CONNECTICUT
Mental Health & Addiction Services

UCONN HEALTH

Data, Prevention and the DMHAS Center for Prevention Evaluation and Statistics (CPES) at UConn Health

Monday, December 2, 2024

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Jennifer Sussman
Coordinator, DMHAS Center for Prevention Evaluation and Statistics at UConn Health

Uses of Data:
The Strategic Prevention Framework

Prioritize problems and community needs

Demonstrate value, secure funding

Measure success, prove value, improve efforts (outcomes)

Build or increase community buy in

Guide adaptation of EBPPP; increase community awareness; inform social marketing

Prioritize risk factors and identify evidence-based strategies

ID subpopulations and health disparities

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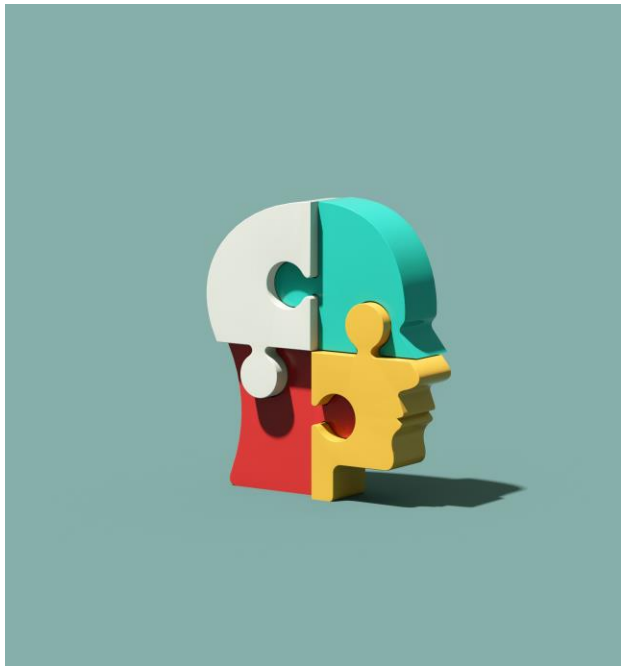
Prevention and Health Promotion: Data Sources and Types

- Publicly available or locally collected
- Prevalence (surveys, deaths)
- Incidence/consequence (hospital, treatment
- Risk factors
- Social Determinants of Health (SDOH)
- Systems resources, gaps and needs



Prevention and Health Promotion: Types of Data

Raw Data

Individual/item-level data, presented as collected, often uncleaned and uncoded

A1 | Car ID

	A	B	C	D	E	F	G	H	I	J	K
1	Car ID	Date Purchased	Location	Manufacture Date	Make	Model	Variant	Transmission	Colour	Economy	Has the car been leased?
2	2612		UK		VW	Golf	Diesel	Auto	Black	60mpg	No
3	2613		Germany		VW	Golf	Petrol	Manual	Red	40mpg	Yes
4	2614		Spain		Seat	Leon	Diesel	Auto	Green	30mpg	Yes
5	2615		Italy		Fiat	500	Petrol	Auto	White	60mpg	Yes
6	2616		France		Renault	Clio	Petrol	Auto	Blue	40mpg	Yes
7	2617		UK		Vauxhall	Corsa	Petrol	Auto	White	30mpg	Yes
8	2618		UK		Vauxhall	Ampera	Petrol	Auto	Black	60mpg	Yes
9	2619		UK		Vauxhall	Corsa	Diesel	Auto	Red	40mpg	Yes
10	2620		Germany		Audi	A2	Petrol	Auto	Red	30mpg	Yes
11	2621		Germany		VW	Golf	Petrol	Manual	Red	30mpg	Yes
12	2622		Germany		Audi	A1	Petrol	Manual	White	60mpg	Yes
13	2623		Germany		Audi	A3	Petrol	Manual	White	40mpg	No
14	2624		Germany		Audi	A3	Petrol	Manual	Blue	30mpg	No
15	2625		Germany		Audi	A3	Petrol	Manual	Green	60mpg	No
16	2626		Germany		VW	A7	Petrol	Manual	Blue	40mpg	No
17	2627		Germany		VW	Q7	Diesel	Manual	Black	30mpg	No
18	2628		Germany		VW	Q5	Diesel	Manual	White	30mpg	No
19	2629		Germany		VW	Polo	Petrol	Auto	White	60mpg	No
20	2630		Germany		Audi	A5	Petrol	Auto	White	40mpg	No
21	2631		UK		Audi	A8	Diesel	Auto	White	30mpg	Yes
22	2632		UK		VW	Passat	Petrol	Auto	Red	60mpg	Yes
23	2633		UK		Vauxhall	Vectra	Petrol	Manual	Blue	40mpg	Yes
24	2634		UK		Vauxhall	Astra	Diesel	Auto	Black	30mpg	Yes

Car Search | Raw Data

READY

Summary Data

Aggregate (vs. individual cases), often sample based and sometimes weighted

Surveillance Data

Real-time data used for monitoring and addressing public health concerns; often alert-based, hospital data, and algorithm-driven.

Nationally Notifiable Infectious Diseases and Conditions, United States: Weekly Tables

(Weekly data are available from Week 01, 1996 through Week 31, 2023)

See Notice to Data Users

Prev | Tables available for Week 31, 2023 | Change Year/Week

Weekly reported cases of notifiable diseases, by geography - United States and Territories		
Anthrax	(Export Data)	(PDF)
Arboviral diseases		
Chikungunya virus disease	(Export Data)	(PDF)
Eastern equine encephalitis virus disease	(Export Data)	(PDF)
Jamestown Canyon virus disease	(Export Data)	(PDF)
La Crosse virus disease	(Export Data)	(PDF)
Powassan virus disease	(Export Data)	(PDF)
St. Louis encephalitis virus disease	(Export Data)	(PDF)
West Nile virus disease	(Export Data)	(PDF)
Western equine encephalitis virus disease	(Export Data)	(PDF)
Babesiosis	(Export Data)	(PDF)
Botulism		
Foodborne	(Export Data)	(PDF)
Infant	(Export Data)	(PDF)
Other (wound & unspecified)	(Export Data)	(PDF)
Brucellosis	(Export Data)	(PDF)
Campylobacteriosis	(Export Data)	(PDF)
Candida auris		

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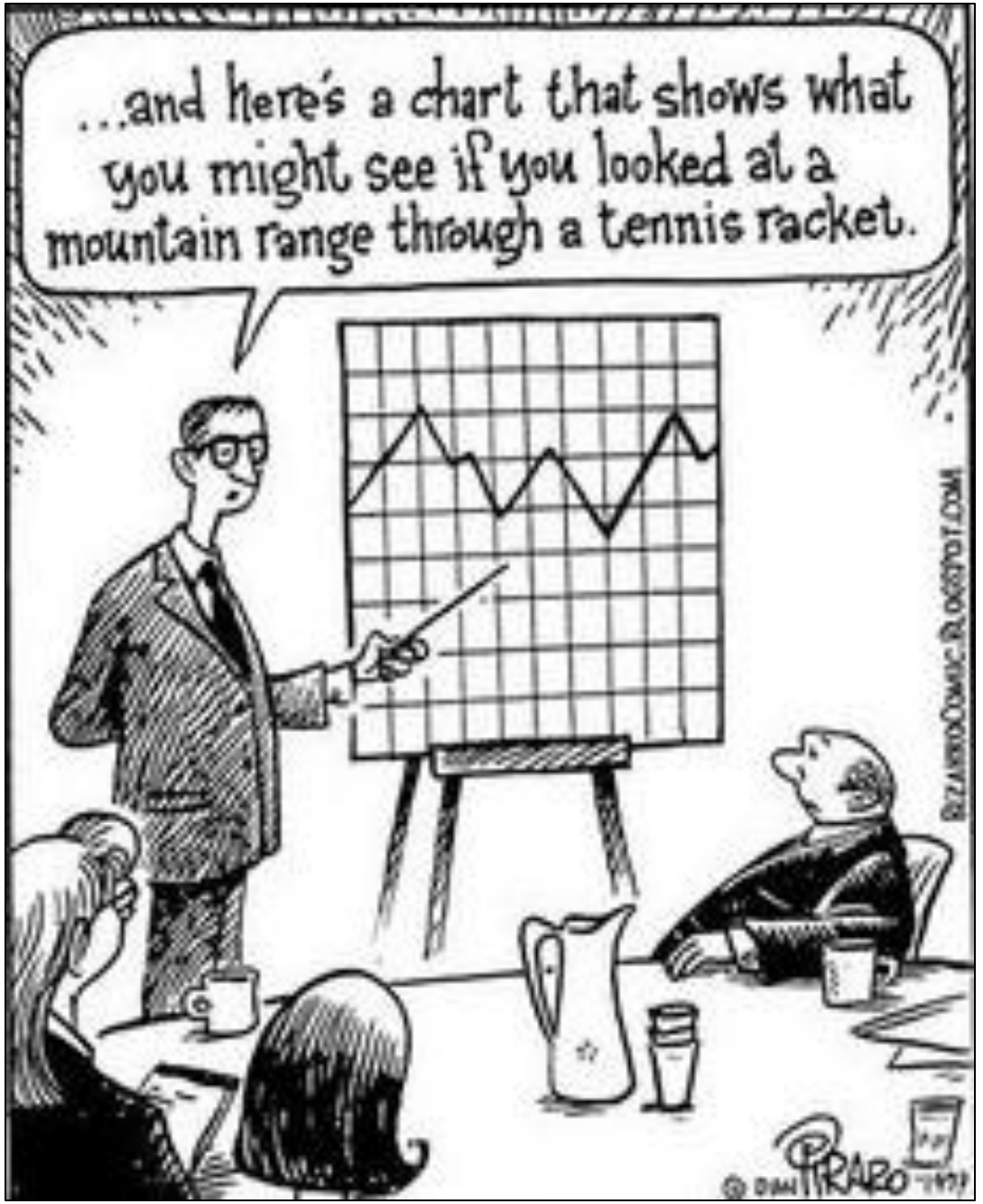
Interpretation is necessary to make sense of data



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The DMHAS Center for Prevention Evaluation and Statistics (CPES) at UConn Health

A DMHAS funded Resource Link, coordinated and staffed by UConn Health to:

- **Identify, collect, analyze, interpret and disseminate data** relevant to substance use prevention and mental health promotion;
- **Track behavioral health indicators**;
- **Develop and maintain an interactive data portal** for use by DMHAS, its partners, and stakeholders;
- **Share findings** via data-driven products, reports, epidemiological profiles, and presentations;
- **Provide research and statistical expertise and support**;
- **Provide training, capacity building, and technical assistance** on evaluation and use of data.

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Center for Prevention Evaluation and Statistics

Meet the team

Megan O’Grady

Director

- Assistant Professor, DPHS
- PhD Social Psychology
- Health services researcher

Center for Prevention Evaluation and Statistics

Meet the team

Jennifer Sussman

Coordinator

- Research Associate, DPHS
- Master of Fine Arts (Writing)
- BA Sociology
- Data capacity building, management

Center for Prevention
Evaluation and Statistics

Meet the team

Marsha Murray

Management Team

Research Associate, DPHS

- MS, Research, Statistics and Measurement
- Evaluation, data product development, branding, and management processes

Center for Prevention
Evaluation and Statistics

Meet the team

Shayna Cunningham

Associated Faculty

- Assistant Professor, DPHS
- PhD Public Health
- Community-based research

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Meet the team

Mayte Restrepo Ruiz

Associated Faculty

- Assistant Professor, DPHS
- PhD Public Health
- Masters in International Studies
- Women's rights, trauma/ACES research

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Meet the team

Janice Vendetti

Data Analyst

- Master of Public Health (MPH)
- BA Psychology
- Health services researcher (SU, MH)

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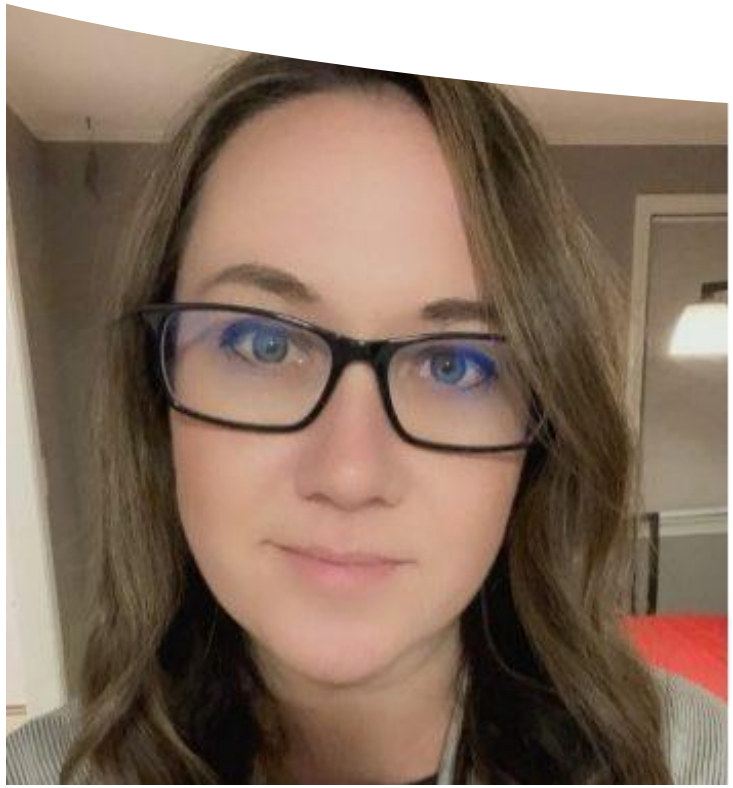
Meet the team



Alison Wiser

Clinical Research Assistant

- Master of Social Work (MSW)
- BA Sociology
- Substance use prevention and recovery

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Meet the team

Alversia Wade

Clinical Research Assistant

- Master of Public Health (MPH)
- BA Psychology
- Minority/Community Health Rese

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Meet the team

Christine Guerette

Clinical Research Assistant

- Masters in Biostatistics
- BA in Mathematics and Psychology
- Data analysis, interpretation, statistical software use

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Meet the team

Sydney Tabor

Clinical Research Assistant

- MPH, Boston University
- BS Biology and Health Sciences
- Outreach, data collection, evaluation

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Meet the team

Adekemi (Kemi) Suleiman

Graduate Assistant

- PhD Student, Public Health
- Master of Public Health (MPH)
- Bachelor of Medicine, Bachelor of Surgery (MBBS)
- Evaluation support

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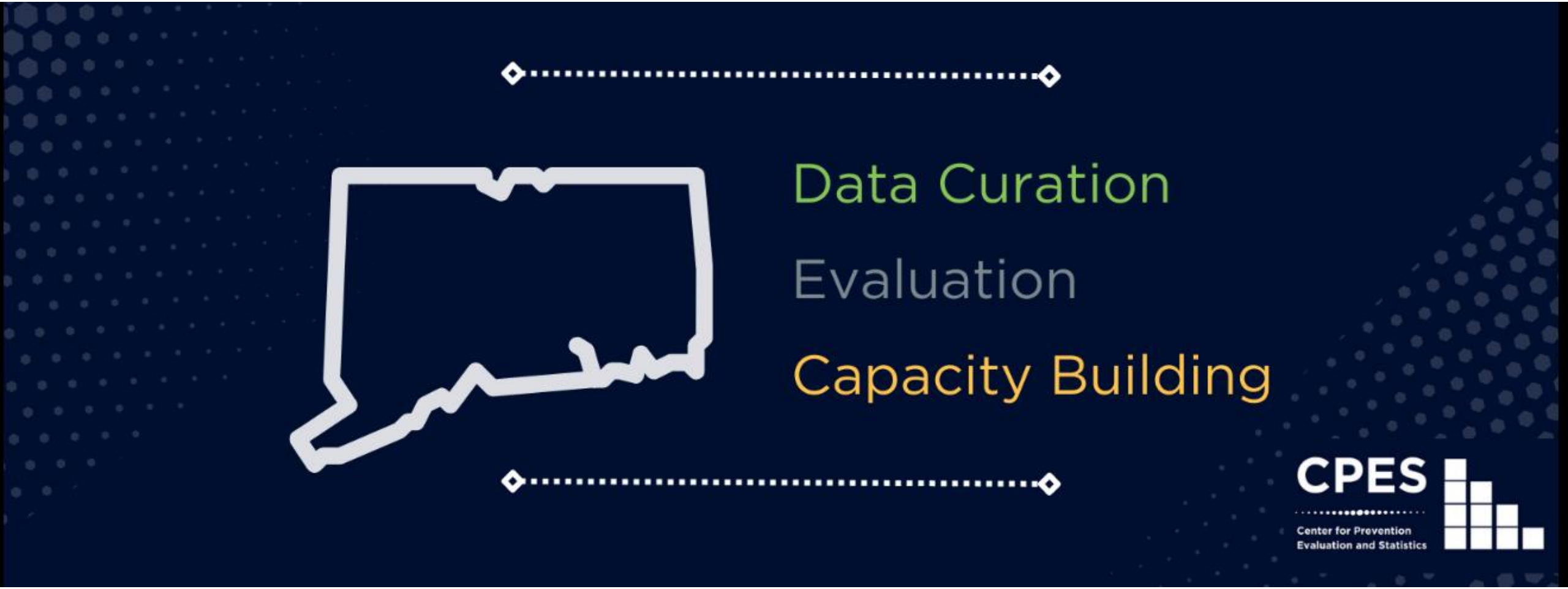
Meet the team

Yang Liu

Graduate Assistant

- PhD Student, Public Health
- Master in Public Health (MPH)
- BS, Allied Health
- Mental health, data support

CPES Core Functions



Data Curation

SEOW Prevention Data Portal

Social Media

Data Products

- Epi profiles
- Info briefs
- Slide decks
- Presentations
- Dashboards

Data Core Team

Analysis and Visualization Team

Product Development Team

Evaluation

Develop plans and instruments to assess progress, outcomes, and impact of DMHAS-funded prevention initiatives

Collect and compile data

Share results and recommendations

Project Evaluation Teams

- Partnerships for Success (PFS)
- Preventing Drug Overdose (PDO)
- State Opioid Response (SOR 2, 3, 4)

Capacity Building

Increase the capacity of prevention partners to utilize data for needs assessment, strategic planning and evaluation through:

- Guidance documents, templates, worksheets
- Trainings, presentations, workshops
- TA consultation
- Instrument development

Implementation Support Team

- Regional Priority Report process
- PFS, PCC initiatives
- Local Evaluation Workgroup

https://preventionportal.ctdata.org/index.html

Portal Primary Objectives

SEOW CONNECTICUT Prevention Data Portal

Centralize state prevention data related to substance use and mental health to ensure consistency and reliability.

Equip prevention professionals and collaborators with accurate and comprehensive data to guide the development of regional planning process, evidence-based programs, practices, and policies.

Facilitate informed decision-making and strategic planning for positive health promotion initiatives with the utilization of the portal's products.

Enhance the ability to monitor trends, **identify emerging issues, and measure the impact** of prevention efforts across Connecticut through time.

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Indicators

Connecticut SEOW Prevention Data Portal

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A searchable library matrix with **over 265 indicators** across **28 sources**, and multiple domains

- National, state and town-level data
- Searchable by priority problem/substance, data level, year, source, domain, and key words

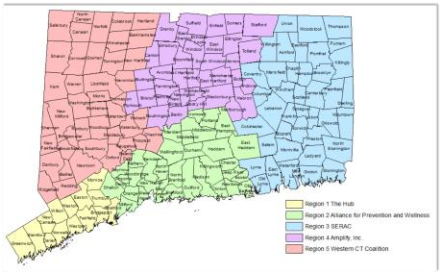
Indicator	Data Format	Source	Geography Level	Latest Year Available	Dimensions	Age/Grade Available	Priority Issue	Keywords
Search	Search	Search	All	All	Search	Search	Search	All
2-1-1 Requests	Dashboard	2-1-1 Counts. Holder: Health Communication Research Laboratory at Washington University	Zip Code	2021			substance misuse, mental health, problem gambling	service utilization
4-year cohort high school graduation rate	Data Repository, CTData	EDSight Portal. Holder: Connecticut State Department of Education (CSDE)	School District, State	2019-2020	Grade, Race/Ethnicity	Grade 9-12	education	risk factor

https://preventionportal.ctdata.org/indicators.html

Data Stories

Connecticut SEOW Prevention Data Portal

Interactive data visualizations, using cross-sector data, that describe behavioral health characteristics of the five DMHAS regions.



Epidemiological Profiles

Connecticut SEOW Prevention Data Portal

- Epidemiological profile fact sheets are data products of the SEOW
- Utilize epidemiological data pertaining to prevalence, risk factors, consequences, impact, and populations at risk for existing and emerging issues.
- Updated biennially with the most up to date data available.

https://preventionportal.ctdata.org/profiles.html

2022 Connecticut Epidemiological Profile: Alcohol

A product of the State Epidemiological Outcomes Workgroup (SEOW)

Prevalence

Alcohol continues to be the most commonly used substance nationally and in Connecticut. Alcohol use prevalence in CT has in fact remained higher than the nation since 2010, and CT has been among the 10 states with highest prevalence most/all of these years.[1]

Overall, NSDUH shows that the prevalence of alcohol use in Connecticut among the general population has remained relatively stable; the prevalence of past 30 day alcohol use in individuals 12 and older was 59.32% in 2008-2009 and 60.03% in 2018-2019. The prevalence of heavy episodic drinking in Connecticut has also remained relatively stable since 2010, and it has remained consistently higher than the national average. Adults in Connecticut ages 26 and older have the highest reported prevalence of past 30 day alcohol use (61.4%).[2] Young adults 18-25 have the highest prevalence of binge alcohol use (29.3%).[2]

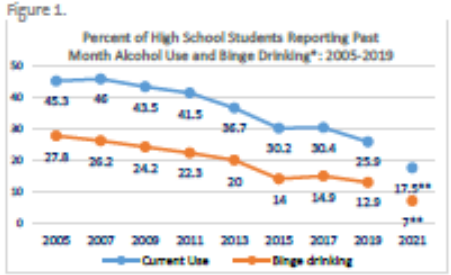
Even though the NSDUH shows that alcohol use in the general population of CT has remained consistent, underage drinking in Connecticut among 12 to 17-year-olds decreased significantly, from 18.56% in 2008-2009 to 11.24% in 2018-2019.

The 2021 Connecticut School Health Survey (CSHS) also reported lower prevalence of past 30 day alcohol use in Connecticut's high school students compared to their national counterparts (18% vs 23%).[3]

The Connecticut School Health Survey (CSHS), CT's Youth Risk Behavior Survey, also shows that the reported prevalence of past month alcohol use and binge drinking among Connecticut high school students has steadily declined since 2005 (Figure 1).

In the 2021 CSHS, 17.5% % of high school students reported using alcohol in the past month. Of these students, 7.0% of them reported binge drinking* in the past month.[3] However, caution should be taken when comparing the 2021 data to that of previous years because the 2021 CSHS was collected during a different semester than in previous years (Fall vs Spring).

Figure 1.



* The definition for binge drinking was 5 or more drinks in a row, until 2017 when it became 5 or more for males or 4 or more for females
**Caution should be taken when comparing 2021 data to that of previous years due to differences in methodology in survey collection.

The 2021 CSHS also shows that high school females were more likely than males to report past month drinking (29.2% and 14.2%, respectively) and binge drinking (8.5% vs 5.6%). Non-Hispanic whites had the highest prevalence of past month drinking (22.4%) and binge drinking (10.3%).Hispanic and Black students' reported prevalence of past month (13.7% and 12.1% respectively) and binge drinking (4.0% and 3.5%, respectively) were similar between the two groups.[3]

At-Risk Populations

Among individuals 12 years and older, those reporting alcohol use disorder (AUD) in the past year was relatively stable from 2016 to 2019, at about 6%. However, the 2021 NSDUH data indicates an increase in reported AUD for this age group (10.3%).[2]

[1] NSDUH 2018-2019
[2] NSDUH 2021
[3] CSHS 2021

Updated September2023

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Products

Connecticut SEOW Prevention Data Portal

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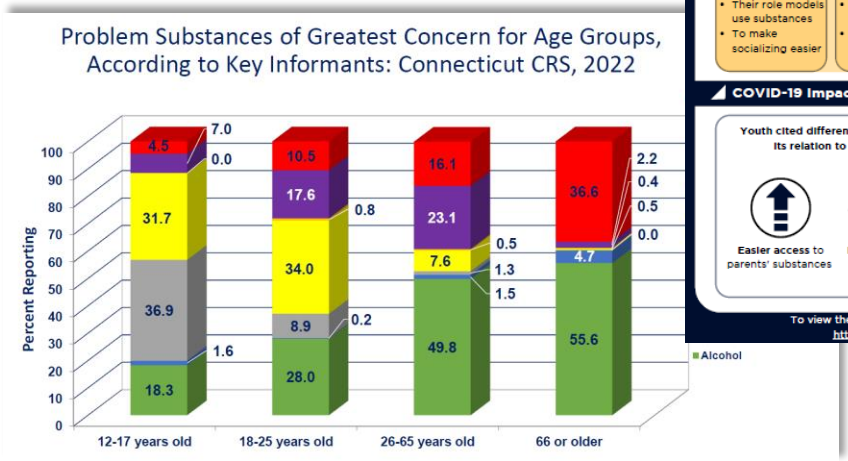
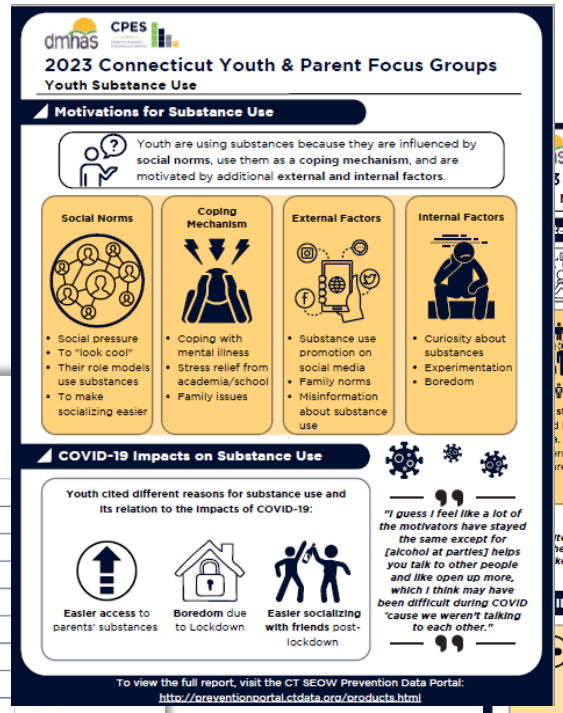
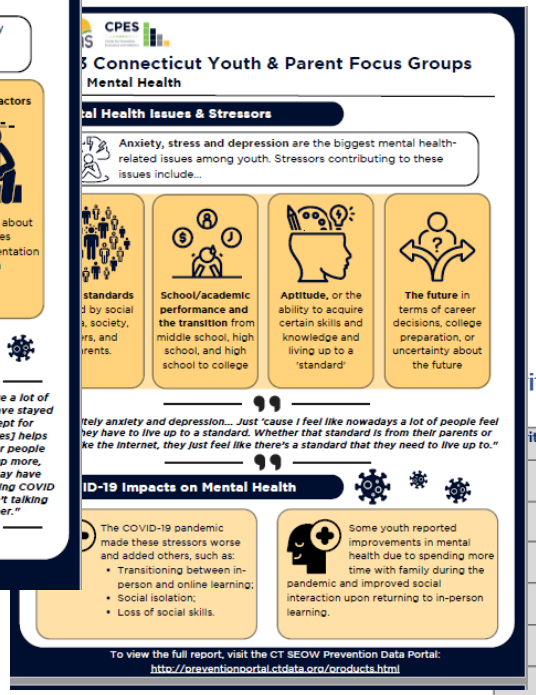
Annotated data visualizations

- Graphs
- Charts
- Maps







Data-driven products:

- Presentations
- Info Briefs
- Reports
- Guidance documents

itization Results: Substance Use

ity	Region 1	Region 2	Region 3	Region 4	Region 5
	ENDS	Heroin/ Fentanyl	Heroin/ Fentanyl	Heroin/ Fentanyl	Alcohol
	Heroin/ Fentanyl	Prescription Drug Misuse	Alcohol	Alcohol	ENDS
	Alcohol	ENDS	Prescription Drug Misuse	ENDS	Heroin/Fentanyl
	Tobacco	Marijuana	ENDS	Marijuana	Marijuana
	Marijuana	Alcohol	Marijuana	Prescription Drug Misuse	Prescription Drug Misuse
	Prescription Drug Misuse	Cocaine	Cocaine	Cocaine	Tobacco
7	Cocaine	Tobacco	Tobacco	Tobacco	Cocaine

https://preventionportal.ctdata.org/products.html

Proposed Portal Improvements

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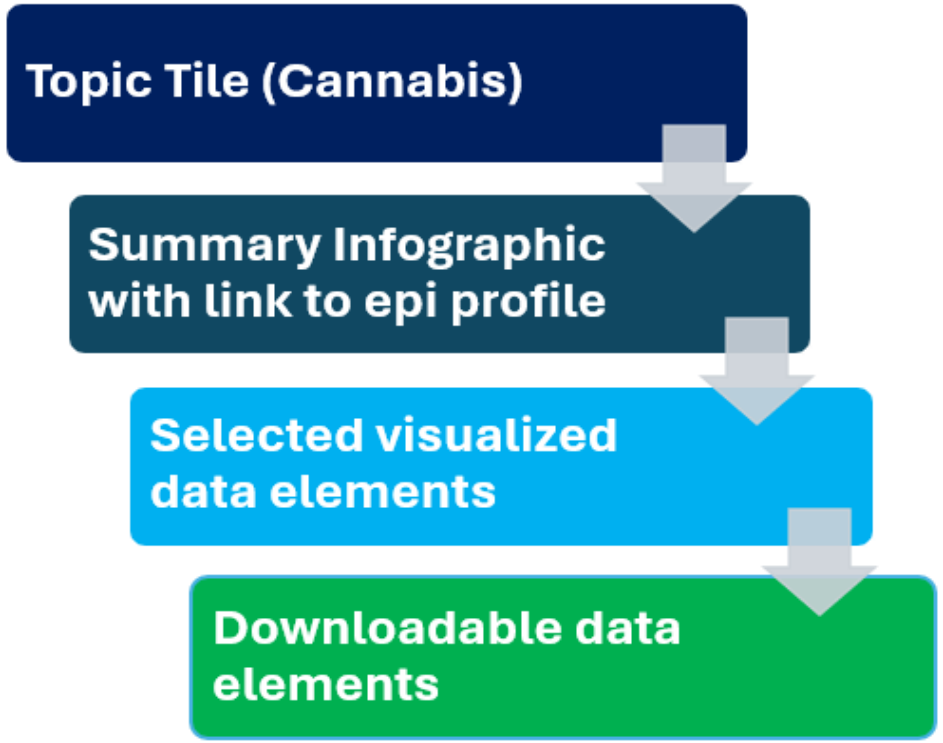
SIMPLIFIED LANDING PAGE

STEPWISE DRILL DOWN TO DOWNLOAD-ABLE DATA BY KEY ISSUE

ADDITION OF INFOGRAPHIC INFO BRIEFS BY SUBSTANCE/ ISSUE

Portal Drilldown Structure



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Connecticut SEOW Prevention Data Portal — CTData

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Featured Products

- Epidemiological profiles
- Information Briefs
- DMHAS Regional Data Stories
- Reports
- Presentations
- Data library/Indicator Matrix

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Enhanced Epidemiological Profiles

- Data visualizations
- Headlines to guide the reader
- Comparative regional data
- Optional region-specific sections for priority report and local data
- Infographic summarizing key points

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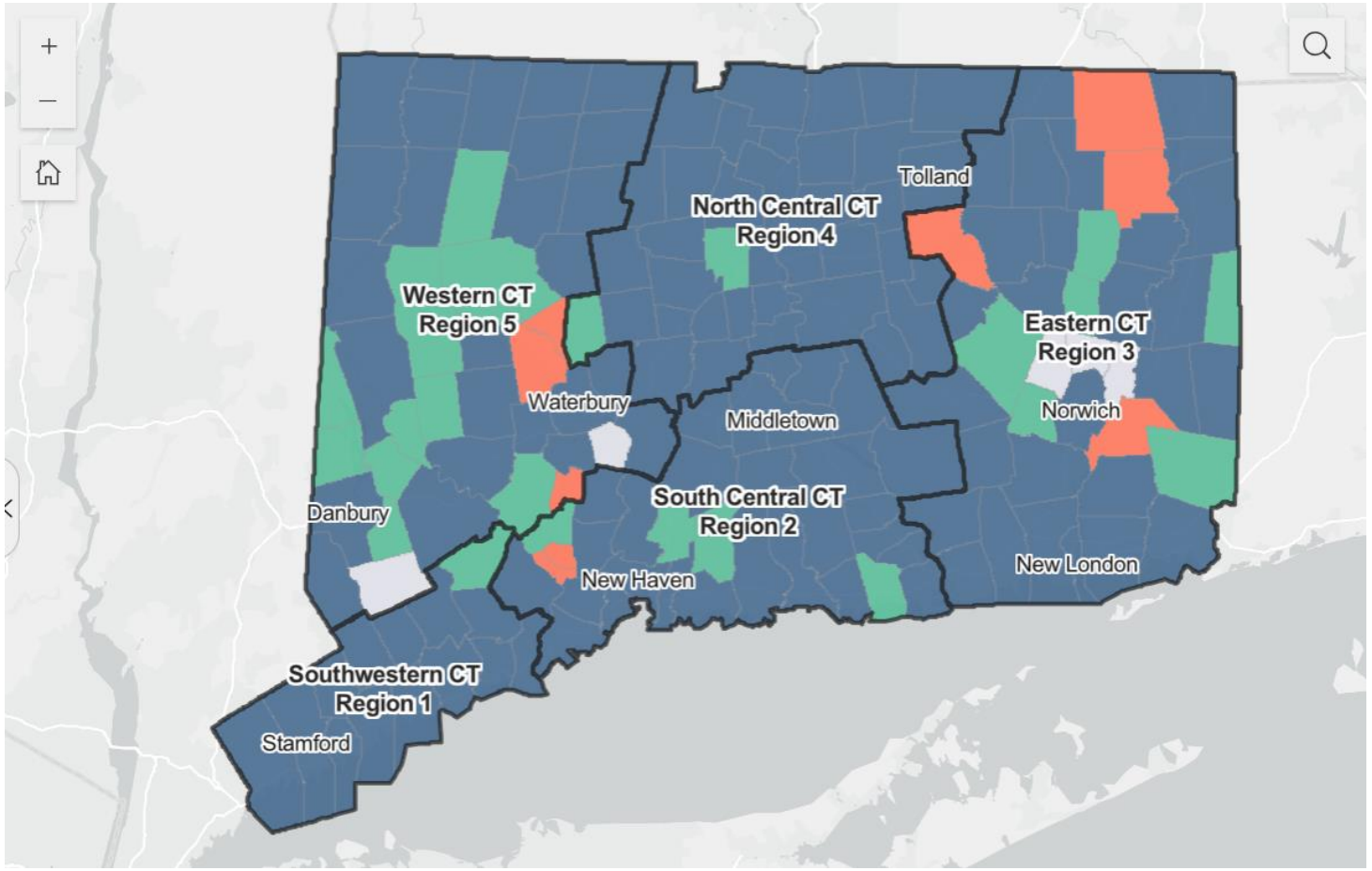
Connecticut Substance Use Primary Prevention: An Interactive Map



Use map filters to explore:

- **Funding type**
- **Prevention strategies**
- **Overlay community type**

Hover over towns to see town-level contact, funding, and strategy information

[CPES Prevention Resource Assessment Map — CTData]

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What can we do for you?

ANSWER QUESTIONS

CONDUCT TRAINING

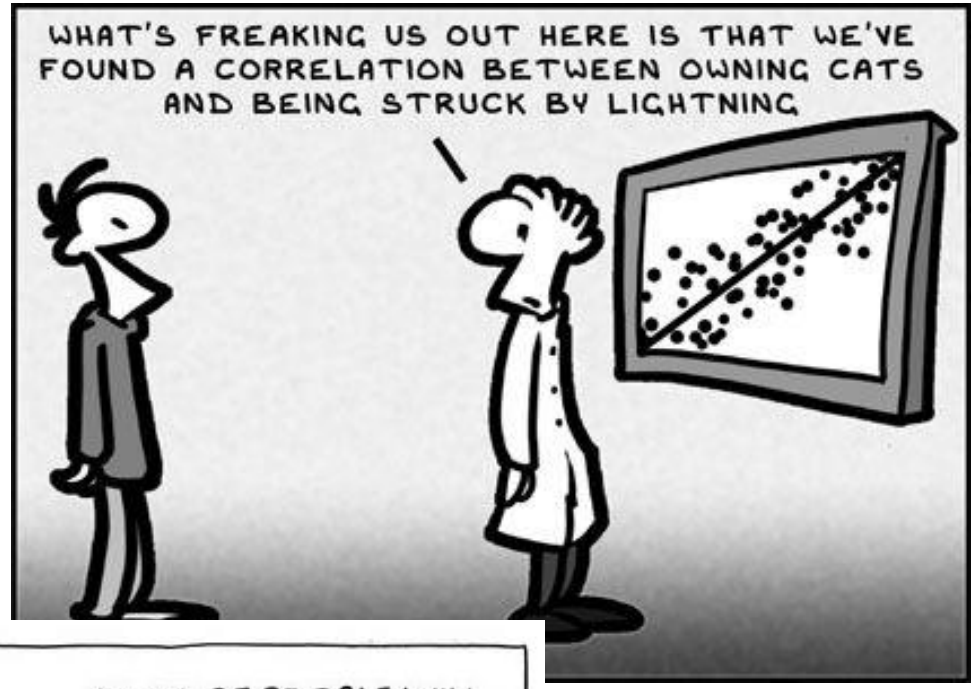
DIRECT YOU TO DATA

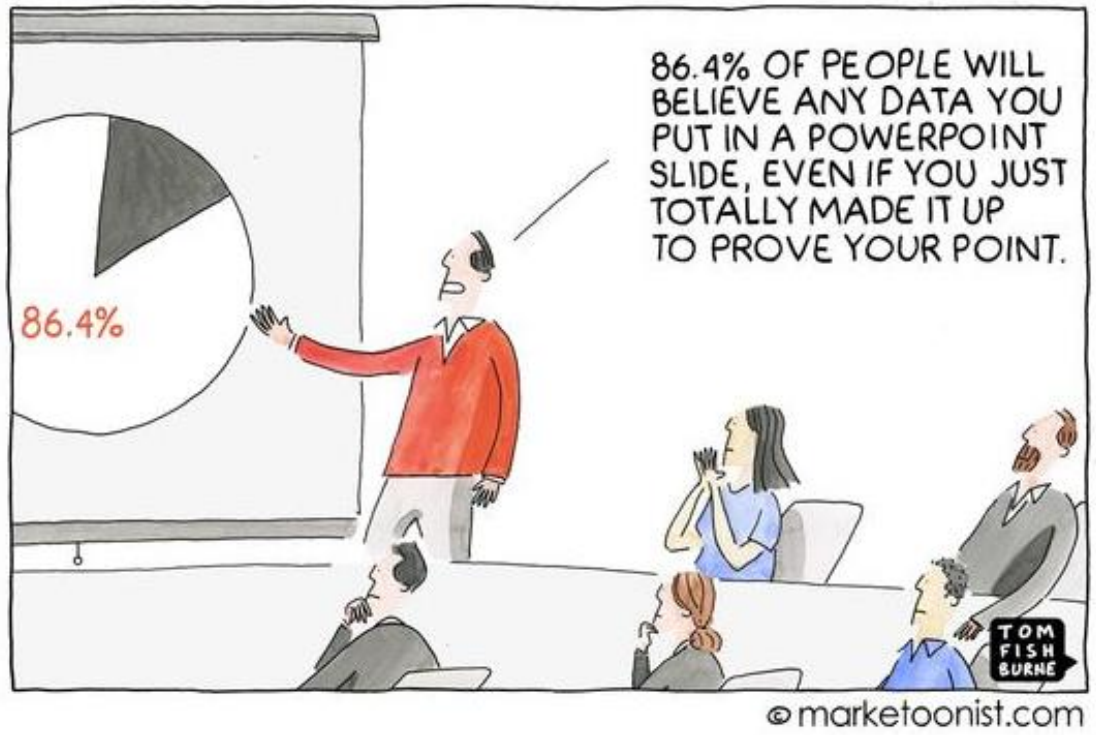
PROVIDE GUIDANCE

SHARE INFORMATION, TOOLS, AND PRODUCTS

Excellent health statistics - smokers are less likely to die of age related illnesses.'

Data isn't the story. You use data to help tell the story. –Brian Fanzo





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Be in touch!

Jennifer Sussman

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https://preventionportal.ctdata.org/