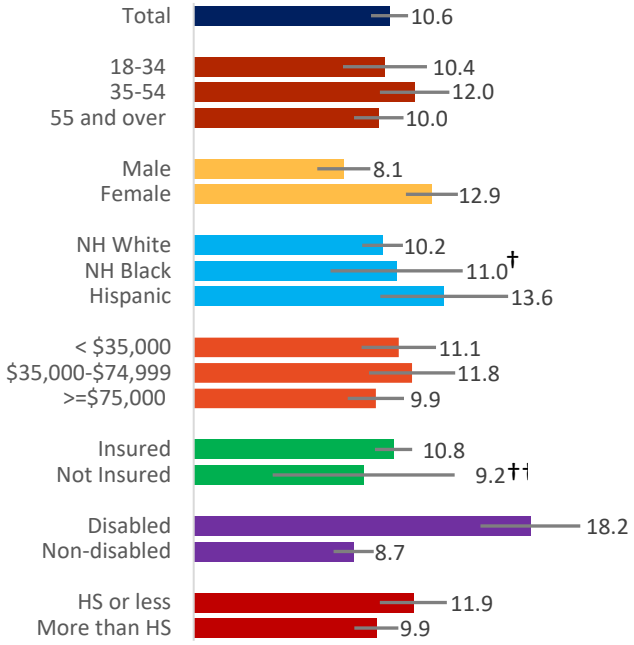


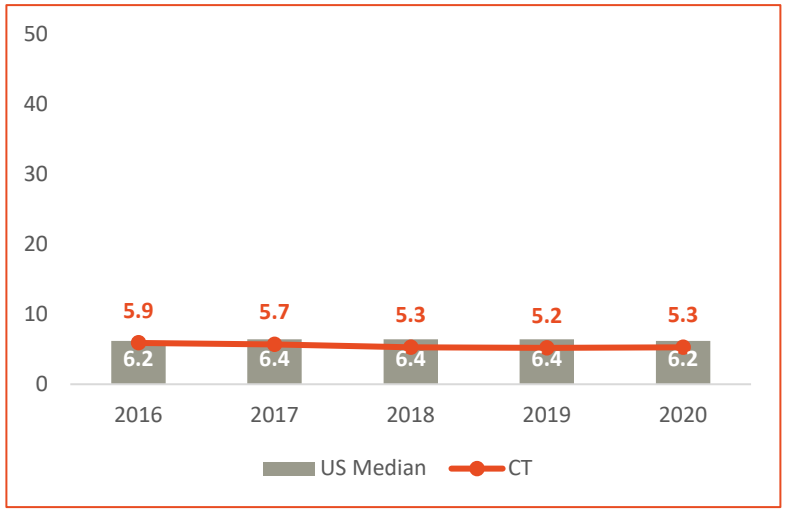
FIGURE 77: CURRENT ASTHMA, CT 2020.



CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)

In 2020, **one** in **19** CT adults reported they had **COPD**.

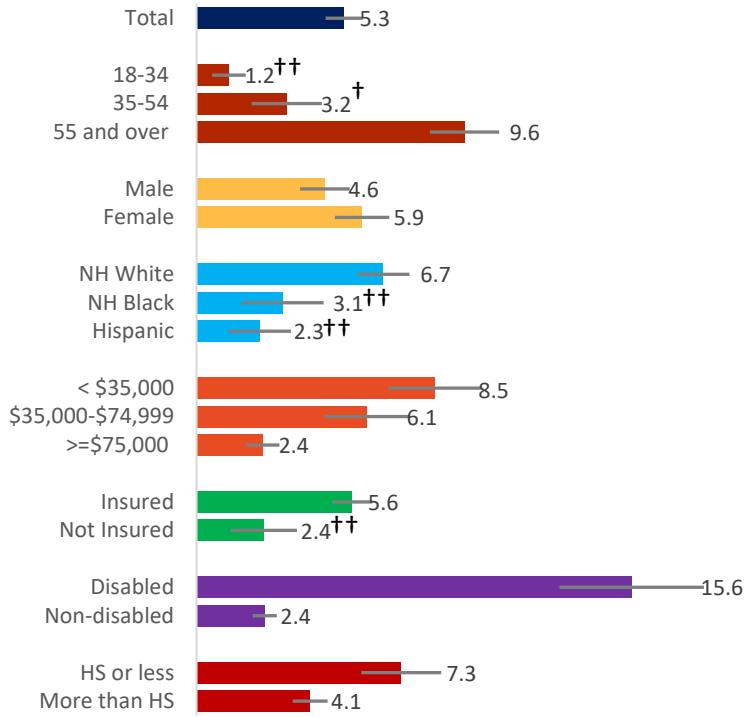
FIGURE 78: PREVALENCE OF COPD, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of **COPD** was significantly greater for:

- Adults from households earning less than $35,000 (8.5%) and $35,000-$75,000 (6.1%);
- Adults with a disability (15.6%); and
- Adults with no more than a high school education (7.3%).

FIGURE 79: CHRONIC OBSTRUCTIVE PULMONARY DISEASE, CT 2020



Estimates marked with a '†' have a CV between 15.0% and 20.0%, estimates marked with a "††" have a CV between 20.1% and 30.0%.

ARTHRITIS

One in **four** Connecticut adults in 2020 had been diagnosed with **arthritis**.

FIGURE 80: PREVALENCE OF ARTHRITIS, CT 2016-2020.

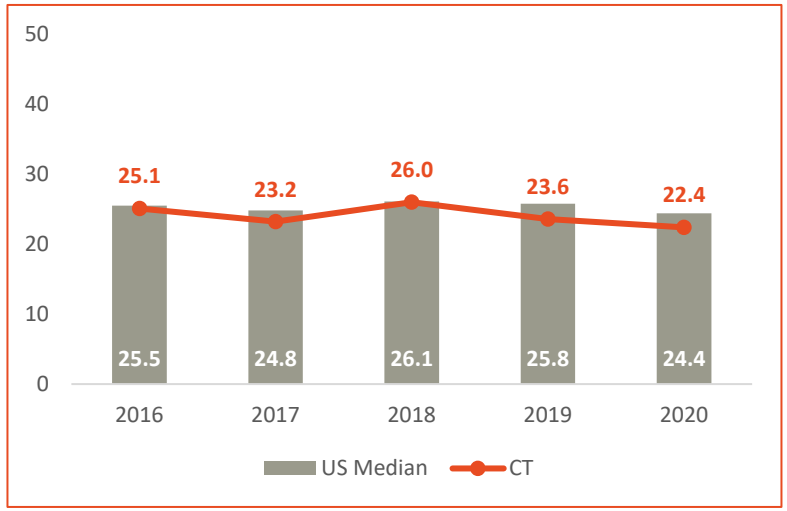
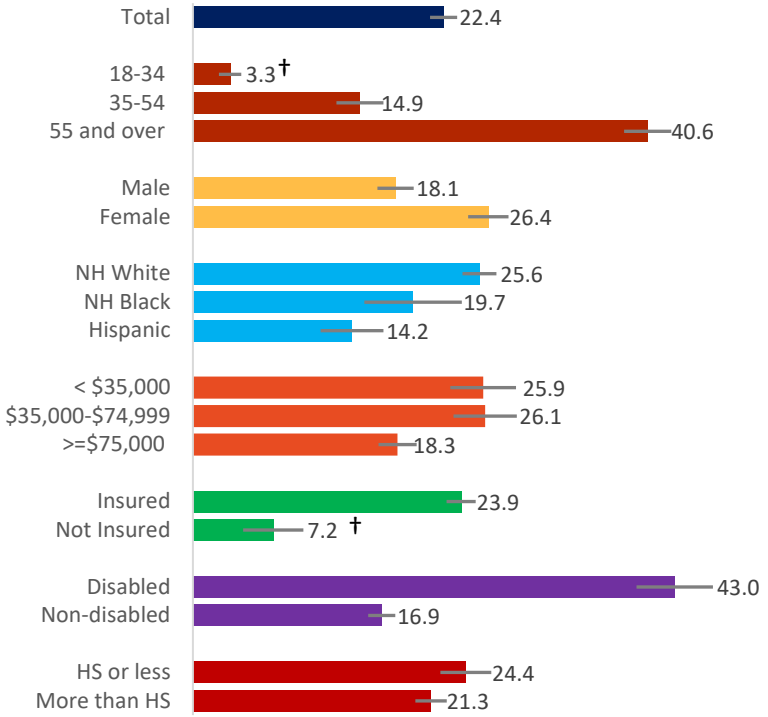


FIGURE 81: PREVALENCE OF ARTHRITIS, CT 2020



Estimates marked with a '†' have a CV between 15.0% and 20.0%.

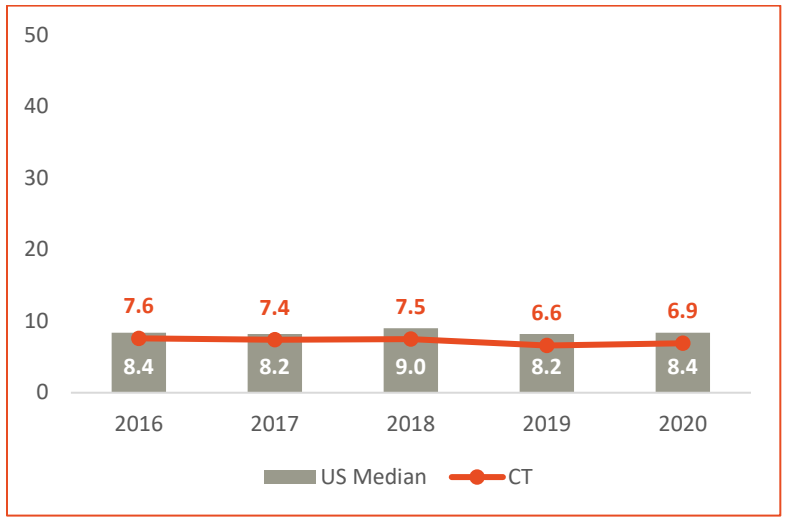
Compared to their counterparts in the state, the prevalence of **arthritis** was significantly greater for:

- Adults 55 years and older (40.6%) compared to adults 35–54 years old (14.9%);
- Females (26.4%);
- Non-Hispanic White adults (25.6%);
- Adults from households earning less than $35,000 (25.9%) and $35,000-$74,999 (26.1%);
- Adults with health insurance (23.9%);
- Adults with a disability (43.0%); and
- Adults with no more than a high school education (24.4%).

CARDIOVASCULAR DISEASE AND STROKE

In 2020, **one** in **14** CT adults reported they had **cardiovascular disease or stroke**.

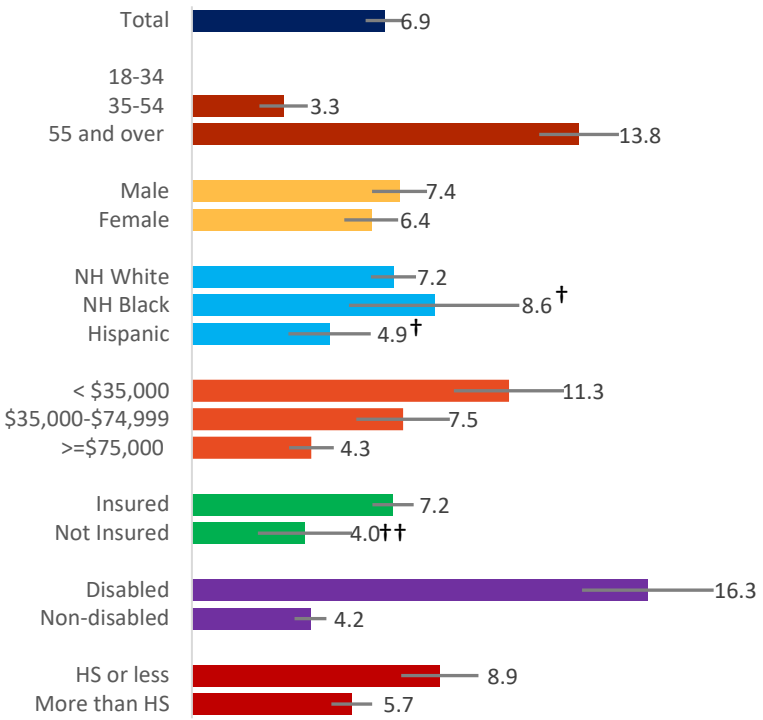
FIGURE 82: PREVALENCE OF CARDIOVASCULAR DISEASES OR STROKE, CT 2016-2020.



Compared with their counterparts in the state, the risk of **cardiovascular disease or stroke** was significantly greater for:

- Adults 55 years and older (13.8%) compared to adults 35-54 years old (3.3%);
- Adults from households earning less than $35,000 (11.3%) and $35,000-$74,999 (7.5%);

FIGURE 83: PREVALENCE OF CARDIOVASCULAR DISEASES OR STROKE, CT 2020



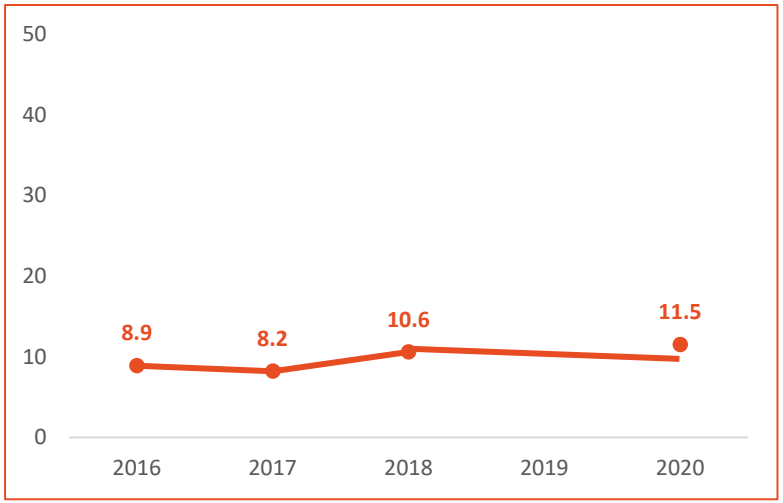
- Adults with a disability (16.3%); and
- Adults with no more than a high school education (8.9%).

Estimates marked with a '†' have a CV between 15.0% and 20.0%, estimates marked with a "††" have a CV between 20.1% and 30.0%, estimates have a CV greater than 30.0% were suppressed.

PRE-DIABETES

In 2020, **one** in **nine** Connecticut adults reported that they had been diagnosed with **pre-diabetes**. More than **half** of CT adults (51.1%) reported had a **test for high blood sugar** in past three years.

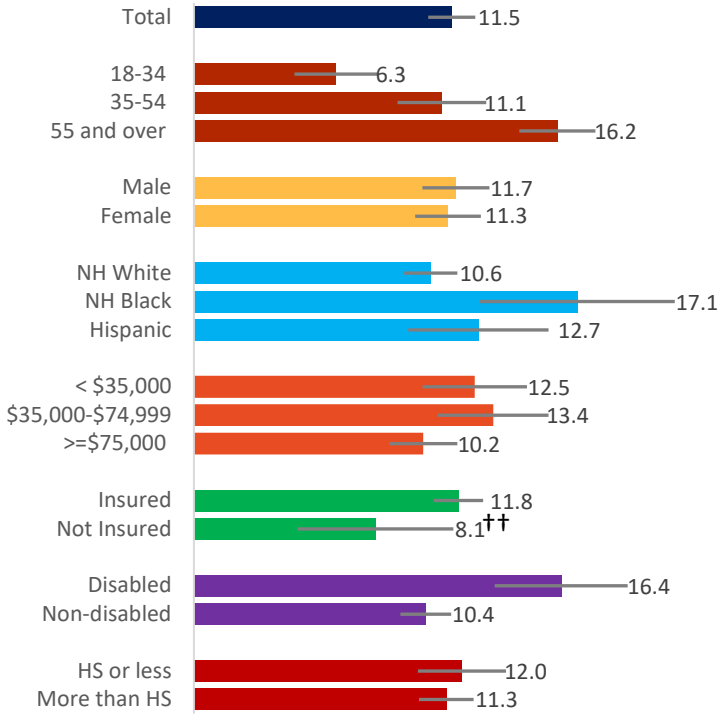
FIGURE 84: PREVALENCE OF PRE-DIABETES, CT 2016-2020.



Compared with their counterparts in the state, the prevalence of **pre-diabetes** among Connecticut adults was significantly greater for:

- Adults 55 years and older (1 2%) and adults 35-54 years old (11 1%);
- Non-Hispanic Black adults (17.1%) compared to non-Hispanic White adults (10.6%); and
- Adults with a disability (16.4%).

FIGURE 85: PREVALENCE OF PRE-DIABETES, CT 2020

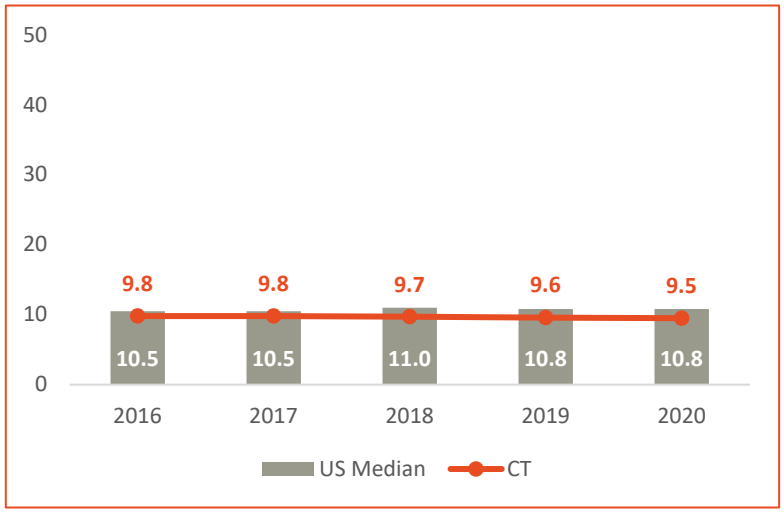


Estimates marked with a "††" have a CV between 20.1% and 30.0%.

DIABETES

One in **11** Connecticut adults reported in 2020 that they had ever been diagnosed with **diabetes**.

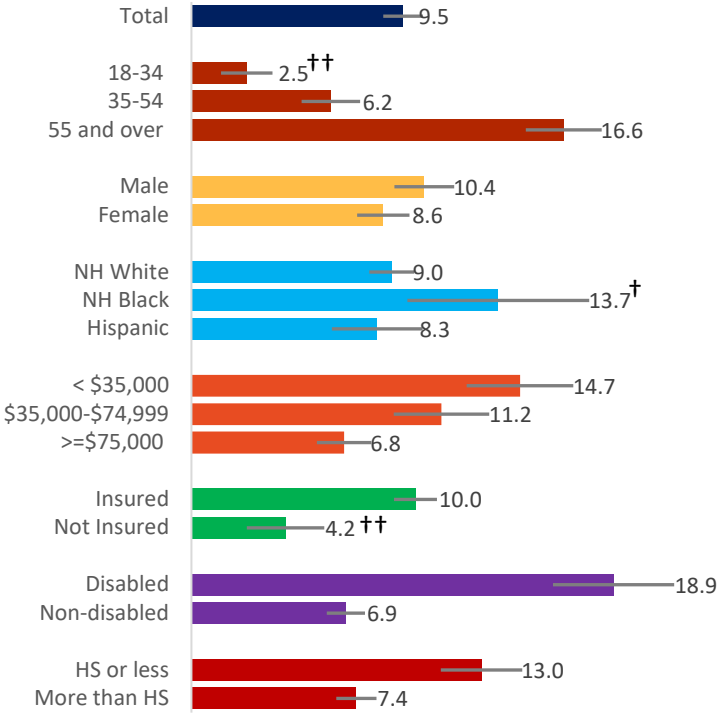
FIGURE 86: PREVALENCE OF DIABETES, CT 2016-2020.



Compared with their counterparts in the state, the prevalence of **diabetes** among adults in Connecticut was significantly greater for:

- Adults 55 or over (16.6%) compared to adults 35–54 years old (6.2%);
- Adults from households earning less than $35,000 (14.7%) and $35,000-$74,999 (11.2%);
- Adults with a disability (18.9%); and
- Adults with no more than a high school education (13.0%).

FIGURE 87: PREVALENCE OF DIABETES, CT 2020

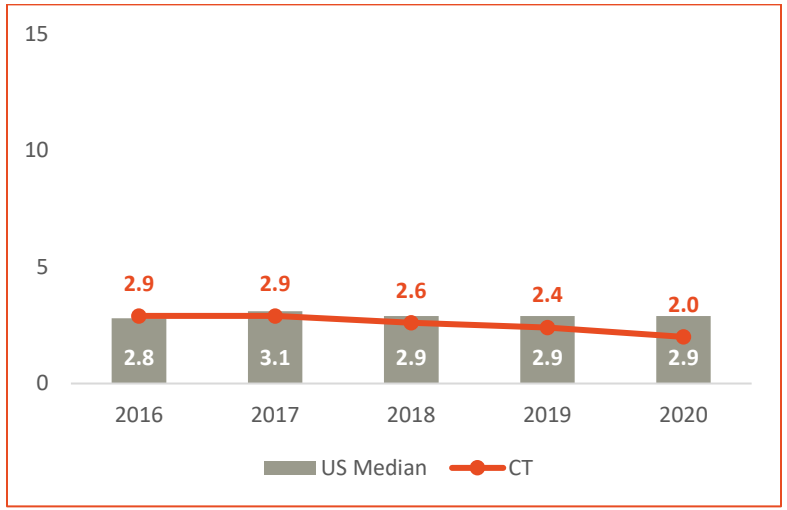


Estimates marked with a "†" have a CV between 15.0% and 20.0%; estimates marked with a "††" have a CV between 20.1% and 30.0.

KIDNEY DISEASE

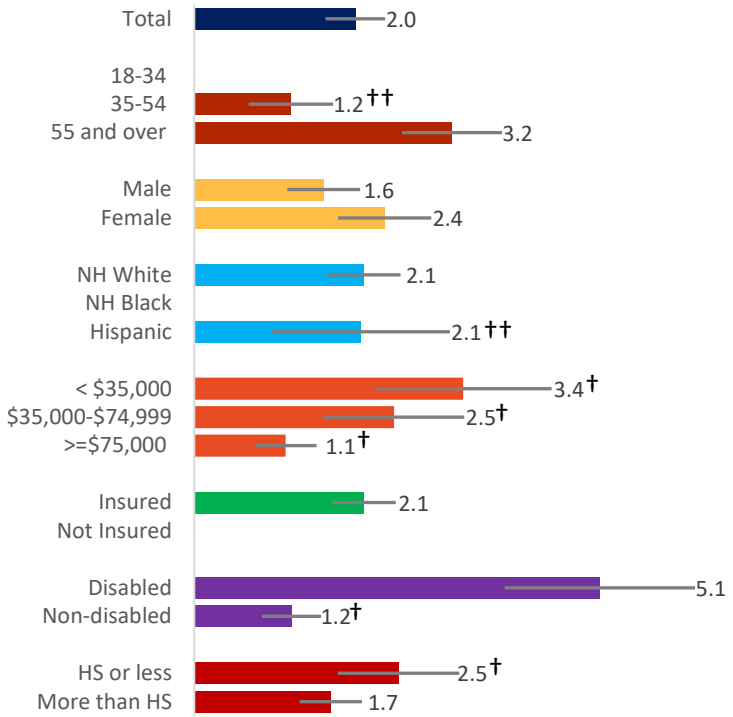
One in **50** Connecticut adults in 2020 had been diagnosed with **kidney disease**.

FIGURE 88: PREVALENCE OF KIDNEY DISEASE, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of kidney disease among adults in Connecticut, no difference was found.

FIGURE 89: PREVALENCE OF KIDNEY DISEASE, CT 2020



Estimates marked with a "†" have a CV between 15.0% and 20.0%; estimates marked with a "††" have a CV between 20.1% and 30.0%; estimates with CV greater than 30.0% were suppressed.

DEPRESSION

One in **six** Connecticut adults in 2020 had been diagnosed with **depression** (17.7%).

FIGURE 90: PREVALENCE OF DEPRESSION, CT 2016-2020.

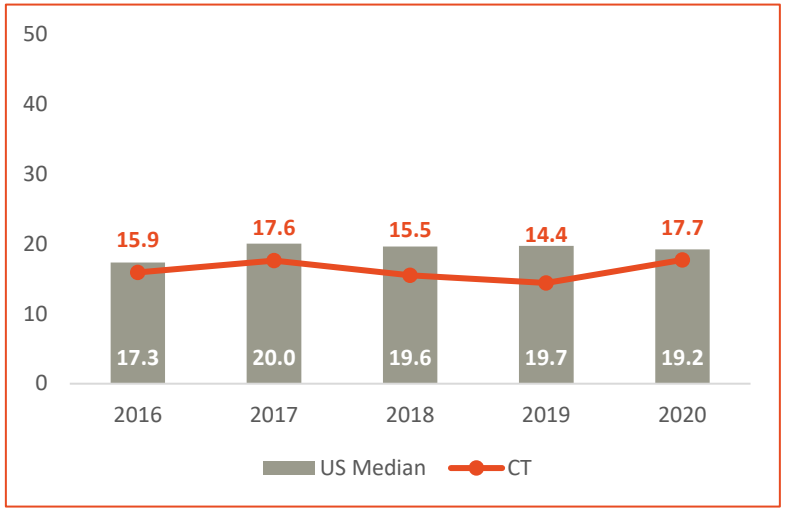
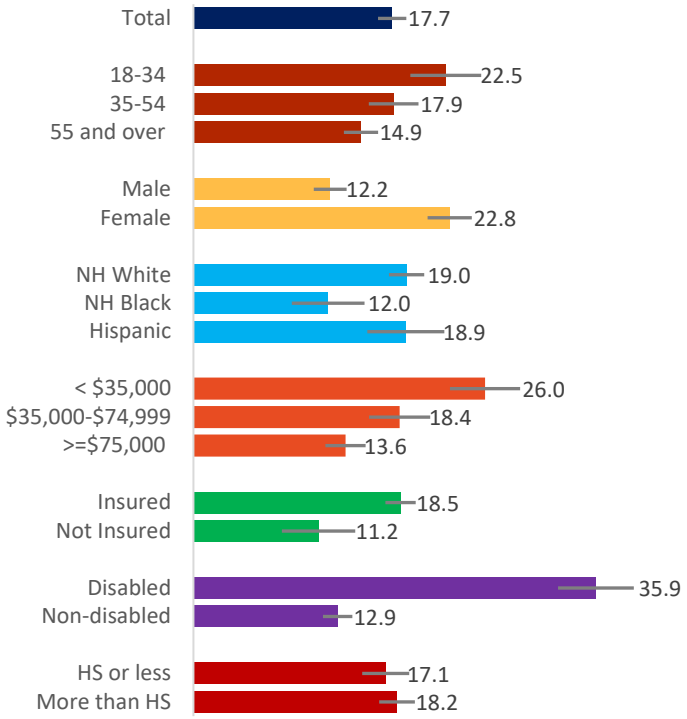


FIGURE 91: PREVALENCE OF DEPRESSION, CT 2020.



Compared to their counterparts in the state, the risk of having **depression** among Connecticut adults was significantly greater for:

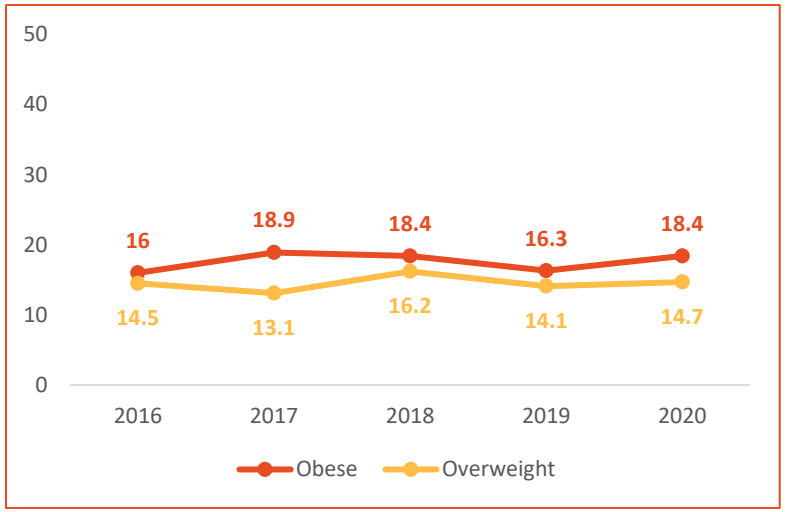
- Adults 18–34 years old (22.5%);
- Females (22.8%);
- Non-Hispanic White (19.0%) and Hispanic adults (18.9%);
- Adults from households earning less than $35,000 (26.0%) and $35,000–$74,999 (18.4%);
- Adults with health insurance (18.5%); and
- Adults with a disability (35.9%).

7. CHILD HEALTH

CHILD WEIGHT STATUS

In 2020, **one** in **seven** children 5-17 years old were **overweight**, and **one** in **five** children 5-17 years old were **obese**.

FIGURE 92: CHILD WEIGHT (5-17 YEARS OLD), CT 2016-2020.



Estimates marked with a "†" have a CV between 15.0% and 20.0%; estimates marked with a "††" have a CV between 20.1% and 30.0%; estimates with CV greater than 30.0% were suppressed.

FIGURE 93: CHILD WEIGHT STATUS, CT 2020.

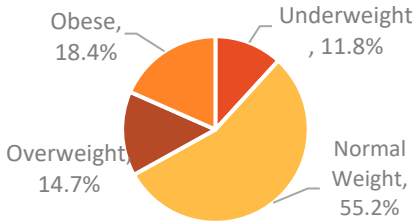
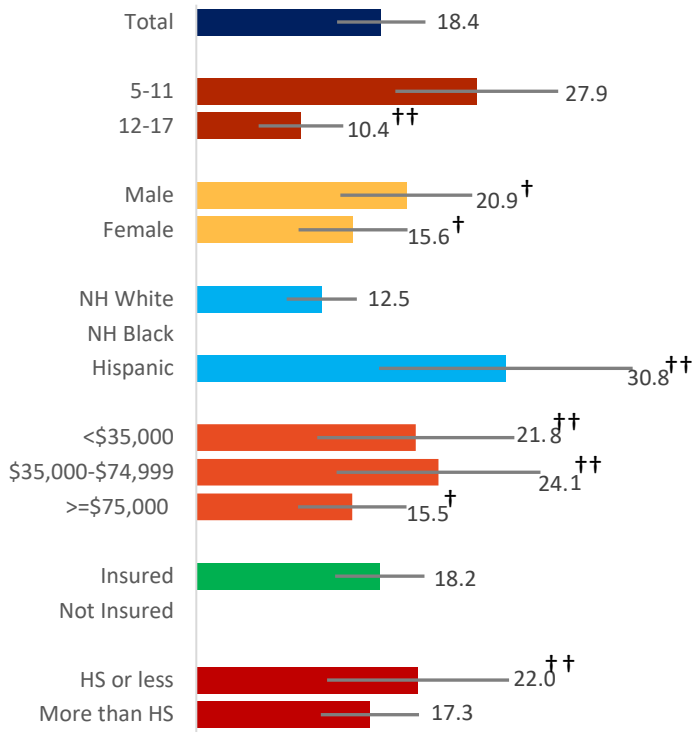


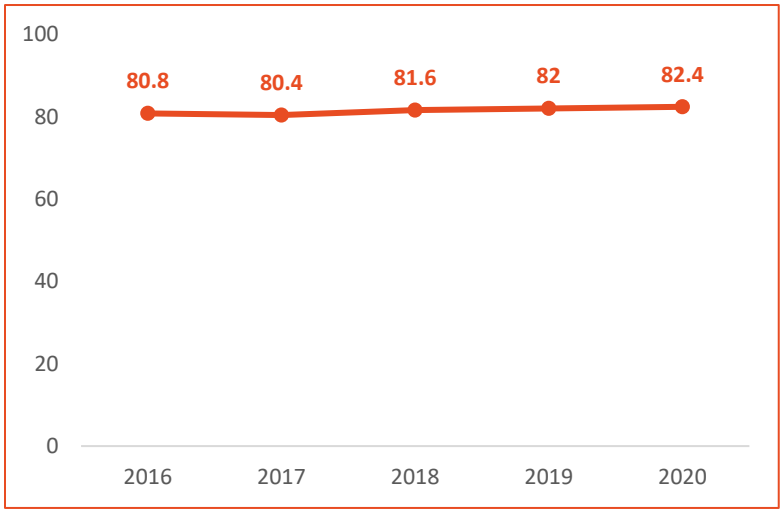
FIGURE 94: CHILD OBESITY (5-17 YEARS OLD), CT 2020.



BREASTFEEDING

In 2020, **four** out of every **five** Connecticut children **have been breastfed**, and among them **one** in **three** have been **exclusively breastfed** for at least 6 months.

FIGURE 95: CHILD EVER BREASTFED, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of ever being **breastfed** among Connecticut children was significantly greater for:

- Children living with an adult caregiver who had more than a high school education (87.7%).

Estimates marked with a "†" have a CV between 15.0% and 20.0%, estimates marked with a "††" have a CV between 20.1% and 30.0%.

FIGURE 96: LENGTH OF BREASTFEEDING PERIOD (MONTH), CT 2020.

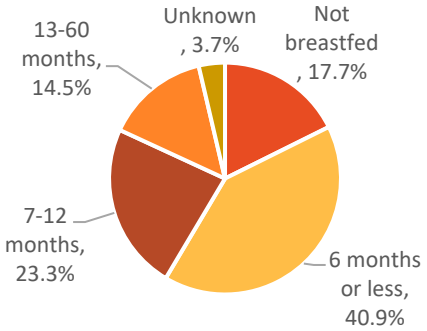
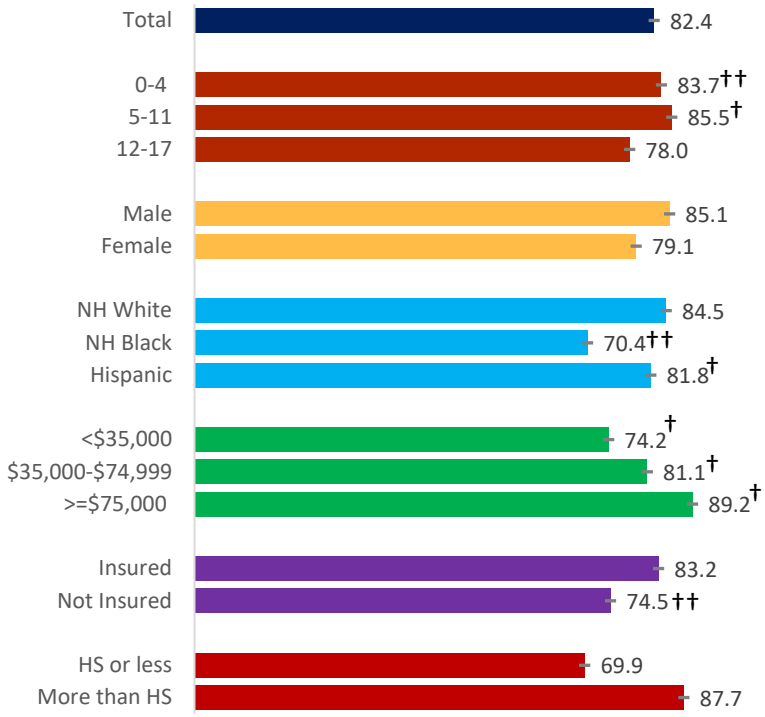


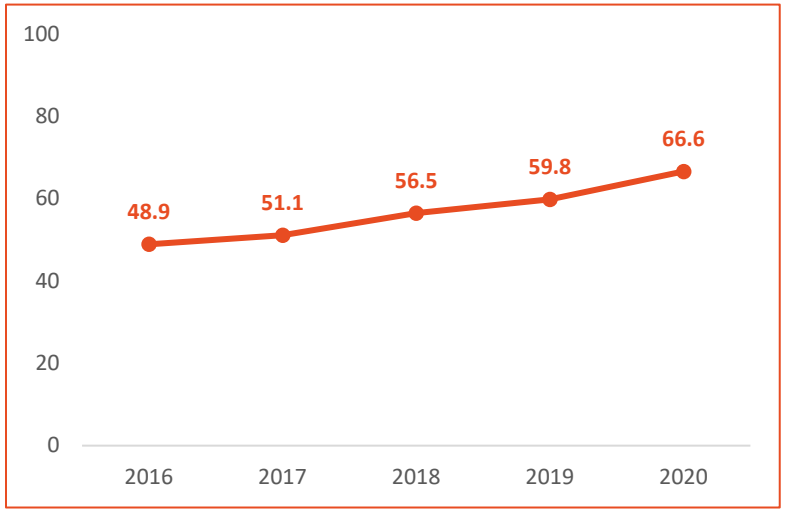
FIGURE 97: CHILD EVER BREASTFED, CT 2020



CHILD SCREEN TIME

Two in **three** Connecticut children in 2020 had **excessive screen time** (more than 2 hours daily).

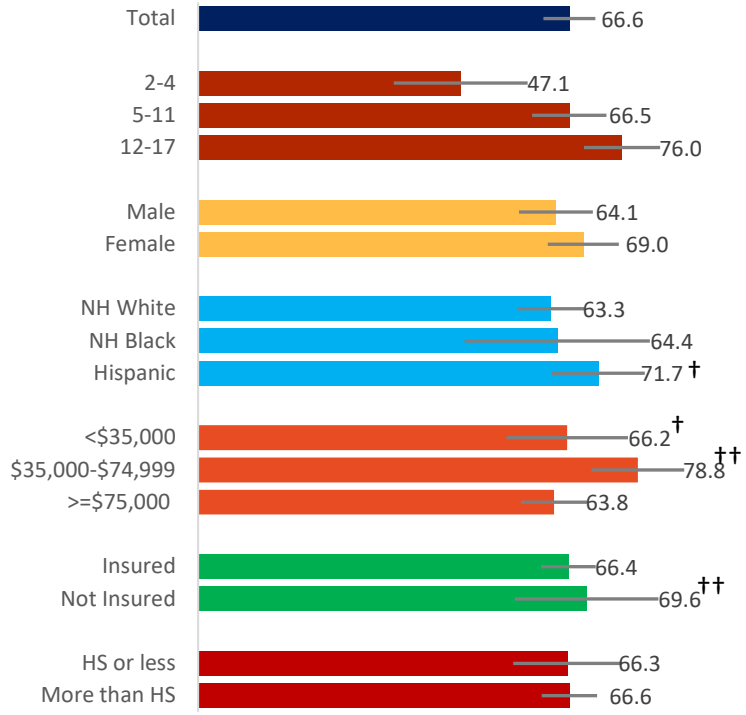
FIGURE 98: PREVALENCE OF CHILD EXCESSIVE SCREEN TIME, CT 2016-2020.



Compared to their counterparts in the state, the risk of **excessive screen time** among children in Connecticut was significantly greater for:

- Children 12–17 years old (76.0%) and 5-11 years old (66.5%).

FIGURE 99: PREVALENCE OF CHILD EXCESSIVE SCREEN TIME, CT 2020



Estimates marked with a "†" have a CV between 15.0% and 20.0%, estimates marked with a "††" have a CV between 20.1% and 30.0%.

CHILD SODA AND FAST FOOD CONSUMPTION

One in **three** Connecticut children drank sugar sweetened beverages (SSBs) **at least once daily** in 2020.

FIGURE 100: PREVALENCE OF CHILD DRINKING SSBS AT LEAST ONCE DAILY, CT 2016-2020.

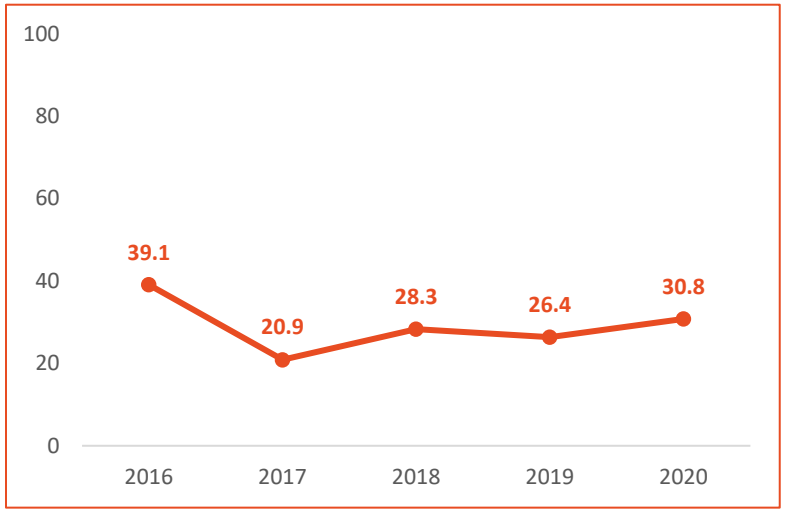
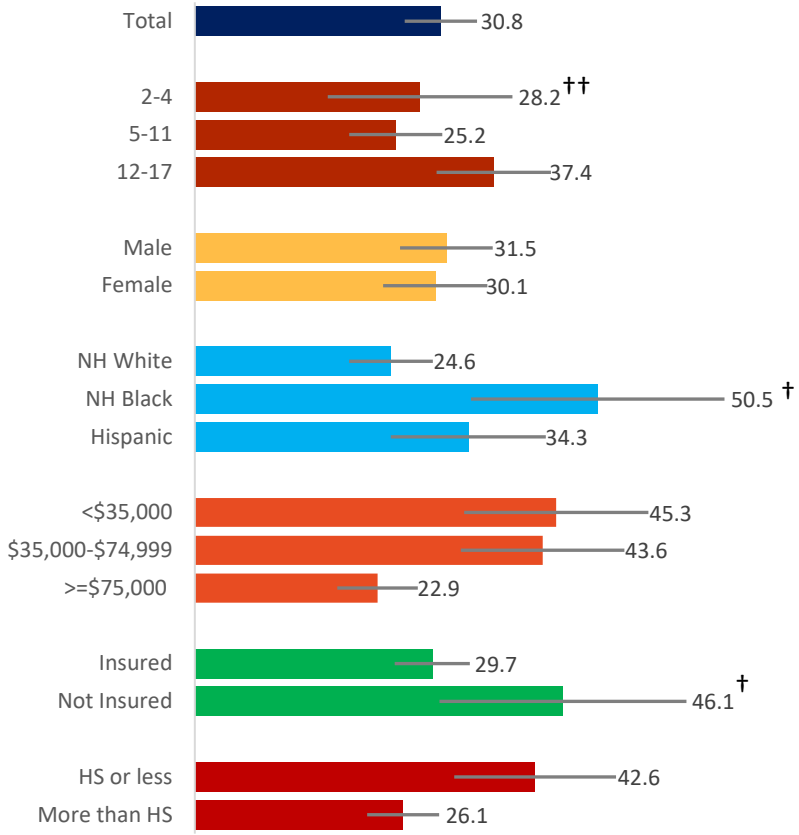


FIGURE 101: DRANK SUGAR SWEETENED BEVERAGES AT LEAST ONCE DAILY, CT 2020



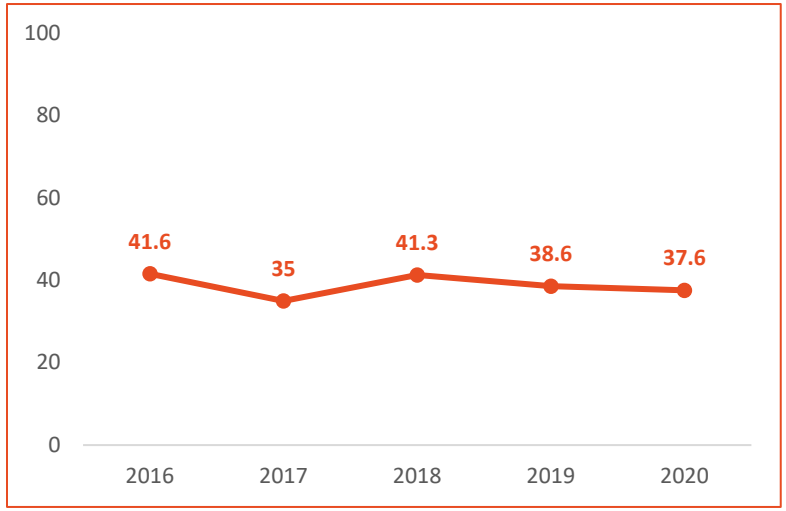
Compared to their counterparts in the state, the prevalence of **drinking SSBs at least once daily** among children in Connecticut was significantly greater for:

- Children 12-17 years old (37.4%) compared to 5-11 years old (25.2%);
- Children living in a household with annual earnings of less than $35,000 (45.3%) and $35,000-$74,999 (43.6%); and
- Children living with an adult proxy who had no more than a high school education (42.6%).

Estimates marked with a "†" have a CV between 15.0% and 20.0%, estimates marked with a "††" have a CV between 20.1% and 30.0%.

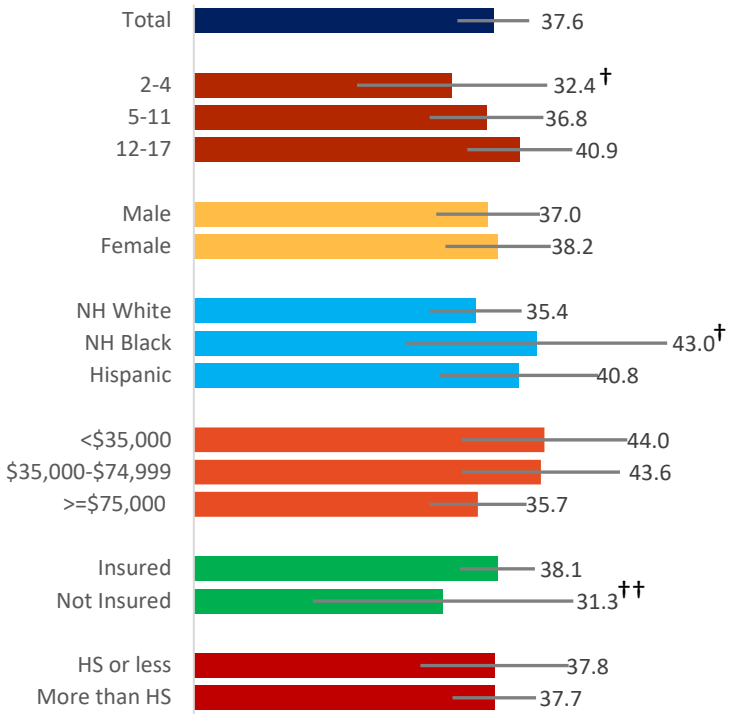
One in **three** Connecticut children **ate fast food two or more times weekly** in 2020.

FIGURE 102: PREVALENCE OF ATE FAST FOOD TWO OR MORE TIMES WEEKLY, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of eating fast food two or more times weekly among children in Connecticut, no difference was found.

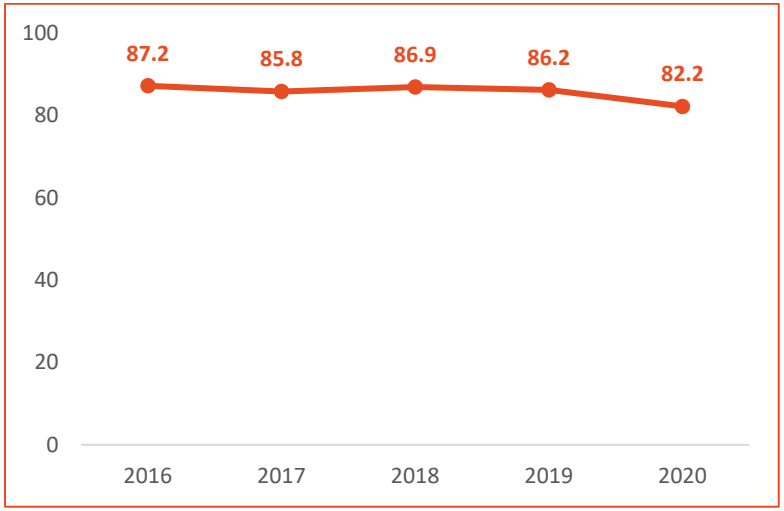
FIGURE 103: ATE FAST FOOD TWO OR MORE TIMES WEEKLY, CT 2020



Estimates marked with a "†" have a CV between 15.0% and 20.0%, estimates marked with a "††" have a CV between 20.1% and 30.0%.

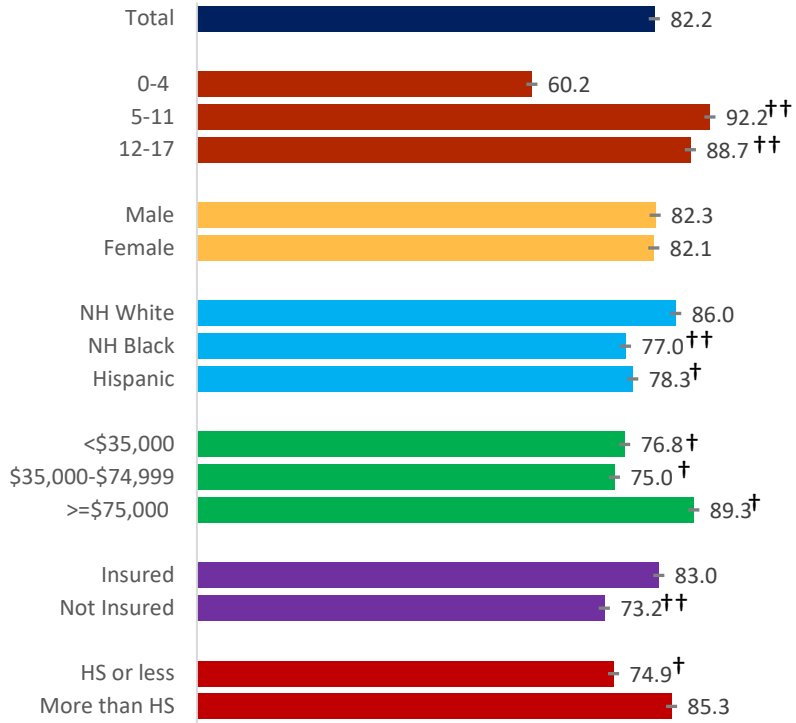
Eight in ten Connecticut children in 2020 had a **dental visit** in the previous year.

FIGURE 104: CHILD DENTAL VISIT IN PAST YEAR, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of dentist visit in past year among children in Connecticut, no difference was found.

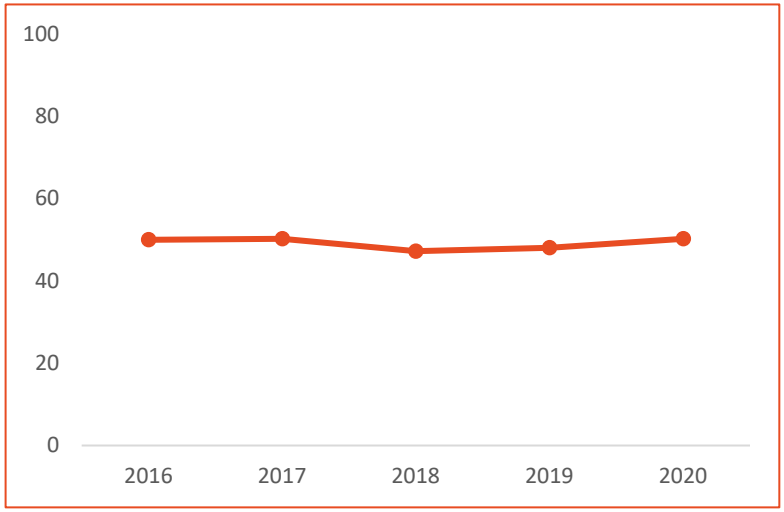
FIGURE 105: CHILD DENTAL VISIT IN PAST YEAR, CT 2020



Estimates marked with a "†" have a CV between 15.0% and 20.0%, estimates marked with a "††" have a CV between 20.1% and 30.0%.

One in two Connecticut children 5-17 years old **had dental sealants** applied to their teeth at some time in 2020.

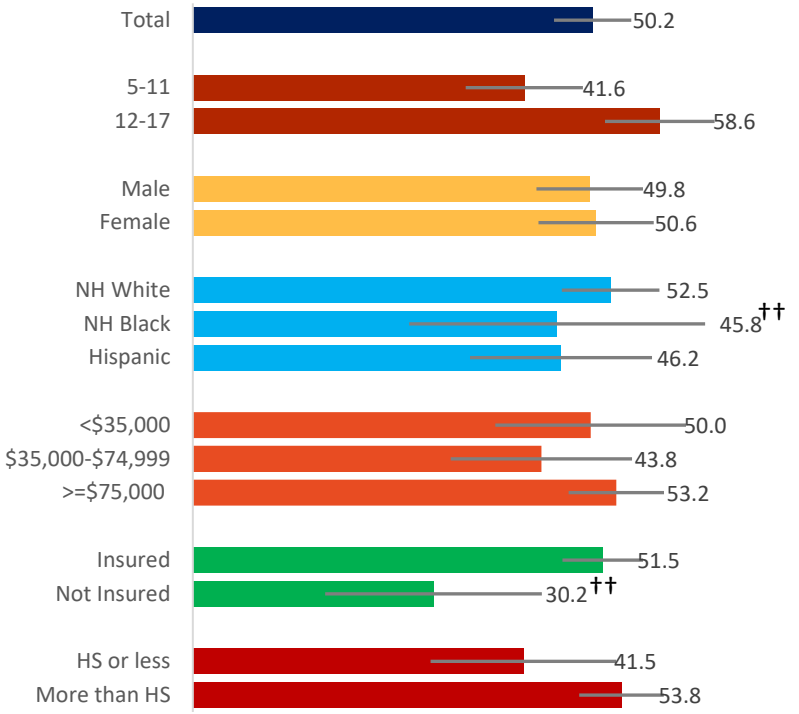
FIGURE 106: PREVALENCE OF CHILD RECEIVED DENTAL SEALANT (5-17 YEARS OLD), CT 2016-2020.



Compared to their counterparts in the state, the prevalence of having **dental sealants** was significantly greater for:

- Child 12-17 years old (58.6%); and
- Child living with a caregiver with more than a high school education (53.8%).

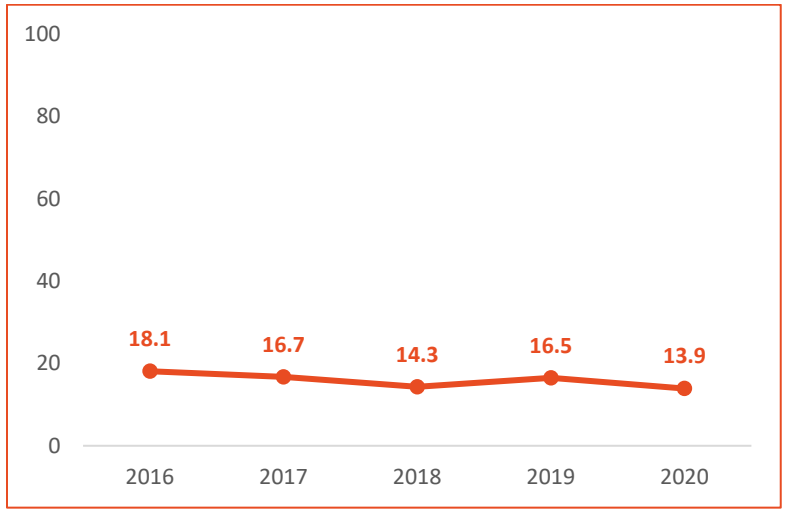
FIGURE 107: RECEIVED DENTAL SEALANT (CHILDREN 5-17 YEARS OLD), CT 2020



Estimates marked with a "†" have a CV between 15.0% and 20.0%; estimates marked with a "††" have a CV between 20.1% and 30.0..

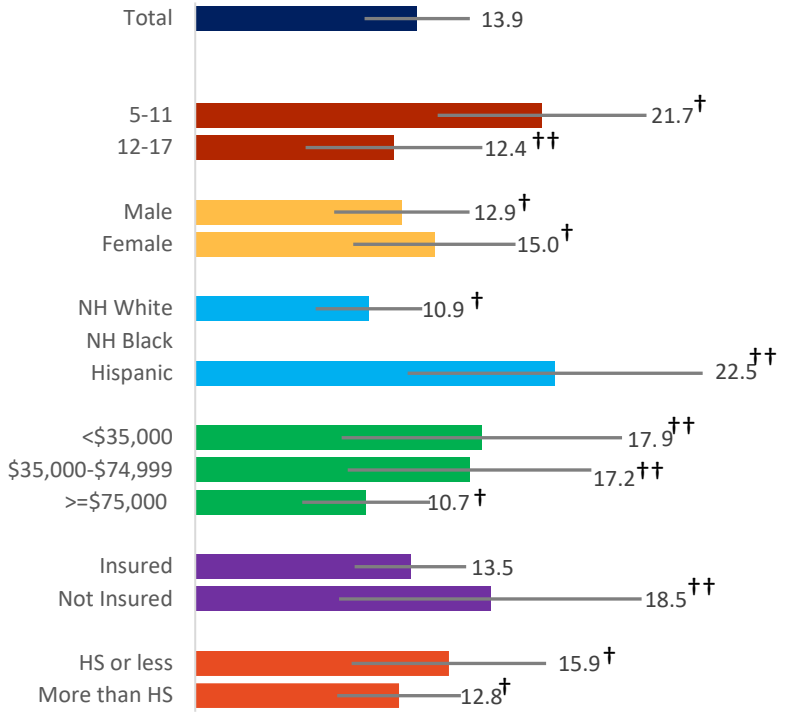
One in **seven** Connecticut children 5-17 years old had been told they have dental decay (cavities) in 2020.

FIGURE 108: PREVALENCE OF CHILD DENTAL DECAY, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of dental decay among children 5-17 years old in Connecticut, no difference was found.

FIGURE 109: CHILD DENTAL DECAY (CAVITIES IN PAST 12 MONTHS), CT 2020

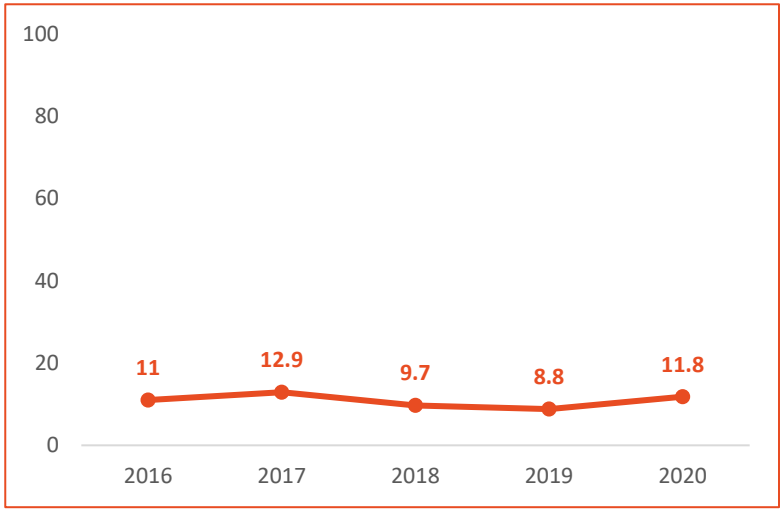


Estimates marked with a "†" have a CV between 15.0% and 20.0%; estimates marked with a "††" have a CV between 20.1% and 30.0%; estimates with CV greater than 30.0% were suppressed.

CHILD ASTHMA

One in **eight** Connecticut children in 2020 had **current asthma**. An additional five percent had been diagnosed with asthma in the past but no longer had the condition.

FIGURE 110: PREVALENCE OF CURRENT ASTHMA AMONG CT CHILDREN, CT 2016-2020.



Compared to their counterparts in the state, the prevalence of current asthma among children in Connecticut, no difference was found.

Estimates marked with a "†" have a CV between 15.0% and 20.0%; estimates marked with a "††" have a CV between 20.1% and 30.0%; estimates with CV greater than 30.0% were suppressed.

FIGURE 111: CHILD ASTHMA, CT 2020

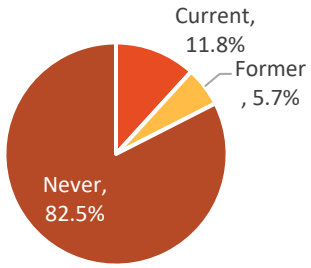
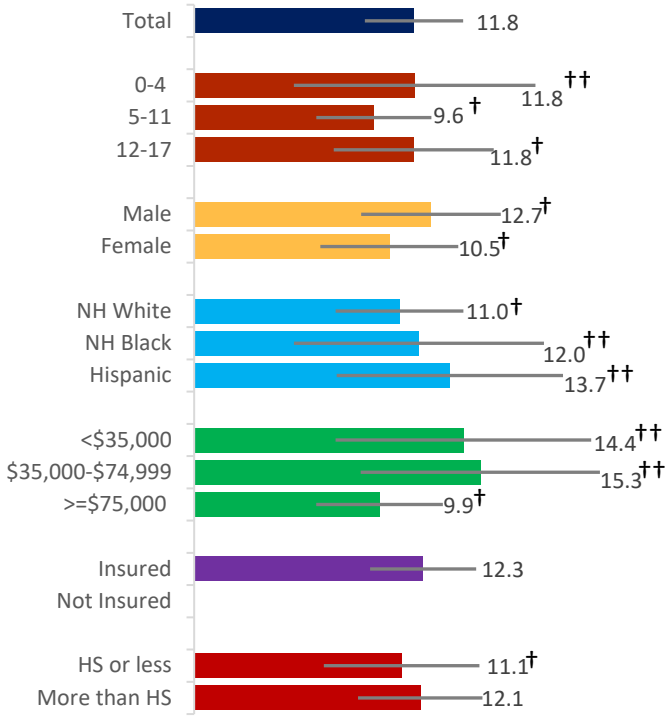


FIGURE 112: CURRENT CHILD ASTHMA, CT 2020.



8. END NOTES

[1] Connecticut Department of Public Health. (2014). Healthy Connecticut 2020. 2: State Health Improvement Plan, Connecticut Department of Public Health, Hartford, Connecticut. http://www.ct.gov/dph/lib/dph/state_health_planning/sha-ship/hct2020/hct2020_state_hlth_impv_032514.pdf

[2] Connecticut Department of Public Health. (2014). Live Health Connecticut, A Coordinated Chronic Disease Prevention and Health Promotion Plan, Connecticut Department of Public Health, Hartford, Connecticut. http://www.ct.gov/dph/lib/dph/state_health_planning/dphplans/chron_dis_coord_plan__april_2014.pdf

[3] Connecticut Department of Public Health: Healthy Connecticut 2020 Performance Dashboard. http://www.ct.gov/dph/cwp/view.asp?a=3130&q=553676

[4] Committee on Children: RBA Children's Report Card, Connecticut General Assembly, Hartford, Connecticut. https://www.cga.ct.gov/kid/rba/results.asp

[5] Connecticut Department of Public Health: Chronic Disease Prevention and Health Promotion, Live Healthy Connecticut Indicators. http://www.ct.gov/dph/cwp/view.asp?a=3137&Q=547826&PM=1