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Healthy Communities Division

# Health Equity Data Analysis (HEDA)

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November 2, 2016



Healthy Communities

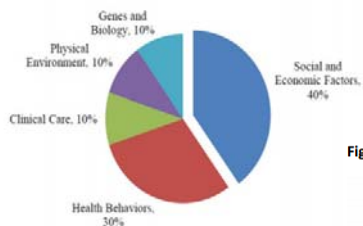
## The HEDA Pilot Project:

- MDH Center for Health Statistics selected 10 sites representing a mix of geographic regions
- *Using Data to Identify Health Inequities: A Guide for Local Health Departments in Minnesota*
- Timeline: June-November 2016
- Goal: Identify & address inequities that contribute to health disparities in our community
- Process: Community engagement, quantitative/qualitative data, data analysis, lessons learned
- Outcome: disseminate findings, mentor other agencies, review HEDA tools for MDH rollout to other SHIP agencies

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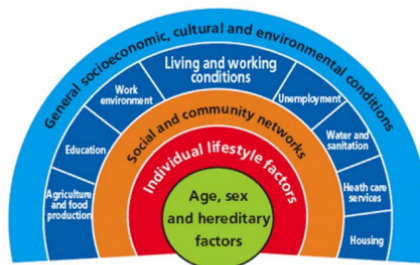
**Figure 1: Determinants of Health**



Social Determinants of Health (SDOH)

USING DATA TO IDENTIFY HEALTH INEQUITIES

**Figure 2: Dahlgren and Whitehead Model of the Layers of Influence on Health**



Source: Dahlgren and Whitehead, 1991

**The Need:**

SDOH contribute to poor health outcomes, lack of access to adequate care, increased chronic stress, preventable diseases & obesity rates.

## Our Focus:

- Racism impacts all other SDOHs.

## Our Community:

- Smallest county in MN (geographically)
- Most densely populated (300,000 in St. Paul)
- Highly diverse (100+ languages in SPPS)

5

## The Data: Education

- Data shows that people with more education tend to live longer, have better health outcomes and have healthier children.
  - Between 2013-2016, only 38% of third-grade students of color in Minnesota achieved reading standards, compared to 66.5% of White third-graders .
  - For Saint Paul Public Schools students, the graduation rates are reflective of the large educational disparity.
  - In 2015 the Black/African American student graduation rate (in four years) is 69.9% whereas during the same period, White students graduated at a rate of are 82.9%.
  - 27% of Persons of Color in the Twin Cities have Bachelor's Degree; 46% of Whites

## The Data: Poverty

- Living at or below poverty level (St. Paul)
  - Total: 23%
  - African Americans: 42.9%
  - Whites: 11.7%
- Free/Reduced Lunch in schools
  - African Americans are 2-3 times that of Whites
- Cost-burdened (>30% of income for housing)
  - African Americans: 43%
  - Whites: 25.4%

## The Data: Employment

- In the Twin Cities: 61.9% of African Americans (ages 16-64) are in the workforce, compared to 78% of Whites
- Black people make up less than 6 percent of Minnesota's population, according to 2013 census estimates, but made up 35 percent of the prison population as of January 2015.
- White people make up the vast majority of the state population — 86 percent — but only 53 percent of the inmate population.
- **Huffington Post named Twin Cities the 3<sup>rd</sup> worst place in America to be black.**

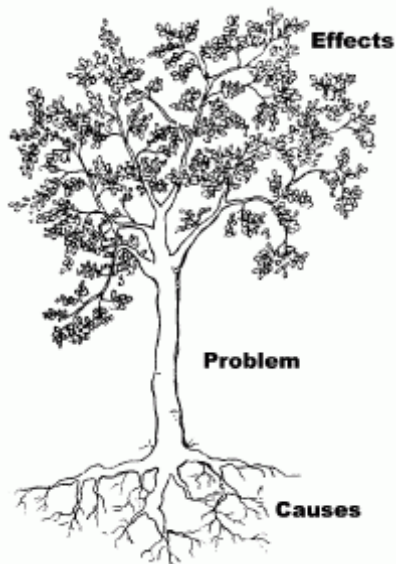
## The Data: Income and Health

- Lower income populations tend to have poorer overall health, increased chronic disease and death rates
- Adults in MN Households earning less than \$35,000 per year are 2.5 times more likely to have diabetes.
- In MN, 1 in 4 adults have incomes >\$35K

## The Data: Health

- Obesity:
  - In 2014, 27.6% of Whites in Minnesota were obese, whereas 32.7% of African Americans fit the criteria for obesity.
  - For all residents: 1 in 4 are obese and 34% are overweight.
  - Male African American students (SPPS) 1.5 x the rate of Whites
  - Female African American students (SPPS) 3 x the rate of Whites
- Diabetes/Pre-diabetes
  - MN: 1 in 3 adults, 1 in 6 youth
  - US: Rate of diabetes dx is 77% higher for African Americans than that of Whites
  - Once diagnosed, African Americans face below average care at clinics compared to Whites.
  - SPPS 11<sup>th</sup> grade students: 2% of males, 5% females have prediabetes, Whites are at a lower rate of 1% male students and 2% female students
- Stroke
  - Ramsey County: 5% of all deaths
  - Rates in African Americans is 31% higher than Whites
- Death
  - African American rates are 1.5 x higher than Whites in each age group

# ACTIVITY: Problem Tree



Short-term/long-term?

Who is impacted?

Effects

Implications for person, family, community

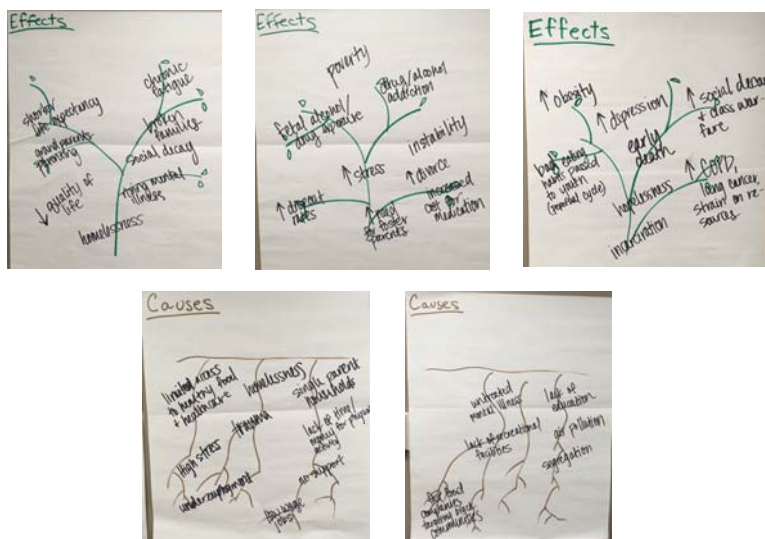
What conditions cause it?

Chronic Disease

Has there been an increase? Why?

Causes

Anything specific to a neighborhood?



**SDOH: Racism**

**Problem: Chronic Disease in the African American Community in Ramsey County**

Causes	Both	Effects
<ul style="list-style-type: none"> <li>No investment in community</li> <li>Fast food companies target black and minority communities</li> <li>Continued disease in family</li> <li>Underemployment</li> <li>Unemployment</li> <li>Lack of [safe] places for recreation</li> <li>Fear of community, unwilling to go out</li> <li>Lack of education</li> <li>Overweight</li> <li>Unhealthy foods, lack of affordable healthy food</li> <li>Unhealthy eating</li> <li>Environment</li> <li>Air pollution</li> <li>Depression</li> <li>Grocery store deserts</li> <li>No support</li> <li>Trauma</li> <li>ACES</li> <li>Poverty</li> <li>Retention (employment)</li> <li>Hiring practices</li> <li>Trust</li> <li>Low wage jobs</li> <li>Stress</li> <li>Lack of time &amp; money for physical activities</li> <li>Women-headed single parent families</li> <li>Stress/anxiety – worried about finances</li> <li>Unidentified or untreated mental/behavioral health disorders</li> <li>Homelessness</li> <li>No access to resources</li> <li>Limited access to healthy foods</li> <li>Lack of access to health care</li> <li>Uninsured/underinsured</li> <li>Smoking</li> <li>Unstable housing</li> </ul>	<ul style="list-style-type: none"> <li>No or limited transportation</li> <li>Segregation – white people don't know or understand black lived experience</li> <li>Stress</li> <li>Unemployment</li> <li>Unstable housing/homelessness</li> <li>Poverty</li> </ul>	<ul style="list-style-type: none"> <li>Shorter life expectancy</li> <li>Health issues are more advanced/expensive by the time help is received</li> <li>Grandparents are parenting</li> <li>Fetal alcohol exposure</li> <li>Fetal drug exposure</li> <li>Impact on communities</li> <li>No income / unable to work</li> <li>Loss of housing</li> <li>Poverty</li> <li>Shorter lifespan</li> <li>Lack of support</li> <li>Chronic fatigue</li> <li>Decrease in quality of life</li> <li>More need for foster parents</li> <li>All are effected – family, neighbors, schools, churches, communities</li> <li>Increase in school dropout rates</li> <li>Instability</li> <li>Increased stress</li> <li>Depression</li> <li>More divorce</li> <li>Drug and alcohol addiction</li> <li>Broken families</li> <li>Increased cost for medication</li> <li>Less work &amp; productivity</li> <li>Obesity</li> <li>Hopelessness</li> <li>Mental illness</li> <li>Incarceration</li> <li>Homelessness</li> <li>Early death rate</li> <li>COPD</li> <li>Lung cancer</li> <li>Strain on available resources</li> <li>Stress on the family</li> <li>Rising social decay</li> <li>Class warfare</li> <li>Bad cooking/eating habits are passed to youth (generational learning perpetuates a cycle of poor nutrition)</li> </ul>





### Coding: Effects

Food/ Food Access	Physical Environment/ Lack of Resources	Policy/Government: Local, City, State	Medical	Economic	Personal/Social
bad cooking/eating habits are passed on to next generation (youth)	limited or no transportation	grandparents are parenting	shorter life expectancy / life span	no income/unable to work (due to medical conditions)	grandparents are parenting
perpetual cycle of poor nutrition	loss of housing / homelessness lack of support decrease in quality of life more need for foster parents increase in school drop-out rates more divorce broken families hopelessness incarceration stress on the family strain on available resources rising social decay segregation lack of education	loss of housing / homelessness lack of support decrease in quality of life more need for foster parents increase in school drop-out rates more divorce broken families hopelessness incarceration stress on the family strain on available resources rising social decay segregation lack of education	health issues are more advanced/expensive by the time help is received fetal alcohol exposure fetal drug exposure chronic fatigue depression drug and alcohol addiction obesity mental illness early death rate COPD Cancers (lung) stress High rates of premature births	poverty more divorce increased cost for medication less work productivity incarceration strain on available resources unemployment / underemployment lack of childcare	loss of housing / homelessness lack of support chronic fatigue decrease in quality of life depression drug and alcohol addiction broken families obesity hopelessness mental illness incarceration COPD cancers (lung) stress unconscious bias health literacy

- Comments?

