Minnesota

Summary

Low Disparities¹ • Between females³ and males³ for less than a high school education • Between white³ and Hispanic³ for low birthweight • Between metropolitan³ and non-metropolitan³ areas for uninsured

High Disparities • Between Hispanic² and white³ for less than a high school education • Between American Indian/Alaska Native² and Asian/Pacific Islander³ for smoking • Between Black² and white³ for child poverty

¹ Low disparities within a state does not indicate that all populations are doing well. Consider rates in comparison to national averages.
² Rates worse than national average.
³ Rates same or better than national average.

Highlights

10% ▼ Excessive Drinking in adults with some college education between 2011-2013 and 2017-2019 from 25.8% to 23.2%

45% ▼ Unemployment in Black civilians between 2005-2009 and 2015-2019 from 14.6% to 8.1%

29% ▼ Smoking in college graduates between 2011-2013 and 2017-2019 from 8.0% to 5.7%

33% ▲ Diabetes in adults with some college education between 2011-2013 and 2017-2019 from 6.9% to 9.2%

54% ▲ Infant Mortality in Asian/Pacific Islander infants between 2003-2006 and 2015-2018 from 4.3 to 6.6 deaths (before age 1) per 1,000 live births.

9% ▲ Physical Inactivity in adults with a high school education between 2011-2013 and 2017-2019 from 26.9% to 29.4%

Trends

High Health Status by Race & Ethnicity

Income Inequality

Income inequality measures the ratio of median household income of the 20% richest to the 20% poorest. A high ratio indicates greater income inequality. Research demonstrates an association between greater income disparity and poorer population health.

In Minnesota, income inequality has decreased since 2011. Minnesota’s ratio is currently lower than the national ratio.

For source details and methodology visit www.AmericasHealthRankings.org.