COMMUNITY NEEDS ASSESSMENT: 2021

This report provides a summary of the causes and conditions of poverty within Otsego County, NY and was submitted to the Opportunities for Otsego Board of Directors for approval in September 2021. Updates will be made to this community assessment as detailed, county-level 2020 Decennial Census data becomes available.

COUNTY PROFILE

- Otsego County is a rural community spanning 1,002 square miles through the Catskill Mountains and is the 17th-largest county in New York by area. The county is comprised of 34 municipalities: 24 towns, 9 villages, and 1 city.
- Otsego County is designated "rural" by the Federal Office of Rural Health Policy. The average population density of the county is 59.9 people per square mile.
- People living in poverty have greater vulnerability than other groups in disasters and hazardous natural events².
 Communities with the greatest number and percentage of people living in flood areas are the City of Oneonta, Unadilla, Laurens, and Otego. Poverty rates in these communities range from 22.2 11.3 percent³. It is estimated that 16.2% of all Otsego County residents live in poverty.
- Thirty-eight percent of Otsego County residents do not
 have access to fixed wireless internet service and approximately 4,000 people do not have access to 25
 Mbps wired broadband. Among all counties in New York State, Otsego ranks 48 out of 62 in the percentage of
 households with broadband coverage⁴. Through newly allocated federal and state funding, access to fixed
 internet service is expected to expand into unserved areas of Otsego County.

POPULATION PROFILE

From 2010 to 2020, the total population in Otsego County declined by 6.0%, from 62,259 persons to 58,524 persons 2020. In total, only four townships experienced growth: Decatur (5.9%), Edmeston (4.4%), Plainfield (0.8%), and Cherry Valley (0.5%). Townships with the greatest loss in population were Exeter (-14.4%), Richfield (-13.5%), Otego (-11.5%), and Middlefield (-11.0%)⁵.

US Census Bureau Data Release Schedule is provided as an appendix.

² https://www.samhsa.gov/sites/default/files/dtac/srb-low-ses_2.pdf

³ Otsego County Hazard Mitigation Plan, Section 5.4.4: Risk Assessment – Flood, April 2021

⁴ Broadband Now

⁵ Democrat & Chronical.com, NYDatabases.com, 2020 Census

Factors contributing to the overall population decline:

- The rate of births and inward migration to Otsego County is slower that the rate of deaths and outward migration⁶.
- Challenges and barriers with the 2020 Census enumeration process. In total, only 54.7% of Otsego
 County households self-responded to the 2020 Census compared to 57.0% in 2010 and 61.0% in 2000⁷.

From 2014 to 2019, Otsego County experienced a loss of 389 households (-1.36%). Of the estimated 23,409 households, 14,494 are families. Married-couple families comprised 77.29% of the total number, while male head of household (HoH) comprise 8.33% and female HOH comprised 14.39% of families. Non-family households represent 36.14% of all households in Otsego County. Of non-family households, 30.1% live alone; of which 13.9% (n=980) are persons over the age of 65. In comparison, households served by Opportunities for Otsego were 23.8% non-family and 76.2% family. Of the family households, nearly 40% were two-parent households followed by single parent female households (29.3%).

Vulnerable populations (e.g. children, elderly, racial and ethnic minorities, economically disadvantage, rural residents) are at greater risk of poor physical and social health status and often encounter barriers to accessing healthcare and other supportive services⁸. A summary of vulnerable populations in Otsego County is provided below:

- Age: The largest age cohort in Otsego County is persons 65+ followed by persons ages 18-24. The age group with the greatest rate of growth from 2010 to 2019 is persons age 65+ (15.56%). Populations with the largest percentage decline were persons aged 45-54, with -21.58% rate change, followed closely by children ages 5-17 (-19.30%)⁹. Age groups served most through the programs and services of Opportunities for Otsego are persons aged 24-34, children from birth-4 and youth ages 5-17.
- Race/Ethnicity: From 2010 to 2020, Otsego County experienced an 11.1% decline in persons identifying as White and a 203.1% jump in persons identifying as Multi/Mixed Race. Per 2020 Census data, Whites comprise 89.5% of the population, Blacks represent 2.2% of the population, Multi/Mixed Race made up 5.3% of the population, and the remaining races combined represent 2.9% of the population. Of all persons, 4.1% (n=2,392) identify as Hispanic or Latino/Latinix¹⁰. The demographics of the population served by Opportunities for Otsego mirror that of Otsego County.
- Language: Overall, 1.24% of Otsego County resident identify as having Limited English Proficiency (LEP). Of
 the estimated 738 persons, 48% speak Spanish or Spanish Creole¹¹. Of all persons receiving services
 from Opportunities for Otsego, 99.4% reported English as their primary language, followed by
 1.7% Urdu, 1.3% Chinese, .09% Spanish, and 1.7% "Other".

⁶ NYS Department of Health Vital Statistics and IRS migration data

 $^{^7\} https://www.census.gov/library/visualizations/interactive/2020-census-self-response-rates-map.html$

⁸ https://www.ajmc.com/view/nov06-2390ps348-s352

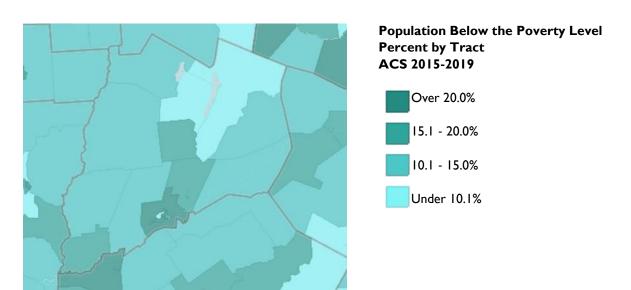
⁹ US Census ACS, 2019 5 Year Estimates

¹⁰ Democrat & Chronical.com, NYDatabases.com, 2020 Census

¹¹ https://www.lep.gov/maps/lma2015/Final_508

- Poverty¹²: Poverty is defined by the federal government annually and are often used to determine eligibility for social programs. The 2021 Federal Poverty Guideline (100% FPL) is \$26,500 for a family of four.

 Approximately 8,809 persons were living in poverty in Otsego County during 2019, representing 16.2% of the total population. This rate is greater than the poverty rates in both New York State (13.1%) and the United States (12.16%) for the same period.
 - Persons aged 18-24 make up one-quarter of all people living below the FPL in Otsego
 County, followed by children under the age of 17 with a combined rate of 20.0%.
 - The rate of poverty for females is 16.4% compared to males at 13.2%.
 - Native Hawaiian-Pacific Islander have the highest rate of poverty at 100% followed by
 persons of Some Other Race (49.4%), Black (35.4%), and Multi-Race (32.1%). Hispanic/Latino
 persons had a higher rate of poverty compared to Non-Hispanic/Latino at rates of 23.6% and 14.6%
 respectively.
 - Children aged 0-17 and seniors aged 65+ that identify as "Some Other Race" have the highest rate of poverty in Otsego County at 79.82% and 34.21% respectively.
 - Of all households living in poverty, married couples had the highest rate of poverty at 40.6%, followed by female headed households (39.4%).
 - Of the population age 25 and older, 25.9% those who did not earn a high school diploma live in poverty. As a person's level of education attainment increases, the rate of poverty decreases.
 - Of those in the labor force, persons who worked part-time or part-year during the past 12 months had a poverty rate of 19.7% compared to a rate of 23.0% who did not work at all in the past 12 months.



¹² US Census ACS, 2019 5 Year Estimates

The highest rates of poverty within Otsego County are in the City of Oneonta (specifically, tracts 5911 and 5910 with rates of 30.1% and 24.0% respectively) and census tract 5908, which encompasses the Town of Oneonta, with a poverty rate of 20.7%. Census Tract 5911, which is located south of the Norfolk-Southern railroad tracks and adjacent to the Susquehanna River in the City of Oneonta, has the greatest rate of persons countywide living below 200% of FPL at a rate of 55.7%.

Per the National 2020 Poverty Measure Estimates¹³, the official poverty rate in 2020 was 11.4%, up 1.0 percentage point from 2019. This is the first increase in poverty after five consecutive annual declines. National data also noted an increase in poverty rates increased for married-couple families and families with a female householder from 2019 to 2020. The poverty rate for married-couple families increased from 4.0% in 2019 to 4.7% in 2020 and the female householder families, the poverty rate increased from 22.2% to 23.4%. One would expect that 2020 poverty rates in Otsego County will also reflect these trends.

An additional measure of poverty is the Supplemental Poverty Measure (SPM). While the official poverty measure includes only pretax money income, the SPM adds the value of in-kind benefits, such as SNAP, school lunches, housing assistance, stimulus payments and refundable tax credits like those enacted as part of economic relief legislation related to the COVID-19 pandemic. SPM data findings: the national SPM rate of 9.1% was 2.3 percentage points lower than the official poverty rate of 11.4%. This is the first time in the history of the SPM where poverty is lower using the SPM than the official poverty rate.

- Unemployment insurance benefits, that were expanded during 2020, prevented 5.5 million people from falling into poverty.
- Stimulus payments, enacted as part of COVID-19 pandemic economic relief legislation, moved 11.7 million persons out of poverty. Without stimulus payments, the poverty rate for all people would have been 12.7% rather than 9.1%.
- Social Security continued to be the most important anti-poverty program, moving 26.5 million individuals out of poverty.

EMPLOYMENT

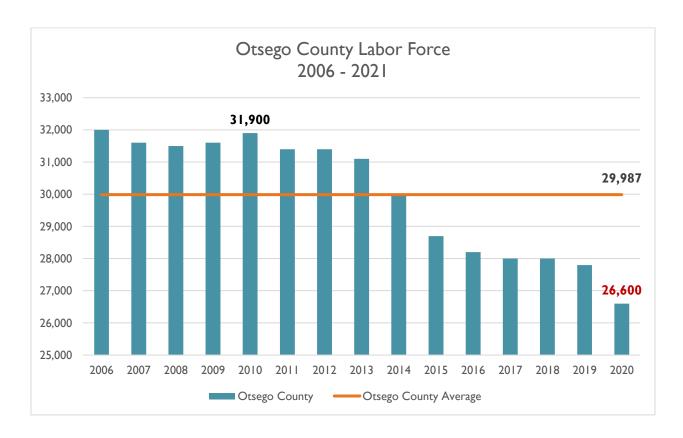
Despite increases in minimum wage, many workers in Otsego County cannot afford basic family expenses. At
the current minimum wage, only a single-adult fast-food worker and a two-adult working
household could sustain themselves¹⁴. Average weekly salaries in Otsego County range from \$771 to
\$1,043, depending on the business sector¹⁵.

¹³ Income, Poverty and Health Insurance Coverage in the United States: 2020, Released September 14, 2021

¹⁴ Massachusetts Institute of Technology Living Wage Calculator

¹⁵ NYS Department of Labor

- Since 2014, the number of persons in the Otsego County labor force has been on a continual decline, dropping from 30,000 persons to 26,600¹⁶. Based on Census Bureau age demographics, one would expect this trend to continue.
- Disregarding unemployment rates during the COVID-19 pandemic, the year with the greatest unemployment was 2012, with a rate of 8.0% and the lowest unemployment rate was in 2019 at 4.1%. Until the COVID-19 pandemic, the unemployment rate in Otsego County was on a consistent downward trend since 2012¹⁷.
- Industries with the greatest employment in Otsego County are health care and social assistance; retail trade; local government; accommodation and food services; state government; educational services; and manufacturing. Combined, these industries represent 77% of all employment¹⁸.
- Since 2017, Otsego County has experienced a decline in licensed family/group day care providers equating to nearly a loss of 100 childcare slots for children from 6 weeks to school-age. Comparably, there are 15 Day Care Centers in Otsego County. In total, these centers can provide care for up to 40 infants, 54 toddlers, 525 preschoolers, and 137 school-age children. Of the available care for preschoolers, 44% of slots are within the Head Start program¹⁹.



¹⁶ US Bureau of Labor and Statistics (https://data.bls.gov)

¹⁷ https://statistics.labor.ny.gov/laus.asp

¹⁸ https://statistics.labor.ny.gov/ins.asp

¹⁹ New York State Office of Children and Family Services (OCFS)

HOUSING

In 2020, Otsego County had an estimated 29,838 housing units: a 3.1% decrease since 2010²⁰.

- Vacancy Rates: Of all housing units, 24.9% are vacant, including 419 owner-occupied, 676 rental units and 6,728 "Other" housing units which are used for seasonal, recreational, or occasional use. The "Other" housing vacancy rate in Otsego County is 21.54% compared to the national rate of 8.27%²¹.
- Housing Age: Approximately 69.5% of housing in Otsego County was built prior to the 1978 federal ban on consumer use of lead-containing paint. The median year in which all housing was built was 1955²².
- Overcrowding: Among all occupied housing units, 2.01% (n=455) are considered overcrowded per HUD definition. The Census Tract with the highest rate of overcrowding is 5910 within the City of Oneonta at a rate of 8.4% (n=114) followed by tract 5908 that encompasses the Town of Oneonta. The rate in tract 5908 is 4.1% with 80 housing units deemed overcrowded²³.
- Other Housing Problems: Among all 23,409 occupied housing units, 0.7% (n=156) lack complete plumbing facilities; 0.9% (n=213) lack complete kitchen facilities; and 1.7% (n=395) have no telephone service available²⁴.

According to HUD, the generally accepted definition of "affordability" is for a household to pay no more than 30% of its annual income on housing. Within Otsego County, 22.3% of home owners and 55.9% of renters are cost burdened²⁵. The chart below summarizes the hourly wage a household must earn in order to afford a rental unit based on the area Fair Market Rent FMR) and not exceed 30% of income for housing costs.

Year	Efficiency	I-Bedroom	2-Bedroom	3-Bedroom	4-Bedroom
FY 2022 FMR ²⁶	\$723	\$734	\$892	\$1,151	\$1,307
Hourly Wage	\$13.31	\$13.38	\$16.79	\$21.06	\$27.00

Homeless: Over the period 10/2019 – 09/2020, Opportunities for Otsego housed 140 homeless households through its domestic violence shelter and emergency housing shelter. The top presenting issues among all homeless households were eviction (42.5%), family crisis/break up (22.5%), lost temporary living situation (12.5%) and domestic violence (12.5%). Additional emergency housing was provided by the Otsego County Department of Social Services and the newly established Warming Station in Oneonta.

²⁰ Democrat & Chronical.com, NYDatabases.com, 2020 Census

²¹ US Census ACS, 2019 5 Year Estimates

 $^{^{\}rm 22}$ US Census ACS, 2019 5 Year Estimates

²³ US Census ACS, 2019 5 Year Estimates

²⁴ US Census ACS, 2019 5 Year Estimates

²⁵ US Census ACS, 2019 5 Year Estimates

²⁶ US Department of Housing and Urban Development (HUD), Fair Market Rents

- Student Homelessness²⁷: During the 2019-2020 school year, there were 99 homeless children attending public school in Otsego County. On average, Otsego County public school districts educate 83 homeless students each year.
- Among these students Kindergarten-age children had the highest rate of homelessness (12.9%),
 followed by children enrolled in first grade (11.8%), and third, fourth, and sixth grades (9.7%).
- The Oneonta City School District had the highest number of homeless students (n=38), while Richfield Springs Central School has the highest rate of student homelessness compared to total enrollment.
 Richfield Springs Central School has ranked as one of the top three school districts in the rate of student homelessness for the last five consecutive years.
- The majority of homeless students (84%) were doubled-up or living in a temporary, shared housing situation, while the remaining lived in a congregate shelter (8.5%) or lived in a motel/hotel (7.5%).

NUTRITION

Per Feeding America, 12.0% of Otsego County residents (n=7,190) were food insecure prior to COVID-19. Of those considered food insecure, 32% live above the income threshold (200% FPL) to be eligible for SNAP and other nutrition programs. Further analysis on the impact of the pandemic on local food insecurity estimates that **food insecurity in Otsego County grew to 14.3% during 2020** and, with improvements to the economy and federal response, is expected to drop to 12.8% in 2021.

Food deserts continue to plague families in Otsego County. Per the UDSA, an estimated 15,705 low-income rural residents, 23.85% of the population of Otsego County, live more than I mile from supermarket. Populations most impacted by food deserts are people identifying as White (75.49%), children ages 0-17 (14.54%), and seniors (12.47%). Rural census tracts with the greatest population affected by limited food access are 5908 (79.2%), 5904 (65.8%), 5915 (65.4%), 5907 (55.3%). These tracts include the towns of Oneonta, Edmeston, Burlington, Pittsfield, New Lisbon, Gilbertsville, Morris, Worcester, and Maryland.

Resources to assist households in accessing food include community Farmers Markets and food pantries. Per NYS Agriculture and Markets, Farmers Markets operate in Cooperstown, Oneonta, Morris, Richfield Springs, and Middlefield. Food pantries operate in nearly every community in Otsego County including, Burlington Flats, Cherry Valley, Cooperstown, Edmeston, Gilbertsville, Hartwick, Laurens, Maryland, Milford, Mount Upton, New Berlin, South New Berlin, Oneonta, Otego, Richfield Springs, Schenevus, Schuyler Lake, Unadilla, West Oneonta, and Worcester.

Programs to assist with addressing nutritional needs:

²⁷ https://nysteachs.org/topic-resource/data-on-student-homelessness-nys/

- Free/Reduced School Lunch Program: During the 2019-2020 school year, 50.74% of the students in Otsego County were eligible for free or reduced lunches. School districts exceeding the county average were Unatego (69.0%), Cherry Valley-Springfield (67.5%), Laurens (64.8%), Gilbertsville-Mt. Upton (61.2%), Worcester (58.2%), Morris (54.3%), and Milford (53.3%)²⁸. Under USDA provisions to address food insecurity brought about by COVID-19, all student, regardless of income, received free/reduced lunch during the 2020-2021 school year. This waiver has been extended until June 2022.
 - Many schools supplement students weekend food needs through independently run Backpack Programs.
 Among the Otsego County school districts that partner with the Regional Food Bank of Northeastern New York for their programs, an average of 210 children are served weekly²⁹.
- Soup Kitchen and Food Pantries: Data gleaned through Hunger Prevention and Nutrition Assistance Program
 (HPNAP) report an average of 182 people are served meals each day at funded soup kitchens, food
 pantries and shelters in Otsego County.
- Supplemental Nutrition Assistance Program (SNAP): New York State caseload data reports 2,980 households encompassing 5,168 persons received SNAP benefits in June 2021. The total number of recipients of SNAP has been on a gradual decline since 2017. Comparable data from June 2017 shows a drop of 180 households (-5.7%) and 634 people (-10.9%).
 - During the COVID-19 pandemic, additional SNAP benefits were issued to students enrolled in school
 free/reduced lunch programs. Based on the number of days their school was closed or in-person attendance
 was reduced due to COVID-19 during the 2020-2021 school year, children received between \$82 and \$132
 in P-EBT food benefits for that month.
- Women, Infants, and Children (WIC): Per NYS WIC data, 680 prenatal, postpartum women, infants, and children under age 5 received benefits from the Otsego County WIC program during the 2020-21 contract year.
 Of the beneficiaries, 90.69% were White, 4.01% Multi-Race, 2.57% Black, 1.12% Asian, and less than 1% American Indian/Alaskan Native and Native Hawaiian/Pacific Islander. Nearly six percent were Hispanic.

INCOME

- Median Household Income: The median household income in Otsego County during 2019 was \$54,028; \$14,458 below the New York State median income of \$68,486³⁰. Per the US Census Bureau 2020 national statistics, the median household income from 2019 to 2020 decreased by 2.9%³¹. One could presume that 2020 median income data for households in Otsego County will also reflect these trends.
 - Data available through Opportunities for Otsego client management database on the source(s) of household income report 50.4% of adults earn income through employment or employment and other sources; 38.6% have other income sources and 11.0% do not have income.

²⁸ https://data.nysed.gov/studenteducator.php

²⁹ Regional Food Bank of Northeastern New York, https://regionalfoodbank.net/backpack-program/

³⁰ US Census ACS, 2019 5 Year Estimates

³¹ Income, Poverty and Health Insurance Coverage in the United States: 2020, Released September 14, 2021

- According to the 2019 American Community Survey estimates, 16.2% of Otsego County residents live below
 the poverty level. Census tract 5911 within the City of Oneonta has the highest rate of poverty
 within Otsego County at 31.1%. Per the US Census Bureau 2020 national statistics, the poverty rate from
 2019 to 2020 increased by I percentage point. One could presume that the 2020 poverty rate in Otsego
 County experienced the same change.
- Temporary Assistance for Needy Families (TANF) provides cash assistance to low-income families with
 dependent children. During January 2021, Otsego County reported a total of 289 recipients, of which
 156 were children, at an average of \$492.84 per person. The highest average of recipients was in January
 2020 at 375. Overall, from 2010 to 2019, the total recipients decreased by only 26 persons.
- SSI provides monthly cash payments to help low-income aged, blind, and disabled persons meet their basic needs
 (e.g. food, clothing, and shelter). During January 2021, Otsego County reported a total of 1,448 recipients at an
 average monthly benefit of \$600.94 per person. Since 2011, average SSI payments have only increased
 by \$87.95 per month³².
- The Earned Income Tax Credit (EITC) is a tax credit for certain people who work and have low wages. This tax credit reduces the amount of taxes taken out each pay period and the amount of tax owed at the end of the fiscal year. Persons who file for the EITC may also receive a refund. The number of EITC filed for tax year 2018 in Otsego County was 3,910. In total, \$8,554,723 was received in EITC with the sum of all refunds totaling \$152,36,439. Sixty EITC returns were prepared by a volunteer organization, such as VITA, Military VITA and TCE³³.

In an effort to improve worker wages, legislation was enacted in the 2016-17 New York State budget to gradually increase the minimum wage to \$15/hour for all industries and \$10/hour for tipped workers. The mandated yearly bump in hourly wages helps to address the rising cost-of-living; however, has unintended consequences for workers receiving publicly-funded benefits such as food, childcare, housing assistance, and the Earned Income Tax Credit. Eligibility for public benefits is often means-tested, therefore small increases in earned income could cause low-income families to lose some or all of their essential public benefits, leaving them worse off despite earning more. This phenomenon, coined the "Benefit Cliff", disproportionately impacts Black and Hispanic families and often traps families in poverty instead of lifting them out of it³⁴.

Research based on 2018 American Community Survey data found that a 10% increase in median wages for Black and Hispanic families resulted in greater income gains compared to Asian and White families, thus posing a greater risk for losing essential public benefits.

³² NYS Office of Temporary and Disability Assistance (http://otda.ny.gov/)

³³ The Brookings Institute, EITC Interactive and Resources (brookings.edu)

³⁴ Koball, H., Growing Pains: How Benefit Cliffs Can Derail Government Support, 05.12.2021 (https://spotlightonpoverty.org/spotlight-exclusives/growing-pains-how-benefit-cliffs-can-derail-government-support)

TRANSPORTATION

Countywide, 8.8% of households (n=2,063) do not have access to a personal vehicle. The greatest concentration is in central Otsego County, including census tracts 5911 in the City of Oneonta, 5908 (the Town of Oneonta), 5905 (Milford/Colliersville) and 5902.01 (Hartwick) with rates of 39.6, 11.0, 10.2 and 9.5 percent respectively³⁵.

Commuter Trends: According to 2019 American Community Survey estimates, the median commute time for workers in Otsego County is 22.93 minutes compared to the national average of 26.94 minutes. Of the work force age 16 and older in Otsego County:

- 28.7% had commute times longer than 30 minutes, with 5.9% clocking in a commute of an hour or longer.
- 74.9% drove to work alone, 8.9% walked or rode bicycles, 8.2% carpooled, 1.7% used public transportation, and 1.4% took taxicabs. An estimated 5.0% work from home.
- Census Tract 5914, which includes the towns of Laurens and Otego, has the greatest percentage of workers commuting to work by vehicle (95.2%).
- Census Tracts with the highest rate of workers traveling to work via public transportation are 5911 in the
 City of Oneonta (11.3%) and 5902.01 encompassing the town of Hartwick (4.2%).

According to the US Bureau of Labor and Statistics, the Consumer Price Index for gasoline rose 41.8% since July 2020. The average gas price in Albany, New York has ranged from as low as \$2.08 to as high as \$3.24 over the past 3 years. Fluctuations in gas prices impact commuter patterns, personal travel and often contribute to increased costs to consumers at the grocery stores and delivery fees.



Public transportation options include Oneonta Public Transit (OPT) and Otsego Express. These two entities, along with ARC Otsego, partner to best meet the demand for affordable public transportation across Otsego County.

³⁵ US Census Bureau, ACS, 2019 5 Year Estimates

However, available bus routes and schedules cannot accommodate all, particularly persons living more than ¾ mile from established bus stops, working non-traditional hours, or commuting between counties. Alternate transportation options include: GetThere mobility management of the Rural Health Network of South Central New York; Otsego County Office for the Aging (age 60+); Otsego County Veterans' Affairs (veterans living east of Route 205); and private providers such as Circle of Life, A&D Taxi, Lyft and Uber³⁶.

The primary purpose of GetThere is to provide transportation to medical appointments and other health-related needs not covered by Medicaid. From 2019 to present, this service assisted 1,380 Otsego County residents; primarily from Oneonta (32.9%), followed by Unadilla (10.4%), Cooperstown (6.7%), Maryland (6.2%), Richfield Springs (6.0%), and Otego (5.7%). An additional 29 individuals received transportation assistance for employment purposes since 2020³⁷.

HEALTH & WELLNESS

Overall, 3.6% (n=2,160) of Otsego County residents over the age of 65 do not have health insurance. Males make up a greater population of the uninsured (58.6%) compared to females (41.4%). Persons with income under 200% of FPL make up 43.2% of all uninsured in Otsego County³⁸.

According to 2020 National Health Insurance data, 8.6% of people, or 28.0 million, did not have health insurance at any point during the year.

- Between 2018 and 2020, the rate of private health insurance coverage decreased by 0.8 percentage points to 66.5%, driven by a 0.7 percentage-point decline in employment-based coverage to 54.4%.
- More children under the age of 19 in poverty were uninsured in 2020 than in 2018. Uninsured rates for children under the age of 19 in poverty rose 1.6 percentage points to 9.3%.

Public health insurance is available to the aged, disabled, and those with limited income. The following are rates of public health insurance usage in Otsego County³⁹:

- Medicare: A total of 14,148 persons received Medicare benefits in 2019, of which 2,034 qualified as
 a "disabled individual".
- Medicaid: An estimated 12,404 persons in Otsego County are covered under Medicaid insurance. The
 overall percentage of the population with Medicaid is 22%. Census tracts with the highest usage
 rate are 5906 in the Westford/Decatur area (27.5%) and 5903 in the Richfield Springs/West Exeter area
 (27.0%). Four additional census tracts (5902.01, 5905, 5914, 5915) all have rates over 25%.

³⁶ Otsego County Coordinated Transportation Plan, 2018

³⁷ Data provided by Getthere Mobility Management program director (09.09.2021)

³⁸ US Census Bureau, ACS, 2019 5 Year Estimates

³⁹ US Census Bureau, ACS, 2019 5 Year Estimates

 According to the New York Department of Health, 1,215 youth were enrolled in Child Health Plus during September 2020. Between September 2011 and September 2020, enrollment in CHP decreased in Otsego County by 20% (n=304).

Teen pregnancies and births include females age 15-19. Over the period 2015-2018, there were an average of 35 pregnancies and 20 live births annually in Otsego County. Over this period, the number of pregnancies and births has followed a cyclical trend; rising one year and falling the next⁴⁰.

"Infant, neonatal, and post neonatal mortality and low birth weight are two of the most widely used indicators of the health and welfare used to measure the well-being of population as it reflects the general state of maternal health and the effectiveness of primary health care systems." The table below reports maternal and infant health indicators for Otsego County compared to New York State for the years 2016-2018.

Indicator ⁴¹	3 Year Total (2016-2018)	County Rate	NYS Rate	
Percentage of births with early prenatal care	999	69.1	76.2	
Percentage of births with late or no prenatal care	75	5.2	5.5	
Mortality Rates (per 1,000 births)				
Infant (<1 year)	10	6.8	4.4	
Neonatal (<28 days)	7	4.7	2.9	
Post neonatal (I month to I year)	I	0.6*	1.5	
Fetal death (>20 weeks gestation)	3	2.0	1.5	
Perinatal (20 weeks gestation - 28 days of life)	16	10.7	9.4	
Perinatal (28 weeks gestation - 7 days of life)	П	7.4	5.2	
Percentage of low birth weight (<2.5 Kg)	97	6.7	8.0	

According to the New York State Department of Health, there were 2,463 deaths in Otsego County from 2015-2018. The **leading cause of death** over this period was Heart Disease (26.4%), followed by Cancer (21.3%), Chronic Lower Respiratory Diseases (6.4%), Unintentional Injury (4.3%)m and Diabetes (4.5%). Since the start of the COVID-19 public health crisis, 66 deaths related to COVID-19 have been reported by the local Department of Health.

Access to Care: Since 2004, Otsego County has been designated a "Medically Underserved Area" (MUA) by the U.S. Department of Health and Human Services. MUA designation is based on having too few primary care providers, high infant mortality, high poverty or a high elderly population. It is estimated that Otsego County has one primary care physician for every 870 persons throughout its rural community and 354 "other primary care providers" to every person⁴².

⁴⁰ NYS Department of Health, Vital Statistics, Table 30

⁴¹ NYS Department of Health CHAI (County Health Assessment Indicators)

⁴² https://www.countyhealthrankings.org/app/new-york/2020/measure/factors/4/data

Bassett Healthcare Network provides care and services to people living in a 5,600 square mile region in upstate New York and is the primary medical provider in Otsego County. The hub of the network is Bassett Medical Center in Cooperstown. In addition, the network has four area community hospitals that provide acute inpatient care and 24/7 emergency care: Cobleskill Regional Hospital, O'Connor Hospital in Delhi, Little Falls Hospital, and A.O. Fox Hospital in Oneonta provide acute inpatient care and 24/7 emergency care. In total, there are 12 facilities in Otsego County that specialize in primary health care.

To limit exposure at community health clinics and to continue to care for patients during the COVID-19 health crisis, Bassett Healthcare Network ramped up expansion of its telehealth component of the MyBassett Patient online portal. Bassett virtual health care offers video visits for primary care, specific specialty services, and inpatient/emergency specialty consultations; E-Consults for specific specialties and locations; and E-Visits for a variety of common conditions. However, with a lack of broadband access countywide, many households in Otsego County cannot utilize this option to meet their ongoing medical needs.

In addition to regional health centers operated by Bassett Healthcare, comprehensive healthcare, preventive dental care, and mental health services are available to youth in grades PreK-12 at School Based Health Centers (SBHC) operated by Bassett Healthcare. To receive services at a SBHC, parents must complete an enrollment paperwork, including a consent to bill the child's insurance provider. Otsego County SBHC are located in the following districts: Cooperstown; Edmeston; Gilbertsville-Mount Upton; Laurens; Milford; Morris; Richfield Springs; Schenevus; and Worcester.

Mental Health: According to the University of Wisconsin Population Health Institute 2021 County Health Rankings tool, it is estimated that Otsego County has one mental health provider for every 520 people. To help address crisis mental health needs, Otsego County contracts with the Mobile Crisis Assessment Team (MCAT) from The Neighborhood Center in Utica to provide 24 hour/7 day a week intervention. School-age youth can access mental health services through Bassett Healthcare School Based Health Centers located in Cooperstown, Edmeston, Laurens, Milford, Morris, Richfield Springs, Schenevus, and Worcester school districts.

Prior to the onset of the COVID-19 pandemic, an estimated 9.5% of adults over age 18 had "poor mental health" for 14 or more consecutive days⁴³. Data available through the New York State Office of Mental Health reported⁴⁴:

 A total of 201 children and 273 adults received mental health services which were funded through Medicaid.

⁴³ Mohawk Valley PHIP, 2016 dataset, http://www.mvphip.org/indicators/index/view?indicatorId=1835&localeId=1918

⁴⁴ https://omh.ny.gov/omhweb/statistics/

- An estimated 2,720 adults and 760 children in Otsego County received outpatient mental health services during 2019.
- Of all persons admitted to Bassett Healthcare for psychiatric care in 2019, 16% were readmitted to
 inpatient care within 30 days of discharge and 25% readmitted 90 days after discharge. Furthermore, 21%
 who sought emergency psychiatric care were readmitted after 30 days and 34% within 90 days of
 discharge.

CONSUMER & COMMUNITY INPUT

As of 09.13.2021, 49 persons responded to Opportunities for Otsego online Community Needs Assessment survey. Of the respondents, the majority were from the City and Town of Oneonta (n=26), followed by 6.7% from West Oneonta, 4.4% from Cooperstown, Maryland, Milford, and Springfield, and the remaining respondents from Hartwick, Laurens, Morris, Otego, Otsego, Pittsfield, Richfield Springs, and Schenevus. Of all respondents, 94.7% identify as White, and one identified at Black/African American and one as Multi-Race. Responses for each content area are as follows:

Employment is a problem in our area:	Yes	41	87.2%	No	6	12.8%
Work force lacks the skills for available jobs		12	6.6%			
Work force lacks the education for available jobs		10	5.5%			
Not enough full time jobs with benefits		26	14.2%			
Lack of child care during hours needed		25	13.7%			
Cost of child care		23	12.6%			
Area jobs are low paying		37	20.2%			
Layoffs/Employers leaving the area		6	3.3%			
Distance to jobs/Transportation		П	6.0%			
Cost of transportation		18	9.8%			
Lack of technology (Computer/High Speed Internet)	12	6.6%			
Not able to return to work due to COVID-19		3	1.6%			
Child Care is a problem in our area	Yes	37	86.0%	No	6	14.0%
Child Care is a problem in our area Lack of providers/available slots	Yes	37 23	86.0% 11. 9 %	No	6	14.0%
·	Yes			No	6	14.0%
Lack of providers/available slots	Yes	23	11.9%	No	6	14.0%
Lack of providers/available slots Long waiting lists	Yes	23	11. 9 % 6.2%	No	6	14.0%
Lack of providers/available slots Long waiting lists Hard to find quality, safe care	Yes	23 12 23	11. 9 % 6.2% 11. 9 %	No	6	14.0%
Lack of providers/available slots Long waiting lists Hard to find quality, safe care Hard to find reliable, consistent care	Yes	23 12 23 15	11.9% 6.2% 11.9% 7.8%	No	6	14.0%
Lack of providers/available slots Long waiting lists Hard to find quality, safe care Hard to find reliable, consistent care Hard to find infant care	Yes	23 12 23 15	11.9% 6.2% 11.9% 7.8%	No	6	14.0%
Lack of providers/available slots Long waiting lists Hard to find quality, safe care Hard to find reliable, consistent care Hard to find infant care Affordability/Cost of child care	Yes	23 12 23 15 15	11.9% 6.2% 11.9% 7.8% 14.5%	No	6	14.0%
Lack of providers/available slots Long waiting lists Hard to find quality, safe care Hard to find reliable, consistent care Hard to find infant care Affordability/Cost of child care Availability does not match work/school schedule	Yes	23 12 23 15 15 16	11.9% 6.2% 11.9% 7.8% 14.5% 8.3%	No	6	14.0%
Lack of providers/available slots Long waiting lists Hard to find quality, safe care Hard to find reliable, consistent care Hard to find infant care Affordability/Cost of child care Availability does not match work/school schedule Distance to care/Transportation	Yes	23 12 23 15 15 28 16	11.9% 6.2% 11.9% 7.8% 7.8% 14.5% 8.3% 5.2%	No	6	14.0%

Education is a problem in our area Yes	25	53.2%	No	22	46.8%
High School drop-out rates	9	11.3%			
Limited resources for remedial education/CSE	8	10.0%			
Hard to access to GED/TASC programs	2	2.5%			
Hard to access vocational training/adult learning	8	10.0%			
Distance to school/Transportation	3	3.8%			
Lack of technology (Computer/High Speed Internet)	П	13.8%			
Lack of child care options	10	12.5%			
Cost of child care	9	11.3%			
Cost of higher education	17	21.3%			
Difficulty obtaining scholarships/loans	3	3.8%			
Housing is a problem in our area Yes	44	91.7%	No	4	8.3%
Inability to pay security deposit/down payment	22	8.3%			
Cost of monthly rent/housing payments	35	13.2%			
Cost of heat and/or utilities	21	7.9%			
Limited inventory of year-round housing	36	13.6%			
Available housing far from jobs/essential services	21	7.9%			
Affordable housing is not in a good/preferred area	22	8.3%			
Cannot/unsure how to qualify for a mortgage	7	2.6%			
Personal/family debt and/or low credit score	13	4.9%			
Inability to afford property and school taxes	16	6.0%			
Housing is in need of repairs/Code violations	23	8.7%			
Cost of home repairs/maintenance	26	9.8%			
Limited housing for special populations	23	8.7%			
Food/Nutrition is a problem in our area Yes	27	60.0%	No	18	40.0%
Distance to grocery store/Transportation	17	18.7%			
Not enough money to purchase food	14	15.4%			
Cost of healthy food options	21	23.1%			
Not aware of community resources (e.g. pantries)	10	11.0%			
Limited resources/inventory at food pantries	7	7.7%			
Public benefits are difficult to apply for/use (e.g. SNAP)	6	6.6%			
Monthly public benefit allowances are not enough to help	8	8.8%			
Distance to meal sites/programs/Transportation	8	8.8%			

Transportation is a problem in our area	Yes	34	72.3%	No	13	27.7%
No access to a car		П	8.1%			
Bus schedules do not meet the needs		20	14.7%			
Bus routes do not meet the needs		24	17.6%			
Cost of taxi/public transportation/Uber		18	13.2%			
Limited disability/medical transportation		7	5.1%			
Cannot afford DMV permit/license/registration fees		5	3.7%			
No driver's license/license suspended		4	2.9%			
Cost of car insurance		16	11.8%			
Cost of car repairs		14	10.3%			
Cost of gasoline		17	12.5%			
Health care is a problem in our area	Yes	32	72.7%	No	12	27.3%
Cost of health insurance		22	12.8%			
Co-pays/Out of pocket expenses		18	10.5%			
Cannot afford/access prescribed medications		12	7.0%			
Do not have insurance or Medicaid/Medicare		6	3.5%			
Doctors will not accept my insurance		10	5.8%			
Dentists will not accept my insurance		19	11.0%			
Distance to care/Transportation		П	6.4%			
Waiting times for appointments		24	14.0%			
Appointments conflict with work/school schedules		П	6.4%			
Specialists: Not enough locally/Need to travel	I	25	14.5%			
Concern with getting care due to COVID-19		5	2.9%			
Lack technology for Telemedicine		9	5.2%			
Mental Health care is a problem in our area	Yes	41	91.1%	No	4	8.9%
Not aware of resources/providers		14	7.3%			
Inadequate crisis services		22	11.5%			
Lack of providers		26	13.5%			
Insurance does not cover/Out of pocket costs		17	8.9%			
Cannot afford/access prescribed medications		13	6.8%			
Waiting times for appointments		21	10.9%			
Appointments conflict with work/school schedules		9	4.7%			
Distance to care/Transportation		9	4.7%			
Lack of care coordination with primary doctor		13	6.8%			
Limited discharge planning/follow up care		13	6.8%			

Stigma of mental health/Privacy issues	23	12.0%			
Lack technology for Telemedicine/Support groups	12	6.3%			
Addition/Recovery is a problem in our area Yes	31	79.5%	No	8	20.5%
Lack of primary prevention efforts	8	8.2%			
Limited criminal justice resources	9	9.3%			
Not aware of resources/providers	15	15.5%			
Insurance does not cover/Out of pocket costs	6	6.2%			
Waiting times for appointments	6	6.2%			
Appointments conflict with work/school schedules	7	7.2%			
Distance to care/Transportation	7	7.2%			
Lack of care coordination with primary doctor	7	7.2%			
Limited discharge planning/Follow up care	8	8.2%			
Stigma of addition and recovery/Privacy issues	18	18.6%			
Lack technology for Telemedicine/Support groups	6	6.2%			

Finances: What actions have you taken to make sure you have enough money on hand for basic need?

Reduced food spending	П	10.7%
Stop saving for retirement	8	7.8%
Cut back on recreational expenses	27	26.2%
Use a credit card instead of cash/debit card	15	14.6%
Borrowed money from friend/family member	12	11.7%
Skipped/stopped paying bills	8	7.8%
Stopped paying child support or alimony/spousal maintenance	0	0.0%
Took on additional work	9	8.7%
Took out a loan	7	6.8%
None of these actions	6	5.8%

Other Challenges you believe are in our community:

Addition/Recovery: Oneonta is circling the drain for sure. Drugs, homeless people, lack of stores, school sucks. Can't wait to move away .

Economy:

- Clothing shopping is limited to young and college age population.
- Insufficient business base in most communities.
- Lack of retail stores that could boost the economy and offer goods for low/middle class. Plenty of space available for such stores like a Target. Community seems dead, struggling to get people to visit main st or

- Oneonta in general. A place like target could help, in part, improve employment opportunities, wages, access. There was a poll about this, overwhelmingly wanting it with 850+ votes.
- Need to travel to Utica or Albany to have shopping choices when needing a good pair of shoes for bad
 feet. Need to shop on line because of limited clothing stores in the area. No place to buy sheets or
 blankets except Walmart & the quality is not always long lasting.
- We need major employers in the area, job growth/economic development will create the change we need so that everyone in the area has a better quality of life

Employment: Lack of workers

Food/Nutrition: Availability of farm to table food. There should be a actual store location that is locally farm sourced products only.

Healthcare:

- Healthcare and keeping same doctors has been huge.
- Many people work for Bassett Healthcare which has outsourced many jobs to Optim and changed to
 Optim's health insurance which has very high copays and deductibles, making critical services like physical
 therapy nearly unaffordable.
- We go to Albany for orthodontist, neuro and Developmental Ped's, Binghamton for MRI and mammograms, Utica for allergy, oral surgeon. As a middle class family we can afford to do this- most people can't. Fox is beyond AWFUL. I would hate to have to go there. Bassett only slightly better.
- The cut back of health services locally, now most things necessitate a trip to Cooperstown. Restore services at Fox Hospital. Wonderful LOCAL hospital.

Housing:

- There aren't many resources to help those with low income housing when moving to get their items from one place to the next so moving although may be the best option the person will either not move or move and leave most of their belongings behind causing them a lack of resources
- Affordable year round safe housing and adequate transportation services are severely lacking in the
 Oneonta area
- Code enforcement from the City is lacking
- Getting helpers for small repair and maintenance is nearly impossible.
- Many area landlords do not take care of their properties and charge above the fair market rates for small, run down units.
- No house rentals for families!!!! Everything is for students or short term for baseball families. We have to
 move because our landlord is selling and there's nothing available

 Please do something about the student rental companies, they need more oversight and should pay higher taxes to support middle income house initiatives.

Mental Health: Lack of mental health and medical specialists is HUGE. If I knew that, I would have reconsidered moving here.

Recreation:

- Lack of Entertainment options. Oneonta Theatre needs to be re-opened and become what it was. Far better option then Foothills.
- As an educator I see the need for activities and opportunities for grade school children. FREE summer
 programs are necessary and STOP charging for swimming. The city should take back that program not
 the YMCA.
- Need a public exercise and walking path. Need safe areas to ride bikes, Need safe sidewalks which are smooth for safe walking for seniors and trikes and skates for kids.
- Not enough public support and funding for arts and cultural offerings outside of the school systems for adults leads to a lack of quality of life.

Seniors/Disabled:

- Finding caregivers for seniors that is affordable is a community problem & a health insurance problem because caregivers do deserve to be paid more but people that need this service usually can't afford it
- Limited support and programs for seniors which are in Oneonta. Limited support to navigate programs such as obtaining disability. Case workers for life threatening illness are needed.

Transportation:

- Restore the DMV office in Oneonta.
- Limited bus destinations, no night or Sunday service.
- Providers are unaware of resources in the area, and those that they are aware of they aren't always aware of what they can actually offer, a lot of members are aware of resources in their communities but expect things vs working toward things, when a person utilizes Medicaid transportation they aren't approved to stop at a local pharmacy to pick up any scripts the members may need this makes it very difficult for a member using services to be able to follow through with any health related needs.
- The major problems are parking Downtown.
- West Street needs repaving. Has not been done in over 50 years from Chestnut to Center Street.

Other:

• The trend to centralize services in the population center of Oneonta creates many of the problems listed above for vulnerable populations in smaller communities within Otsego County.

• Too many non-profits in the area are leaching taxpayer money without making a real difference. We're treating the wounds with a Band-Aid instead of the root cause. Oneonta gets dumped with all of the social programming, creating a burden on the home-owners and taxpaying residents of the city.

CENSUS BUREAU ANNOUNCES KEY DATES FOR UPCOMING RELEASES

JULY 29, 2021 — The U.S. Census Bureau's schedule for the release of 2020 Census redistricting data; the 2020 income, poverty and health insurance coverage statistics from the Annual Social and Economic Supplement to the Current Population Survey; and the 2020 American Community Survey is as follows:

August 12, 2021 (no embargo)

2020 Census Redistricting Data Legacy Format - The Census Bureau will provide redistricting data in the legacy format that state officials have used the last two decades. These data will consist of 2020 Census population counts by race, Hispanic origin, and voting age, as well as housing unit data for counties, places, census tracts and blocks.

September 14, 2021 (no embargo)

- National 2020 Income, Poverty and Health Insurance Coverage Statistics: Current Population Survey
 Annual Social and Economic Supplement Annual release of national-level income, poverty (including
 official 2020 poverty rate), and health insurance coverage statistics. The reports will include statistics for
 calendar year 2020 and compare trends with previous years.
- National 2020 Supplemental Poverty Measure Estimates: Current Population Survey Annual Social and Economic Supplement - Annual release of supplemental poverty estimates for the nation and states.

September 16, 2021 (no embargo)

2020 Census Redistricting Data Easier-to-Use Format - The Census Bureau will provide states and the public with the same data released in a legacy format in August. States will receive an easier-to-use toolkit of DVDs/flash drives with integrated browsing software for official state recipients. The public will have access to the data on data.census.gov. These data will consist of the same 2020 Census population counts by race, Hispanic origin and voting age, as well as housing unit data for counties, places, census tracts and blocks.

November (no later than November 30)

2020 American Community Survey (ACS) I-Year Experimental Estimates - The ACS is one of the most comprehensive sources of information about the U.S. population, providing crucial demographic, social, economic and housing statistics. The COVID-19 pandemic significantly disrupted our ability to reach people and limited their ability to participate in the 2020 ACS. Therefore, instead of providing the standard I-year data products, the Census Bureau will release a series of estimates using "experimental" weights from the I-year data. It will also release a research paper detailing the methodology for the experimental weights. One-year ACS estimate data is only available for areas with populations of 65,000+ therefore, typically not available for Otsego County.

December

- 2020 ACS I-Year Public Use Microdata Sample (PUMS) with Experimental Weights The Census Bureau
 plans to release a 2020 ACS I-year PUMS file containing experimental weights for research use. <u>Each</u>
 unique PUMA-county part must have a population of at least 10,000 persons, therefore PUMA data is typically not
 available for Otsego County.
- 2016-2020 ACS 5-Year Estimates The Census Bureau is still reviewing the quality of the 2016-2020 ACS
 5-year estimates against our statistical quality standards, but tentatively plans to release the 5-year estimates.

January 2022 (no embargo)

2016-2020 ACS 5-Year Variance Replicate Estimates (VRE) - The VRE allow users to calculate margins of error when collapsing ACS data within a table or across geographies. This is dependent on the tentative release of the 2016-2020 ACS 5-Year Estimates in December.

February 2022 (no embargo)

2016-2020 American Community Survey 5-Year PUMS Files - This is dependent on the tentative release of the 2016-2020 ACS 5-Year Estimates in December. <u>Each unique PUMA-county part must have a population of at least 10,000 persons, therefore PUMA data is typically not available for Otsego County.</u>