ELEVATE THE HEALTH AND WELL-BEING OF **NORTH DAKOTA**

A Social Determinants of Health Perspective





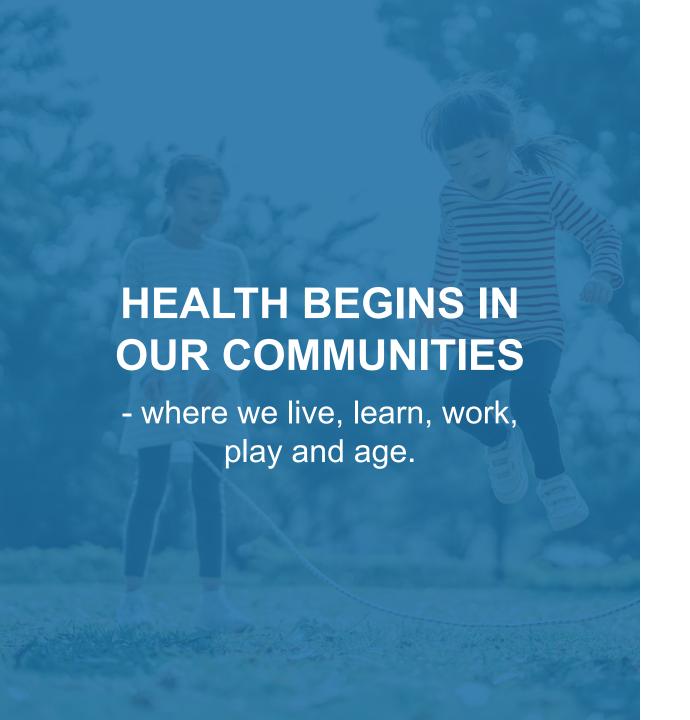






It's time we made it possible for all Americans to afford to see a doctor, but it's also time we made it less likely that they need to.

- Robert Wood Johnson Foundation







KAREN OLSON

Research Specialist

NDSU Center for Social Research



Health and Well-Being in North Dakota, 2022

A Social Determinants of Health Perspective

A study conducted by the Center for Social Research at NDSU on behalf of the BCBSND Caring Foundation

January 2023

Social Determinants of Health



Health starts where we....

Live Learn Work Play

...long before illness

Social Determinants of Health



Repeated studies have found that the conditions in which we live and work have an enormous impact on our health, long before we see a doctor. By thinking about health as something beyond what we get at the doctor's office, but instead as something that starts in our families, in our schools and workplaces, in our playgrounds and parks, in the air we breathe, and the water we drink...

the more opportunities present to improve it.



ECONOMIC STABILITY

Poverty, 2020

11%

77,491 people

 A slight decrease from 12% in 2010; statistically, no real change Child Poverty, 2020

11%

19,459 children 0-17

Living with:

Married parents.. 4% Single parent 29% Poverty by Race & Ethnicity, 2020

Hispanic 19%

Near Poverty, 2020

15%

107,564 people

With incomes from 100% to 199% of poverty

EDUCATION

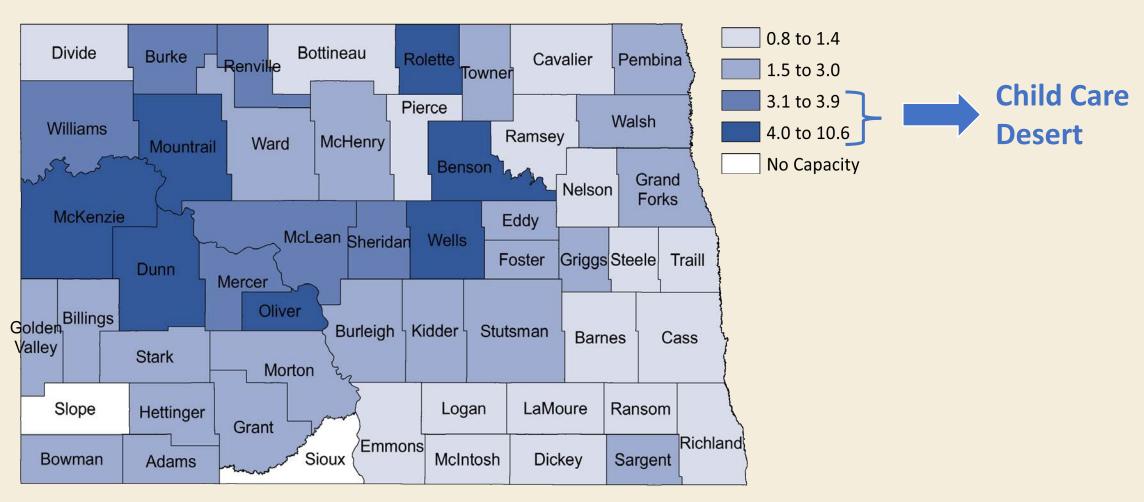
Ages 0-5, All Parents Working, 2020

74%

U.S. average is 67%

 6th largest percentage among states

Number of Children Ages 0 to 5 for Every One Licensed Child Care Slot in North Dakota by County, 2020



Children: U.S. Census Bureau, 2016-2020 American Community Survey 5-Year Estimates

Licensed Child Care Slots: Child Care Aware of North Dakota

EDUCATION

4	Ages 0-5, All Parents Working, 2020	Ages 3 & 4 in Early Education, 2020	3 rd Grade Reading Achievement, 2021	Graduating High School On Time, '21
	74%	31%	62%	87%
	U.S. average is 67%	U.S. average is 47%	NOT meeting standards	6,825 graduates
	 6th largest percentage among states 	 Lowest percentage among states 	Achieving standards: Meeting 29% Exceeding 10%	• A decrease from 89% in 2019/20

SOCIAL & COMMUNITY CONTEXT

Adults 65+ Living Alone, 2020

31%

36,419 people 65+

Largest percentage among states Adult Volunteers, 2019

35%

192,616 people 16+

A decrease from 40% in 2017 Youth/Young Adults in Work Force, 2020

65%

65,979 people 16-24

Largest percentage among states Adverse Childhood Experiences, 2019/20

19%

32,095 children 0-17

Have experienced
 2 or more
 adverse
 experiences

NEIGHBORHOOD & BUILT ENVIRONMENT

Monthly Housing Costs, 2020

Homeowner ... \$1,457 Renter \$828

Change in Housing Costs, 2010 to 2020

Costs rose faster than inflation since 2010

Inflation	19%
Homeowner costs	27%
Gross rent	49%

Household Cost Burden, 2020

23%

70,445 households

- 2nd lowest rate among states, behind WV
- Burden: 30% or more of income to housing

Household Cost Burden, 2020

White 21% Black 38% American Indian 25% Asian 36% Hispanic 43%

Broadband Subscription, 2020

83%

Of households have broadband subscription

Lower than national average of 85%

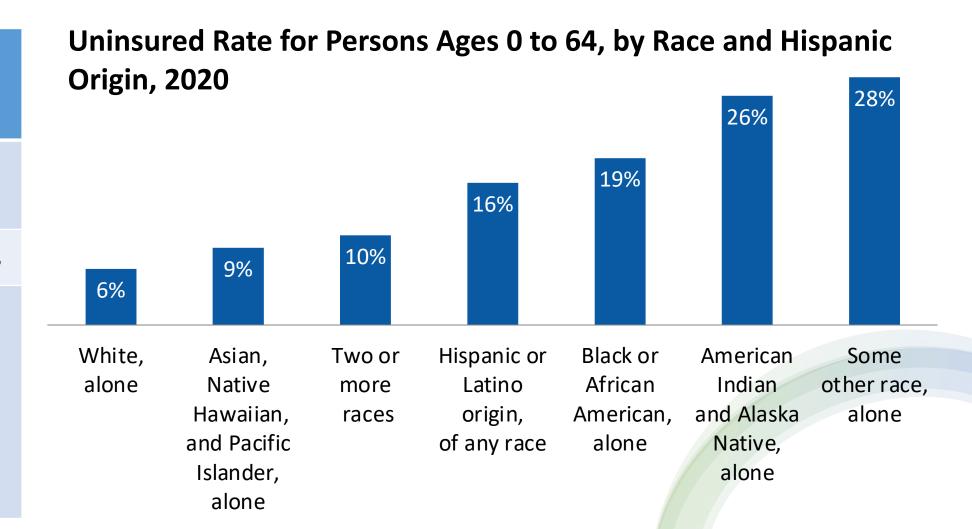
ACCESS TO HEALTH CARE

Uninsured Children, 2020

6%

11,697 children 0 to 18

 Higher than the national average of 5% of children with no health ins. coverage



ACCESS TO HEALTH CARE

Uninsured Children, 2020

6%

11,697 children 0 to 18

 Higher than the national average of 5% of children with no health ins. coverage Primary Health Care, 2022

281,849

people live in a
Primary Care
Health Professional
Shortage Area,

which is **36%** of the state's population

Dental Health Care, 2022

211,631

people live in a

Dental Care

Health Professional

Shortage Area,

which is **27%** of the state's population

Mental Health Care, 2022

281,849

people live in a

Mental Health Care

Health Professional

Shortage Area,

which is **46%** of the state's population

HEALTH BEHAVIORS

Physically INactive Adults, 2021

25%

Of adults

Did not
 participate in any
 physical activity
 or exercise in past
 month

Adult Smokers, 2021

15%

Of adults

 Have smoked at least 100 cigarettes, and smoke every day or some days High School Tobacco Use, 2021

6%

Smoke cigarettes

High School students who:

Vape 21%

Use any form of tobacco 23%

Adult Alcohol Consumption, 2021

Binge Drink 21%

Traffic fatalities due to alcohol 35%

- 2nd highest binge drinking rate in the nation
- Only 8 other states had higher fatality rate

HEALTH OUTCOMES

Adult Obesity, 2021

35%

U.S. average is 34%

 ND average is up from 28% in 2011 Life Expectancy, 2020

77.0

years

A decrease from79 years in 2018

Suicide Deaths, 2020

135 deaths

18.2 deaths per 100k

 2nd leading cause of death for people ages 15 to 44 Drug Overdose Deaths, 2020

114 deaths

14.9 deaths per 100k

 A 396% increase from 23 deaths in 2010

CONCLUSIONS

Strengths

- Population is growing and becoming more diverse
- Economy, overall, is strong; Housing costs are low relative to rest of nation; Most have enough to eat
- Many people are engaged in their communities and have access to Internet, exercise opportunities, and health care

Opportunities to Improve Health and Well-Being – to list just a few...

- Some populations experience far greater disparities in health than others
- 26% of people in ND live in or near poverty (185,055 people)
- Quality early education is foundational, yet ND ranks last in enrollment
- When compared to national averages, ND children are more likely to live with someone experiencing mental illness, live with someone abusing substances, have a family member in jail or prison, and be a witness to domestic violence
- Life expectancy is down and mental health concerns continue to rise; alcohol, drug overdose, and suicide are leading factors in premature death

ACKNOWLEDGEMENTS



The Health and Well-Being of North Dakotans, 2022 – A Social Determinants of Health Perspective was made possible by the Blue Cross Blue Shield of North Dakota Caring Foundation. With this study, the Caring Foundation sought to better understand the state of the social determinants of health – the conditions in which people are born, grow, live, work, and age – in North Dakota and how they shape the health of North Dakotans and the communities where they live.

Gaining insight into these data can serve to identify disparities and barriers that impact people's health. It is the study sponsor's hope that this effort leads to greater collaboration and alignment among key stakeholders as they work to develop community-driven solutions and identify resources, both financial and non-financial, to address and improve health and well-being of North Dakotans.



The Center for Social Research, an applied social science research unit at North Dakota State University, was engaged to conduct this study to better understand how economic stability, education, the social and community context, the neighborhood and built environment, and access to health care are impacting the ability of North Dakotans to thrive.

Contact Information



CENTER FOR SOCIAL RESEARCH

Karen Olson

Research Specialist 701.231.1060

k.olson@ndsu.edu

Nancy M. Hodur, PhD

Director

701.231.8621

nancy.hodur@ndsu.edu



The full report is available at

https://www.bcbsnd.com/social-determinants-of-health and https://www.ndsu.edu/csr/research and evaluation/



KRISSIE GEURARD

Community Engagement Director

North Dakota Health & Human Services



Community Engagement Unit

Krissie Guerard, MS, Community Engagement Director Social Determinants of Health Round Table – Bismarck February 15, 2023



Health & Human Services

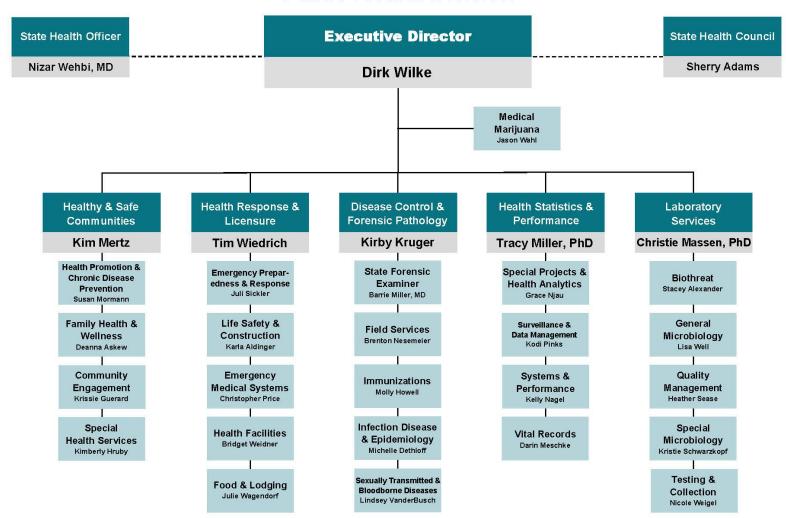
Community Engagement (CE) Unit

The mission of the CE Unit is to understand and reduce health disparities among all North Dakotans. The primary goal is to work alongside North Dakota communities in addressing health-related needs to reduce disease rates by providing opportunities for interventions and improving access to health care.

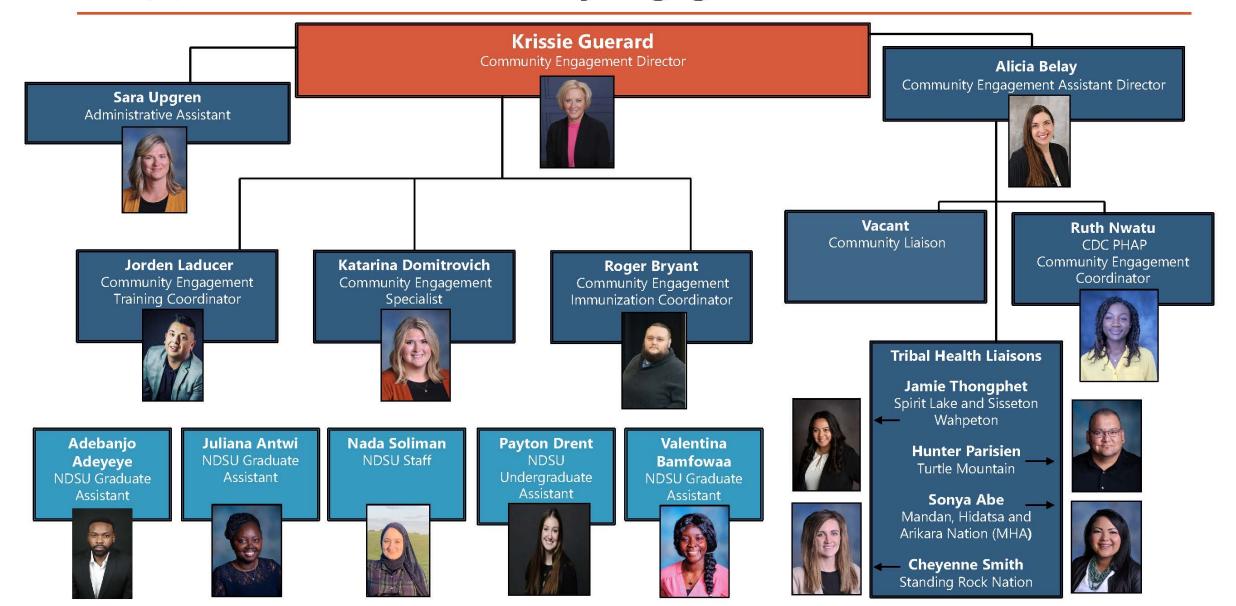
This will ensure that all North Dakotans have the ability to reach their optimal health.



Public Health Division



Community Engagement Unit



Public Health Division Strategic Plan





Strategic Plan: 2021 - 2023 Mission Improve the length and quality of life for all North Dakotans Improve Health Equity Use Evidence-based Practices and Make Data-Driven Decisions Create Healthy Promote Public Enhance and Strengthen GOALS and Vibrant Population-based Improve **Health Readiness** Health Communities Systems of Care and Response Interventions Prevent and reduce Ensure effective Reduce the risk of Improve access to communication infectious disease care in tobacco and other substance misuse systems underserved and rural areas Prevent and reduce chronic diseases Prevent violence, Maintain systems Enhance health intentional and to sustain medical care through unintentional injury and emergency Promote safe and technology TIVES services sanitary food establishments Reduce the risk of Ensure access to vaccine equitable health OBJEC Ensure capacity to preventable and preventive Support detect and services diseases communities in respond to building resiliency hazardous threats **Enhance quality** Reduce adverse and safety through health outcomes Promote regulation and through early community driven education wellness detection Promote health in Increase healthy all policies Promote healthy lifestyles and weight across the behaviors lifespan Foster system level partnerships across continuums of care

Community Engagement Strategic Plan

- Originated from North Dakota Department of Health Strategic Plan
- Front cover symbol represents committeeapproved method of highlighting data disparities
- Living, public document that is updated monthly
- Includes 20 SMART goals and specific strategies to address additional public health inequities
- Identifies populations of focus, accreditation standards and tracking method





Community Engagement
Unit Strategic Plan
2020-2024



Addressing COVID-19 in ND Special Populations

- Living, public document
- Updated monthly
- Identify activity to address needs, partners and tracking method
- Includes 106 goals to address COVID-19 disparities among Special Populations in North Dakota:
 - New American/Foreign Born/Immigrant (NFI)
 - African American
 - American Indian/Alaskan Natives
 - Persons with disabilities
 - Aging or elderly
 - LGBTQ2S+
 - Homeless
 - Rural





Addressing COVID-19 in



North Dakota Special Populations

January 2021 - June 2024

COMMUNITY ENGAGEMENT UNIT
STRATEGIC PLAN

Advisory Boards

New American/Foreign Born/Immigrant (NFI)



Diverse cross-section of individuals and organizations with ties to NFI communities

BeYOU LGBTQ2s+



Ally, provider and/or members of the LGBTQ2S+ community (18+)

Youth (YAB)



Provide insight- ensuring youth perspectives are incorporated in planning and decisions for the state, as well as forming community partnerships (15-21)

Tribal Health



Led by NDSU American Indian Public Health Resource Center

CE Unit Project Highlights



- Health Equity Ambassador Program
- Your Health Matters Newsletter
- Development of Health Equity Training Series
- Over 160 Collaborative Partnerships
- Internal Partnerships
 - Immunizations
 - HIV/STIs/TB/Viral Hepatitis
 - Behavioral Health





Thank You

Community Engagement | hhs-engagement@nd.gov



Health & Human Services



BRAD HAWK

Deputy Director

North Dakota Indian Affairs Commission



ERIN OBAN

State Director

USDA Rural Development



BCBS Caring Foundation: Elevating the Health & Well-being of North Dakota



Erin Oban, State Director

USDA Rural Development | North Dakota



Mission: We are committed to increasing the economic opportunities and improving the quality of life in America's rural and Tribal communities.

How: Providing financing as grants, loans, and loan guarantees through more than 70 programs to rural individuals and families, small business owners, non-profits, cooperatives, and community and tribal entities.



USDA Rural Development U.S. DEPARTMENT OF AGRICULTURE

USDA RD Major Programs

Business Programs

Cooperative Services

Community Programs

Water & Environmental Programs

Energy Programs

Housing Programs

Electric Programs

Telecommunications Programs

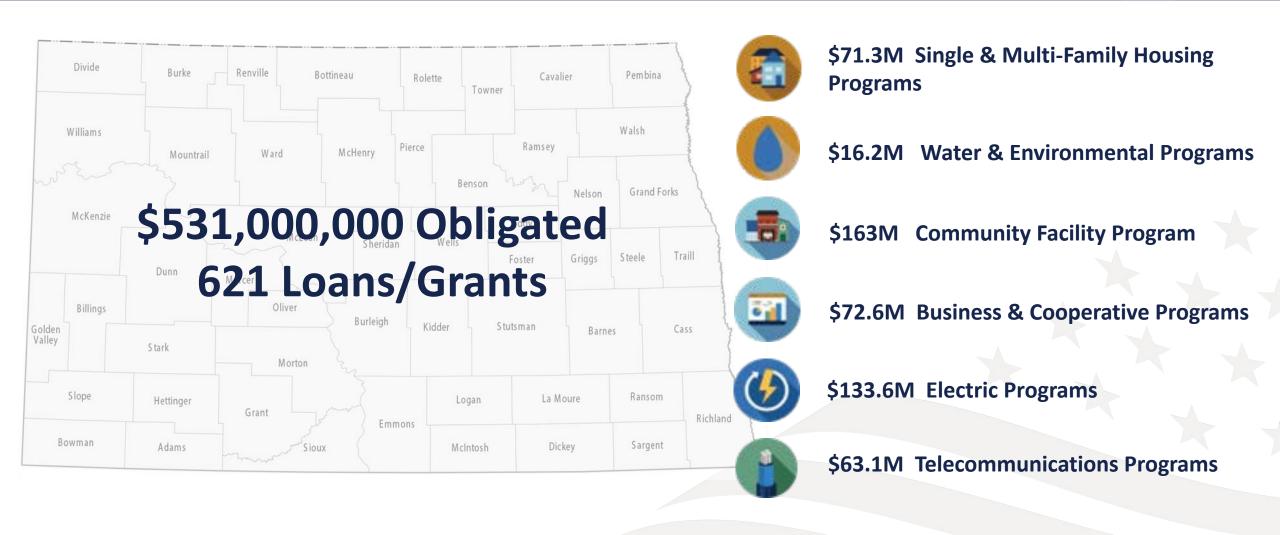


rd.usda.gov/files/ RD_ProgramMatrix.pdf



Rural Development U.S. DEPARTMENT OF AGRICULTURE

FY22 Investments in North Dakota





USDA Rural Development U.S. DEPARTMENT OF AGRICULTURE

USDA RD and Social Determinants of Health

How can USDA Rural Development help create better conditions?









Community Facility



Telecommunications Programs

Electric Programs

Business & Cooperative

Programs



Additional supports

Technical Assistance & Revolving Loan Funds

Non-profits, JDAs, EDCs, Planning Councils, and Rural Cooperatives provide technical assistance and establish Revolving Loan Funds to serve their communities:

- Intermediary Relending Programs (IRP)
- Rural Business Enterprise Grant (RBEG)/Rural Development Business Grant (RDBG)
 Revolving Loan Funds
- Meat & Poultry Intermediary Lending Program (MPILP)
- Rural Microentrepreneur Assistance Program (RMAP)
- Rural Economic Development Grant (REDG)

See hand-out: "Revolving Loan Funds in North Dakota" for RLFs with USDA RD funding



USDA Rural Development U.S. DEPARTMENT OF AGRICULTURE

Rural Data Gateway

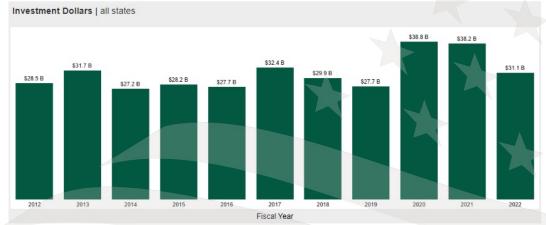
View RD investments in ND:

Recently launched, publicly-accessible Rural Investments Dashboard tool to see USDA RD investments in Rural America and in ND for more than a decade.



www.rd.usda.gov/rural-data-gateway





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Thank you!





Thank you ND FOUNDATION for your partnership & leadership!

USDA Rural Development North Dakota State Office

220 E Rosser Ave, Room 208

Bismarck, ND 58502-1737

Phone: (701-530-2037 | (800) 366-6888

General inquiries: info@nd.usda.gov

Visit https://www.rd.usda.gov/nd

Area office locations in Bismarck, Devils Lake, Dickinson, Minot, and Valley City.



 Table facilitators will guide conversations

 Reconvene to report out your table's discussion, themes and ideas

Post-it notes and N.D. map

Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it's the only thing that ever has.

Margaret Mead

THANK YOU!

Find resources at bcbsnd.com/sdoh

