Overall health of Hennepin County adults

Highlights

- In 2006, 89.7% of Hennepin County adults (aged 18 and older) rated their overall health as good, very good or excellent, while 10.3% rated their overall health as poor or fair.
- The rate of reporting poor or fair health in 2006 increased from what was reported in 1998 (10.3% vs. 8.0%).
- The average number of unhealthy days reported by Hennepin County adults during the past 30 days was 5.9. The average number of days varied across age groups and by gender.
- Residents with disadvantaged social conditions reported a disproportionately higher number of unhealthy days.

Introduction

This briefing summarizes major findings on the overall health status of adults using Health-Related Quality of Life measures from SHAPE 2006. SHAPE 2006 is the third in a series of nationally recognized surveys collecting information on the health of Hennepin County residents and factors that affect it. More than 10,000 households in the county participated in the SHAPE 2006 survey, providing information on 8,000 adults and 4,000 children.1

Background

SHAPE 2006 - Adult Survey included a standard set of Health-Related Quality of Life (HRQOL) measures. The Centers for Disease Control and Prevention developed these measures to track health trends at the state and national level. These measures help monitor progress in achieving two overall national health goals for Healthy People 2010: increasing the quality and years of healthy life; and eliminating health disparities.2

In this briefing, we summarize major findings for Hennepin County adults using the following HRQOL measures:

- **Percentage reporting poor or fair health**– percentage of adults reporting that their overall health was either poor or fair.
- **Average number of unhealthy days during the past 30 days**- average number of days that adults reported their physical health or mental health was not good during the past 30 days.

The great majority of Hennepin County adults enjoy good health

Overall, the great majority of county adults enjoy good health (see Figure 1). Nine in ten adults reported good to excellent health, and the others (10.3%) reported poor or fair health.
Adults in Hennepin County reported a significantly lower rate of poor or fair health than their peers at the national level (10.3% vs. 14.7%). Hennepin County’s rate of reporting poor or fair health in 2006 was very similar to the rate for all adults in Minnesota during the same year (10.8% and 10.3% respectively) (see Figure 2).4

There was a small, yet statistically significant, increase in the rate of Hennepin County adults reporting poor or fair health since 1998 (8.0% in 1998 compared to 10.3% in 2006) (see Figure 2).5 This increase can be partially explained by the aging of the county’s population between 1998 and 2006. A similar increase in reporting poor or fair health was also observed at the state and the national levels.

Good health is not equally enjoyed by all adults across Hennepin County

Overall health status varies by age, gender and geographic location.

The average number of unhealthy days reported by Hennepin County adults during the past 30 days was 5.9; the average number was higher among women (6.8 days) than among men (5.0 days).

Older county residents tended to report better mental health, but had poorer physical health than their younger counterparts (see Figure 3).
The percentage of Hennepin County adults reporting *poor* or *fair* health across 10 geographic subareas shows a large variation, ranging from 21.0% for adults living in North Minneapolis to 6.6% among adults living in the Northwestern outer ring suburbs.

Adults from the City of Minneapolis and inner ring suburbs reported higher rates of *poor* or *fair* health than did adults from the outer ring suburbs (see Figure 4).

Over one in ten (13.1%) Minneapolis adults reported *poor* or *fair* health, while the rate for suburban Hennepin County was 8.8%.

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**Social conditions matter:**

Residents with disadvantaged social conditions report a disproportionately higher rate of poor health

Social conditions — whether measured by educational attainment, household income, health care access, food insecurity, discrimination, or neighborhood safety — matter when monitoring residents’ health.

The number of unhealthy days reported by Hennepin County residents was inversely related to the adult's education level and household income (see Figure 5). Residents without a high school education reported almost twice as many unhealthy days during the past 30 days as residents who completed a college education (8.6 days vs. 4.5 days).

Residents from households with income under 100% of the federal poverty level (FPL) also reported nearly twice as many unhealthy days during the past 30 days as residents living at a household income at or above 200% of the FPL (9.5 days vs. 5.3 days).  

**Figure 4.** Percent reporting *poor* or *fair* health by geographic area, Hennepin County adults, 2006

**Figure 5.** Average number of *unhealthy* days during the past 30 days by education and income, Hennepin County adults, 2006

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As demonstrated in Figure 6, SHAPE 2006 data indicate that residents who have experienced discrimination reported twice as many unhealthy days during the past 30 days as residents who have not experienced discrimination (10.0 days vs. 5.2 days).

Similarly, SHAPE 2006 data also show that residents who are uninsured, who worry about having adequate food on their table, or who feel that the neighborhood is unsafe for their children also reported a significantly higher average number of unhealthy days during the past 30 days than those who do not.

**Acknowledgments**

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**For More Information**

SHAPE 2006 is a collaborative project between the Hennepin County Human Services and Public Health Department and the University of Minnesota School of Public Health.

For more information on this Briefing or other topics related to the SHAPE project, or to receive this information in an alternate format, contact SHAPE@co.hennepin.mn.us or 612-348-6150.

www.co.hennepin.mn.us
Search keyword: SHAPE2006

**Notes:**


4. Minnesota and Nationwide HRQOL data all from Behavioral Risk Factor Surveillance System(BRFSS) by CDC. HRQOL data from 2006 was provided by CDC National Center for Chronic Disease Prevention & Health Promotion (per communication with Mairity & Zack, May 24, 2007). Annual trend data nationwide or by state 1993-2005 was accessed at: www.cdc.gov/hrqol.


* Difference in rates between the two groups is statistically significant at p < 0.05. SOURCE: SHAPE 2006