

CARVER COUNTY COMMUNITY HEALTH ASSESSMENT PROFILE

Belonging

Inclusion in the community and our connections with each other enhance or weaken our health, from early childhood and continuing through our later years.



The more ACEs we experience, the more likely we are to have health problems later in life.

- People who experienced five or more ACEs are much more likely to smoke as adults (42 percent versus 11 percent, respectively).
- Adults who experienced ACEs are three times more likely to have asthma, four times more likely to have depression, six times more likely to have anxiety, and twice as likely to engage in chronic drinking.

Anxiety and Stress

Children who experience toxic stress are at greater risk of experiencing alienation and depression in adolescence and adulthood. Adults who experienced adverse childhood experiences are three times more likely to have asthma, four times more likely to have depression, six times more likely to have anxiety, and twice as likely to engage in chronic drinking.

- Anxiety prevalence in Carver County adults spans income levels, with no major differences between poverty levels.

Adverse Childhood Experiences

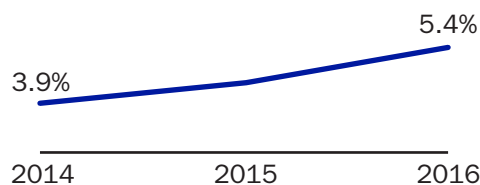
Negative experiences, especially adverse childhood experiences, or ACEs, shape lifelong health. ACEs are traumatic events in life occurring before a child turns 18. Adverse experiences for children are closely linked to adverse conditions for communities.

- The rate of children in out-of-home care is trending upward. Out-of-home care is a court-monitored process that encompasses the placements and services provided to children and families when children are removed from their home due to abuse and/or neglect.

Nine different types of ACEs have been studied: physical abuse, sexual abuse, verbal abuse, mental illness of a household member, problematic

drinking or alcoholism of a household member, illegal street or prescription drug use by a household member, divorce or separation of a parent, witnessing domestic violence towards a parent, and incarceration of a household member.

Carver County Children <18 years in Out-of-Home Care per 1,000



Source: Minnesota Department of Health County Health Tables, 2018

Isolation

People who are physically or socially isolated are at greater risk of abuse, loneliness, depression, and injury. As people grow older and lose life partners or family members they may become more isolated. The proportion of older persons who are expected to be living alone is anticipated to increase significantly among baby boomers, partly because they have fewer children than preceding generations.

- In 2010, almost 10 percent of Minnesotans aged 65+ lived alone. This number is expected to rise to over 13 percent by 2030.
- For rural elders in the western side of the county, the risk of isolation is compounded by distances to family, communities, or needed services.
- A disability at any age also increases the potential for physical and social isolation.

Immigrants and refugees who lack English language skills and cultural knowledge face additional hurdles to belonging. The loss of a shared culture, lack of

access to familiar foods, and missing the companionship of friends and loved ones contributes to isolation.

- Focus group participants noted the importance of having a culturally-relevant food retailer in the community, along with events to create a sense of community.

Depression

People physically or socially isolated are at greater risk of abuse, loneliness, depression, and injury. People worried about meeting their basic needs are more likely to report having chronic diseases such as cancer, arthritis, depression, diabetes, or asthma.

- Over 20% of Carver County adults report having been told they have depression by a medical professional.
- Carver County adults who report worrying about not being able to pay for housing costs or food are much more likely to also report having depression.
- Carver County adults who report having warm and trusting relationships are much less likely to also report having depression.



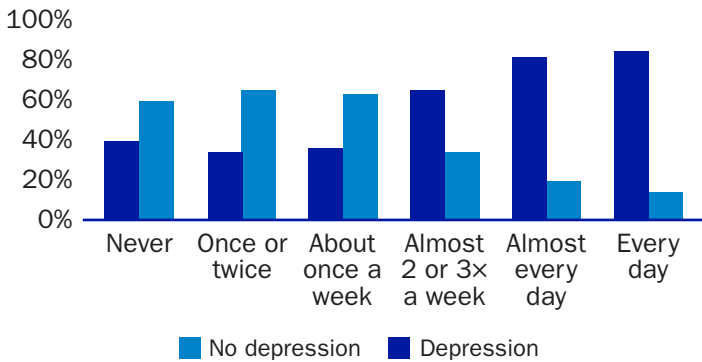
References

Minnesota Department of Health (2017). 2017 Minnesota Statewide Health Assessment. Produced in collaboration with the Healthy Minnesota Partnership. St. Paul, MN. <https://www.health.state.mn.us/communities/practice/healthymnpartnership/docs/2017MNStatewideHealthAssessment.pdf>

Minnesota Department of Health (2019). Mental Health Promotion. Available at <https://www.health.state.mn.us/communities/mentalhealth/>

Minnesota Department of Health (2011). *Adverse childhood experiences in Minnesota: findings & recommendations based on the 2011 Minnesota Behavioral Risk Factor Surveillance System.*

Have a Warm and Trusting Relationship by Depression Status



Source: Carver County Adult Health Survey, 2018

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