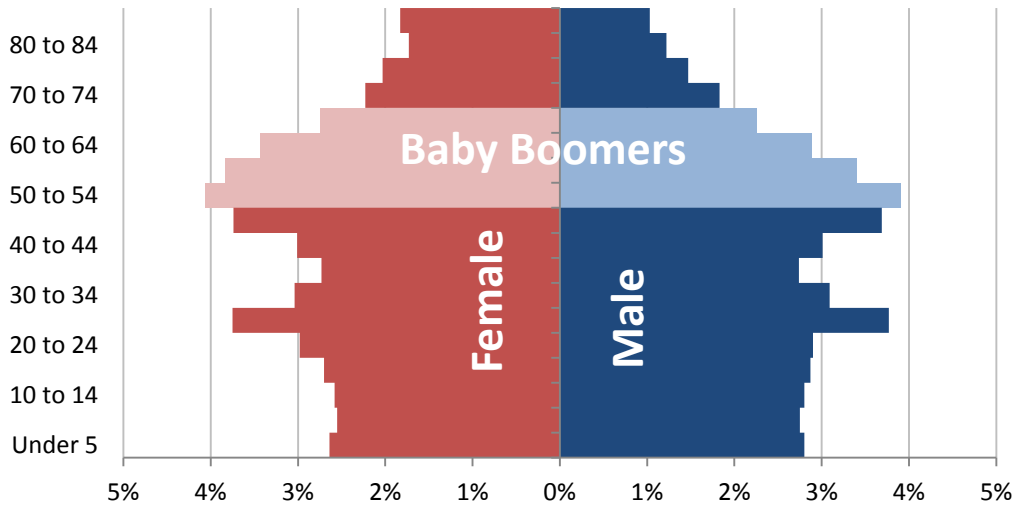


## Bloomington Health Fast Facts February 2014

### Demographics and Social Determinants of Health

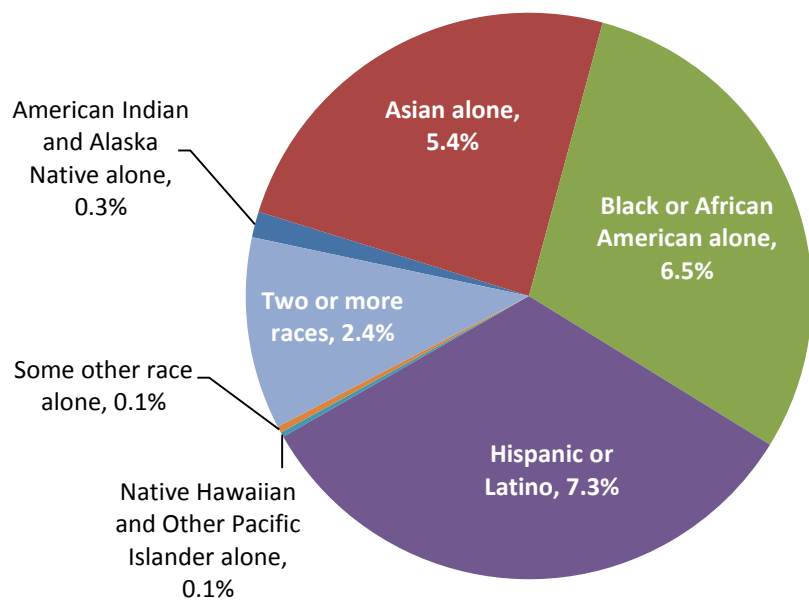
Bloomington’s overall population is expected to grow from its current 82,893 people (2010 Census) to over 93,000 in 2040, according to the Metropolitan Council estimates. The baby boomer generation is reaching retirement age and will create a growing need for health resources. (U.S. Census Bureau, 2010 Census; Metropolitan Council, 2014)



### Diversity

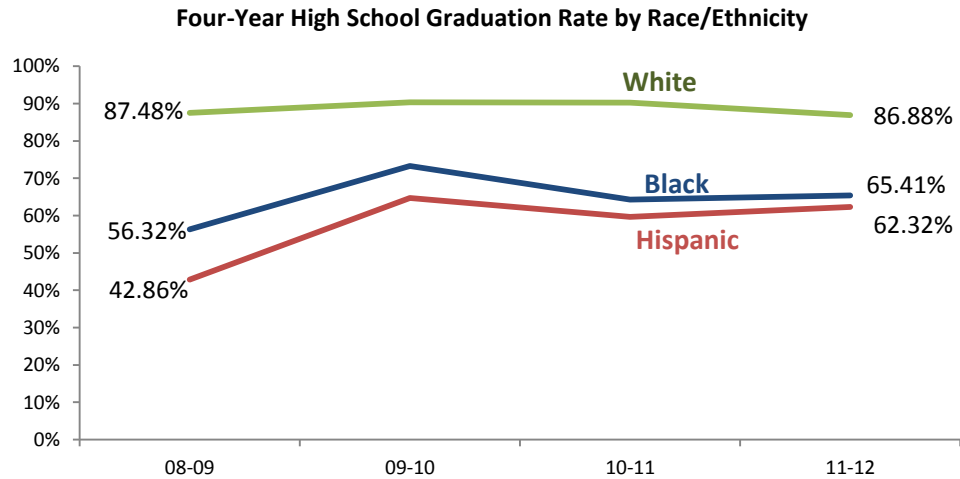
Bloomington’s minority populations makes up 22% of the total population and is well represented among the upcoming younger populations, with nearly 39% of Hispanic or Latino residents and 34% of Black or African-Americans under 18 years old. This is in comparison to an aging White population, 22% of whom are 65 years of age or older. (U.S. Census Bureau, American Community Survey)

**Bloomington Minority Population (2012)**



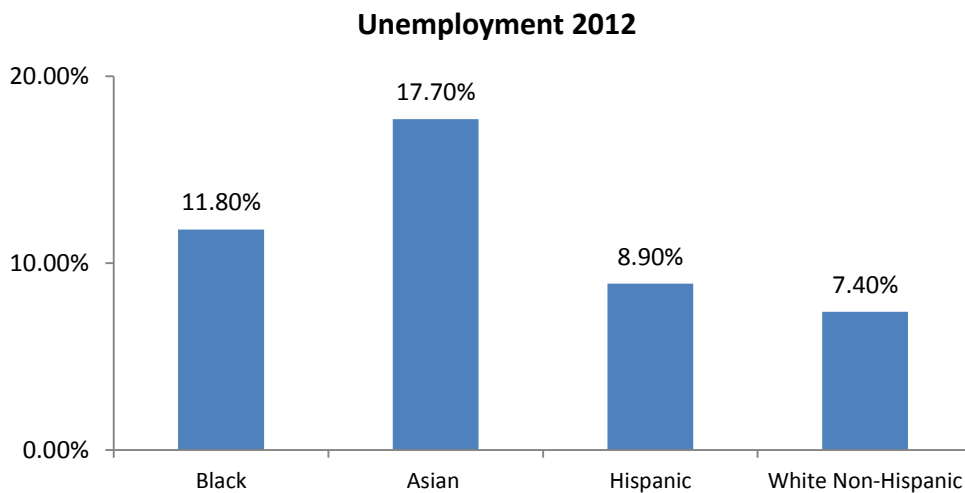
## Education

In 2012, the 4-year graduation rate for Bloomington Schools was 80.6%, down 3.6% from 2011. The State graduation rate in 2012 was 76%. Graduation disparities exist by race, ethnicity and household income. High school graduation is a key indicator of future health. (Minnesota Department of Education, 2013)



## Unemployment

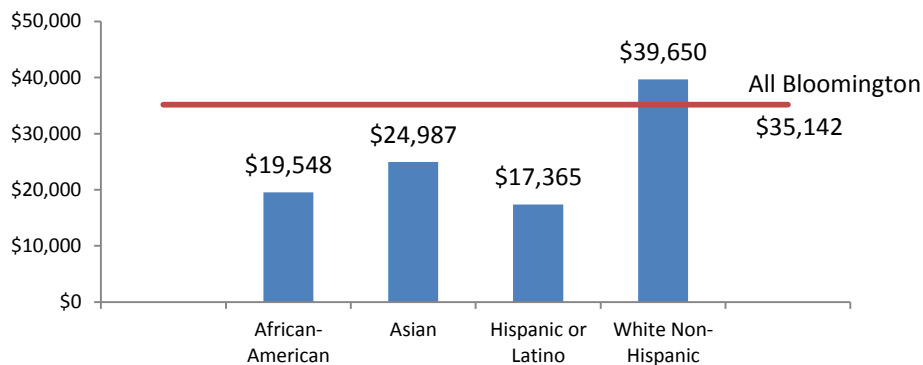
In 2012, those with less than a high school diploma had a 15% unemployment rate compared to 10% unemployment among those with a high school diploma as their highest educational attainment. Additional disparities are seen by race and ethnicity, with whites having the lowest unemployment rate. (U.S. Census Bureau, American Community Survey 2010-2012)



## Income

In 2012, the average annual per capita income in Bloomington was approximately \$35,000, slightly above the Minnesota average of \$30,000. Whites in Bloomington made on average about twice as much as the average income of minorities. Large disparities in income can set the stage for subsequent social conditions and health access which may affect the health of residents. (U.S. Census Bureau, American Community Survey 2008-2012)

**Per Capita Income 2012**

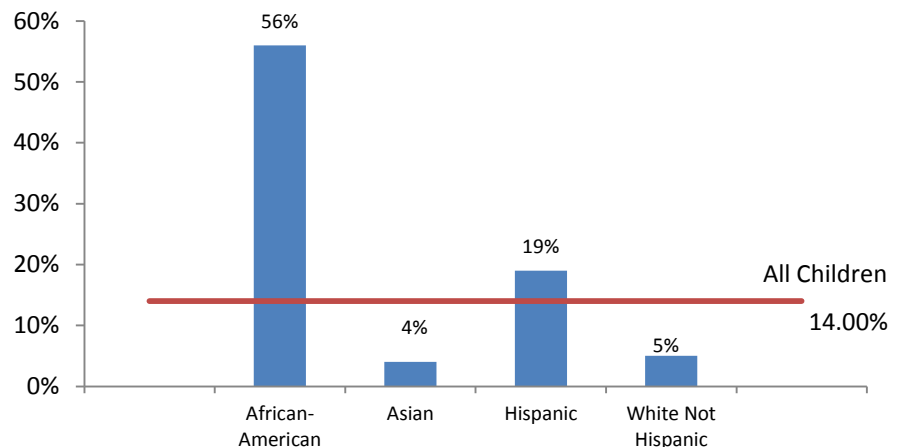


## Poverty

In Bloomington, 14% of all children live at or below the Federal Poverty Line, the same as Minnesota a whole. Poverty rates are four to five times higher among Hispanic families and African American Families than among Whites in Bloomington.

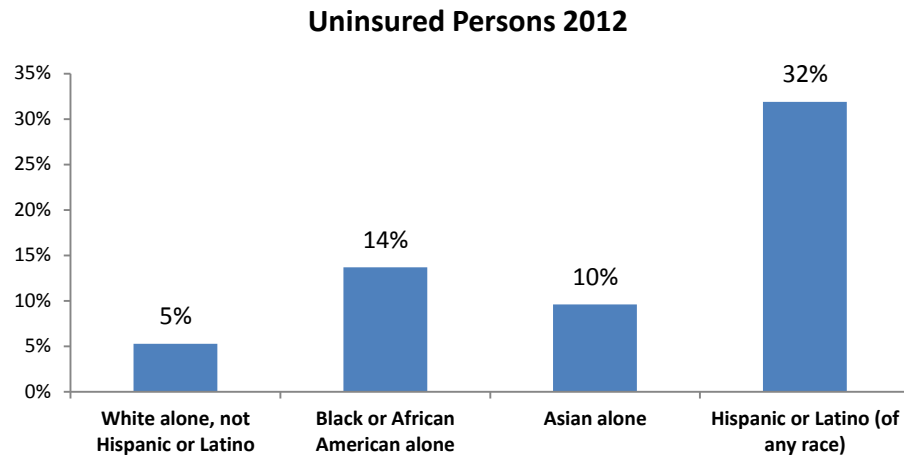
The poverty rate is 34% higher for families where only a female guardian is present compared with those with two married parents. (U.S. Census Bureau, American Community Survey 2008-2012)

**Children Living in Poverty 2012**



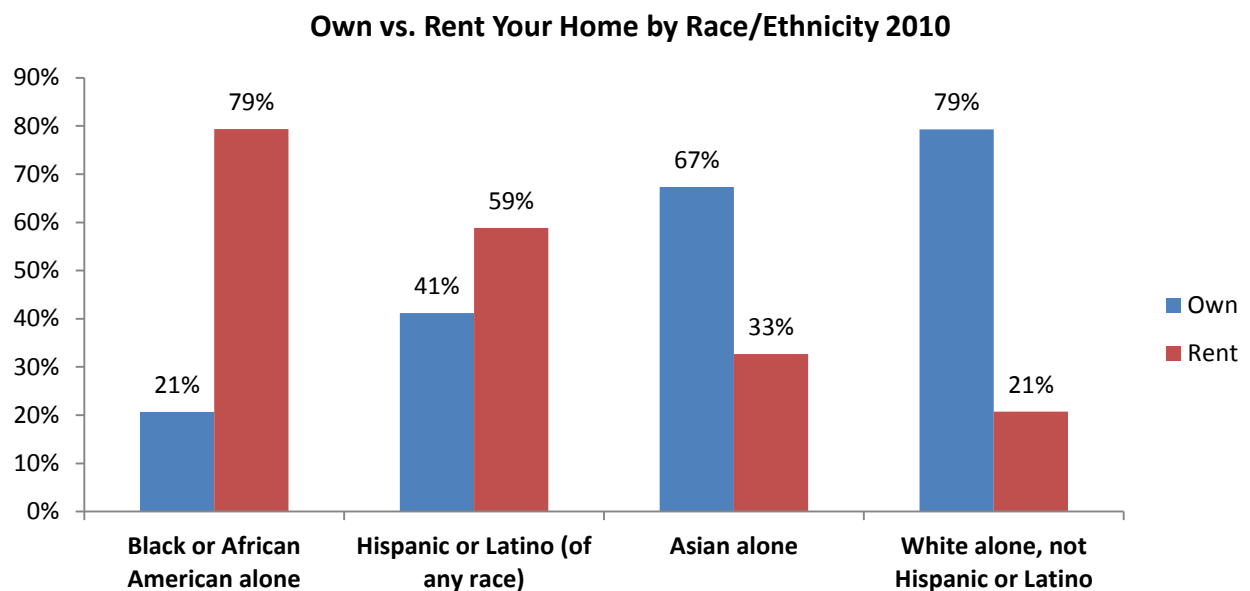
## Uninsured

While there are many social factors that may affect an individual's health outcome, perhaps none is as essential as access to adequate and affordable health insurance. In Bloomington, the 2012 rate of uninsured was highest among the Hispanic and Latino population, six times higher than Whites. (U.S. Census Bureau, American Community Survey, 2010-2012)



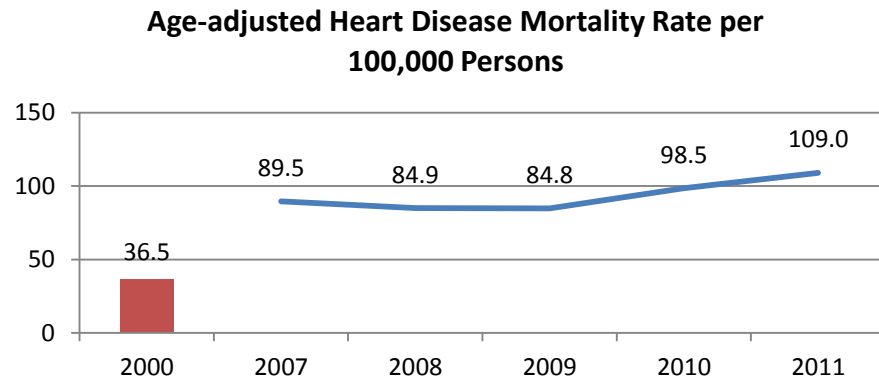
## Home Ownership

In Bloomington, home ownership is more common among White and Asians than Blacks and Hispanic or Latinos. Whites own their home approximately four times as much as they rent their home, while Black residents rent their home four times as much as they own their home. (U.S. Census Bureau, 2010 Census)

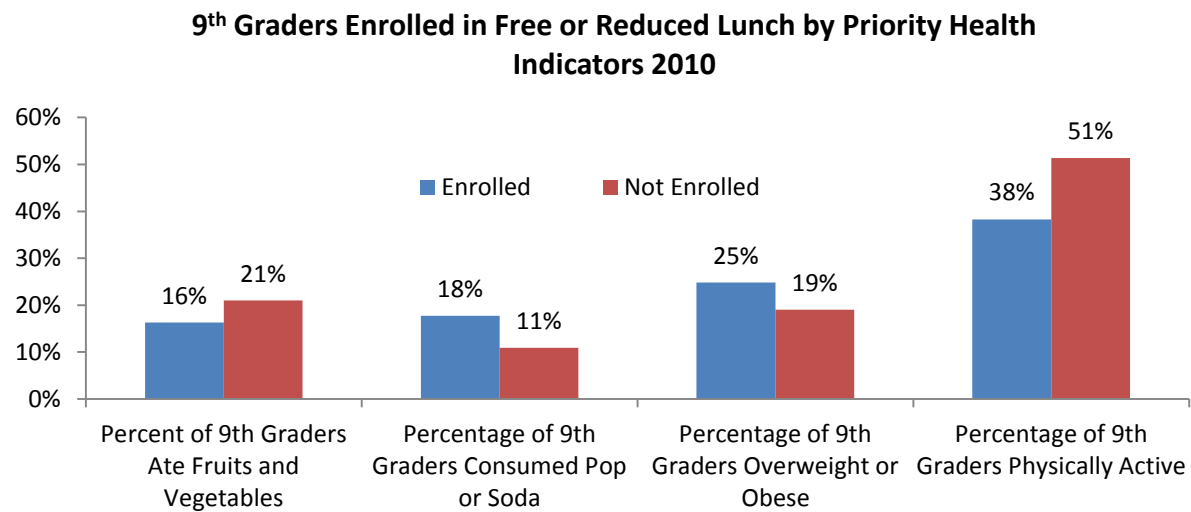


## Nutrition, Obesity and Physical Activity

Heart disease is the leading cause of death in Bloomington, with 109 deaths per 100,000 people in 2011. (MDH Vital Statistics, 2011)



Bloomington 9<sup>th</sup> graders enrolled in Free or Reduced Lunch are more likely to be obese, consume more pop or soda, and be less physically active than those not enrolled. (Minnesota Student Survey, 2010)

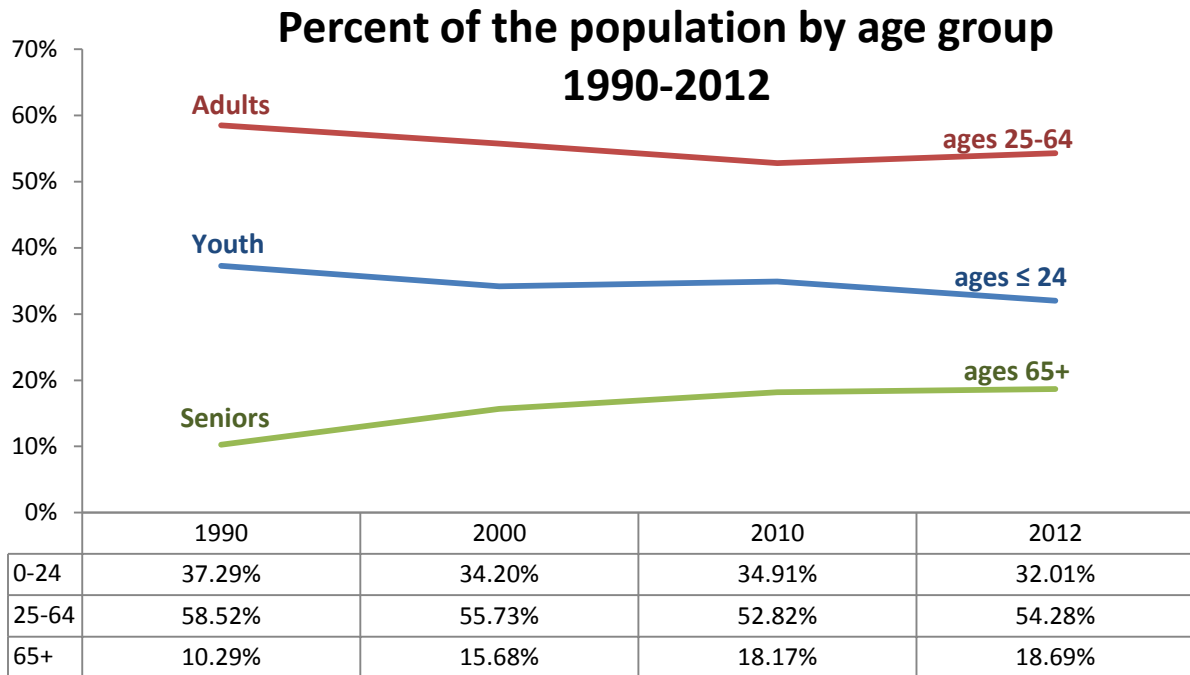


### Fast Fact:

***Lower-income students have lower rates of healthy food consumption and higher rates of obesity than non-low-income students. This disparity may lead to higher rates of heart disease and other associated health conditions in adulthood.***

## Aging of the Population

In Bloomington, the proportion of the population 65 years or older has been steadily rising since 1990, while the younger populations have been slightly declining. (U.S. Census Bureau, U.S. Census and American Community Survey)

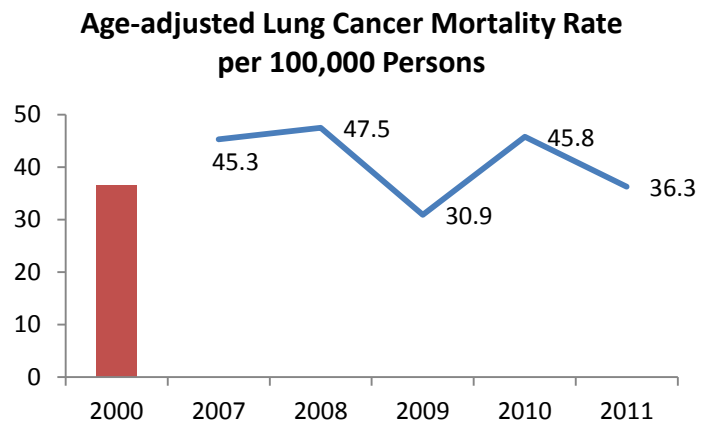


### Fast Fact:

***Bloomington's population is getting older, with a rising number of seniors and decreasing proportions of younger people. This will come with an increased need for senior services and healthcare.***

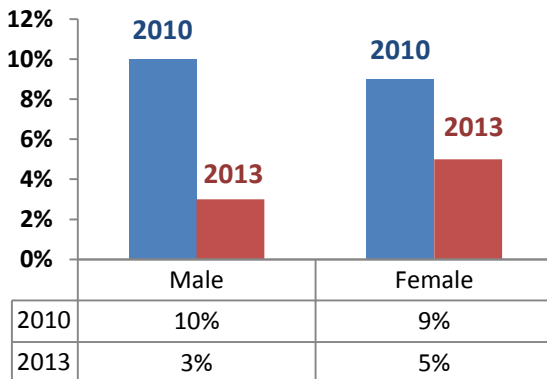
## Alcohol, Tobacco, Drug Use and Abuse

Lung cancer is a leading cause of death in Bloomington, with 37 deaths per 100,000 people in 2011. (MDH Vital Statistics, 2011)

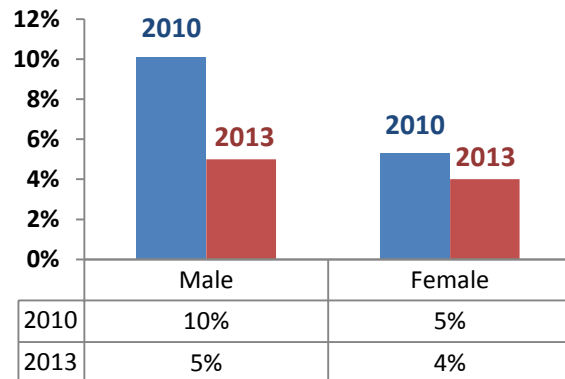


Between 2010 and 2013, 9<sup>th</sup> Grade binge drinking has declined 7% for males and 4% for females. Smoking has declined 5% for males and 1% for females. (Minnesota Student Survey, 2010, 2013)

**Percent 9<sup>th</sup> graders Consumed 5+ drinks on one occasion in past 30 days 2010-2013**



**Percent 9<sup>th</sup> graders smoked cigarettes in the past 30 days 2010-2013**



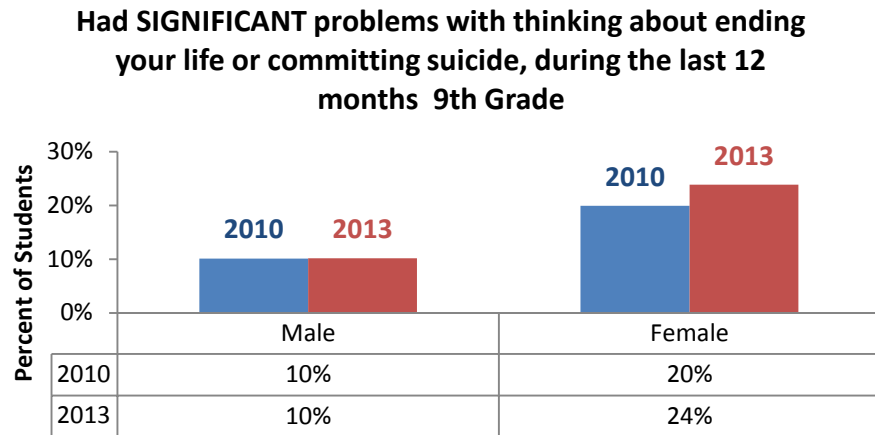
**Fast Fact:**

**Cigarette smoking among 9<sup>th</sup> graders has decreased 5% among males since 2010. Continued efforts to curb youth substance use must continue if the rate of chronic diseases such as lung cancer, a leading cause of death in Bloomington, is to go down.**

## Social and Emotional Wellbeing

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In 2013, 24% of Bloomington Females reported thinking about ending their life or committing suicide, 14% more than their male classmates and 4% more than the females statewide. (Minnesota Student Survey, 2010, 2013)



On an individual level, counseling is often needed to help youth address thoughts about suicide. On a community level, positive youth development activities and opportunities can reduce adolescent isolation and depression that contribute to suicidal behavior.

**Fast Fact:**

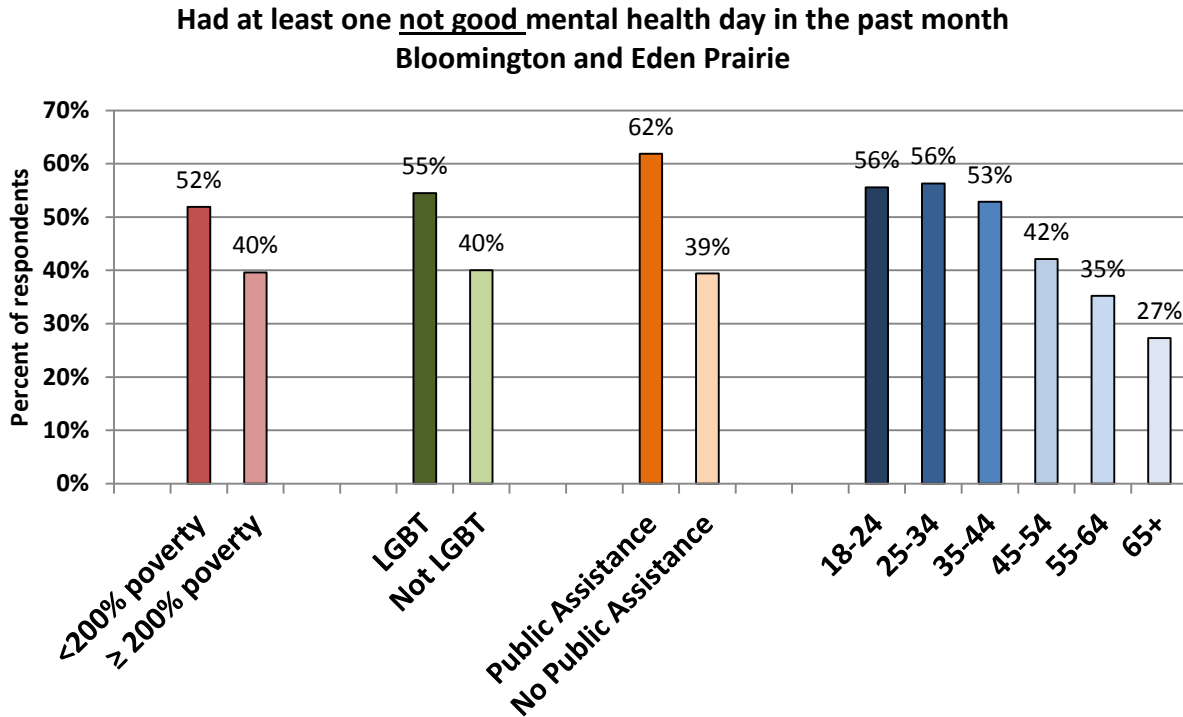
***Nearly a quarter of Bloomington 9<sup>th</sup> grade females have thought about committing suicide; 14% more than their male classmates.***



## Mental Illness

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In Bloomington and Eden Prairie, 40.6% of people report having at least one “not good mental health day” in the past month. This rate is higher for younger people, with 56.3% of 25-34 year olds reporting “not good mental health days” and 27.3% of those 65 or older. (Survey of the Health of All the Population and the Environment, 2010)



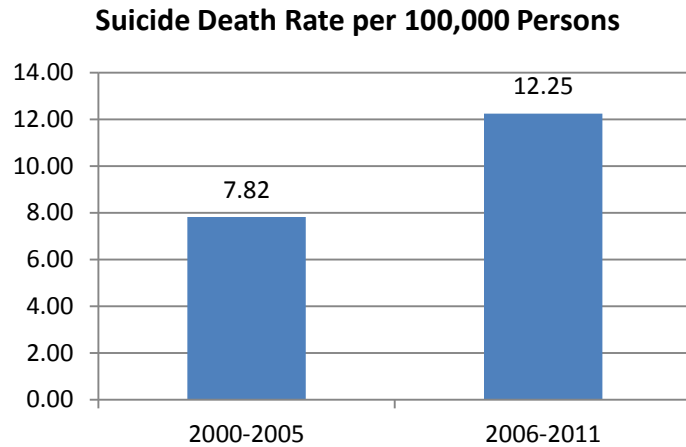
**Fast Fact:**

**Forty percent of Bloomington and Eden Prairie residents reported having at least one “not good mental health day” in the past month in 2010.**

## Intentional Injury Prevention

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In 2011, the suicide rate in Bloomington had risen to more than twice what it was in 2001, from 8 deaths per 100,000 people to 18. The average suicide death rate from 2000-2005 was 7.8 deaths per 100,000 people; from 2006 to 2011 it was 1.6 times higher with 12.3 deaths per 100,000 people. (Minnesota Department of Health Vital Statistics, 2011)



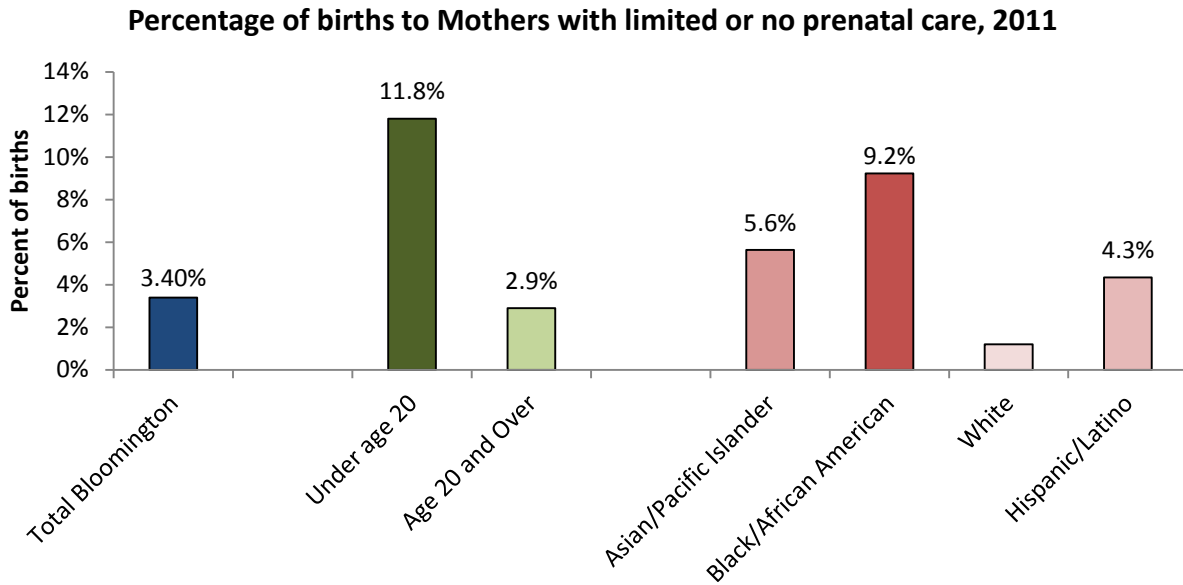
***Fast Fact:***

***Between 2001 and 2011, the rate of suicide deaths among Bloomington residents increased more than two-fold from 8 deaths per 100,000 people to 18 deaths.***

## Maternal and Child Health

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Early prenatal care is a major priority for healthy pregnancies, birth outcomes and child health and wellbeing. African-American and young mothers have the highest rates of limited or no prenatal care. (Minnesota Department of Health, Vital Statistics, 2011)



**Fast Fact:**

***The proportion of mothers who received limited or no prenatal care in 2011 was highest among African-American Mothers (9.2%) and mothers under 20 years of age (11.8%).***

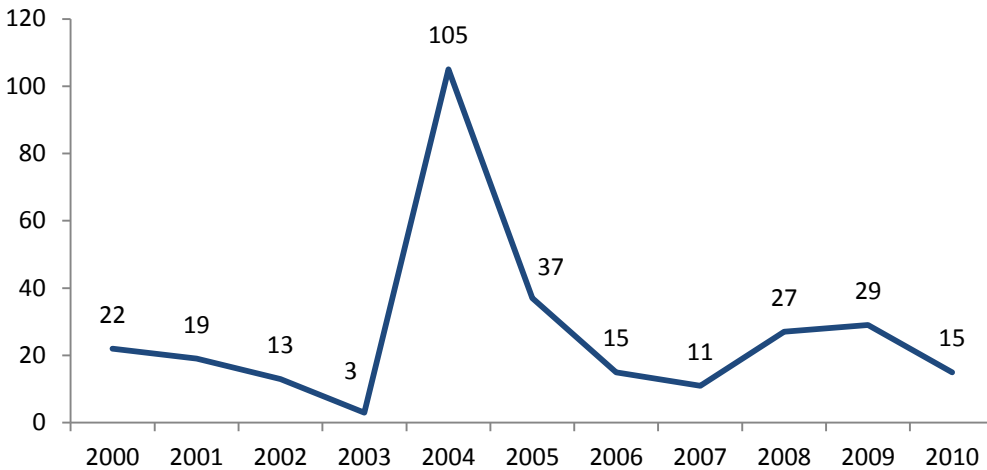
## Immunization and Infectious Disease Prevention

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Pertussis cases outbreaks generally occur in three year cycles. The most recent occurred in late 2012 and early 2013. From 2000 to 2010, the southern Suburbs of Hennepin County saw a high of 105 pertussis cases in 2004 up from just three cases the year prior.

(Hennepin County Department of Health and Human Services, Epidemiology Update)

**Bloomington, Edina, and Richfield Pertussis Cases 2000-2011**



**Fast Fact:**

***Pertussis is a vaccine preventable disease, with outbreaks that occur in three year cycles. In 2004 the number of cases rose from 3 in 2003 to 105. The most recent outbreak occurred between 2012 and 2013.***

## Individual and Family Emergency Preparedness

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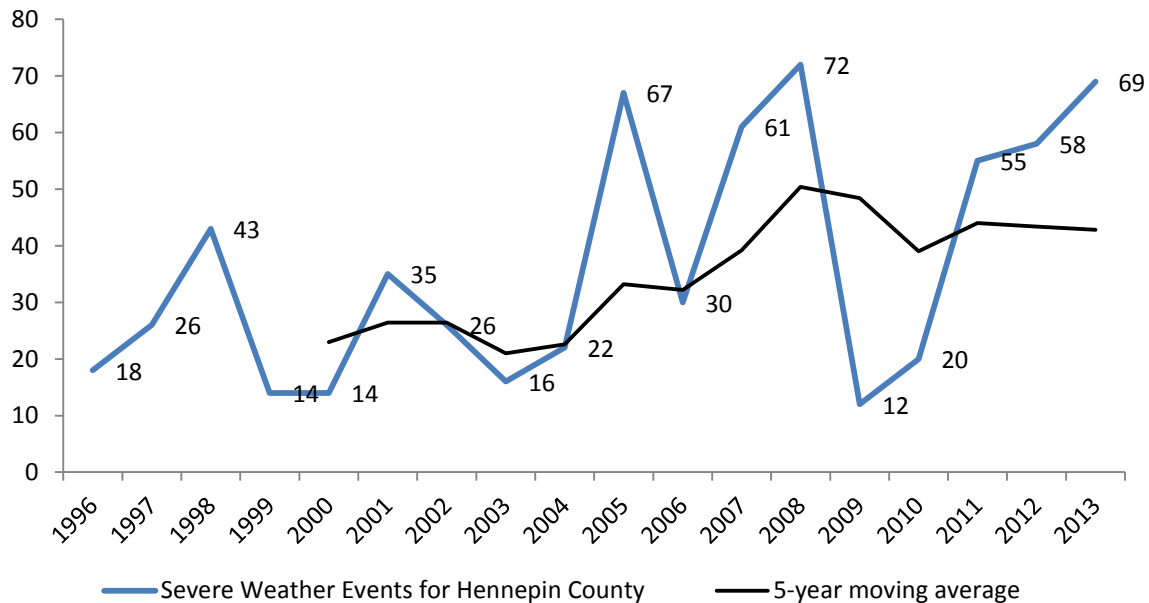
Irregularities in weather patterns and extreme events (i.e. hail storms, high winds, extreme colds) have increased in past years, placing a greater importance on individual and family emergency preparedness.

In 2013, 69 severe weather events were reported in Hennepin County. They ranged from hail, thunderstorms, lightning, heavy wind, and flash flooding.

The average number of weather events in a five year period for Hennepin County has increased two-fold between 2000 and 2013, with 69 events in Hennepin County in 2013.

(National Oceanic and Atmospheric Administration, 2013)

**Severe Weather Events for Hennepin County 1996-2013**



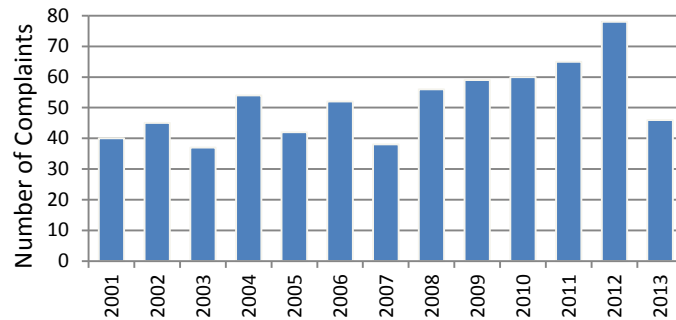
**Fast Fact:**

***The average number of weather events in a five year period for Hennepin County has increased two-fold between 2000 and 2013, with 69 events in Hennepin County in 2013.***

## Food-borne Illness Prevention

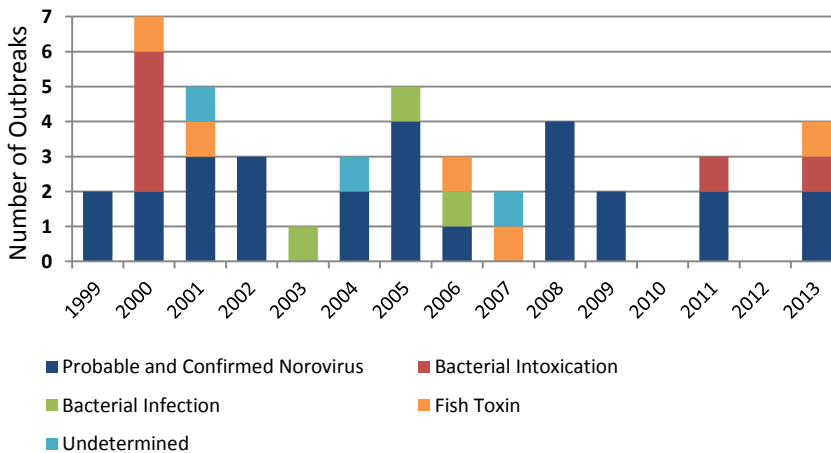
In 2013, the City received 46 reports of foodborne illness from persons who had visited at least one City-licensed food establishment up to three days before illness onset. The City receives illness reports from the complainant directly (43%), or from reports received by the Minnesota Department of Health (MDH) Foodborne Illness Hotline (44%) or the food establishment (13%). The source or cause of illness in most of these cases cannot be confirmed.

**Foodborne Illness Complaints, by Year, Bloomington, MN 2001-2013**



Though every complaint is addressed, typically 5 to 10 complaints a year lead to an outbreak investigation. Most outbreak investigations reveal that illnesses were foodborne. In some instances, however, outbreaks were caused by person-to-person transmission rather than foodborne transmission.

**Confirmed and Probable Foodborne Illness Outbreaks, by Year, Bloomington MN 1999 - 2013**



Norovirus is the causative agent in the majority (61%) of foodborne illness outbreaks. Norovirus is most commonly associated with ready-to-eat foods (sandwiches, cold salads, etc.), prepared by infective food workers. (City of Bloomington, Division of Environmental Health)

**Fast Fact:**

*Norovirus is the causative agent in the majority (61%) of foodborne illness outbreaks.*

## ***Chronic Disease***

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Chronic disease is the leading cause of death in Bloomington.

<b>Cause of Death</b>	<b>Age Adjusted Rate per 100,000 people</b>
Heart Disease	109
Lung Cancer	36.3
*Breast Cancer	27.6
Stroke	26.2

\*rate per 100,000 females

(Minnesota Department of Health Vital Statistics, 2011)

### ***Fast Fact:***

***In 2011, Heart Disease, Cancer and Stroke were the three most common causes of death in Bloomington.***