

Priority health issues identified by community health boards in Minnesota in 2020

Local public health departments across Minnesota, in partnership with community, are committed to improving their population's health. They engage their community to understand the most pressing health issues through community health assessment, and prioritize issues for action through community health improvement planning.

A community health assessment is the foundation of efforts to improve community health. The assessment tells the community story of health: the community health status, factors contributing to higher health risks and poorer health outcomes, and resources available to improve health. After assessment, public health and community consider this data and information to prioritize the top issues impacting health that need to be addressed collectively to improve the health of the population. A community health assessment serves as the basis for the community health improvement plan, which is a long-term, systematic plan to address identified issues.

The community health assessment and community health improvement plan are dynamic, and while both pieces are intended to address long-range issues, community health boards and their communities continuously considering new data and information and make adjustments to changing needs and opportunities. For this reason, the information represents the priorities of the community health board at the time of submission.

Methods: This summary describes the five issues most frequently prioritized by Minnesota community health boards* at a single point in time (November 2020). Community health boards and partners conducted their community health assessments, which identified and ranked these health issues, prior to the onset of the COVID-19 pandemic. Community health boards then indicated which issues they and their communities chose to address in their community health improvement plans.

How can we use this information?

- Examine the priority health issues across your region and the state. Consider how you align and differ. Explore opportunities to leverage work on shared priorities.
- Share this information with community partners and elected officials. Use it as an opportunity to talk about what creates health, the community's vision of health, and how partners and elected officials can support the work.
- Reach out to others across the state who are working on similar priorities to learn about their efforts.
- Continue to identify interested parties and talk with them about underlying conditions contributing to the health issues identified, and the systems, environment, structures, and norms that may be contributing to and causing health disparities.
- Use this information to garner funding and other support for community health improvement work.

For more information about what health issues community health boards are working on and links to community health improvement plans, visit: [What are community health boards working on right now?](https://www.health.state.mn.us/communities/practice/assessplan/lph/currentwork/) (<https://www.health.state.mn.us/communities/practice/assessplan/lph/currentwork/>).

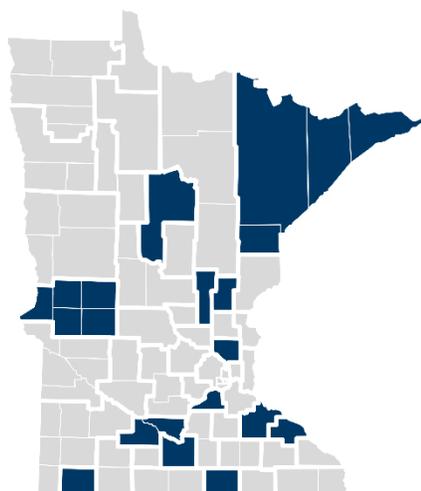
* In Minnesota, community health boards are the legally recognized governing body for local public health, and work in partnership with the Minnesota Department of Health to address areas of public health responsibility. Community health boards consist of single counties, multiple counties working together, single cities, and a city-county working together.

PRIORITY HEALTH ISSUES IDENTIFIED BY
COMMUNITY HEALTH BOARDS IN MINNESOTA

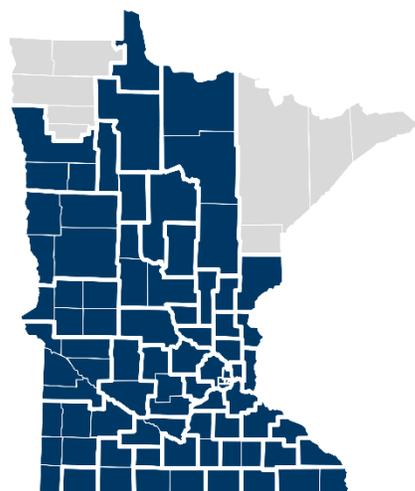
Mental health

- Mental health or access to mental health care services was identified as a top priority issue in every region of the state.
- Nearly all community health boards included strategies and actions to address mental health in their community health improvement plan.
- The share of community health boards reporting mental health as a priority health issue increased from 2015 (77%) to 2020 (96%).
- In addition to prioritizing mental health and access to mental health care, many community health boards identified related priority health issues such as adverse childhood experiences, suicide, and social isolation.

Access to mental health care services



Mental health



Community health boards that identified mental health as a priority health issue in 2020 include: Aitkin-Itasca-Koochiching, Anoka, Beltrami, Benton, Bloomington, Blue Earth, Brown-Nicollet, Carver, Cass, Chisago, Countryside (Big Stone, Chippewa, Lac qui Parle, Swift, Yellow Medicine), Crow Wing, Dakota, Des Moines Valley (Cottonwood, Jackson), Dodge-Steele, Edina, Faribault-Martin, Fillmore-Houston, Freeborn, Goodhue, Hennepin, Horizon (Douglas, Grant, Pope, Stevens, Traverse), Isanti, Kanabec, Kandiyohi-Renville, Le Sueur-Waseca, Meeker-McLeod-Sibley, Mille Lacs, Minneapolis, Morrison-Todd-Wadena, Mower, Nobles, North Country (Clearwater, Hubbard, Lake of the Woods), Olmsted, Partnership4Health (Becker, Clay, Otter Tail, Wilkin), Pine, Polk-Norman-Mahnomen, Rice, Richfield, Scott, Sherburne, St. Paul-Ramsey, Stearns, SWHHS: Southwest Health & Human Services (Lincoln, Lyon, Murray, Pipestone, Redwood, Rock), Wabasha, Washington, Watonwan, Winona, Wright.

Community health boards that identified access to mental health services as a priority health issue in 2020 include: Anoka, Blue Earth, Brown-Nicollet, Carlton-Cook-Lake-St. Louis, Cass, Freeborn, Goodhue, Horizon (Douglas, Grant, Pope, Stevens, Traverse), Kanabec, Mille Lacs, Nobles, Scott, Wabasha.

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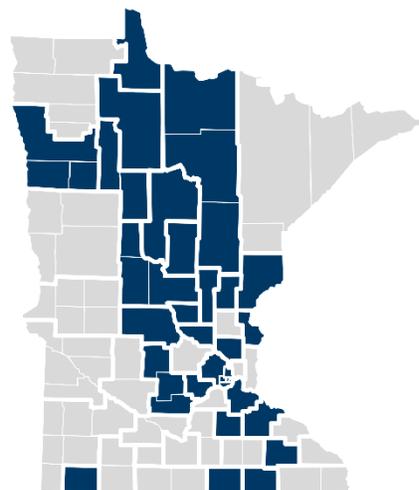
Economic stability

Economic stability includes issues such as poverty, unemployment, food insecurity, and affordable housing.

- Over half of the state's community health boards (57%) identified economic stability as a priority issue impacting health.
- Nearly one-fifth (18%) of community health boards included this priority health issue in their community health improvement plan.
- Several community health boards noted that the reason they identified economic stability as a priority health issue in their assessment but did not include it in their improvement plan is because partner organizations with resources and expertise take the lead on this issue.
- More exploration is needed to understand what role health departments can play in this work.

Community health boards that identified economic stability as a priority health issue in 2020 include: Aitkin-Itasca-Koochiching, Anoka, Beltrami, Benton, Bloomington, Carver, Cass, Chisago, Crow Wing, Dakota, Edina, Freeborn, Goodhue, Hennepin, Kanabec, Meeker-McLeod-Sibley, Mille Lacs, Minneapolis, Morrison-Todd-Wadena, Mower, Nobles, North Country, Olmsted, Pine, Polk-Norman-Mahnomen, Rice, Sherburne, Stearns, Wabasha.

Economic stability



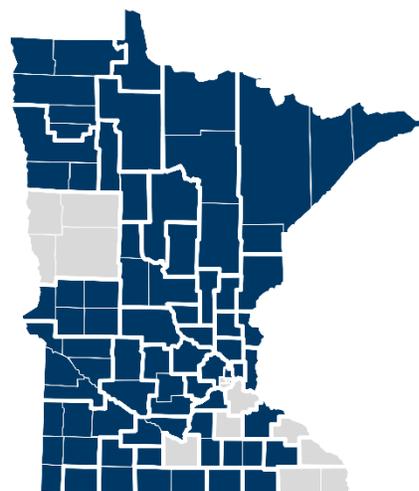
Substance use [all types]

Substance use includes general substance use, e-cigarette use, tobacco and secondhand smoke, alcohol, illicit drugs such as meth and cocaine, and opioids (prescription and non-prescription).

- Most community health boards identified some sort of substance use as a priority health issue.
- Community health boards in most regions of the state included substance use in their community health improvement plans.

Community health boards that identified substance use of any type as a priority health issue in 2020 include: Aitkin-Itasca-Koochiching, Anoka, Beltrami, Benton, Brown-Nicollet, Carlton-Cook-Lake-St. Louis, Carver, Cass, Chisago, Countryside (Big Stone, Chippewa, Lac qui Parle, Swift, Yellow Medicine), Crow Wing, Des Moines Valley (Cottonwood, Jackson), Dodge-Steele, Faribault-Martin, Freeborn, Goodhue, Hennepin, Horizon (Douglas, Grant, Pope, Stevens, Traverse), Isanti, Kanabec, Kandiyohi-Renville, Le Sueur-Waseca, Meeker-McLeod-Sibley, Mille Lacs, Minneapolis, Morrison-Todd-Wadena, Mower, Nobles, North Country (Clearwater, Hubbard, Lake of the Woods), Olmsted, Pine, Polk-Norman-Mahnomen, Quin County (Kittson, Marshall, Pennington, Red Lake, Roseau), Scott, Sherburne, St. Paul-Ramsey, Stearns, SWHHS: Southwest Health & Human Services (Lincoln, Lyon, Murray, Pipestone, Redwood, Rock), Washington, Watonwan, Wright.

Substance use (all forms)



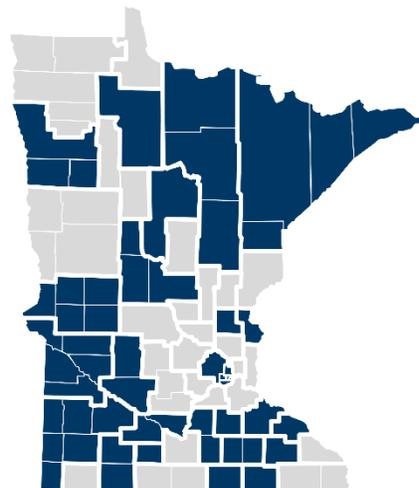
Neighborhood and built environment

Neighborhood and built environment includes transportation accessibility, quality of housing, access to healthy foods, safe neighborhoods, and easy access to services (for people of all abilities).

- Over half of the state's community health boards (57%) reported issues related to neighborhood and built environments among their priority health issues. Almost half of the regions in the state identified neighborhood and built environments as top priority health issues.
- One-fifth (20%) of community health boards included strategies and actions to address these issues in their community health improvement plan. Some noted plans to collaborate with health system partners who also identified this issue to develop strategies to address. More exploration is needed to understand what role health departments can play in this work.

Community health boards that identified neighborhood and built environment as a priority health issue in 2020 include: Aitkin-Itasca-Koochiching, Beltrami, Bloomington, Brown-Nicollet, Carlton-Cook-Lake-St. Louis, Cass, Chisago, Countryside (Big Stone, Chippewa, Lac qui Parle, Swift, Yellow Medicine), Des Moines Valley (Cottonwood, Jackson), Dodge-Steele, Edina, Freeborn, Goodhue, Hennepin, Horizon (Douglas, Grant, Pope, Stevens, Traverse), Isanti, Kandiyohi-Renville, Le Sueur-Waseca, Minneapolis, Morrison-Todd-Wadena, Mower, Olmsted, Polk-Norman-Mahnomen, Rice, Richfield, SWHHS: Southwest Health & Human Services (Lincoln, Lyon, Murray, Pipestone, Redwood, Rock), Wabasha, Watonwan, Wright.

Neighborhood and built environment

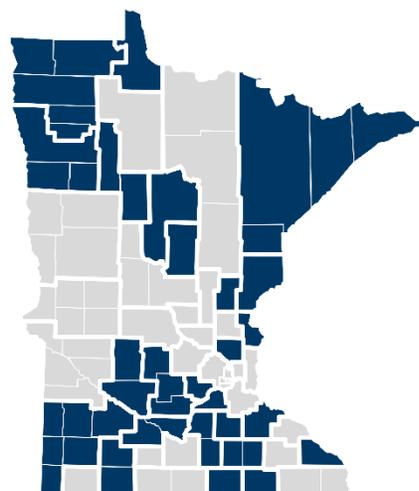


Obesity

- Obesity remained a top priority health issue for nearly half of the state's community health boards and many included strategies to address obesity in their community health improvement plan.
- Fewer community health boards identified obesity as a priority health issue in 2020 (47%) than in 2015 (83%); however, health departments across Minnesota are engaged in many efforts to reduce obesity through the [Statewide Health Improvement Partnership, or SHIP](https://www.health.state.mn.us/ship) (<https://www.health.state.mn.us/ship>). This existing engagement to expand opportunities for active living, healthy eating, and commercial tobacco-free living may have contributed determine how to prioritize this work.

Community health boards that identified obesity as a priority health issue in 2020 include: Anoka, Brown-Nicollet, Carlton-Cook-Lake-St. Louis, Carver, Cass, Chisago, Crow Wing, Des Moines Valley (Cottonwood, Jackson), Dodge-Steele, Freeborn, Goodhue, Kanabec, Kandiyohi-Renville, Le Sueur-Waseca, Meeker-McLeod-Sibley, Mower, North Country (Clearwater, Hubbard, Lake of the Woods), Pine, Polk-Norman-Mahnomen, Quin County (Kittson, Marshall, Pennington, Red Lake, Roseau), Rice, Scott, SWHHS: Southwest Health & Human Services (Lincoln, Lyon, Murray, Pipestone, Redwood, Rock), Winona.

Obesity



Minnesota Department of Health Center for Public Health Practice

651-201-3880 health.ophp@state.mn.us

www.health.state.mn.us

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To obtain this information in a different format, call: 651-201-3880.