



2024 COMMUNITY HEALTH ASSESSMENT SUMMARY

KANDIYOHI-RENVILLE CHB

Purpose

The Community Health Assessment (CHA) uses data from local and state resources, community surveys, and local input to better understand and prioritize community health needs. Minnesota State Statute 145A requires each Community Health Board (CHB) to submit a CHA to Minnesota Department of Health (MDH) at least every five years. Submitting the top ten health priorities is a start of that process and necessary for narrowing down health issues to create a Community Health Improvement Plan (CHIP).

Partners

- Local policy makers
- Hospital & clinics, other health care and long-term care providers
- Human Services, service organizations and agencies
- City and county government
- Schools
- Foundations, churches and civic groups
- Health plans
- Community members

Preparation

The Kandiyohi-Renville Community Health Assessment was prepared under the KaRe to Achieve leadership team and the Kandiyohi-Renville CHB, using data from MDH, CDC, MN Student surveys, PACT for Families surveys, SW Regional Adult Health Survey, U.S. Census, local hospital and clinics, and other data sources.

Process

Phase 1: Initial Planning Meetings and Data Gathering
The KaRe to Achieve leadership group worked over a year to compile, find gaps in, and critique data from various sources.

Phase 2: Document Creation and Revision
Data from various sources was gathered, analyzed and verified, after which the CHA was finalized.

Phase 3: Community Input
Kandiyohi and Renville Counties hosted Call to Action Meetings with over 100 community members to share findings of the CHA. The community groups selected top health issues and priorities for each county. Kandiyohi County has an ethnically diverse population, whose voices were essential towards our mission of health equity. Smaller community meetings were held with these groups to gather their input on the main CHA priorities.

Phase 4: Identify Top Ten Issues
The Kandiyohi-Renville CHB approved the top ten priorities identified by the Call to Action and community meetings. The Kandiyohi-Renville Community Leadership Team (CLT) will make the final selection of at least two health priorities. Decisions are based on specific criteria: size of the problem, if some groups were affected more than others, community support, and if there were solutions and resources available to impact the problem.

Plan

Last cycle, the Kandiyohi-Renville CHB identified mental health as an issue to address for both counties in the (CHIP). Community groups from Kandiyohi County selected alcohol, tobacco, and other drugs and Renville County selected adverse childhood experiences as additional issues to address with local partners. This cycle's needs looks to be different, so this and our plan moving forward is likely to change.

Top 10 Health Priorities Kandiyohi-Renville CHB



Public Health
Prevent. Promote. Protect.
Kandiyohi-Renville
Community Health Board



Childcare Access - Access to childcare from in-home providers to licensed centers.



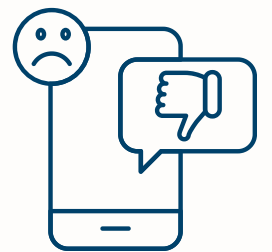
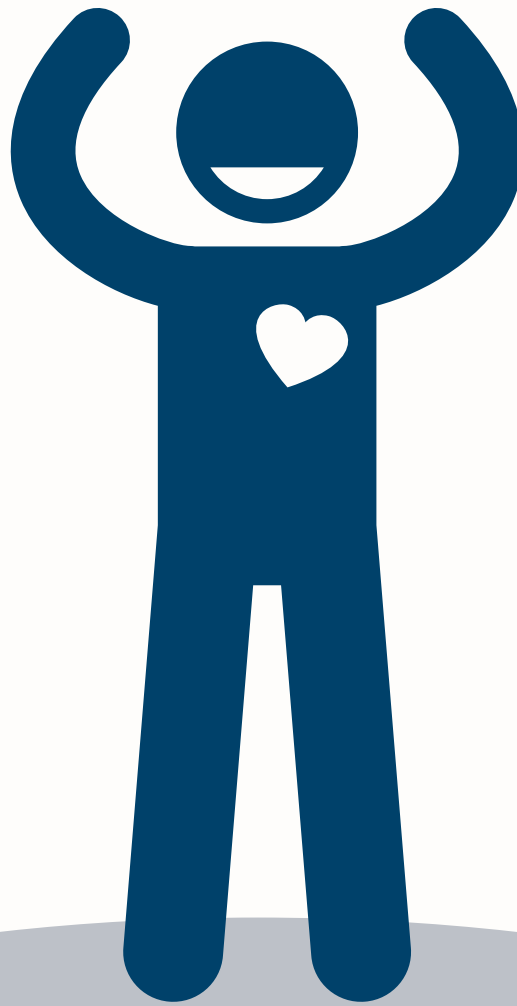
Access to Care - Access to care is difficult for general, mental, and dental health.



Chronic Disease - Diseases such as high blood pressure, asthma, and diabetes, which are chronic diseases that can last a lifetime.



Mental Well-Being - Effects of mental health difficulties are related to the majority of health issues.



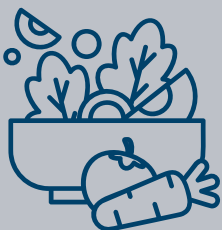
Adolescent Health - Sexual activity, bullying, and substance use among students.



ACEs - Adverse childhood experiences (ACEs) are negative experiences that shape lifelong health.



Substance Use - Consumption and purchasing of illicit and legal recreational substances by our general and student population.



Food Security - The ability for people to find healthy and nutrient dense foods.



Housing Stability - Stability and affordability of renting and owning.



Aging Population - The state of our population and unique challenges that lie ahead due to general aging trends.