

**Minneapolis**

*City of Lakes*

**Department of Health  
& Family Support**

**2011 Goals**

**Public Safety  
& Health Meeting  
4/7/10**

# DHFS Vision & Mission



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## Vision

Health, equity and well-being for all people in their communities

## Mission

To provide leadership in meeting the unique needs of our urban population and eliminating disparities by engaging partners in promoting individual and community health.

# DHFS Guiding Principles



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- Our activities are investments in the health, social and economic well-being of the residents of Minneapolis.
- Our work is accomplished through collaborations and partnerships. We acknowledge the complexity and challenge of this approach and are committed to creating and nurturing these efforts.
- We work actively to build community capacity.
- We recognize, and work to integrate, the increasing diversity of the City in our work.

# Social Determinants of Health



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- Inequities in economic, social, physical and service environments create patterns of poor health.
- Interventions outside the health sector are likely to have greater impact on the *occurrence* of illness, where health care has greater impact on *severity* of illness.
- Early childhood is when the basis for many health inequities is established.
- Policies targeted at structural changes in society and systems are more effective than interventions targeted at individual behaviors.



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# Individuals Below Poverty, 2008

- Minneapolis Overall: **21%**
- Children under age 18: **31%**
- White, non-Hispanic children under age 18: **8%**
- Children of Color under age 18: **47%**

*Source: American Community Survey*

# How We Operate



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## Institute of Medicine Core Functions of Public Health

- Assessment
- Assurance
- Policy Development



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# 2010 DHFS Budget (12.9 million)

## 2011 Goals

### Safety & Health

- \$3.2 million in City General Funds
- \$2.9 million in Local Public Health grants
- \$1.8 million in Federal Maternal Child Health and TANF grants
- \$2 million in non-competitive Federal Grants
- \$.6 million in non-competitive State/local grants and patient revenue
- \$2.4 Million in discretionary/competitive grants



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## 2011 Goals

### Safety & Health

# DHFS Department Goals *(adopted in 2006)*

- Improve infant and child health
- Develop healthy youth and prevent violence
- Improve teen and young adult sexual health
- Increase physical activity and healthy nutrition
- Maintain health care safety net for underserved populations
- Assure preparedness for public health emergencies – today and into the future

# DHFS Department Measures



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## Three Sources for Department Measures

- Business Plan
- Results Minneapolis
- Sustainability Indicators

# DHFS Department Measure: Infant Mortality by Race



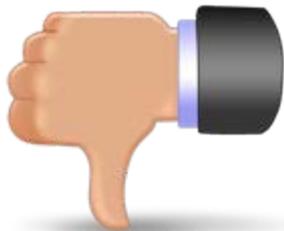
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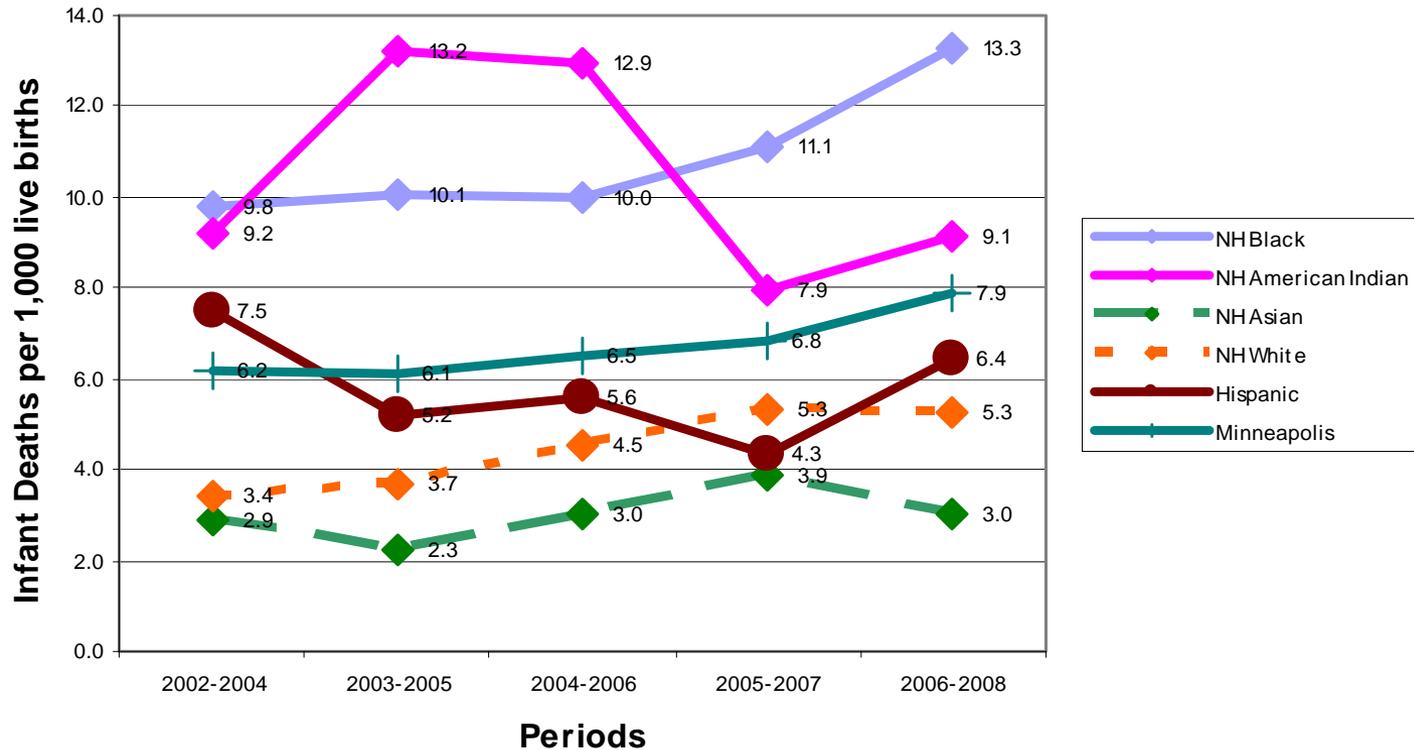
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**DHFS Goal:**  
Improve Infant  
and Child Health



**Minneapolis Infant mortality rates by race/ethnicity during  
2002-2008  
( 3 year rolling average rates)**



# DHFS Department Measure: Low Birth Rate



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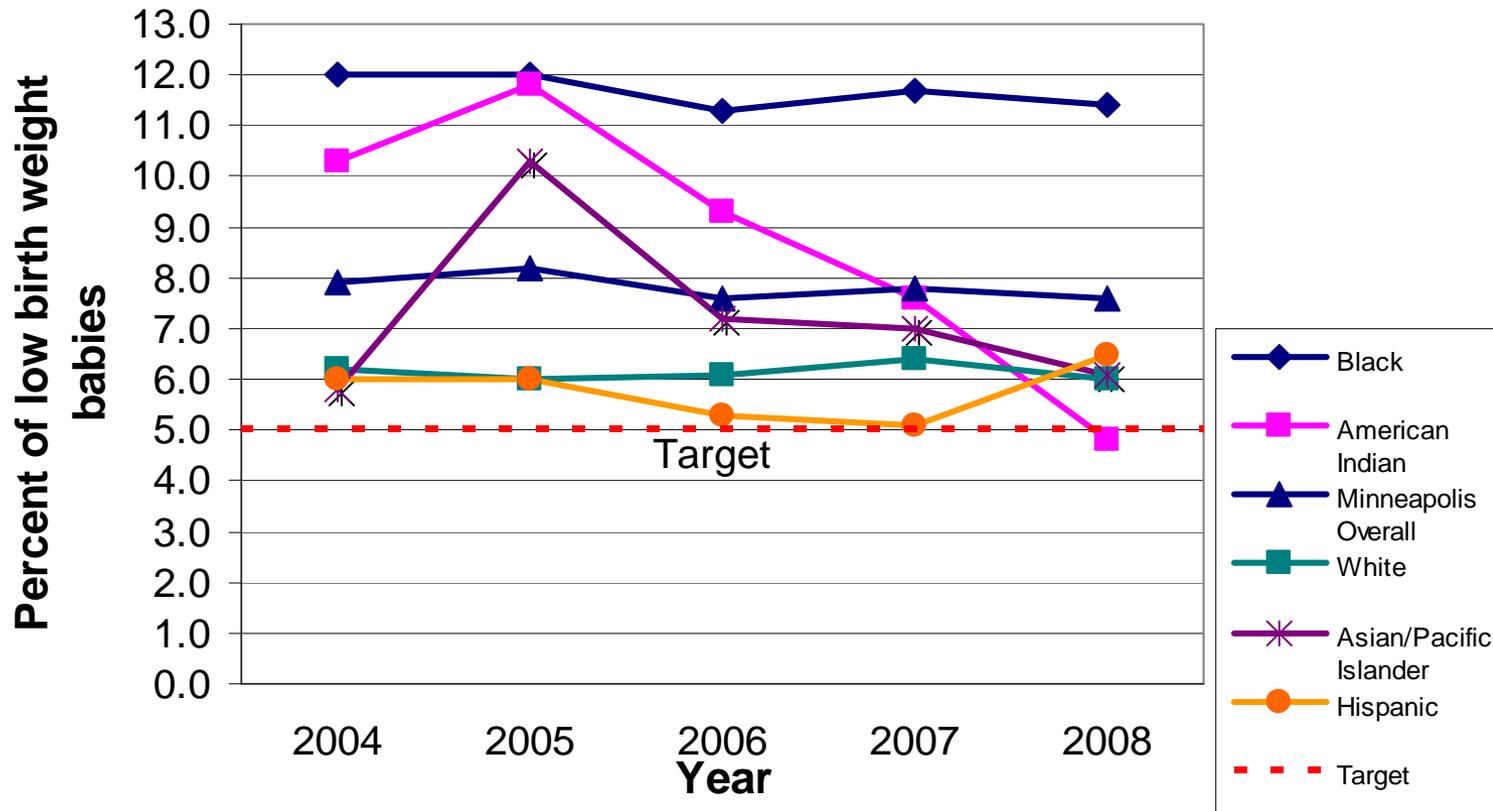
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**DHFS Goal:**  
Improve Infant  
and Child Health

## Proportion of low birth weight babies among Minneapolis residents by race/ethnicity, 2004-2008.



# DHFS Department Measure: Child Development



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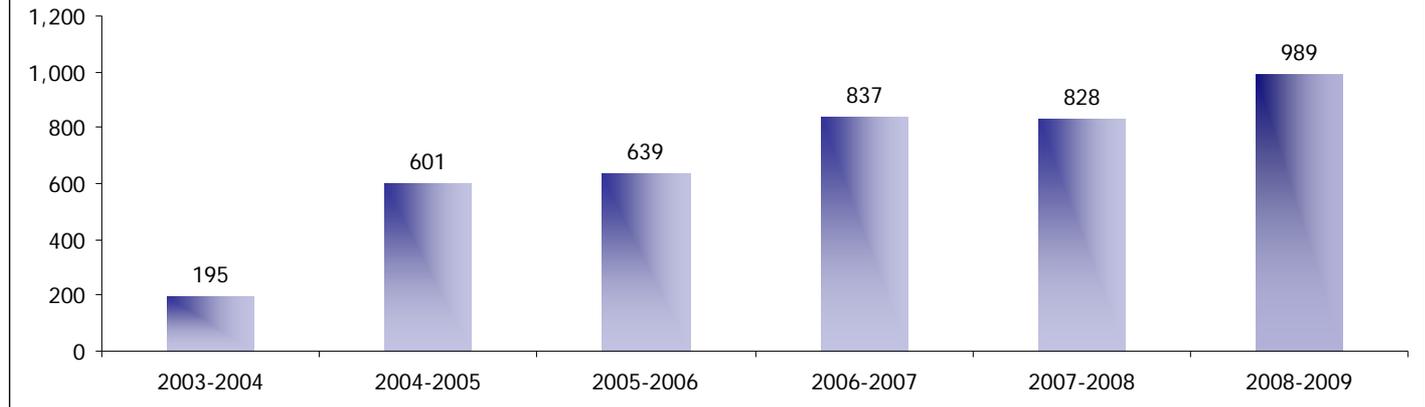
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**DHFS Goal:**  
Improve Infant  
and Child Health

Number of 3-year olds screened by Minneapolis Public Schools



# DHFS Department Measure: Lead Poisoning



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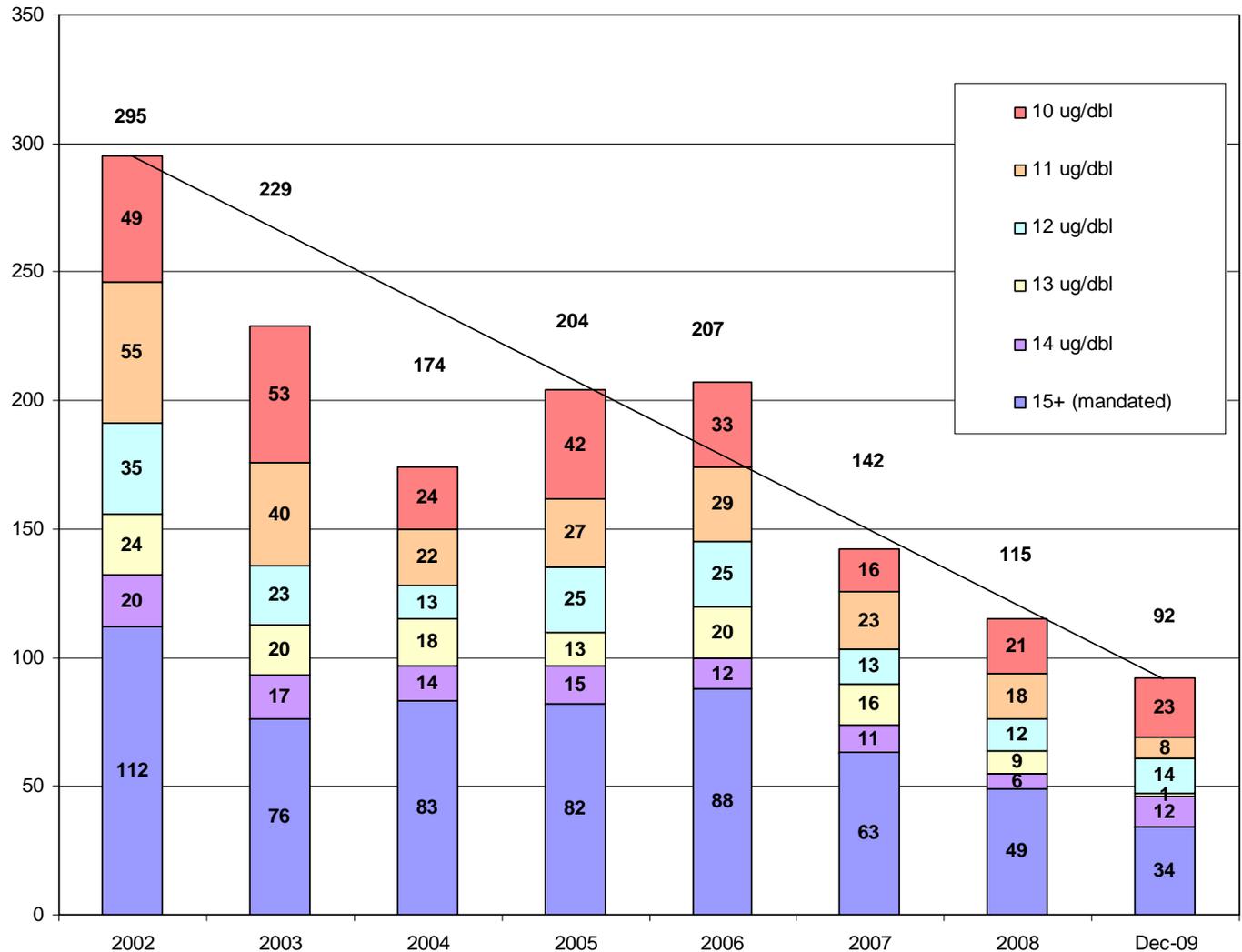
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**DHFS Goal:**  
Improve Infant  
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## Number of Lead Poisoned Children in Minneapolis





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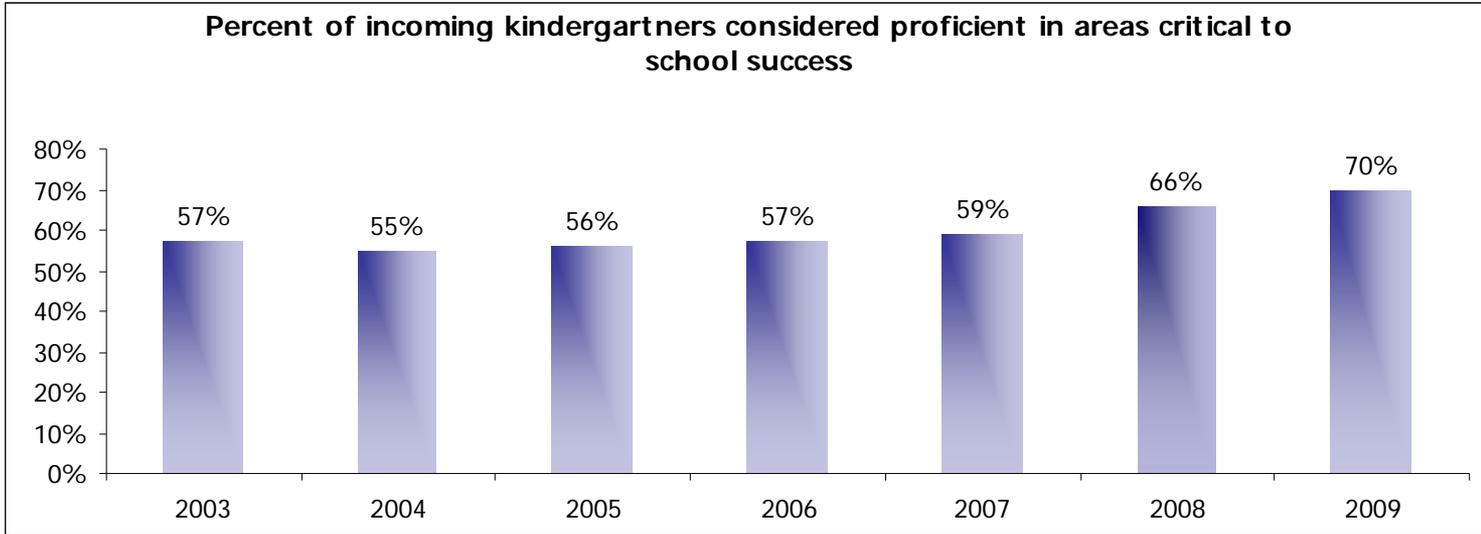
# DHFS Department Measure: Beginning Kindergarten Assessment

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**DHFS Goal:**  
Improve Infant  
and Child Health

Percent of incoming kindergartners considered proficient in areas critical to school success



# DHFS Department Measure: Youth & Young Adult Homicides



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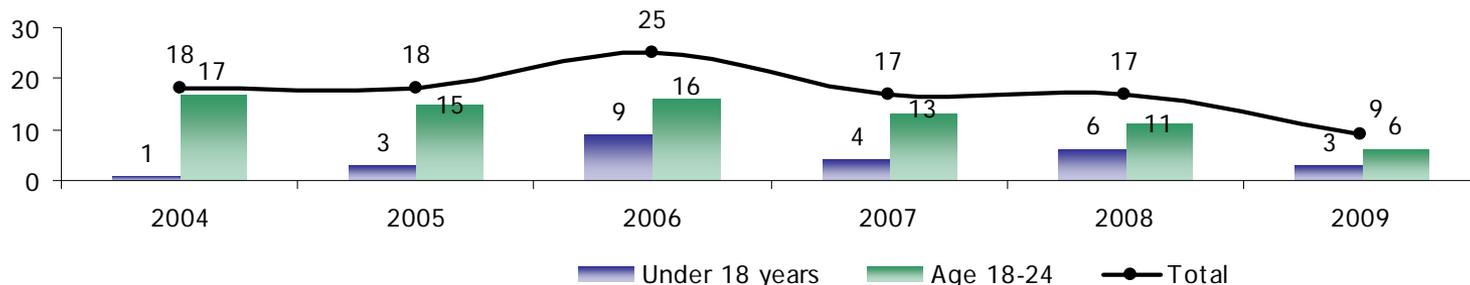
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**DHFS Goal:**  
Develop  
Healthy Youth  
and Prevent  
Violence

### Homicides occurring in Minneapolis (2004-2009)



Source: Minneapolis Police Department, 2003-2009



# DHFS Department Measure: Teen Pregnancy Rate by Race



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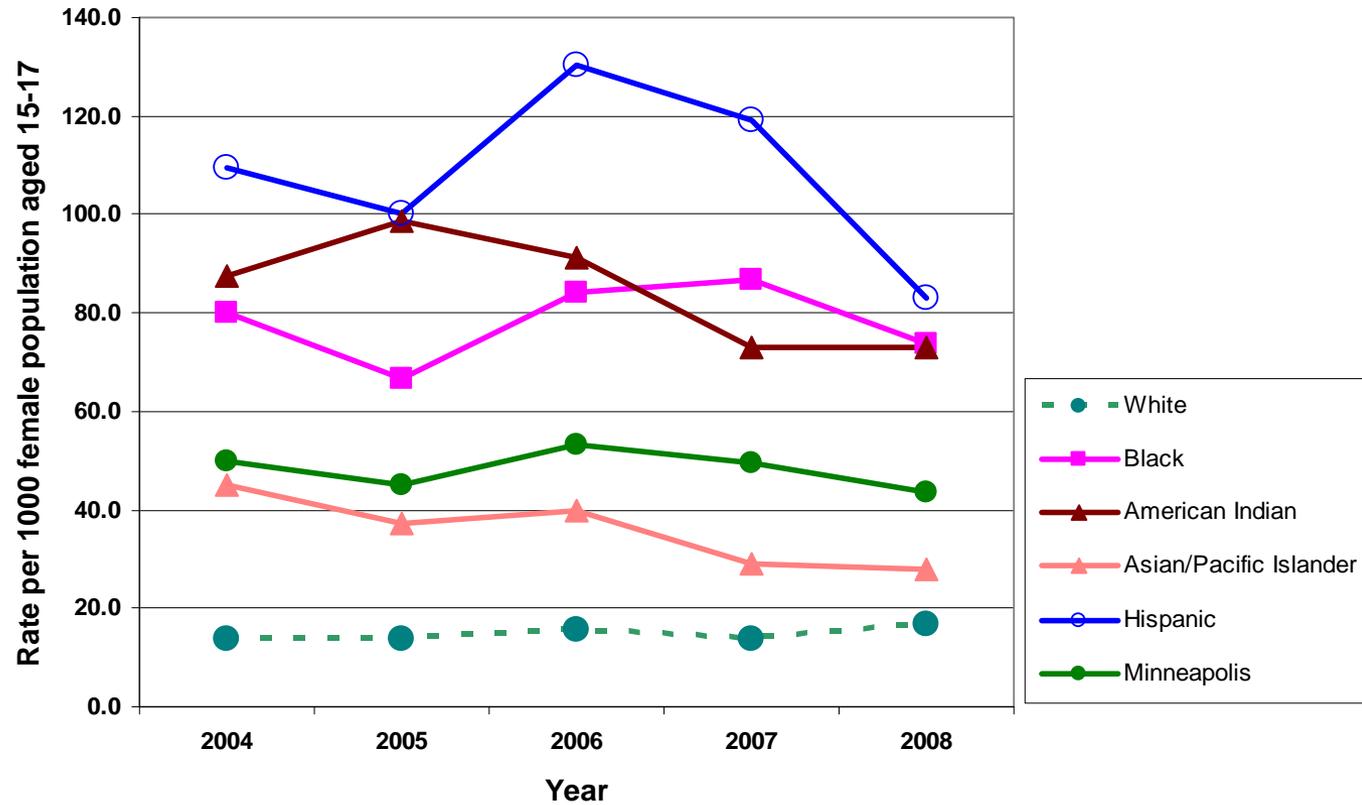
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**DHFS Goal:**  
Improve Teen  
and Young Adult  
Sexual Health



Teen Pregnancy rates among females aged 15-17 residing in Minneapolis by race/ethnicity, 2004-2008.



# DHFS Department Measure: Gonorrhea Rate by Race



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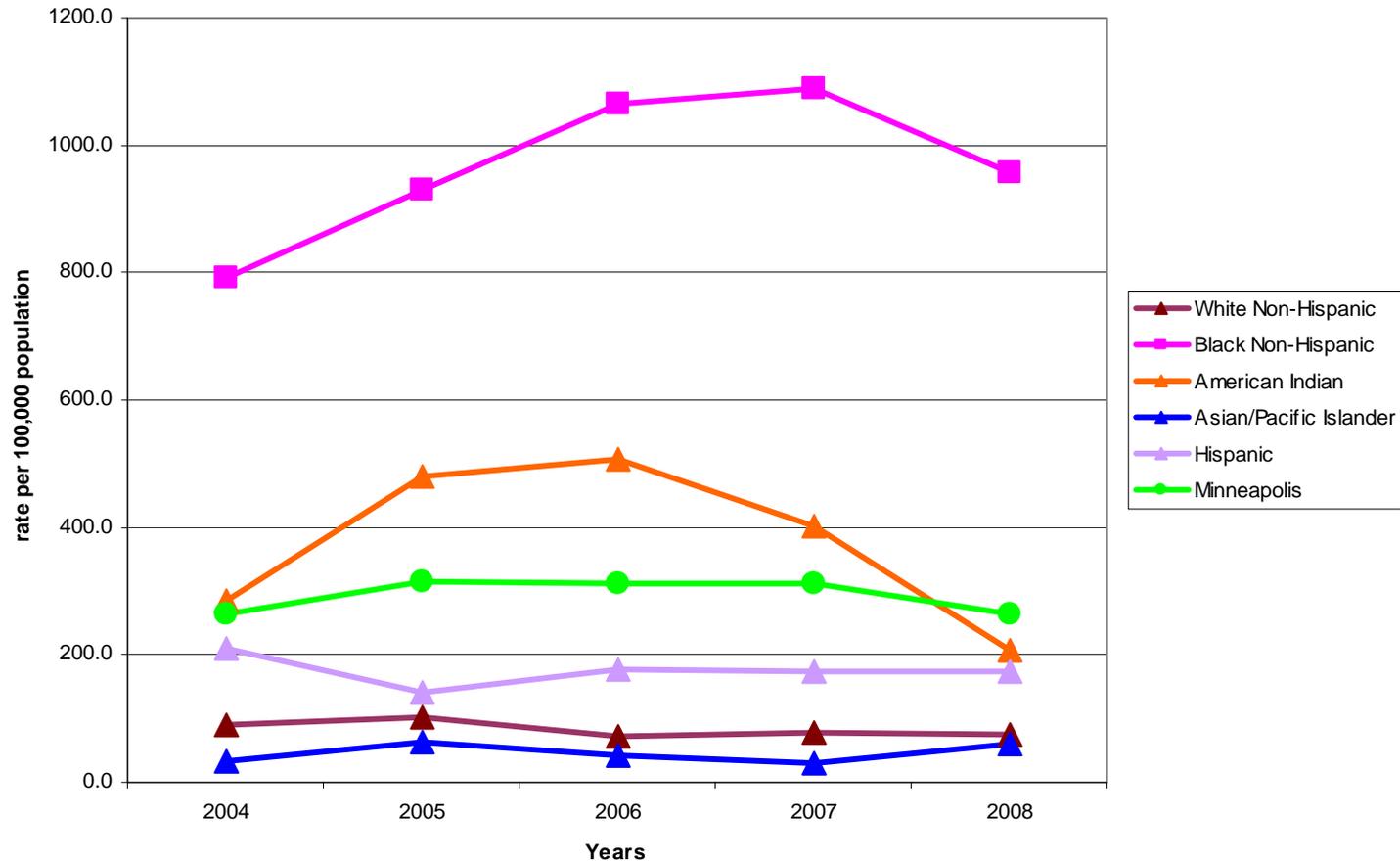
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**DHFS Goal:**  
Improve Teen  
and Young Adult  
Sexual Health

Gonorrhea rates among Minneapolis residents during the period 2003-2007 by race/ethnicity



# DHFS Department Measure: AIDS Rate



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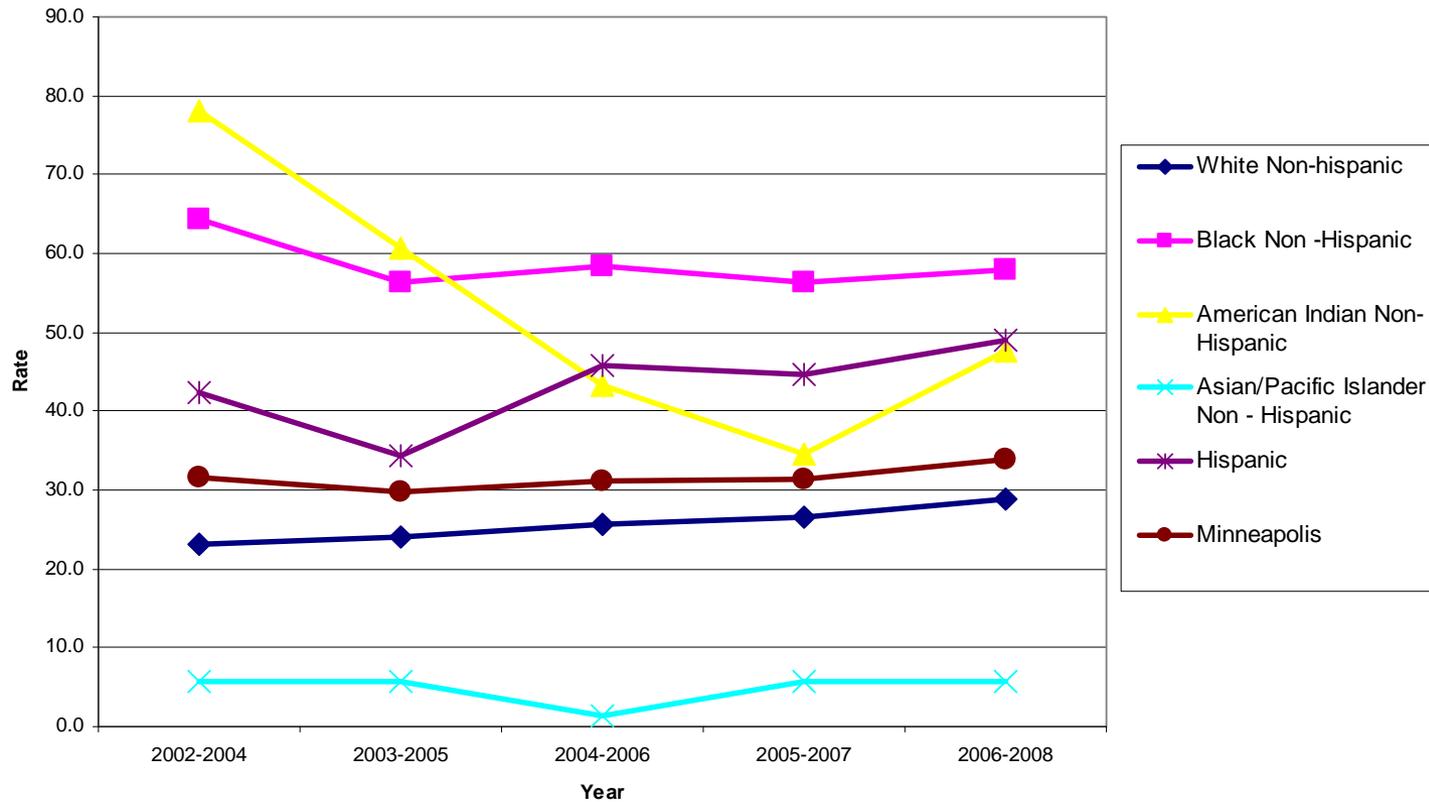
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**DHFS Goal:**  
Improve Teen  
and Young Adult  
Sexual Health

HIV Rate per 100,000 in Minneapolis, 2001-2007 (Rolling Avg)



# DHFS Department Measure: Healthy Weight



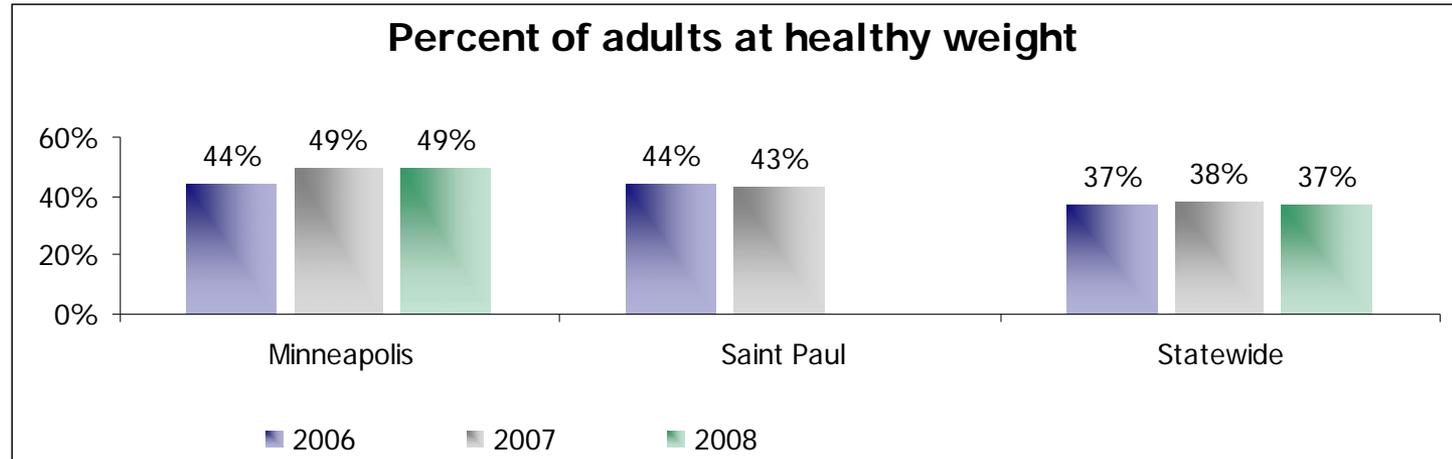
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**DHFS Goal:**  
Increase  
Physical Activity  
and  
Healthy Nutrition



# DHFS Department Measure: Emergency Preparedness



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- Partnerships with 35 community-based agencies for emergency planning
- 44 community agencies have completed mini-grant funded emergency continuity of operations plans
- Memoranda of Understanding with 6 key community agencies

## DHFS Goal:

Assure  
Preparedness for  
Public Health  
Emergencies –  
Today and into  
the Future



# DHFS Department Measure: Adult Smoking Rates



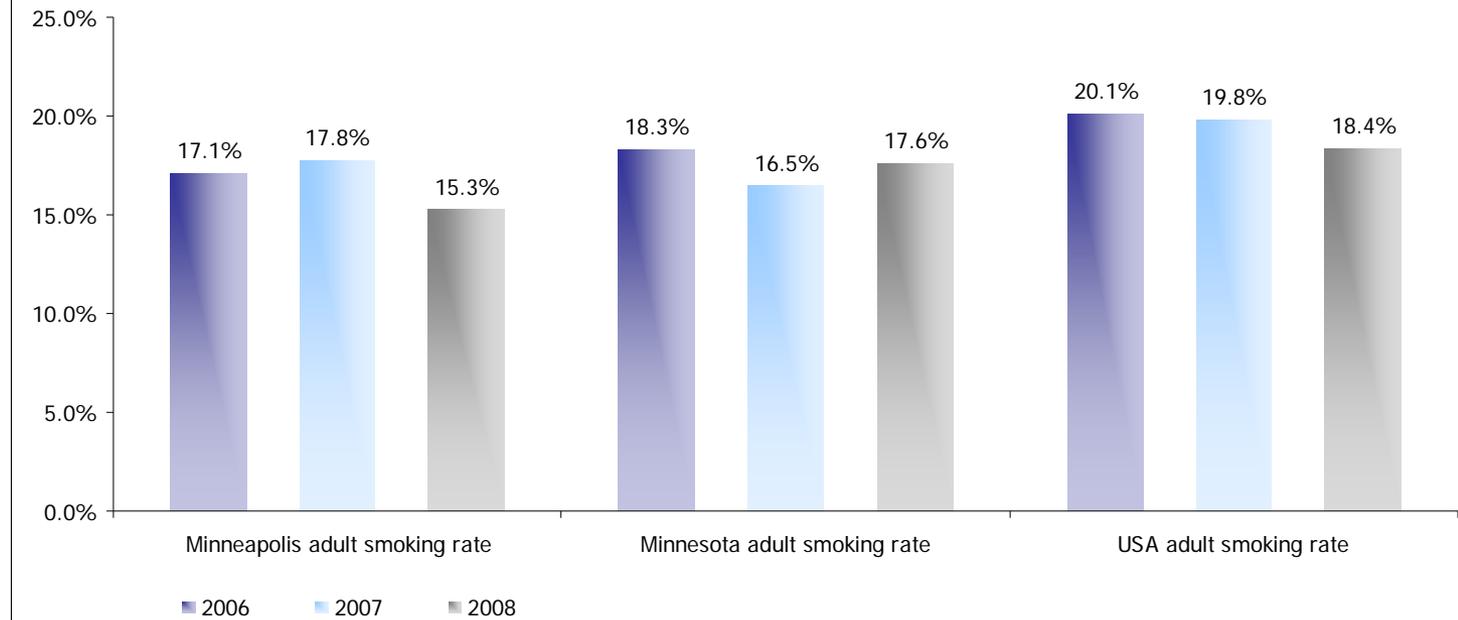
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Minneapolis adult smoking rate compared to Minnesota and national averages



# DHFS Department Measure: Asthma Hospitalization Rates



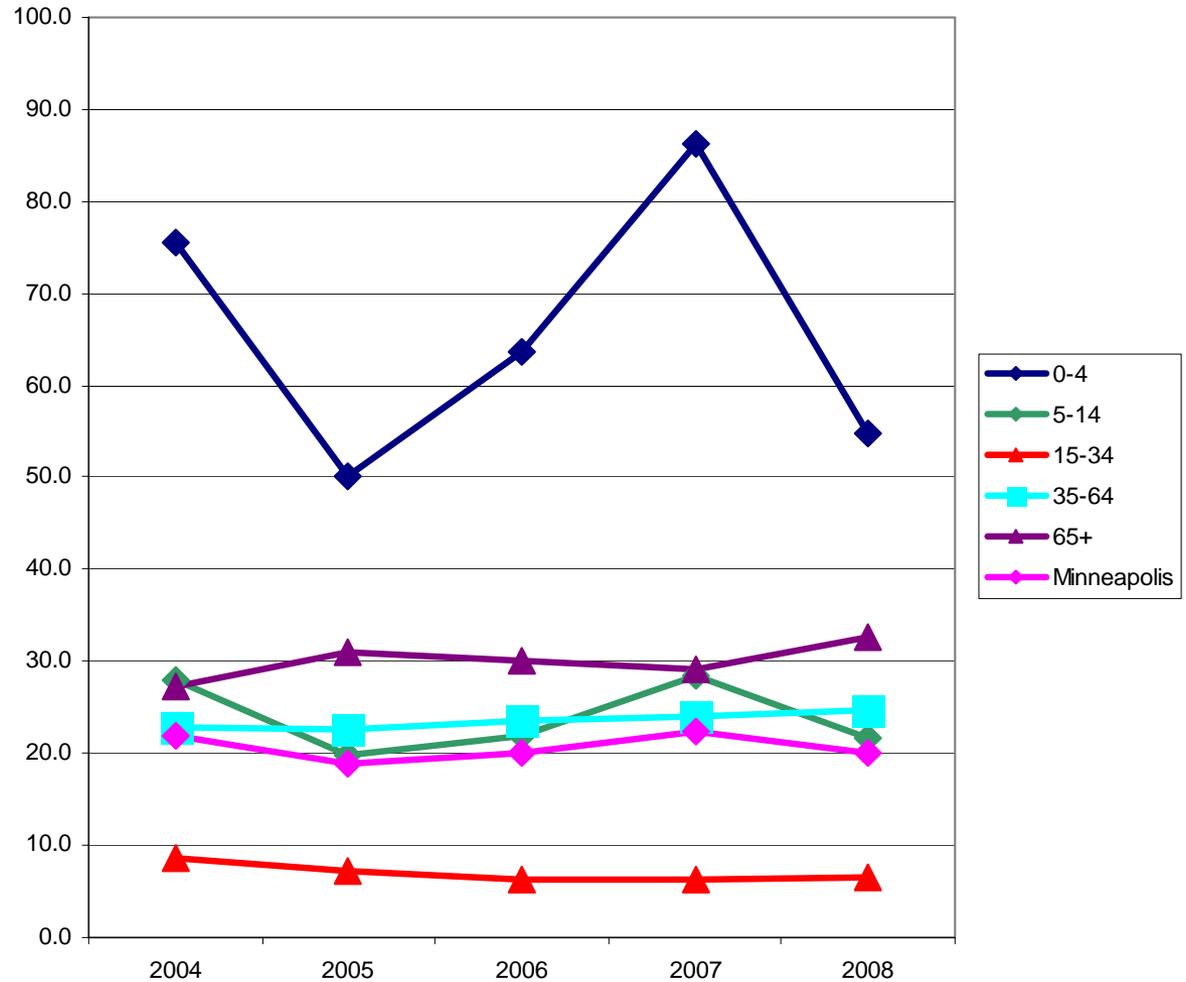
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Asthma Hospitalization rates among Minneapolis residents by age groups  
during 2004 -2008



# Extensive Community Input



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## Methods include

- Storytelling sessions, listening circles and focus groups
- Advisory and stakeholder group meetings
- Community forums
- Key informant interviews and surveys

# Extensive Community Input



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Themes that arise consistently include:

- All youth need connections to activities and positive role models.
- Everyone needs to work together to institute healthy eating and increase activity.
- Programs and activities should be designed for families.
- Extended social networks and interactions promote health.
- Racial/cultural pride and maintaining cultural traditions are integral to health.
- Include members of target populations in program design.
- Capacity building is critically important.
- Emphasis on hope and future.
- Individuals & groups have assets & resilience despite hardships.