



HENNEPIN COUNTY  
MINNESOTA

# SHAPE 2018: Early findings

June, 2019

# SHAPE: Survey of Health of All the Population and the Environment

- Longstanding Public Health project, since 1998
  - Adheres to best practices in population health surveillance - Centers for Disease Control and Prevention and Minnesota Dept of Health
- Innovation a key tenet of SHAPE
  - Current challenges in survey research led to 2018 innovations
- Provides most detailed local data about the health of Hennepin County adults
  - One of several data sources in Public Health

# SHAPE: Examples of use HHS

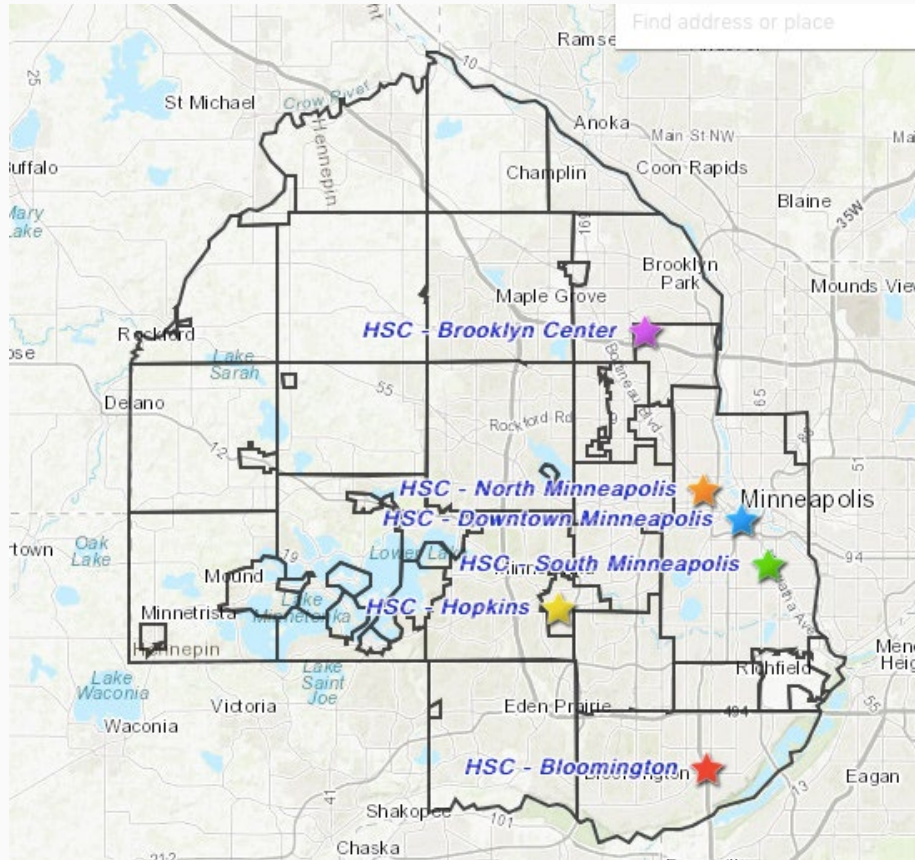
- North Point HRSA needs assessment, grant proposals
- Data source for Hennepin Healthcare Community Health Needs Assessment
- Tobacco control efforts
  - 2007 Freedom to Breathe Act and current work around multi-unit housing and smoke-free policy
- Numerous grant proposals internally and externally

# What we did, how we did it, and who we reached

# SHAPE 2018: What we did

- Traditional mailed survey
  - 40,000 households
  - Sampled based on characteristics of populations within census tracts
  - 9,783 surveys received by mail; response rate: 23.7%
- In person survey
  - Collaboration key to strategy

# Human Service Center data collection



# North Point Health and Wellness





# Office of Multicultural Services



# Overcoming the unexpected

Identifying clients experiencing homelessness

Many surveys completed in Spanish/Somali

Number and variety of language support needed

Rapid data collection and coordinating staff/volunteers



# Who we reached

# Enhanced mail survey + in person strategy:

- Improved number of young adult respondents – reportable in 2018!
- Improved representation of populations of color and American Indians
  - Reportable in 2018! Respondents identifying as foreign-born black, southeast Asian, American Indian
- Improved representation of respondents with limited English proficiency
  - 281 surveys completed in Spanish; nearly 100 in Somali; dozens in other languages
- Reached 12,000+ Hennepin County residents

# Enhanced mail survey + in person strategy:

- Reached 3,300+ in person
- 2,700+ provided address
  - 219 identified as homeless
- Participants from the HSCs replaced households that did not complete the mailed survey, and live nearest to them
  - 205 matched exactly
  - 840+ matched at the building
  - 1200+ matched within 200m

# Example of what we learned



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# Considering SHAPE results

- Results demonstrate inequities in access to and opportunities for health among Hennepin County residents
- SHAPE is one tool to identify disparities and ground our collective understanding of health in our community to advance equity
- Putting meaning to results requires stakeholder and community input



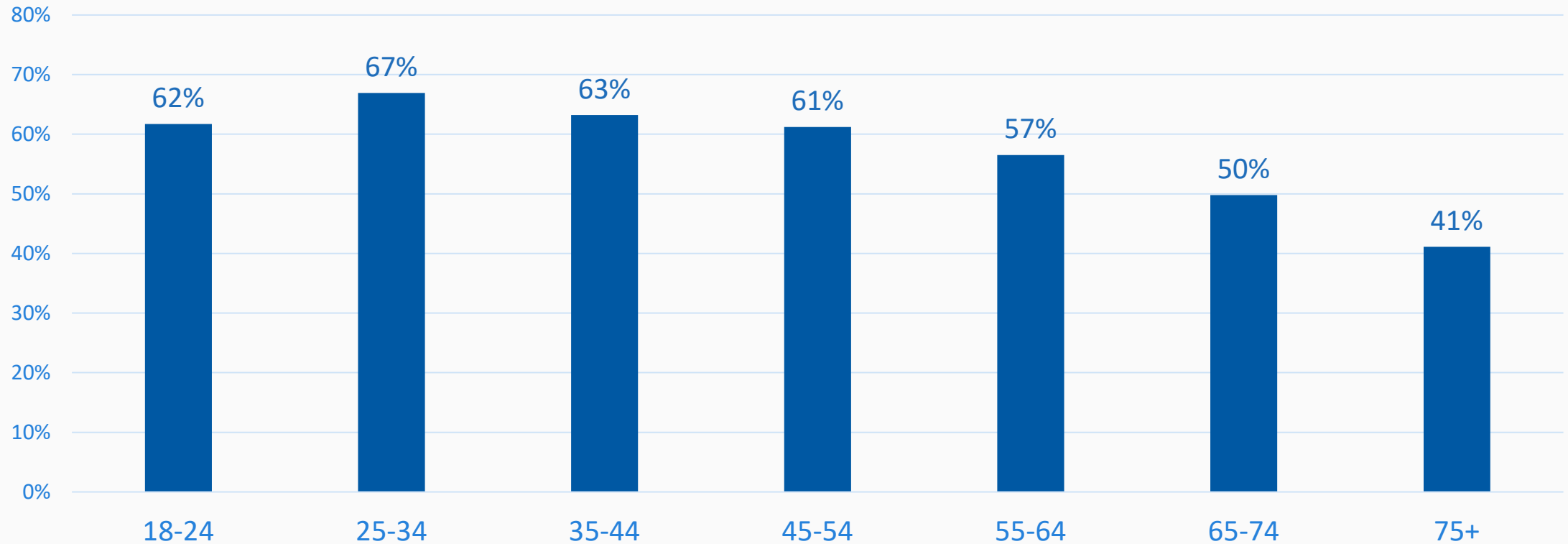
# SHAPE limitations

- Selection bias
  - People who participate in surveys may be different from those who do not
- Information/measurement bias
  - Self-reported data
  - Method changes over time
    - Impact on trending



# Health

% who self-report very good or excellent health by age



SHAPE 2018: selected findings

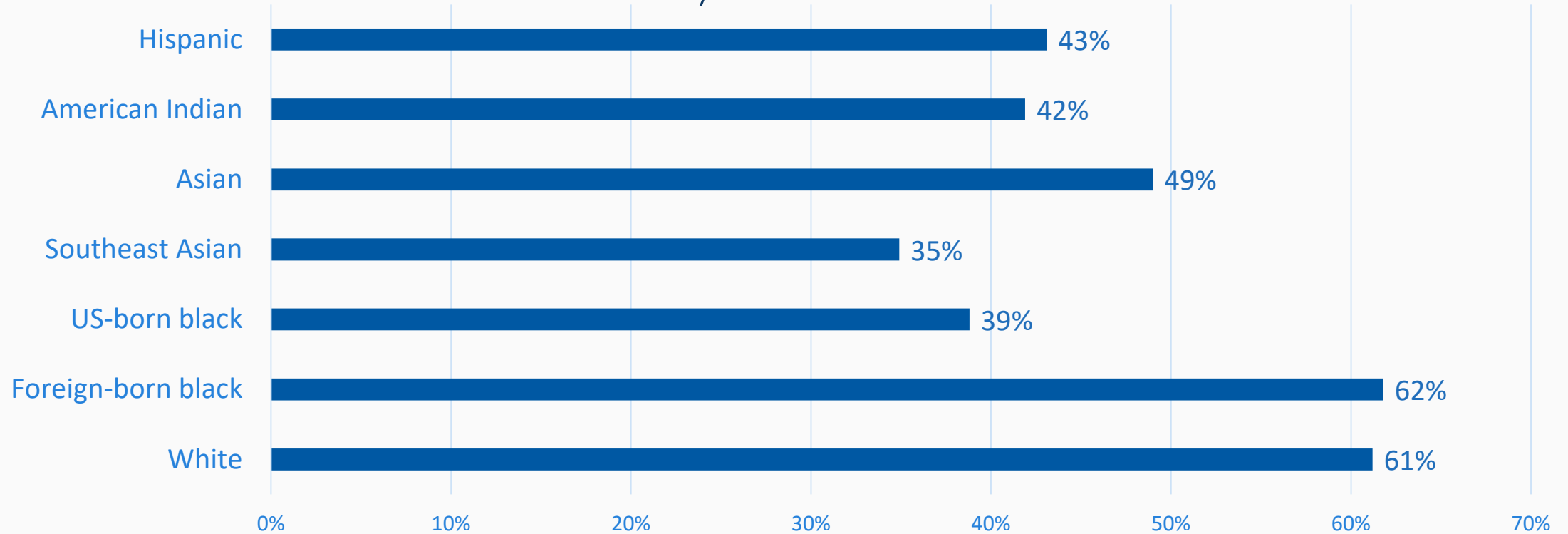
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# Health

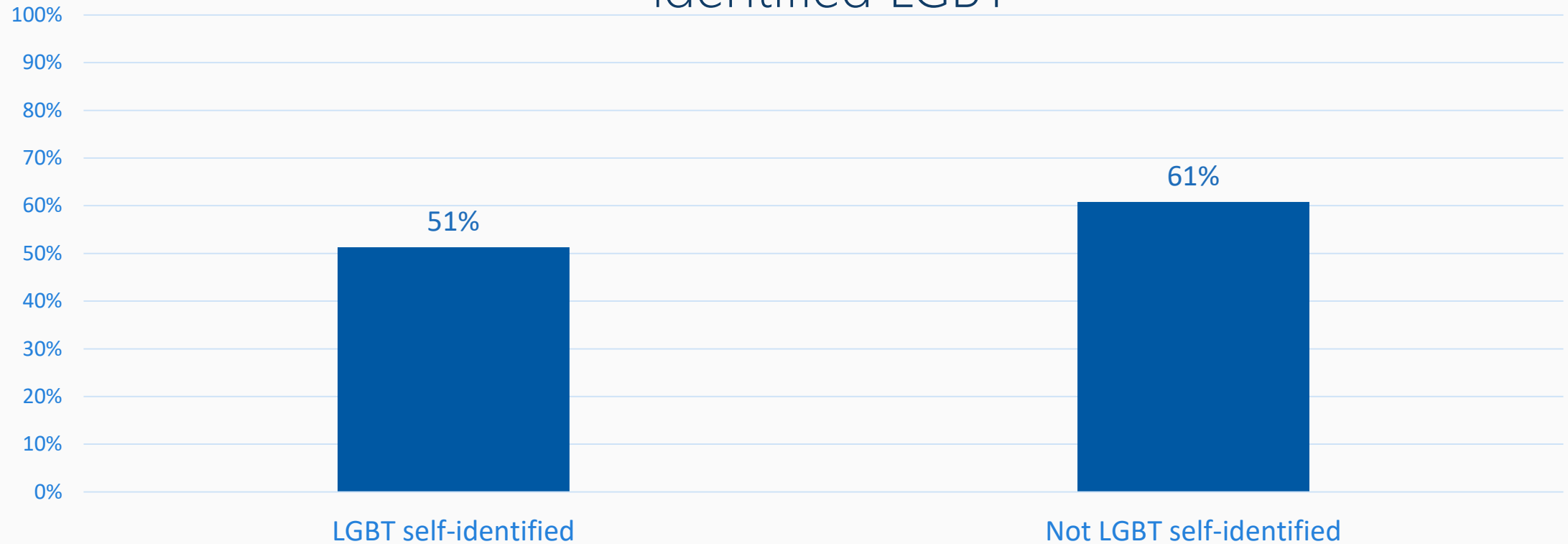
% who self-report very good or excellent health by selected race/ethnicities





# Health

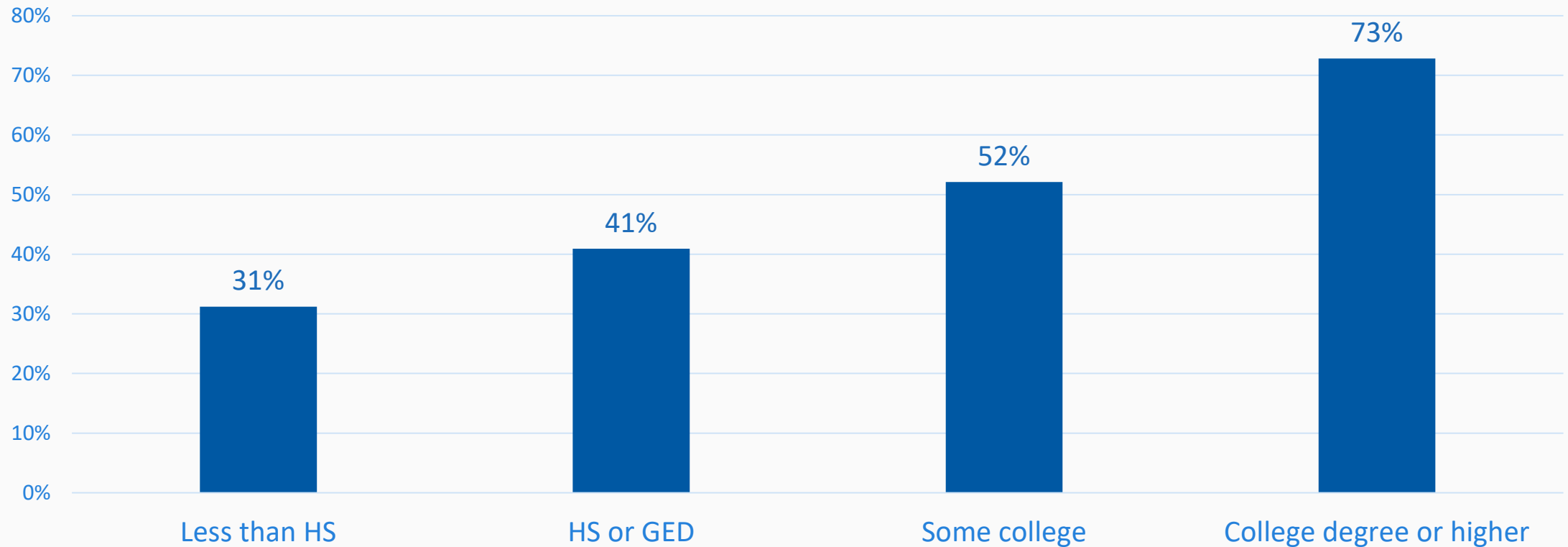
% who self-report very good or excellent health by self-identified LGBT





# Education

% who self-report very good or excellent health by education



SHAPE 2018: selected findings

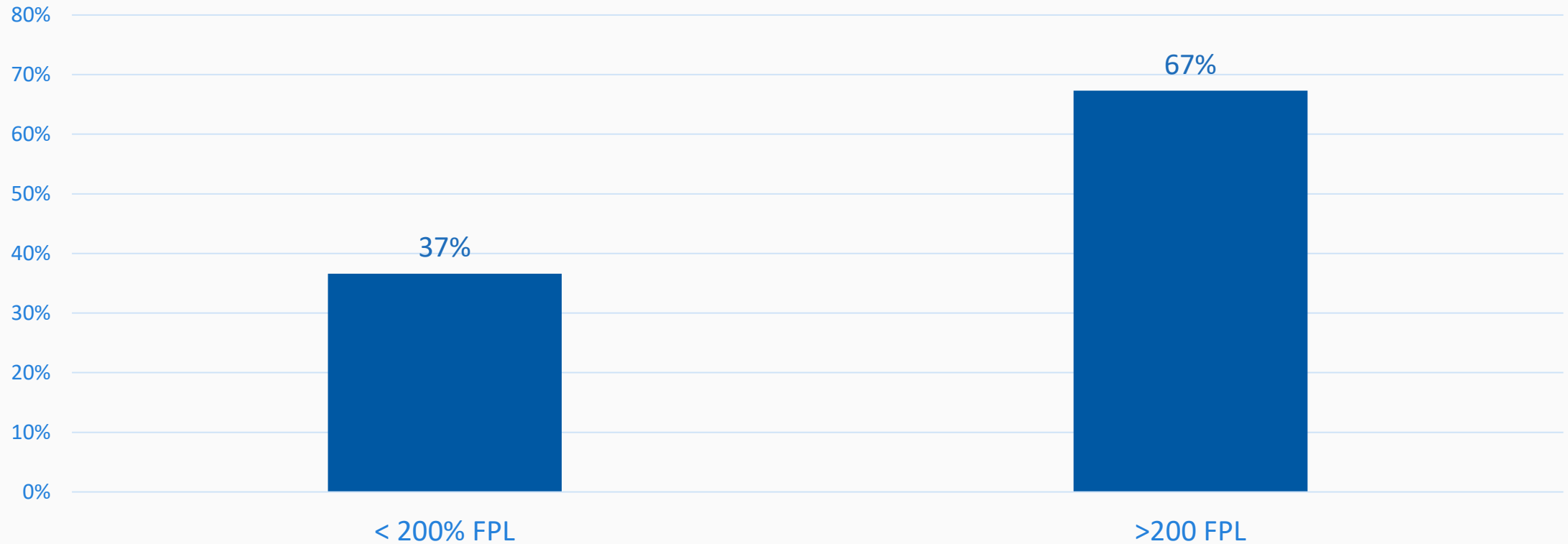
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# Income

% who self-report very good or excellent health by income



SHAPE 2018: selected findings

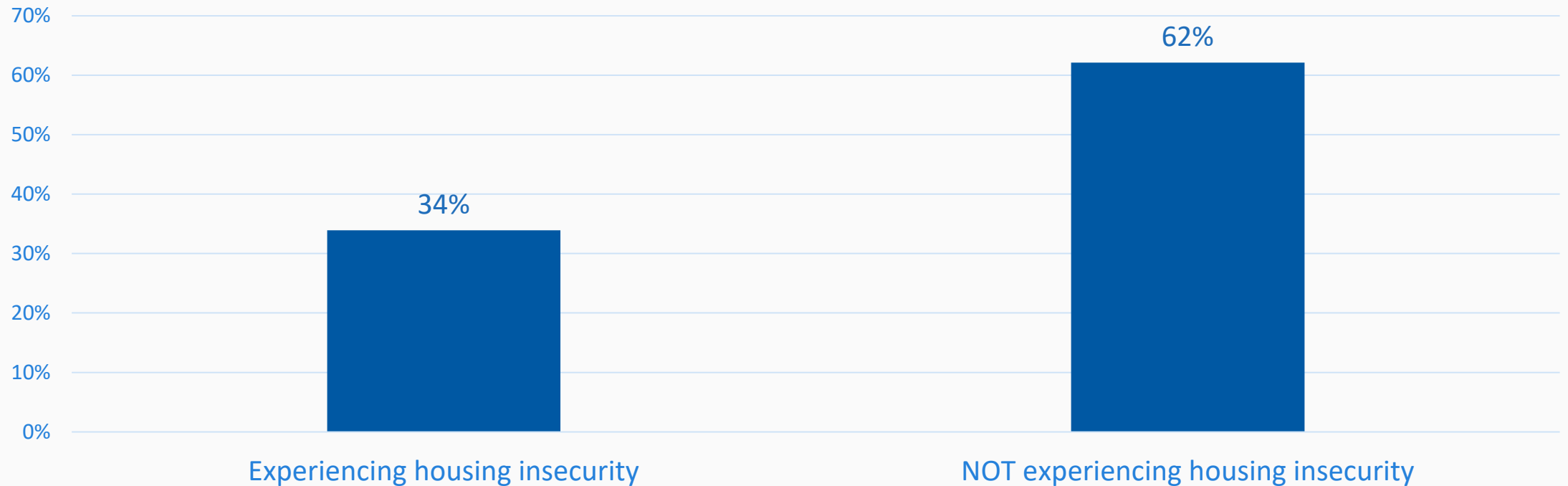
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# Housing

% who self-report very good or excellent health by housing security



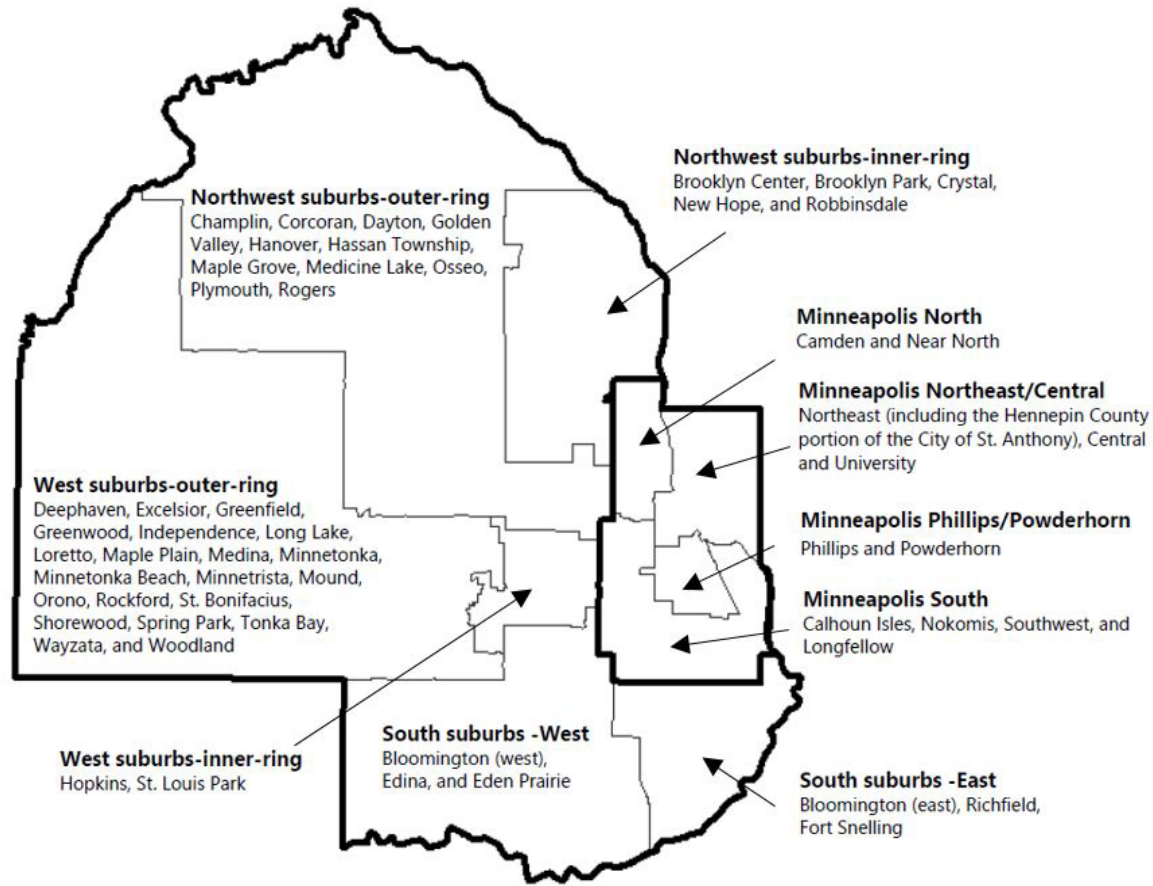
SHAPE 2018: selected findings

Hennepin County





# Community of residence



GIS:  
Coming  
soon!

SHAPE 2018: selected findings

Hennepin County





# SHAPE topics

- Health status and chronic health conditions
- Access to and use of health care
- Mental health needs and use of health care
- Lifestyle behaviors

# Next steps

# Analysis and reports

- Representative sample databook
- Topic and population-specific reports (e.g. LGBT; mental health focused; social connectedness)
- Maps and other geographic analyses
- Community presentations and discussions (e.g. collaboration with libraries)
- Trend report
- Additional reports and analyses on request

# New client-level analysis and reports

- Overall HS client population and by HSC
- North Point client report
- OMS client report
- Topic and population-specific reports (e.g. clients experiencing homeless)

# Discussion questions

- How can SHAPE 2018 findings support or inform your work?
- How can SHAPE 2018 support county initiatives such as Disparities Reduction, Community Engagement, etc?
- What other groups should we engage as we communicate results to stakeholders?
- What additional topic or population-specific analyses/reports to prioritize?

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