EXECUTIVE SUMMARY

Public health is the practice of promoting health, preventing disease, and prolonging life in the community through communication and collaboration. The Community Health Assessment, along with the Community Health Improvement Plan, is a powerful tool to collect data, customize information, and provide practical considerations for developing an improvement plan. This document has been prepared to follow NYS DOH’s guidance and to meet the State Aid requirements.

Geographically, Oswego County is in a rural area. It is bordered by Lake Ontario to the north and on the south by Oneida Lake. The county is subject to heavy lake-effect snowfalls from Lake Ontario in the winter and the threat of mosquito-borne diseases from the swamps near Oneida Lake in the summer.

Demographically, white non-Hispanic is the predominant ethnic group with more than 96% in the county population of over 122,000. Approximately 61% of the population lives in the rural area, compared with 12% for the state and 19% for the nation. In the last 10 years, total population in the county has been stable. Migrant workers, necessary for the agricultural industry, add a seasonal demographic change to the county.

Socioeconomically, Oswego County experienced difficulties, such as a high unemployment rate, high poverty rate, and low education attaining rate, as the global economy changed in the past decades. Economic hardship hits the rural population more than the urban. It is generally agreed that socioeconomic disadvantages are linked to poor health outcomes in a community.

In terms of population health, Oswego County has high death rates from lung cancer, cardiovascular diseases, and respiratory diseases. It is alarming that the county has the highest adult smoking rate and obesity rate among all its neighboring counties, and highest school student obesity rate in the state. Obesity and smoking are associated with lung cancer, cardiovascular diseases, respiratory diseases, and diabetes. The heavy disease burden from these deadly conditions in the county could be alleviated by community behavioral changes.
This report details the health status of Oswego County residents based on the most recent data available. The key findings are:

- Oswego County has a smaller uninsured population (8.64%) compared to the state (11.55%) and the nation (15.05%).
- A community survey showed that the percentage of residents who claimed that they have a doctor for their primary care needs increased from 91% in 2010 to 95% in 2012. This increase is despite the physician to population ratio being lower in the county (1:2701) than the state (1:631) and the national (1:781) average.
- Oswego County has inadequate dental provider coverage for the population.
- The adult obesity rate (34%) is the highest of neighboring counties and higher than the state (25%). Obesity is a national epidemic, but the rate of Oswego County’s increase in adult obesity is higher than the nation and the state.
- Oswego County has the highest student overweight or obesity rate (38% for elementary, middle, and high school students combined), among all counties in the state.
- The percentage of diabetic adults is higher in Oswego County (9.9%) than the state average (9.0% including NYC and 8.5% excluding NYC).
- The diabetes mortality rate (19.0 per 100,000) is higher than in Central New York (17.3) and the state (16.6).
- The county’s diabetes hospitalization rate per 100,000 has been higher than that of the upstate NY region for the past several years.
- Diabetes care in Oswego County is better than the state and national averages, as indicated by percentage of Medicare enrollees with diabetes who have had an annual exam (85.32% vs. 84.83% and 83.81%).
- The percent of county adults who smoke almost every day (32%) is almost twice as high as the state (18%).

Summary of Main Health Challenges in Oswego County:

- High overweight and obesity rate among adults and school children;
- High smoking rate, and high alcohol and drug abuse among adults;
- High disease burden and life lost from cancer, cardiovascular diseases, respiratory diseases, and diabetes;
- High unintentional pregnancy rate and reduced percentage of pregnant women seeking early prenatal care;
- High rate of drug abuse;
- High suicide death rate;
- Increased incidence of STDs;
- Constant threat from mosquito-borne diseases and increased incidence of tick-borne diseases;
- Health disparities are associated with socioeconomic differences; and
- Unfunded or underfunded federal and state mandates drain the County’s resources for improvement of local community health.
• The percentage of **women who smoked during pregnancy** is the highest among neighboring counties (28.3% in 2012).

• Data collected at WIC sites showed that 28% of pregnant women, 11% of breastfeeding women, and 35% of post-partum women smoked, and 21% of pregnant women were exposed to second-hand smoke.

• With Medicaid as payer, 42.4% of pregnant women smoked but only 7.9% of pregnant women with private insurance smoked.

• With 216 deaths per 100,000 population, the county leads the **cancer mortality** rate in the state. On average, each week 13 people are diagnosed with cancer and five people die from cancer in the county.

• Oswego County’s **lung cancer** incidence and mortality rates are the highest among all neighboring counties and higher than the upstate NY regional average (incidence: 96.5 per 100,000 population vs. 83.0; death: 71.5 per 100,000 population vs. 55.8).

• The county’s **female breast cancer** incidence is the lowest among neighboring counties, and lower than that of the CNY regional average (105 per 100,000 women vs. 124). Female breast cancer deaths are the same as the CNY regional average.

• In the most years of the past decade, the county’s **chronic lower respiratory disease** hospitalization and mortality rates have been consistently 33%-50% higher than those for the Upstate NY region.

• The rate of **hospitalizations for falls** has been lower than the Upstate NY average rate in recent years.

• **Unintended pregnancy** is higher (41.1%) than the CNY region (33.6%).

• **Births to teen mothers** remains steady at 2.8% of births in the county.

• **Newborns’ drug-related hospitalization** rate in the county (121.8 per 10,000 discharges) is almost twice as high as that of the state (64.0 per 10,000 discharges).

---

**CONTRIBUTING CAUSES TO THE MAIN HEALTH CHALLENGES:**

- Rural area and its subsequent socioeconomic and environmental disadvantages;
- People in remote areas are geographically isolated;
- Poor health behaviors, including smoking, excessive alcohol use, and lack of physical activity among adults;
- Shortage of primary care physicians, dentists, and mental health providers;
- Funding cuts to various service programs, such as teen pregnancy prevention, mental health support, and prenatal and post-natal care assistance, etc.;
- Lack of secured funding to tackle smoking and obesity issues; and
- Community health issues are intertwined with local socioeconomic situations.
• Percent of pregnant women seeking early prenatal care in the county (75.0%) is the lowest among all neighboring counties but almost the same as the CNY regional average (75.1% in 2012). However, the county’s current percentage is a reduction from the previous survey (79.0%).

• Northeastern towns have the highest percent of women smoking prior to and during pregnancy and the Village of Central Square has the lowest.

• It is estimated that 13,352 residents in the county, approximately 13% of the population, age 12 years and above, need chemical dependency service. Among the 13,352, 92% are adults and 8% are adolescents (age 12-17 years old).

• The percent adult population with adequate social/emotional support in the county (84.20%) is higher than that of neighboring counties and higher than that of the state average (76.10%).

• Suicide death rate of Oswego County (11.69 deaths per 100,000 population) is higher than that of the state average (7.11).

• Percent of adults drinking alcohol daily (men more than two drinks and women more than one drink) in the county (23.90%) is much higher than that of the state (15.70%).

• STDs have increased in the county in recent years: Chlamydia cases more than doubled, Gonorrhea more than quadrupled, and Hepatitis C increased almost 50% since 2009.

• Oswego County is located in the epicenter of mosquito-borne diseases in the state. In the past 42 years, three of the five fatal EEE human cases reported in the state occurred in Oswego County. In 2012, there was one case of human WNV reported. In 2013, up until October 21, one case of human WNV has been reported.

• Lyme disease increased more than 10 times since 2009 through August 2013.

• Oswego County adults a have higher percentage of no leisure-time physical activities compared to the state. Access to parks, recreation and fitness facilities are low compared to the state.

• Few of the population uses public transit (0.71%) compared to the state (26.65%).

Despite many challenges, Oswego County remains a well netted community. More county residents reported feeling adequate social/emotional support in Oswego County than people in neighboring counties. At an institutional level, many health improvements were achieved by collaboration and partnership among different organizations in the county, for example reducing fall-related hospitalizations and improving primary care coverage for the county residents.

In the development of this Community Health Assessment, more than a dozen data sources were explored, numerous partners and stakeholders were consulted, preliminary data was shared with many organizations and institutes, community input was sought, and the process and the document were reported to the Oswego County Health Legislative Committee and the Oswego County Board of Health.
OSWEGO COUNTY
COMMUNITY HEALTH ASSESSMENT
2014 – 2017

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Oswego County Community Health Assessment 2014 - 2017

A Look at Oswego County’s Health Status and Prevention Agenda Priorities

SECTION I. DESCRIPTION OF OSWEGO COUNTY

Established in 1816 through an act of the New York State Legislature, Oswego County occupies 951 square miles of land on the southeastern shore of Lake Ontario. While rich in natural beauty, the proximity to Lake Ontario and the Tug Hill Plateau located in the eastern portion of the county subjects the area to heavy lake-effect snowfall which can reach over 180 inches a season, particularly in the northern half of the county. The county is also home to Toad Harbor/Big Bay Swamp, which lies along the northern shore of Oneida Lake. These hardwood swamps create a hospitable environment for species of mosquitoes known to transmit Eastern Equine Encephalitis (EEE).

Oswego County is comprised of the cities of Oswego and Fulton, 10 villages, and 22 towns. The County Legislature includes 25 districts; each legislator represents approximately 5,000 citizens. The county is located in the 23rd Congressional District; the 48th District of the New York State Senate; and in the 115th, 122nd, 124th, and 128th Districts of the New York State Assembly.

Oswego County is accessible by land, air and water. Interstate 81 and I-481 travel through the county, and the NYS Thruway (I-90) is just to the south. The Oswego County Airport sees more than 25,000 take-offs and landings a year. The 23-mile Oswego River Canal is part of the NYS Canal System and the historic Erie Canal National Heritage Corridor.

The northern and eastern portions of the county are sparsely populated and rural in nature, and characterized by a high level of poverty and geographic isolation. Public transportation is limited throughout Oswego County, but particularly so in this area.
I.A. DEMOGRAPHICS

I.A.1. POPULATION

The population in Oswego County has remained relatively stable over the last decade. The most recent population change reported by the U.S. Census Bureau showed an increase in Oswego County population of 0.1% between April 1, 2010 to July 1, 2011. There are no statistically significant differences in population by age group or gender in Oswego County as compared to New York State. Oswego County is not very racially or ethnically diverse. Approximately 96.6% of Oswego County residents identify themselves as White, 1.0% as Black, and 2.2% as Hispanic based on the U.S. Census Bureau Quick Facts updated January 13, 2013. Almost 62% of Oswego County’s population lives in an area identified as rural, as defined by the U.S. Census Bureau.

Oswego County has had an increase in the number of migrant farm workers over the past year. From April of 2012 to March of 2013, approximately 450 seasonal farm workers came through Oswego County; this is up from 350 the previous year, according to the Oswego County Opportunities Migrant Services Program Manager. Most arriving are H2A workers here on work visas. Workers come from Mexico, Guatemala, Jamaica, and Cuba. In addition, a few farms are hiring Burmese refugees. There are very few family groups. The average migrant worker is between 20-35 years of age, with the Jamaican workers being a bit older, in the 40-50 year old age group. In the last several years, Oswego County has seen an influx of Amish families. It is estimated by Cornell Cooperative Extension, based on discussions with several members of the Amish community, that about 40 families have moved into Oswego County, settling primarily in the northeastern portion of the county.

---

Population Density

<table>
<thead>
<tr>
<th>Population Density (Per Sq. Mi.) by Tract, U.S. Census 2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Over 10,000</td>
</tr>
<tr>
<td>5,001 - 10,000</td>
</tr>
<tr>
<td>500.0 - 5,000</td>
</tr>
<tr>
<td>50.1 - 500.0</td>
</tr>
<tr>
<td>Under 50.1</td>
</tr>
</tbody>
</table>

Data Source: U.S. Census Bureau, 2006-2010 American Community Survey 5-Year Estimates
### Population Density (Per Sq. Mi.)

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population</th>
<th>Total Land Area (Square Miles)</th>
<th>Population Density (Per Square Mile)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>122,220</td>
<td>951.65</td>
<td>128.43</td>
</tr>
<tr>
<td>New York State</td>
<td>19,229,752</td>
<td>47,126.40</td>
<td>408.05</td>
</tr>
<tr>
<td>United States</td>
<td>303,965,271</td>
<td>3,531,905.50</td>
<td>86.06</td>
</tr>
</tbody>
</table>

### Urban vs. Rural Population

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population</th>
<th>Urban Population</th>
<th>Rural Population</th>
<th>Percent Urban</th>
<th>Percent Rural</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>122,109</td>
<td>46,701</td>
<td>75,408</td>
<td>38.25%</td>
<td>61.75%</td>
</tr>
<tr>
<td>New York State</td>
<td>19,378,102</td>
<td>17,028,105</td>
<td>2,349,997</td>
<td>87.87%</td>
<td>12.13%</td>
</tr>
<tr>
<td>United States</td>
<td>312,471,327</td>
<td>252,746,527</td>
<td>59,724,800</td>
<td>80.89%</td>
<td>19.11%</td>
</tr>
</tbody>
</table>


### Total Population - By Age Group

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Age</th>
<th>0-4</th>
<th>5-17</th>
<th>18-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td></td>
<td>5.76%</td>
<td>18.19%</td>
<td>12.12%</td>
<td>10.52%</td>
<td>13.74%</td>
<td>15.76%</td>
<td>11.72%</td>
<td>12.18%</td>
</tr>
<tr>
<td>New York</td>
<td></td>
<td>6.03%</td>
<td>16.77%</td>
<td>10.05%</td>
<td>13.54%</td>
<td>14.19%</td>
<td>14.75%</td>
<td>11.39%</td>
<td>13.29%</td>
</tr>
<tr>
<td>United States</td>
<td></td>
<td>6.62%</td>
<td>17.73%</td>
<td>9.94%</td>
<td>13.22%</td>
<td>13.89%</td>
<td>14.57%</td>
<td>11.28%</td>
<td>12.75%</td>
</tr>
</tbody>
</table>

*Citation: U.S. Census Bureau: A Compass for Understanding and Using American Community Survey Data (2008).*

### Total Population - By Gender

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Male</th>
<th>Female</th>
<th>Percent Male</th>
<th>Percent Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>60,761</td>
<td>61,459</td>
<td>49.71%</td>
<td>50.29%</td>
</tr>
<tr>
<td>New York</td>
<td>9,300,854</td>
<td>9,928,898</td>
<td>48.37%</td>
<td>51.63%</td>
</tr>
<tr>
<td>United States</td>
<td>149,398,720</td>
<td>154,566,544</td>
<td>49.15%</td>
<td>50.85%</td>
</tr>
</tbody>
</table>

*U.S. Census Bureau: A Compass for Understanding and Using American Community Survey Data (2008).*
Total Population - By Race

<table>
<thead>
<tr>
<th>Report Area</th>
<th>White</th>
<th>Black</th>
<th>Asian</th>
<th>Native American / Alaska Native</th>
<th>Native Hawaiian / Pacific Islander</th>
<th>Some Other Race</th>
<th>Multiple Races</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>96.64%</td>
<td>0.90%</td>
<td>0.66%</td>
<td>0.25%</td>
<td>0.01%</td>
<td>0.25%</td>
<td>1.30%</td>
</tr>
<tr>
<td>New York</td>
<td>66.38%</td>
<td>15.55%</td>
<td>7.24%</td>
<td>0.35%</td>
<td>0.03%</td>
<td>8.36%</td>
<td>2.09%</td>
</tr>
<tr>
<td>United States</td>
<td>73.99%</td>
<td>12.49%</td>
<td>4.67%</td>
<td>0.82%</td>
<td>0.16%</td>
<td>5.46%</td>
<td>2.41%</td>
</tr>
</tbody>
</table>

*U.S. Census Bureau: A Compass for Understanding and Using American Community Survey Data (2008).*

The following indicator reports information about population in-migration by assessing changes in residence within a one year period. Persons who moved to a new household from outside of their current county of residence, from outside their state of residence, or from abroad are considered part of the in-migrated population. Persons who moved to a new household from a different household within their current county of residence are not included.

Population - Geographic Mobility

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population</th>
<th>Population In-Migration</th>
<th>Percent Population In-Migration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>120,886</td>
<td>6,315</td>
<td>5.22%</td>
</tr>
<tr>
<td>New York</td>
<td>19,078,454</td>
<td>892,855</td>
<td>4.68%</td>
</tr>
<tr>
<td>United States</td>
<td>302,754,912</td>
<td>18,633,068</td>
<td>6.15%</td>
</tr>
</tbody>
</table>

*Data Source: U.S. Census Bureau, 2007-2011 American Community Survey 5-Year Estimates.*

Source geography: Tract.

I.A.2. INCOME, POVERTY AND UNEMPLOYMENT

Poor economic indicators are frequently associated with poor health outcomes. Poverty often creates barriers to accessing health care, healthy food, and other necessities to promote a healthy lifestyle. Families in crisis may not be in the position to make lifestyle changes to promote good health. Poverty issues continue to be a concern in Oswego County. The percent of Oswego County residents living at or below the poverty level is the highest in 10 years and growing faster than the state and national levels.

Over the last several years, Oswego County has experienced a rise in unemployment, a decline in the median family income from $45,928 in 2009 to $44,371 in 2010, and an increase in children living in poverty, from 19.5% in 2008, 20.3% in 2009, and 23.7% in 2010. According to the U.S. Census Bureau, 2008-2010 American Community Survey 3-Year Estimates, approximately 25% of the county population is receiving Medicaid.
Oswego County Median Family Income in U.S. Dollars

Population in Poverty (200% FPL)
This indicator reports the percentage of the population living in households with income below 200% of the Federal Poverty Level (FPL). This indicator is relevant because poverty creates barriers to accessing health services, healthy food, and other necessities, thereby contributing to poor health status.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population</th>
<th>Population with Income at or Below 200% FPL</th>
<th>Percent Population with Income at or Below 200% FPL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>116,210</td>
<td>41,679</td>
<td>35.87%</td>
</tr>
<tr>
<td>New York</td>
<td>18,787,162</td>
<td>5,838,051</td>
<td>31.07%</td>
</tr>
<tr>
<td>United States</td>
<td>298,788,000</td>
<td>97,686,536</td>
<td>32.69%</td>
</tr>
</tbody>
</table>

Oswego County Percentage of Children Ages <18 Years At or Below Poverty Level

Children in Poverty in Oswego County, NY County, State, and National Trends

Source: NYS DOH
Unemployment
Unemployment continues to be a struggle in Oswego County. The loss of several large employers over the past decade has greatly impacted this area. According to the NYS Department of Labor data, released March 12, 2013, the unemployment rate in Oswego County reached 12.7%. This rate was also reached in January 2011 and February 1992.

NYS Unemployment Rates by County
January 2013

Data from NYS Dept. of Labor, Released March 12, 2013
I.A.3. HEALTH INSURANCE STATUS

As more population has been enrolled in Medicaid, Oswego County has fewer uninsured residents than the state and national average, but is similar to surrounding counties and other rural counties.

### Population Without Health Insurance

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population (For Whom Insurance Status is Determined)</th>
<th>Number Uninsured</th>
<th>Percent Uninsured</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>121,644</td>
<td>10,516</td>
<td>8.64%</td>
</tr>
<tr>
<td>New York</td>
<td>19,040,036</td>
<td>2,198,934</td>
<td>11.55%</td>
</tr>
<tr>
<td>United States</td>
<td>301,501,760</td>
<td>45,368,296</td>
<td>15.05%</td>
</tr>
</tbody>
</table>

*Data Source: U.S. Census Bureau, 2008-2010 American Community Survey 3-Year Estimates. Source geography: PUMA*

### Percent of Adults Under Age 65 Without Health Insurance

<table>
<thead>
<tr>
<th>New York State</th>
<th>Cayuga</th>
<th>Cortland</th>
<th>Madison</th>
<th>Oneida</th>
<th>Onondaga</th>
<th>Oswego</th>
<th>Tompkins</th>
<th>Chautauqua</th>
</tr>
</thead>
<tbody>
<tr>
<td>14%</td>
<td>13%</td>
<td>11%</td>
<td>11%</td>
<td>10%</td>
<td>12%</td>
<td>12%</td>
<td>12%</td>
<td>12%</td>
</tr>
</tbody>
</table>

*County Health Ranking Data March 20, 2013*

### Population Receiving Medicaid

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Population (for Whom Insurance Status is Determined)</th>
<th>Population Receiving Medicaid</th>
<th>Percent Population Receiving Medicaid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>122,150</td>
<td>28,164</td>
<td>25.46%</td>
</tr>
<tr>
<td>New York</td>
<td>19,389,160</td>
<td>4,040,335</td>
<td>20.84%</td>
</tr>
<tr>
<td>United States</td>
<td>309,231,232</td>
<td>51,335,184</td>
<td>19.91%</td>
</tr>
</tbody>
</table>

*Data Source: U.S. Census Bureau, 2008-2010 American Community Survey 3-Year Estimates. Source geography: PUMA.*
I.A.4. ACCESS TO HEALTH CARE

The Access to Health Care indicator reports the percentage of adults aged 18 and older who self-report that they do not have at least one person who they think of as their personal doctor or health care provider. This indicator is relevant because access to regular primary care is important to obtaining preventive healthcare and avoiding unnecessary emergency department visits.

According to 2012 County Health Ranking data, Oswego County has one primary care physician for every 2,701 resident, which is fewer than the national average (one for every 631 residents) and fewer than the state average (one for every 781 residents).

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population (Age 18+)</th>
<th>Number Adults Without Any Regular Doctor</th>
<th>Percent Adults Without Any Regular Doctor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>92,945</td>
<td>11,683</td>
<td>12.57%</td>
</tr>
<tr>
<td>New York</td>
<td>14,846,155</td>
<td>2,161,600</td>
<td>14.56%</td>
</tr>
<tr>
<td>United States</td>
<td>232,747,222</td>
<td>44,961,851.44</td>
<td>19.32%</td>
</tr>
</tbody>
</table>

A Community Needs Survey conducted by Oswego Health in August 2012 noted an increase in the number of respondents who mention they have a doctor they use on a regular basis for routine or primary care. This response rose from 91% in 2010 to 95% in 2012. In addition, 55% of these respondents reported that they use their nurse or doctor as their primary source of health-related information. This may be a significant finding impacting efforts to reach county residents with positive messages about improving health behaviors. Although the number of residents who are able to identify a primary care provider seem to be improving, and while the county rate of insured residents is higher than the NYS percentages, there is still a lag in timely access to care.

The Primary Care Safety Net is a coalition made up of Northern Oswego County Health Services, Inc. (NOCHSI), which operates the county’s federally qualified health center; Oswego County Opportunities (OCO); and Oswego Health. The coalition agreed to consolidated their agencies’ Primary Care Services under the NOCHSI federally qualified health center. This change occurred in January of 2013 and helped to stabilize the availability of primary care services in Oswego County.
The merger did not result in the loss of any primary care physicians and actually aided in the recruitment of new providers. While there is still a several week wait for an appointment with most of NOCHSI's current primary care providers, recent recruitment should help to improve this. NOCHSI also operates five school-based health centers in Oswego County located in Pulaski, Sandy Creek, Mexico and APW school districts.

**Dental Care Utilization (Adult)**

This indicator reports the percentage of adults aged 18 and older who self-report that they have not visited a dentist, dental hygienist or dental clinic within the past year. This indicator is relevant because engaging in preventive behaviors decreases the likelihood of developing future health problems. This indicator also highlights a lack of access to preventive care, a lack of health knowledge, insufficient provider outreach, and/or social barriers preventing utilization of services.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population (Age 18+)</th>
<th>Number Adults with No Dental Exam</th>
<th>Percent Adults with No Dental Exam</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>92,945</td>
<td>33,488</td>
<td>36.03%</td>
</tr>
<tr>
<td>New York</td>
<td>14,846,155</td>
<td>4,035,185</td>
<td>27.18%</td>
</tr>
<tr>
<td>United States</td>
<td>232,747,222</td>
<td>70,151,188.94</td>
<td>30.14%</td>
</tr>
</tbody>
</table>


Oswego County also lacks adequate dental provider coverage for the population. According to the County Health Rankings data released March 20, 2013, Oswego County has a ratio of people per dentist of 2,825:1. The New York State ratio is 1,222:1.

**I.A.5. EDUCATION**

This following indicator reports the average high school freshman graduate rate, which measures the percentage of students receiving their high school diploma within four years. This indicator is relevant because low levels of education are often linked to poverty and poor health. While Oswego County does better than New York State and the National on-time graduation rate, only 51% of residents completed some college, compared to the national benchmark of 68%, and New York State percentage of 64%. This is despite data from the Kids Wellness Indicator Clearinghouse that suggests that over 80% of Oswego County High school graduates intend to go to college.
I.A.6. HOUSING ISSUES

Housing quality has often been identified as a key social determinant of health. A growing body of literature continues to support the idea that access to and quality of housing play a role in one’s health status. Public health has long been interested in the role housing plays in lead poisoning and asthma-related illnesses. A paper published in the American Journal of Public Health illustrates the link between housing and health. The article states that access in substandard housing is disproportionately distributed across the population and that low income people are 2.2 times more likely to live in homes with severe physical problems. Those with low income are more likely to live in overcrowded homes, have homes with repairs that are needed but are unable to afford to make those repairs, and often live in homes that are too cold or too warm, due to lack of insulation or inability to afford the cost associated with keeping a home at a comfortable temperature. (Am J of Public Health, 2002;92:758-768)
Home ownership in Oswego County is 73.5%, which is well above the NYS rate of 54.8%. The median value of a house in Oswego County is $90,600, well below the median value in New York State of $301,000. Despite these seeming advantages, economic hardship makes proper housing a challenge for many residents in the county.

- Homelessness is an increasing yet silent problem in Oswego County. Oswego County Opportunities (OCO) reported assisting 1,126 teens, adults or families with homelessness issues in 2012.
- The Department of Social Services reported that in 2012, 705 people indicated on applications for assistance that they were homeless, which is up from 580 people in 2011. In addition, point-in-time surveys were conducted by OCO in January of 2012 and 2013 to get a picture of those who were at risk for becoming homeless or currently homeless. In 2012, 155 individuals completed the survey. One hundred and twenty participants met the HUD definition of homeless or at-risk for homelessness. Of those at risk or currently homeless, 22.5 % were homeless and 77.5% were at risk of becoming homeless.
- In 2013, more participants took the survey with 280 of the 365 participants meeting the HUD definitions of at risk for homelessness or homeless. The percentages remained the same. (2012, 2013 COACH Point in Time Survey, Oswego County)
I.B. HEALTH STATUS & HEALTH ISSUES

Over the last several years, Oswego County has consistently ranked at the bottom of the County Health Ranking data in New York State, for health factors and health behaviors. Oswego County has ranked worse than its neighboring counties in the following areas: adult and childhood obesity, adult smoking, smoking during pregnancy, unintended pregnancy and excessive drinking. The poor health behaviors exhibited have lead to a decline in health outcomes in the County Health Ranking data for 2013. Several of these health behaviors are known risk factors for the leading causes of death. A community wide change in health behaviors would improve residents' health. In addition, Oswego County has a more years lost to premature death than neighboring counties. The NYS DOH reported in 2011 the leading causes of death for Oswego County residents were: 1) Heart Disease, 2) Cancer, 3) Chronic Lower Respiratory Disease, 4) Unintentional Injury, and 5) Stroke.

Premature Death

Premature death means years of potential life lost due to death prior to the age of 75. Health behaviors, clinical care, social and economic factors, and physical environment all play in role in influencing mortality, morbidity, and premature death. Although improving, Oswego County remains among the highest in Central New York for years of potential life loss, and is above the New York State rate.
I.B.1. PREVENT CHRONIC DISEASE

Obesity

Obesity has reached epidemic proportions across the United States and New York State. Oswego County also finds overweight and obesity issues plaguing its residents. Obesity and overweight are the second leading cause of preventable death in the United States, and threaten to overtake tobacco use as the single most preventable cause of premature death. According to the Institute of Medicine, if action is not taken to reverse the obesity and overweight trend, this generation runs the risk of being the first generation that does not have a longer lifespan than their parents. At the core of the obesity and overweight issue is that citizens consume excess calories through food and drink than they are able to burn off through physical activity.

It is important that residents have access to healthy affordable foods, safe places to walk and play, are exposed to less advertising promoting unhealthy foods; workplaces and schools that encourage and promote healthy behaviors; and have health care providers who are willing to engage their patients in discussions about attaining and maintaining a healthy weight. Currently, 67.9% of Oswego County adults are overweight or obese, with 34% of the adult population falling into the obese status (a BMI of 30 or above). That is significantly higher than New York State’s 25%.
Obesity in children is also a concern in Oswego County, with childhood obesity rates among the highest in the state. Thirty-one percent of elementary school children in Oswego County are overweight or obese and 46% of middle school and high school students are overweight or obese. Combine all students and the county is the worst in the state at 38%, according to the 2008-2010 Student Weight Status Category Reporting System. This is based on weight status reported on physical exams required in Pre-K, Kindergarten, second, fourth, seventh, and tenth grades.

According to the Pediatric Nutrition Surveillance System data collected from 2008-2010, 16% of Oswego County children aged 2-4 years of age are obese compared to the New York State rate of 14.5%.

Additionally, 30% of pregnant women enrolled in WIC in Oswego County were obese prior to their pregnancy.

### Percentage of Adults Who Are Obese (18yrs Old+)

<table>
<thead>
<tr>
<th>New York State</th>
<th>Cayuga</th>
<th>Cortland</th>
<th>Madison</th>
<th>Oneida</th>
<th>Onondaga</th>
<th>Oswego</th>
<th>Tompkins</th>
<th>Chautauqua</th>
</tr>
</thead>
<tbody>
<tr>
<td>25%</td>
<td>25%</td>
<td>27%</td>
<td>27%</td>
<td>29%</td>
<td>29%</td>
<td>34%</td>
<td>23%</td>
<td>28%</td>
</tr>
</tbody>
</table>

*County Health Ranking Data, 2013 Percent Population with BMI > 30.0*

### Adult Obesity Trends in Oswego County, New York State and United States

*Data: County Health Ranking Data, 2013*
## Adults With No Leisure-Time Physical Activity By Gender

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Males with No Leisure-Time Physical Activity</th>
<th>Percent Males with No Leisure-Time Physical Activity</th>
<th>Total Females with No Leisure-Time Physical Activity</th>
<th>Percent Females with No Leisure-Time Physical Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>11,181</td>
<td>25.20%</td>
<td>12,456</td>
<td>26.90%</td>
</tr>
<tr>
<td>New York</td>
<td>1,564,037</td>
<td>22.34%</td>
<td>2,018,892</td>
<td>25.97%</td>
</tr>
<tr>
<td>United States</td>
<td>23,736,266</td>
<td>21.73%</td>
<td>29,817,193</td>
<td>25.41%</td>
</tr>
</tbody>
</table>

*Data Source: Centers for Disease Control and Prevention, Diabetes Data & Trends: Frequently Asked Questions (FAQ). (2012). Community Commons*

## Recreation and Fitness Facility Access

This indicator reports the number per 100,000 population of recreation and fitness facilities as defined by North American Industry Classification System (NAICS) Code 713940. This indicator is relevant because access to recreation and fitness facilities encourages physical activity and other healthy behaviors.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population</th>
<th>Number of Establishments</th>
<th>Establishment Rate per 100,000 Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>122,109</td>
<td>11</td>
<td>9.01</td>
</tr>
<tr>
<td>New York</td>
<td>19,378,102</td>
<td>2,134</td>
<td>11.01</td>
</tr>
<tr>
<td>United States</td>
<td>308,745,538</td>
<td>29,506</td>
<td>9.56</td>
</tr>
</tbody>
</table>

*Note: This indicator is compared with the state average. No breakout data available. Data Source: U.S. Census Bureau, County Business Patterns, 2011. Source geography: County.*

## Park Access

This indicator reports the percentage of population living within 1/2 mile of a park and is relevant because access to outdoor recreation encourages physical activity and other healthy behaviors.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population</th>
<th>Total Population Within 1/2 Mile of a Park</th>
<th>Percent Population Within 1/2 Mile of a Park</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>122,109</td>
<td>8,547</td>
<td>7%</td>
</tr>
<tr>
<td>New York</td>
<td>19,378,102</td>
<td>9,989,440</td>
<td>52%</td>
</tr>
<tr>
<td>United States</td>
<td>312,732,537</td>
<td>120,503,664</td>
<td>39%</td>
</tr>
</tbody>
</table>

*Data Source: Centers for Disease Control and Prevention, National Environmental Public Health Tracking Network, 2010. Source geography: County.*
Oswego County School Children’s Weight Status by Schools, 2008-2010

- 38% overweight or obese
- 22% obese
- 16% overweight but not obese
- 24% healthy weight

NYS DOH September 2012, Pre-K, K, 2nd, 4th, 7th, and 10th grades

Supplemental Nutrition Assistance Program (SNAP)-Authorized Food Store Access

This indicator reports the number of SNAP-authorized food stores as a rate per 100,000 population. SNAP-authorized stores include grocery stores as well as supercenters, specialty food stores, and convenience stores that are authorized to accept SNAP benefits.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population</th>
<th>SNAP-Authorized Retailers</th>
<th>SNAP-Authorized Retailers, Rate per 100,000 Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>122,228</td>
<td>107</td>
<td>87.54</td>
</tr>
<tr>
<td>New York</td>
<td>19,465,197</td>
<td>20,551</td>
<td>105.58</td>
</tr>
<tr>
<td>United States</td>
<td>311,449,532</td>
<td>255,511</td>
<td>82.04</td>
</tr>
</tbody>
</table>

Low Income Population With Low Food Access
Low food access is designated for urban populations living over one mile from a food retailer and for rural populations living over 10 miles from a food retailer. This indicator is relevant because it highlights populations and geographies facing food insecurity.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>122,109</td>
<td>3,225</td>
<td>2.64%</td>
</tr>
<tr>
<td>New York</td>
<td>19,378,102</td>
<td>493,320</td>
<td>2.55%</td>
</tr>
<tr>
<td>United States</td>
<td>308,745,538</td>
<td>19,347,047</td>
<td>6.27%</td>
</tr>
</tbody>
</table>

Note: This indicator is compared with the state average. No breakout data available.

Grocery Store Access

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population</th>
<th>Number of Establishments</th>
<th>Establishment Rate per 100,000 Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>122,109</td>
<td>23</td>
<td>18.84</td>
</tr>
<tr>
<td>New York</td>
<td>19,378,102</td>
<td>9,560</td>
<td>49.33</td>
</tr>
<tr>
<td>United States</td>
<td>308,745,538</td>
<td>64,366</td>
<td>20.85</td>
</tr>
</tbody>
</table>

Source: U.S. Census Bureau, County Business Patterns, 2011

Diabetes
Diabetes mortality for Oswego County is higher than surrounding counties in Central New York (CNY) and New York State. Hospitalizations due to diabetes as a primary diagnosis are elevated compared to CNY, but below the statewide trend. In Oswego County discharges due to diabetes seem to be trending downward from 2009 to 2010. According to the County Health Ranking data, 85% of diabetic Medicare enrollees are being screened appropriately for HbA1c, as a measure of how well patients are managing their diabetes. HbA1c monitoring is a standard of care for the management of diabetes and this percentage is consistent with state trends, but below the National Benchmark of 90%.
Diabetes Mortality and Hospitalization

<table>
<thead>
<tr>
<th></th>
<th>Oswego</th>
<th>Onondaga</th>
<th>Oneida</th>
<th>Madison</th>
<th>Cayuga</th>
<th>Jefferson</th>
<th>CNY</th>
<th>NYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mortality</td>
<td>19.0</td>
<td>16.8</td>
<td>18.4</td>
<td>15.3</td>
<td>14.8</td>
<td>13.5</td>
<td>17.3</td>
<td>16.6</td>
</tr>
<tr>
<td>Hospitalization</td>
<td>16.3</td>
<td>13.3</td>
<td>16.8</td>
<td>10.2</td>
<td>12.3</td>
<td>10.9</td>
<td>13.6</td>
<td>19</td>
</tr>
</tbody>
</table>

Source: 2008-2010 Vital Statistics Data as of February, 2012; rate per 10,000 (primary diagnosis) Source: 2008-2010 SPARCS Data as of May, 2011

Percentage of Adults Aged 18 and Older Who Have Diabetes or Are Obese (2009)

![Graph showing percentage of adults with diabetes or obesity]

New York State Expanded BRFSS.2009

Diabetes Hospitalization Age-adjusted Rate per 10,000 (Primary Diagnosis) Trend for Oswego County

![Graph showing diabetes hospitalization rate]

Source: 2008-2010 SPARCS Data as of May, 2011
Diabetes Management (Hemoglobin A1c Test)

This indicator reports the percentage of diabetic Medicare patients who have had a hemoglobin A1c (hA1c) test, a blood test which measures blood sugar levels, administered by a health care professional in the past year.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Medicare Enrollees</th>
<th>Medicare Enrollees with Diabetes</th>
<th>Medicare Enrollees with Diabetes with Annual Exam</th>
<th>Percent Medicare Enrollees with Diabetes with Annual Exam</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>10,405</td>
<td>1,349</td>
<td>1,150</td>
<td>85.32%</td>
</tr>
<tr>
<td>New York</td>
<td>1,466,971</td>
<td>160,429</td>
<td>136,085</td>
<td>84.83%</td>
</tr>
<tr>
<td>United States</td>
<td>51,875,184</td>
<td>6,218,804</td>
<td>5,212,097</td>
<td>83.81%</td>
</tr>
</tbody>
</table>

Data Source: Dartmouth Atlas of Healthcare, Selected Measures of Primary Care Access and Quality, 2010. Source geography: County

Tobacco Use

Tobacco use remains the number one preventable cause of premature death in the United States, and the high rate of tobacco use among residents in Oswego County is a concern. Currently, 32% of Oswego County residents are smokers. This is almost twice as high as the New York State use of 18%, and well above the Prevention Agenda 2013 objective of 12%. Additionally, statewide perinatal data for 2011 shows that 26.1% of pregnant women in Oswego County smoked during pregnancy. That number has climbed to 28.3% in 2012. Recent zip code-level data suggests the rate may be close to 32% of pregnant women smoke (see Promote Healthy Mothers, Infants, and Children section).

Approximately 42.4% of pregnant women with Medicaid as a payer source smoked during pregnancy compared to only 7.9% of pregnant women with private insurance. Data from the single OB/GYN provider in Oswego County shows 6.2% of their total patient population smoke. This number jumps to 14% among women 22-30 yrs of age. Twenty-two percent of their pregnant patients smoke. Of their total patient population, 54% of their current smokers have Medicaid or Medicaid Managed Care plans as their payer source. Based on data collect from WIC participants in October, November, and December 2012, 28% of pregnant women smoked <20 cigarettes/day, 11% of breastfeeding women smoked <20 cigarettes/day, 35% of post-partum women smoked <20 cigarettes/day, and 20.7% of pregnant women were exposed to second-hand smoke.
The exposure of pregnant women, unborn children, infants and children to the dangers of tobacco is alarming. The percentage of adults smoking in Oswego County is well above the target of 12% set in the 2013 Prevention Agenda and the National Benchmark of 13%. According to the 2008-2009 NYS Expanded BRFSS Data, only 70.4% of adults in Oswego County live in homes where smoking is prohibited. This is below the NYS percentage of 80.1%. Only three other counties have a lower percentage residents living in homes where smoking is prohibited.

### Percentage of Adults Who Smoke Almost Every Day

<table>
<thead>
<tr>
<th>New York State</th>
<th>Cayuga</th>
<th>Cortland</th>
<th>Madison</th>
<th>Oneida</th>
<th>Onondaga</th>
<th>Oswego</th>
<th>Tompkins</th>
<th>Chautauqua</th>
</tr>
</thead>
<tbody>
<tr>
<td>18%</td>
<td>29%</td>
<td>21%</td>
<td>23%</td>
<td>24%</td>
<td>16%</td>
<td>32%</td>
<td>13%</td>
<td>23%</td>
</tr>
</tbody>
</table>

*County Health Ranking Data March 20, 2013*

### Percentage of Women Who Smoked During Pregnancy

- Cayuga
- Madison
- Onondaga
- Oswego
- CNY Region

*Data: Statewide Perinatal Data System, Jan. 2011-Dec 2011
*REACH CNY Region includes Cayuga, Madison, Onondaga, Oswego Counties*
Cancer
Cancer is the second leading cause of death in Oswego County, with 214 deaths per 100,000 population in 2011. The incidence and mortality for all cancers collectively is higher in Oswego County than the rest of New York State. Rates of lung and bronchus cancer are of particular concern given the high percentage of smokers in Oswego County. Oswego County is better than the New York State average when it comes to incidence of breast cancer. Mortality from breast cancer is at the Central New York regional average. Diagnosis of late stage breast cancer in Oswego County remains below the Central New York and New York State averages. According to the American Cancer Society, 13 people are diagnosed with cancer each week in Oswego County and 5 people die each week due to cancer.

Lung and bronchus cancers represent 18.6% of all cancers and 34.6% of cancer deaths in Oswego County. This disproportionately high mortality highlights the need to address the prevention of smoking initiation, smoking cessation, and reducing the exposure to second hand smoke and tobacco advertising. Prostate cancer accounts for 14.6% of all cancers, female breast cancer accounts for 11.9% of all cancers, and colorectal cancer accounts for 9.8% of all cancers; with each representing 4.2%, 4.5%, and 8.8% of all cancer deaths respectively.

The Oswego County Cancer Services Program, lead by Oswego County Opportunities, does a great job screening uninsured and underinsured residents for breast, cervical and colorectal cancer. In 2012, 443 residents received cancer screening through this program.

---

Cancer Incidence and Mortality Rate per 100,000 Population

![Cancer Incidence and Mortality Rate](chart.png)

Lung And Bronchus Cancer Incidence and Mortality Rate per 100,000 Population

<table>
<thead>
<tr>
<th>Region</th>
<th>Incidence</th>
<th>Mortality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego</td>
<td>96.5</td>
<td>71.5</td>
</tr>
<tr>
<td>Onondaga</td>
<td>83.6</td>
<td>55.8</td>
</tr>
<tr>
<td>Oneida</td>
<td>82.5</td>
<td>54.3</td>
</tr>
<tr>
<td>Madison</td>
<td>85.6</td>
<td>53.5</td>
</tr>
<tr>
<td>Cayuga</td>
<td>84.6</td>
<td>46.6</td>
</tr>
<tr>
<td>Cortland</td>
<td>91.4</td>
<td>58.2</td>
</tr>
<tr>
<td>Region</td>
<td>83.0</td>
<td>55.8</td>
</tr>
</tbody>
</table>


Oswego County Lung and Bronchus Cancer Incidence Rate per 100,000 Population

The Oswego County Cancer Services Program, lead by Oswego County Opportunities, strives to promote free screening services among uninsured and underinsured residents for breast, cervical and colorectal cancer. In 2012, 443 residents were received cancer screening through this program.

Female Breast Cancer Incidence and Mortality Rate per 100,000 Women

Breast Cancer Incidence Rate for Oswego County

**Respiratory Disease**
Hospitalizations and deaths due to chronic lower respiratory diseases (chronic bronchitis, chronic obstructive pulmonary disease, and emphysema) remain higher for Oswego County residents compared to the rest of Upstate New York. Asthma hospitalization rates among county residents remain significantly lower than the New York State average, however the age-adjusted percentage of adults with current asthma is higher (12.1%) than the Upstate New York percentage (9.7%). This again emphasizes the need to address tobacco use among county residents and reduce the exposure to second hand smoke in order to protect non-smokers from respiratory disease.
Cardiovascular Disease
According to New York State Department of Health data, age adjusted deaths and hospitalizations due to cardiovascular disease are higher in Oswego County than the New York State rates. Premature death (deaths between 35-64 years of age) due to CHF are higher than the state average, with Oswego County having 2.7 deaths per 100,000 population and the state rate at 1.6 deaths per 100,000 population. Hospitalizations for CHF are a bit higher at 29 per 10,000 compared to 26.8 for the CNY region, and 28.9 per 10,000 for NYS. One area of particular concern is that of cerebrovascular disease or stroke. Oswego County ranks in the last quartile of the state for both deaths (38.8 per 100,000) and hospitalizations (28.3 per 10,000) due to stroke. The high prevalence of smoking and obesity may contribute to stroke data.

Cardiovascular Disease Indicators

New York State DOH data 2008-2010, As of Feb 2012, mortality rate per 100,000 and hospitalization per 10,000. All data age-adjusted.
I.B.2. PROMOTE A HEALTHY AND SAFE ENVIRONMENT

A healthy and safe environment is important for the development of a healthy population. Residents need access to clean drinking water, good air quality, and communities that limit the risk for physical injury. Oswego County and its partners are continuing to address falls prevention among the elderly population.

The local geography places Oswego County in epicenter of Eastern Equine Encephalitis and West Nile Virus activity in Central New York. Since the 1950s, there have been five human deaths attributable to mosquito borne disease in New York State, with three of them occurring in Oswego County. The hardwood swamps that are prevalent in Oswego County are excellent breeding grounds for mosquitoes that spread illnesses such as Eastern Equine Encephalitis and West Nile Virus.

Oswego County has an active mosquito surveillance program throughout most of the summer to monitor arthropod-borne diseases in the mosquito population. The county maintains 16 mosquito surveillance sites around the county to collect mosquito samples. Samples are submitted to the New York State Department of Health for testing to identify if mosquitoes are harboring viruses that could cause illness to people. In 2013, Oswego County submitted an average of 50-55 samples per week for testing.

This surveillance program helps to identify the prevalence and species of mosquitoes in the community, and the presence of EEE or WNV in the mosquito population. This is valuable information for public health officials, and helps in mosquito control decision making. While much of the county population’s attention is on aerial spraying as a control measure, this is only one, often limited approach to preventing the spread of EEE and WNV. The main focus of prevention messages should continue to be the use of personal protection measures to reduce the risk of being bitten by mosquitoes.

Oswego County inspected close to 1,200 permitted facilities, including restaurants, summer camps, hotels, and public water supply systems, and more than 300 public health related complaints and nuisances in 2012. These inspections included two big public events, the annual harbor festival and a heavy metal music concert. There was not any food-borne or water-borne disease outbreak reported in Oswego County due to the timeliness of inspections and intervenes.

In 2012, Oswego County maintained its efforts in enforcing tobacco regulations by reducing youth access to tobacco and tobacco products. Compliance rates with the Adolescent Tobacco Use Prevention Act (ATUPA) are consistently in the high ninety percent range. Compliance checks conducted in 2012 yielded only one sale to a minor. Vending machines that sell tobacco products are non-existent in Oswego County. In 1998 there were over 100 vending machines that sold cigarettes and all machines were gone by 2010.
I.B.3. PROMOTE HEALTHY WOMEN, INFANTS AND CHILDREN

In 2012, there were approximately 1,324 births to women from Oswego County. That is about the same number of births as in the previous year. The number of women seeking early prenatal care decreased from 79.3% to 75%. This could be linked to the lack of Prenatal Care Assistance Program (PCAP) services in the county. The number of women seeking early prenatal care who self-pay has increased. Births to teen mothers remain steady at 2.8%

**Teen Birth Rate**

This indicator reports the rate of total births to women under the age of 15-19 per 1,000 female population age 15-19. This indicator is relevant because in many cases, teen parents have unique social, economic, and health support services. Also, high rates of teen pregnancy may indicate the prevalence of unsafe sex practices.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Female Population Age 15 - 19</th>
<th>Births to Mothers Age 15 - 19</th>
<th>Teen Birth Rate (Per 1,000 Births)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>36,774</td>
<td>1,026</td>
<td>27.90</td>
</tr>
<tr>
<td>New York</td>
<td>4,613,065</td>
<td>120,401</td>
<td>26.10</td>
</tr>
<tr>
<td>United States</td>
<td>72,071,117</td>
<td>2,969,330</td>
<td>41.20</td>
</tr>
</tbody>
</table>


The number of women in the county who breastfeed in the early postpartum period has increased 2% but is still less than other counties in the region. Oswego County continues to have a high percentage of unintended pregnancies, in fact the highest in the CNY Perinatal region at 41.1%.

The number of pregnant women smoking increased from 26.1% to 28.3%. Nowhere else are health disparities based on income more evident than in the data provided by the CNY Perinatal Data System. On average, almost 32% of pregnant women smoked during their pregnancies. That percentage jumps to 42% among women with Medicaid as a payer source. This data illustrates that compared with women who have private insurance, women with Medicaid as a payer source participate in early prenatal care less often, smoke significantly more, breastfeed less in early postpartum periods, and have more unintended pregnancies. Reducing smoking during pregnancy needs to be a priority.
There has been a decrease in the number of women who self-report drug and/or alcohol use during pregnancy, however referrals made to the county’s Public Health Maternal and Child Nursing Service and a newborn drug-related hospitalization rate (121.8/10,000 discharges, well above the state rate 64/10,000 discharges) would suggest that numbers are increasing in drug and alcohol use among pregnant women.

### Maternal / Child Health Factors

Data source: Statewide Perinatal Data System, January-December 2012

<table>
<thead>
<tr>
<th></th>
<th>Oswego County</th>
<th>Reach CNY Area</th>
<th>CNY Region</th>
</tr>
</thead>
<tbody>
<tr>
<td>unintended. Preg.</td>
<td>41.10%</td>
<td>34.90%</td>
<td>33.60%</td>
</tr>
<tr>
<td>smoking preg</td>
<td>28.30%</td>
<td>19.60%</td>
<td>19.40%</td>
</tr>
<tr>
<td>Births to Teens</td>
<td>3%</td>
<td>2.40%</td>
<td>2.10%</td>
</tr>
<tr>
<td>Breastfeeding early</td>
<td>68.40%</td>
<td>72.20%</td>
<td>73.20%</td>
</tr>
</tbody>
</table>

*Data source: Statewide Perinatal Data System, January-December 2012*

### Smoked During Pregnancy by Payor Source

Data source: Statewide Perinatal Data System, January-December 2012

- Medicaid
- Private
- self pay/unknown

- Oswego
- CNY region
- Cayuga
- Madison
- Onondaga
Early Prenatal Care (1st Trimester)

Data source: Statewide Perinatal Data System, January-December 2012

Female Smoking Prior To and During Pregnancy, Oswego County, 2011

Data Source: NYS DOH Vital Statistics

*Town of Amboy shares zip codes with West Monroe and Williamstown
I.B.4. PROMOTE MENTAL HEALTH AND PREVENT SUBSTANCE ABUSE

Mental health and substance abuse issues continue to be a concern in Oswego County. The mortality rate from suicide in the county is nearly twice as high as the entire state. When Oswego County residents were surveyed about the number of days in the last 30 days that they would say their mental health was “not good,” the average was 3.2 days, which is comparable to the state average of 3.4 days. Almost 13% of Oswego County adults reported in the NYSBRFSS (2009) that they had poor mental health for 14 or more days in the past month, which is slightly above the state figure of 10.9%. However, on a positive note, most Oswego County residents report feeling that they have adequate social or emotional support.

The Oswego County Mental Hygiene division notes many areas of concern in the 2013 Local Plan for Mental Hygiene Services. The estimated prevalence of children with Serious Emotional Disturbance (SED) age 9-17 is 12%; the estimated prevalence of adults with Serious Mental Illness (SMI) age 18 and over is 5.4%; the estimated prevalence of adults with Serious and Persistent Mental Illness (SPMI) age 18 and over is 2.6%. The estimated prevalence of county residents with chemical dependency service needs is 13,352, approximately 13% of the county population age 12 and over. Of this estimate, 92% are adults and 8% are adolescents (ages 12-17) with alcohol and/or non-opiate drug use.

Oswego County has a greater percentage of adult consumers of mental health services living in private residences: 90% compared to the state average of 75%. There is also a greater percentage of adult consumers of mental health services with custody of minor children: 22% compared to 12.3% statewide. This may explain an increase for independent living supports and a reduction in demand for supervised programs.

Compared to New York State, Oswego County has a higher rate of binge drinking (consuming 5+ drinks in a row) at 22.5% compared to 19.6%, and a higher rate of alcohol consumption at 23.90% compared to 15.70%.

Despite the above background, Oswego County has only one-fifth of mental health providers compared with the state average (6429:1 vs. 1285:1).

Oswego County is seeing an increase in the number of new born drug-related hospitalizations. Oswego County’s rate is 137.3 per 10,000 discharges. This is significantly higher than the NYS rate of 72.6 per 10,000 discharges and above the Central New York rate of 130.5 per 10,000 discharges.
According to a local treatment center, Farnham Family Services, Oswego County has seen an increase in the use of heroin in the last few years. So much so, that this provider has started an opiate tract of substance abuse services this year to deal with the increase in those seeking treatment who list heroin as their primary drug of choice.

**Heroin and Other Opiate Use Among Clients Admitted to Farnham Family Services, 2010-Sept. 2013**

![Graph showing heroin and other opiate use among clients admitted to Farnham Family Services, 2010-Sept. 2013.](image)

*Data Source: Farnham Family Services, 2010-Sept. 2013*

**Adequate Social Or Emotional Support**

This indicator reports the percentage of adults aged 18 and older who self-report receiving sufficient social and emotional support all of most of the time.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>92,945</td>
<td>78,260</td>
<td>84.20%</td>
</tr>
<tr>
<td>New York</td>
<td>337,663</td>
<td>256,962</td>
<td>76.10%</td>
</tr>
<tr>
<td>United States</td>
<td>89,135,163</td>
<td>71,631,787</td>
<td>80.36%</td>
</tr>
</tbody>
</table>

*Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2006-2010.*
**Suicide**

This indicator reports the rate of death due to intentional self-harm (suicide) per 100,000 population. This indicator is relevant because suicide is an indicator of poor mental health.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population</th>
<th>Average Annual Deaths, 2006-2010</th>
<th>Crude Death Rate (Per 100,000 Pop.)</th>
<th>Age-Adjusted Death Rate (Per 100,000 Pop.)</th>
<th>Age-Adjusted Death Rate (Per 100,000 Pop.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>122,219</td>
<td>14</td>
<td>11.62</td>
<td>11.69</td>
<td></td>
</tr>
<tr>
<td>New York</td>
<td>19,226,914</td>
<td>1,419</td>
<td>7.38</td>
<td>7.11</td>
<td></td>
</tr>
<tr>
<td>United States</td>
<td>303,844,430</td>
<td>35,841</td>
<td>11.80</td>
<td>11.57</td>
<td></td>
</tr>
<tr>
<td>HP 2020 Target</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>&lt;= 10.2</td>
</tr>
</tbody>
</table>

Data Source: Centers for Disease Control and Prevention, National Center for Health Statistics, Underlying Cause of Death, 2006-2010. Accessed through CDC WONDER. Source geography: County.

**Alcohol Consumption**

This indicator reports the percentage of adults aged 18 and older who self-report heavy alcohol consumption (defined as more than two drinks per day for men and one drink per day for women). This indicator is relevant because current behaviors are determinants of future health and this indicator may illustrate a cause of significant health issues, such as cirrhosis, cancers, unintentional injuries, and untreated mental and behavioral health needs.

<table>
<thead>
<tr>
<th>Report Area</th>
<th>Total Population Age 18+</th>
<th>Estimated Population Heavily Consuming Alcohol</th>
<th>Percent Population Heavily Consuming Alcohol</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oswego County</td>
<td>92,945</td>
<td>22,214</td>
<td>23.90%</td>
</tr>
<tr>
<td>New York</td>
<td>337,663</td>
<td>53,013</td>
<td>15.70%</td>
</tr>
<tr>
<td>United States</td>
<td>89,135,163</td>
<td>13,385,866</td>
<td>15.02%</td>
</tr>
</tbody>
</table>

Note: This indicator is compared with the state average. No breakout data available. Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2005-2011. Source geography: County.
### Newborn Drug-Related Hospitalization Rate Per 10,000 Newborn Discharges

<table>
<thead>
<tr>
<th>Region 3 - CNY County</th>
<th>Discharges</th>
<th>Average Newborns 2009-2011</th>
<th>Crude Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2009</td>
<td>2010</td>
<td>2011</td>
</tr>
<tr>
<td>Cayuga</td>
<td>s</td>
<td>s</td>
<td>s</td>
</tr>
<tr>
<td>Cortland</td>
<td>s</td>
<td>s</td>
<td>s</td>
</tr>
<tr>
<td>Herkimer</td>
<td>s</td>
<td>s</td>
<td>s</td>
</tr>
<tr>
<td>Jefferson</td>
<td>s</td>
<td>s</td>
<td>s</td>
</tr>
<tr>
<td>Lewis</td>
<td>s</td>
<td>s</td>
<td>s</td>
</tr>
<tr>
<td>Madison</td>
<td>s</td>
<td>s</td>
<td>s</td>
</tr>
<tr>
<td>Oneida</td>
<td>27</td>
<td>23</td>
<td>22</td>
</tr>
<tr>
<td>Oswego</td>
<td>142</td>
<td>121</td>
<td>138</td>
</tr>
<tr>
<td>St Lawrence</td>
<td>12</td>
<td>18</td>
<td>26</td>
</tr>
<tr>
<td>Tompkins</td>
<td>s</td>
<td>s</td>
<td>s</td>
</tr>
<tr>
<td><strong>Region Total</strong></td>
<td>199</td>
<td>196</td>
<td>236</td>
</tr>
</tbody>
</table>

*Source: 2009-2011 SPARCS Data as of February, 2013*

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### I.B.5. HIV, STD, VACCINE PREVENTABLE DISEASE AND HEALTH-CARE ASSOCIATED INFECTIONS

The Oswego County Health Department investigates hundreds of cases of reportable disease, as is required by NYS Public Health Law. In 2012, the health department investigated 498 reportable illnesses which was up slightly from 477 in 2011. To date in 2013, some diseases that appear to be trending higher than in previous years. Those illnesses are: Chlamydia, Campylobacteriosis, Gonococcal infections, and Hepatitis C.
The hardwood swamps that extend along the north shore of Oneida Lake in the southern part of Oswego County and along the shoreline of Lake Ontario, make Oswego County and surrounding Central New York counties a hot spot for West Nile Virus (WNV) and Eastern Equine Encephalitis (EEE) activity. These swamp lands are prime breeding grounds and habitat for the species of mosquitoes that are the primary vectors of EEE. In the United States, approximately 5-10 human cases of EEE are reported annually. In the past 42 years there have been 5 cases of EEE in humans reported in New York State, all have been fatal and all have occurred in Central New York. Of those five cases, three were in Oswego County residents.

Lyme disease is also a concern in Oswego County. Cases are on the rise and Lyme disease has now been identified all across the state. Oswego County has seen a sharp rise in cases in the past five years, climbing from 5 cases in 2009 to 52 cases through August 2013.

Arthropod Borne Disease
SECTION II. MAIN HEALTH CHALLENGES
AND CONTRIBUTING CAUSES

II.A. MAIN HEALTH CHALLENGES

II.A.1. PREVENT CHRONIC DISEASE

Chronic diseases are non-communicable illnesses that are prolonged in duration, do not resolve spontaneously, and are rarely cured completely. Examples of chronic disease include cardiovascular diseases, respiratory diseases, cancer, and diabetes. They are among the most common, costly, and preventable of all health problems in the United States. Chronic disease is a leading health concern of the nation.

Oswego County, without exception, is facing challenges from chronic diseases, such as high death rates from stroke, high frequency of lung cancer, high hospitalization from congestive heart failure, and high diabetes incidence. These chronic diseases are associated with obesity and tobacco use. In Oswego County, more than one-third of the adult population is obese, meaning that they have a BMI greater than or equal to 30. In addition, based on the student weight status reporting system reported in July 2012 by the New York State Department of Health, Oswego County has consistently struggled when it comes to overweight or obese students, and positioned at the bottom of the county rankings (excluding NYC). Weight status is reported for students in Pre-K, Kindergarten, second, fourth, seventh, and tenth graders across New York. Based on the data collected from 2008-2010, 38% of students were in the overweight or obese categories. WIC data collected during that same time period indicates that 16% of the 2-4 year olds enrolled in the program were obese, which is above the New York State average of 14.5%. The County Health Ranking data reports the percentage of Oswego County adults who smoke is among the highest in the state, and according to the New York State Health Department, the county has one of the lowest percentages (70.4%) of adults who live in homes where smoking is prohibited.

The prevention of chronic disease in Oswego County is hindered by high rates of tobacco use and obesity, which contribute to the county’s:

- high incidence and mortality due to lung and bronchus cancer;
- increased mortality and hospitalization rates due to Chronic Lower Respiratory Disease;
- higher than state rates of death and hospitalization due to stroke;
- numerous hospitalizations due to congestive heart failure; and
- diabetes diagnosis and hospitalizations higher than that of other counties in Central New York and New York State.
II.A.2. PROMOTE HEALTHY WOMEN, INFANTS AND CHILDREN

The goal of promoting healthy women, infants, and children is to achieve better health and a safer environment for women, infants, and children through education, healthcare, social services, and public policy.

Over the past years, the rate of women in Oswego County who breastfeed during the early postpartum period has increased, and the number of teen mothers is stable and lower than 10 years ago, but still higher than neighboring counties. Further study of the available data identifies that women, infants and children’s health in Oswego County is intertwined with poor socioeconomic situations. For example, proportionally more pregnant women smoke who have Medicaid as their third party payer than those who have private insurance, and more pregnant women in remote towns smoke than in the rest of the county, with their children and infants more likely to receive exposure to second-hand smoke.

Challenges to promoting healthy women, infants and children in Oswego County are increased by health choices and health disparities as well, such as:

- smoking during pregnancy;
- later entrance into prenatal care;
- fewer women breastfeeding in early postpartum period;
- more unintended pregnancies; and
- significantly more newborn drug-related hospitalizations than the state.

II.A.3 PROMOTE MENTAL HEALTH AND PREVENT SUBSTANCE ABUSE

Mental health is defined as “a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.” The goal of promoting mental health is to increase awareness of mental illness as an important public health problem, and to increase awareness of the importance of promoting mental health, preventing mental illnesses, and reducing substance abuse.

As a rural county, with two-thirds of its population distributed in four-fifths of its territory, Oswego County achieved something very significant: compared to surrounding counties, Oswego County has the lowest percentage of adult residents who claim they feel inadequate social and emotional support. The county percentage is significantly lower than the state average.
Despite such a significant achievement, challenges to preventing substance abuse and improving mental health remain within Oswego County. For example,

- 12% of children age 9-17 have Serious Emotional Disturbance (SED).
- Of adults age 18 and over, 5.4% have serious mental illness (SMI) and 2.6% have serious and persistent mental illness (SPMI).
- The estimated prevalence of county residents age 12 and over who need chemical dependency services is approximately 13%.
- There are no chemical dependency detoxification intensive residential services with Oswego County. Transportation is a significant obstacle in accessing these services out of county.
- Inpatient treatment beds are not available for children or youth in Oswego County. Access to youth beds in close proximity is often a slow and difficult process.
- Heroin use among county residents has increased.
- Newborn drug-related hospitalizations are significantly higher than the New York State rate.

II.B. CONTRIBUTING CAUSES OF HEALTH CHALLENGES

II.B.1 BEHAVIORAL RISK FACTORS

According to the County Health Rankings data published by the University of Wisconsin and the Robert Woods Johnson Foundation, Oswego County has ranked 62 out of 62 counties for health behaviors for the last three years. The percentage of adults who smoke (32%), are obese (34%), and drink excessively (25%) rank well above the state and federal averages, and have for the past three years. In addition, 27% of female residents and 25% of male residents get no leisure-time physical activity. These factors lead to an increased risk for cancer, cardiovascular disease, chronic lower respiratory disease, stroke, and unintentional injury, the leading causes of death in Oswego County.

II.B.2. ENVIRONMENTAL RISK FACTORS

Oswego County is a largely rural county with almost 62% of the population living in rural areas. The northern and eastern-most portions of the county are also limited by geographic isolation and poverty. The area is often impacted by heavy lake effect snow, which can make travel by car dangerous and walking impossible.

There is limited access to public transportation and in most rural areas, roadways do not have sidewalks. According to the U.S. Census Bureau, 2007-2011 American Community Survey 5-Year Estimates, less than 1% of Oswego County’s population uses public transportation to get to work.
Oswego County is fortunate to have many beautiful natural resources. The shores of Lake Ontario, the Oswego River, Salmon River, and Tug Hill Plateau provide many areas to engage in outdoor physical activity. However, many of these are difficult to access without the use of a vehicle. According to the Center for Disease Control and Prevention National Environmental Public Health Tracking Network, only 7% of Oswego County’s population lives within a half mile of a park, compared to 52% across New York State. This is important because having access to outdoor recreation areas encourages physical activity and other healthy behaviors, and often walking or biking on rural roadways is not an option for families.

Food insecurity is an issue in isolated parts of Oswego County, with as much as 20-50% of the population located in the northeast corner of the county living more than 10 miles from a grocery store. This percent drops to 8% for the county as a whole, which is better than the state average of 13% with low access to food. Across the county, 2.65% of the county’s low income population has low food access, compared to 2.55% in New York State.

II.B.3. SOCIOECONOMIC RISK FACTORS

Poverty appears to be an underlying factor in the several of the socioeconomic issues and health behavior challenges facing Oswego County. The county unemployment rate reached 12% in the end of 2012, and Oswego County has been impacted by higher than the state average for unemployment for some time. There has been a decrease in median family income, and increase in children living in poverty(23.7% as of 2010), and families living in poverty.

Just over 25% of Oswego County’s population receives Medicaid. This is above the state percent of 20.84%, and the national trend of 19.91%. Over one-third (35.87%) of the county population lives with an income at or below 200% of the poverty level ($47,100 for a family of four). This is above the state (31%) and federal (32.69%) percentages.

Teen births also are relevant because teen parents often have several social, economic, and health support services needs. In addition, high rates of teen pregnancy may also indicate unsafe sex practices and an increased risk of contracting and spreading sexually transmitted diseases. Oswego County’s teen birth rate is 27.9 births per 1,000 births. This is slightly higher than the state rate of 26.10 teen births per 1,000 and below the federal rate of 41.20 per 1,000 births. Births to teens younger than 18 represent 2.8% of all births in the county, and 94.6% of these births are unintended.

Families in crisis are often not in a position to make lifestyle changes to promote good health. Poverty often creates barriers to accessing health care, obtaining healthy foods and other necessities to promote good physical, mental and emotional health.
II.B.4 POLICY ENVIRONMENT

County governments have limited amount of financial resources to provide the mandated and non-mandated local services. In Oswego County, 83% of the entire county budget pays for state and federal mandates. Medicaid consumes 59% of the entire Oswego County property tax levy. With the property tax cap in place, and the cost of unfunded and underfunded mandates going up, little discretionary funding remains available to pay for programs to improve the health and safety of county residents.

Oswego County has taken the lead in policy changes in the area of synthetic drugs and substitute cannabinoids, and has been recognized by New York State for being in the forefront of proposing legislation to reduce the risk in its communities resulting from these and other dangerous designer drugs. Other policy changes in Oswego County, especially those reducing the danger of exposure to secondhand smoke, have been undertaken at the local city, village, and town levels, with several municipalities implementing smoke-free parks and/or playground policies.
SECTION III. SUMMARY OF ASSETS & RESOURCES

Oswego County has a long history of successfully collaborating in order to meet the needs of its residents. Partnership exist among various government organizations, healthcare providers, local human service providers, universities, school districts, and the business community.

RURAL HEALTH NETWORK (RHN) OF OSWEGO COUNTY

The RHN is a leader in community mobilization in Oswego County. Monthly advisory meetings bring together over a dozen community members each month. In addition, four subcommittees meet on a monthly basis: County Health Issues; Technology; Workforce Development; and Policy and Funding. Current initiatives of the RHN that could be mobilized to address obesity are:

- Community Garden Project in Fulton
- Excellus Grant Healthy Cooking Connection
- Step Up to Stop Falls, Falls Prevention Grant
- Healthy Living Workshops

OSWEGO COUNTY OPPORTUNITIES (OCO)

The Oswego County Health Department has partnered with OCO on several projects and staff members are active on OCO advisory boards and the Board of Directors. The mission of OCO is to build partnerships to improve quality of life and create successful communities. They coordinate services in the following areas:

- Reproductive health
- WIC
- Nutrition services for seniors and summer food program for children
- Housing services for homeless, developmentally disabled, substance abuse
- Headstart
- RHN
- Cancer Services Program

CORNELL COOPERATIVE EXTENSION OF OSWEGO COUNTY (CCE)

CCE is a leader in nutrition education in Oswego County. They are a key participant in a new grant program which addresses food insecurity, access to healthy foods, nutrition education and the impact a healthy diet has on health metrics such as blood pressure, blood sugar, and cholesterol levels in individuals diagnosed with chronic disease.

OSWEGO HEALTH

Oswego Health operates the only hospital in Oswego County and is a valuable partner in many health initiatives across the county. They are pursuing opportunities to expand Healthy Living Workshops by having staff trained as peer leaders. The ability to have their discharge planning team refer patients to these workshops has the potential to increase the number of participants in this evidence-based program. The hospital also provides smoking cessation services to county residents.
TOBACCO FREE NETWORK OF OSWEGO COUNTY (TFN)
The TFN of Oswego County works throughout the county to reduce the exposure of second hand smoke and limit point of sale advertising in Oswego County. The TFN is a valuable partner in expanding the number of municipalities that have tobacco-free policies and will work to encourage landlords and housing agencies to institute tobacco policies for rental units in the county. TFN has been instrumental in establishing tobacco free grounds policies and encouraging events such as farmer’s markets to be tobacco free. The Oswego County Health Department is interested in partnering with TFN to reduce the exposure of second hand smoke in multi-unit housing, particularly low income housing.

OSWEGO COUNTY OB/GYN
Oswego County OB/GYN is the only provider of obstetrical/gynecological services in Oswego County, and delivers approximately half of all births in the county. The practice is willing to partner to find creative ways for reducing the smoking rate among pregnant women and reducing exposure to second hand smoke among pregnant women and children.

STATE UNIVERSITY OF NEW YORK AT OSWEGO
SUNY Oswego is a resource that Oswego County is attempting to utilize more often in public health activities. The university is willing to place interns with the Health Department, and faculty at the college have been willing to partner to assist with testing interventions and the development of strategies for health messaging. These links have been established through the Communications and Health Promotion and Wellness programs at SUNY Oswego.

NORTHERN OSWEGO COUNTY HEALTH SERVICES, INC (NOCHSI)
NOCHSI is a Federally Qualified Health Services Center that operates health centers in Fulton, Mexico, Oswego, Parish, Phoenix, and Pulaski, and five school-based health centers located in the APW, Pulaski and Sandy Creek School Districts. In addition they provide dental services in the Pulaski Health Center. They are active members of the Rural Health Network and are partnering on several grants including the Healthy Cooking Connection and Step Up to Stop Falls programs.

INTEGRATED COMMUNITY PLANNING (ICP)
ICP is a non-profit human service agency serving Oswego County. The agency consists of the Child Care & Development Council, the Tobacco Free Network and the Traffic Safety Board. Their mission is to be a community resource agency to support and improve the quality of life for youth and families of Oswego County.
EXCELLUS BLUE CROSS BLUE SHIELD

Excellus is an active member of the Oswego County Rural Health Network. Oswego County realizes the importance of obtaining input from the payer side of the health care system when considering changes that impact the health of residents. Excellus offers a perspective that providers may overlook. They have resources available to educate professionals and residents about changes in the healthcare system in areas such as the insurance exchange system, coding, resources available via insurance plans, and unique data sources.

OTHER POTENTIAL PARTNERS

- Chamber of Commerce
- Farhnam Family Services
- United Way of Oswego County
- Rotary
- Elks
- Zonta
- RSVP
- Oswego County School Districts
- Arise
- Public Libraries
- Primary Care Providers
- Shineman Foundation

CROSS COUNTY POLICY SUPPORT

As awareness of the county’s health challenges increased, many local governments and businesses developed and installed various policies to restrict smoking in their jurisdictions. For example:

- Oswego County passed legislation restricting smoking on county properties within 35 feet of an entrance.
- County-owned parks are smoke free.
- The Oswego County Tobacco Free Network was successful working with local business and municipalities to pass several tobacco free policies.
  - Municipalities include:
    - Towns of Minetto, Volney, Granby, and Oswego
    - Villages of Hannibal, Cleveland, and Central Square
    - City of Oswego (playgrounds only; not parks and Farmer’s Market)
  - Local businesses/organizations include:
    - Novelis
    - Oswego Health
    - Catholic Charities
SECTION IV. DOCUMENTATION OF PROCESS USED

The Oswego County Health Department engaged many community partners in the gathering of data, discussion of findings, and development priorities for the Community Health Assessment. Meetings with individual organizations took place as well as meetings among groups of stakeholders. A focus group of community organizations and community members was convened in May 2013. Numerous presentations of preliminary data were shared with the community. Information was shared with and gathered from diverse sections of the community including schools, health and human services, higher education institutions, law enforcement and probation agencies, businesses, legislative bodies, and the disabled/special needs community.

DATA SOURCES

- New York State Department of Health
- County Health Ranking 2010-2013
- Community Commons
- New York State Expanded Behavioral Risk Factor Surveillance System
- Oswego County WIC Program, 2012
- Oswego County OB/GYN, 2013
- Oswego Health Community Survey Findings Report, August 2012
- Oswego Health Stakeholder Interviews, August 2012
- Oswego County COACH Point in Time Survey on Homelessness, 2012 & 2013
- QuickFacts from the U.S. Census Bureau
- 2007-2011 American Community Survey
- Oswego County DSS TA Application Assessment Data, 2011 & 2012
- Statewide Perinatal Data System, 2011, 2012
- NYS Kids Wellness Indicators Clearinghouse
- American Cancer Society
- Oswego County Cancer Services Program
- Oswego County Health Department
- Farnham Family Services

PLANNING PARTNERS

- Oswego Health
- Oswego County Rural Health Network
- Oswego County Division of Mental Hygiene/DSS
- Oswego County OB/GYN
- Oswego County Tobacco Free Network
- Cornell Cooperative Extension of Oswego County
- Oswego County WIC
- Oswego County Head Start
- Oswego County Opportunities
- Integrated Community Planning of Oswego County
- Oswego County School Superintendents
COMMUNITY INPUT
Community input was sought from various stakeholders in the county using several methods including presentations, meetings with elected officials, reports to community organizations and committees, and a focus group. These engagements were opportunities for health department staff to share preliminary findings on the health challenges faced in Oswego County, seek opinions from those outside of the health department as to what they perceive as health concerns, and obtain information on how to partner with stakeholders to address these challenges in the Community Health Improvement Plan. Input and guidance was sought from the planning partners listed previously, and from those that preliminary data was shared with.

A focus group meeting was held on May 29, 2013. There were 30 participants in attendance with representation by health and human service organizations, elected leaders, and county residents. The participants were divided into three groups of ten. Each group was given the following questions to discuss in their sub-groups and then report back to the larger group. Those questions and results were:

- **Question 1:** What do you see as the biggest health issue impacting Oswego County?
  
  **Common themes:** Obesity and related health issues, poverty, access to care, mental health/substance abuse, unplanned pregnancy, lack of focus on preventive health

- **Question 2:** How do we better engage the community to create environmental changes for a healthier Oswego County?
  
  **Common Themes:** meet them in “their” community, community pride, highlight success stories, policy change/legislation, change social norms
• **Question 3**: How do we “brand” the healthier community and health behaviors we want for Oswego County?

  **Common Themes**: use local champions, social media, broad message that can be used across issues, for example: “Take a Step Towards Better Health,” “What is Your Healthy Choice?” “Health Wise.” Others said, don’t brand it, make it from the bottom up to get true ownership, e.g. “You Own It.”

A preliminary report of the Community Health Assessment was presented to the Oswego County Health Legislative Committee in October, 2013.

Once completed, the CHA will be posted on the county website. A link will be posted on the Health Department Facebook page and a copy will be placed in public and school libraries within Oswego County.