



Executive Summary

Cayuga County Community Health Assessment 2011 - 2012

The Cayuga County Department of Health and Human Services prepares an assessment of the health of its residents every four years. The report is updated annually. The findings of the report help guide community planning and departmental decision making concerning interventions that will improve the overall health of the county's residents.



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- 2012

The Executive Summary highlights significant findings from the Community Health Assessment (CHA). It is not a discussion of all indicators of health and well-being covered in the Demographic and Health Status section of the CHA report.

This summary lists prevention indicators in three categories with regard to change over time and/or comparison of indicators to the US, State or fellow New York counties as well as the Prevention Agenda 2013 Goals/Objectives:

1. Gains (positive)
2. Concerns (areas possibly needing intervention)
3. Watch List (areas for on-gong monitoring)

In all measures of childhood economic security, both the number and percent of those at risk is growing.

There was an increase of 14% of the County's children receiving public assistance in the year between 2010 and 2011.

DEMOGRAPHIC AND HEALTH STATUS INFORMATION

Economic Profile:

The 2010 Census figures reported a 22% increase in the poverty rate for the county when compared to the rate reported in the 2000 Census.

In all measures of childhood economic security, both the number and percent of those at risk is growing with the exception of children living below the poverty level. That number has remained relatively stable (with a statistically significant uptick in 2009); likely because of the County's safety net programs (especially those operated by Health and Social Services Department). Still, with nearly 3,200 Cayuga County children living below the poverty level, it remains a very serious issue. There was an increase of 14% of the County's children receiving public assistance in the year between 2010 and 2011. During that same time period, children qualifying for food stamps (SNAP) increased 5%.



Gains (positive changes)

Health Insurance Coverage: Cayuga County has done an excellent job in extending health insurance coverage for its population. With nearly 90% of its population having health care coverage, it well exceeds the U.S. rate of 85% and is slightly better than the state rate of 88.6%.

Low Birth Weight Births (less than 2500 grams): The percent of these births has been a decreasing (from 8.2% during 2004-06 to 4.9% during 2009).

Late or No Prenatal Care: The percent of births to mothers who had late or no prenatal care (3.3%) is 40% lower than the state rate and 20% lower than the region.

Perinatal Mortality: There has been an improvement over time in infant, neonatal, post neonatal and spontaneous fetal deaths. The average rate for these four types of deaths averaged 8.9 in 2005 and 3.4 in 2009.

Teen Pregnancy: The teen (ages 19 and under) pregnancy rate within the county, has slowly declined. Between 1998 and 2007-09, the rate for pregnancies for the 15-19 age cohort decreased from 62.3 to 38.2 per 1,000. The County also continued to have fewer pregnancies among those 15 – 19 year olds than the region. It is important to note that there are communities within the county where the teen pregnancy rates are higher than the overall county rate (i.e. rates of 40-50%).

Obese Children: The county rate for children ages 2 to 4, enrolled in WIC, deemed overweight or obese has been steadily declining and is now below the upstate and state rates.

Asthma: The county's rate has improved for asthma related hospitalizations of adults age 65+ to the point that it was below the region's rate of 15.2 (County rate was 14.4). There has been a steady decrease over time in the asthma related hospital discharge rate for children ages 0- 4 per 10,000. It has decreased from 46.2 to 22.9, closer to the prevention goal of 17.

Lung Cancer Mortality: Mortality from lung and bronchus cancer has stayed fairly constant in Cayuga County and the region. The latest data from the cancer registry showed a modest improvement for the county over time.

The County's safety net programs are holding in the face of the recession.

The County continues to make important strides in key areas of residents' health and access to health care.



Cardiovascular Heart Disease: During the last decade the County's hospitalization and death rates per 10,000 for cardiovascular disease have gradually decreased in upstate and in the County.

Coronary Artery Disease (CAD): Recent data shows a decrease in the County rate for hospitalizations due to CAD. The rate declined to equal the state rate and the 2013 prevention goal.

Cerebrovascular Disease: Historically the death rates were higher for the county than the state but were gradually declining. Recent data shows the rate has declined and is now similar to the state's.

Diabetes: Mortality and hospitalization rates, due to diabetes, have shown improvement between 2001-03 and 2007-09, declining by 38% and 23% respectively.

Colorectal Cancer: There has been a gradual decrease in colorectal incidence and mortality. In addition, the percent of early stage diagnosis for colorectal cancer was higher than the state and prevention goal.

The county rate for unintentional injury mortality was the highest in 16 years.

Concerns

Late or No Prenatal Care: While the county, as a whole, compares very favorably in having a low rate of births to mothers who had late or no prenatal care, there were communities within the county where the rate was more than double the county rate.

Unintentional Injury Mortality: The county rate for the period 2008-2010 was 37 per 100,000 (the highest in the last 16 years), as compared to the state at 20.5. The 2013 prevention agenda objective is 17.1.

Motor Vehicle Related Mortality: Motor vehicle related mortality rates have gradually increased, with county rates significantly higher than the state's and higher than the Prevention Goal. While the numbers were small, the mortality rate for young adults ages 15-24 was over three times the state rate.

Unintentional Injuries/Older Adults: The number and percent of all hospital discharges for unintentional injuries of the 65+ age cohort is very high in the county, higher than the region or the



state, and represented 58% of the hospital discharges for this category. Applying national health care costs, a working estimate of the annual cost in Cayuga County for older adults who were hospitalized for a fall is approximately \$19 to \$20 million annually (calculated in 2010 dollars).

Mental Health: Cayuga County is 50% above the State and the nation (and the nearby counties of Seneca, Wayne, Cortland and Onondaga) with residents reporting poor mental health.

Hospitalizations for Self-inflicted Injuries: Hospitalizations for self-inflicted injuries in the county have increased by 60% since 2000. The three year period, 2007 – 2009 saw a leveling out of the rate yet it continues to be twice as high as the state rate. Hospitalizations for intentional, self-inflicted injuries by youth (15-19 year olds) while small in number, are twice the rate experienced upstate, the state and is one of the highest rates state-wide and the highest in a decade.

Suicide: While the numbers are small, the rate of suicide has shown an increase over time from 6.8 to 9.2/100,000. The suicide rate in the county has been increasing and the rate is higher than the state and the prevention goal.

Alcohol Abuse: Cayuga County's "excessive drinking" rate (binge plus heavy drinking) is more than twice the rate in neighboring Seneca County and considerably higher than the state rate. High rates of tobacco use coupled with high rates of excessive drinking are the primary cause of why Cayuga County ranks 49th (of 62) in healthy behaviors.

Breastfeeding: The percentage of WIC mothers breastfeeding after six months is only 16.6% and continues to be far below the state rate of 40.6% and the prevention goal of 50%. Despite the fact the data presents this as an upstate issue, neighboring Tompkins County's rate was 41%.

Chlamydia: The incidence of chlamydia in the county increased dramatically (by 140%) in the first half of the decade and it continued to increase by another 56% in the later part of the decade.

Dental Health Children: Cayuga County's children have an abnormally high rate of dental caries. The percent of 3rd graders with untreated caries (cavities) is twice that of the state (excluding NYC). Recent oral health indicators report an ever increasing emergency room and ambulatory surgery utilization rate, by children ages 3 to 5 years for dental needs. It increased 300% and was 48% higher than upstate.

The percentage of WIC mothers, who breastfeed after six months, is only 16.6%, far below the state rate of 40.6%.

Cayuga County's children have an abnormally high rate of dental caries and use of the emergency room for dental needs.

Approximately 28% of Cayuga County's adult population and 21.7% of its school children are obese



Overweight and Obesity Adults: Of Cayuga County's residents age 45 and over, 36% were overweight and approximately 28% of adult population fell into the more severe condition of obesity. Rates of pre-pregnancy obesity in women who participated in the WIC program remained high, at nearly 32%.

Overweight and Obesity in Children: According to the most recent data 21.7% of all Cayuga County school students (elementary, middle and high school) were obese. The county was the second highest in the state, excluding NYC. Unlike other counties, Cayuga had a higher percent of obese children in elementary school.

Diabetes: The prevalence of diabetes in the county's population has nearly tripled since the mid-1990s. The most current data shows that 9.5% of its residents had diabetes though it is likely to be significantly higher due to residents living with diabetes not yet diagnosed. Of serious concern is the high rate of diabetes among youth (ages 6 to 17) at nearly double the state rate.

Lead Poisoning: Elevated blood levels (greater than 25 ug/dl) per 100,000 employed persons age 16 plus in the county have been higher than the state over time.

Work Related Hospitalization: The county's rates of work related hospitalizations have historically been higher than the region's, upstate and state rates. The latest data continues that trend and is almost twice the 2013 prevention goal.

Arthritis: As the leading cause of disability in New York, arthritis is a major health concern. The county's incidence rate for arthritis was 34.1%, compared to the statewide rate of 26.6%.

Smoking: Adult tobacco use in the county had been declining since 2004. The most recent data, however, shows that the decline in use rates have reversed. The percent of county residents who smoke, 23%, was nearly double that of the state.

A growing number of county residents have diabetes and the number is climbing.

The County's rate for self-inflicted injuries is at the highest rate in more than a decade.

Smoking is the leading cause of death in the U.S. The rate of smoking for county residents was nearly double that of the state.



Watch List (areas to monitor)

Lung Cancer Mortality: There has been some decline in the number of deaths due to lung cancer from 2005-2009. Of significance, the number and rate of deaths continues to be nearly twice as high for males as females, likely due, in part, to higher tobacco use rates for county males.

Breast Cancer: Breast cancer is an area for on-going diligence in prevention. The county's incidence rates for breast cancer have only slightly varied over the last decade. In addition, breast cancer mortality has very gradually increased. The early stage diagnosis and mortality rates were below the 2013 Prevention Goals.

Uterine Cervical Cancer: Unfortunately early stage cervical cancer diagnosis rates for the county have decreased over time from 66.7% during 2007-09 to 44.4% during 2008-2010. This rate has now fallen well below the 2013 prevention goal of 65%.

Disabilities and Aging: According to the 2010 US census, of those age 65 and over, 37% were non-institutionalized disabled in Cayuga County. The County should expect that rates of disability will escalate over the next decade.

Alzheimer's Disease: The incidence of Alzheimer's disease in Cayuga County will increase due to the significant increases in the numbers of older adults and increasing longevity.

Lyme Disease: The number and rate of Lyme disease incidence has increased over time in the county and state. Lyme disease is notoriously difficult to diagnose. If not treated promptly the disease can lead to complications involving the heart, nervous system, joints, and skin within weeks, months, or even years later. Prevention and awareness are vitally important.

Early Stage Diagnosis for Colorectal Cancer: Because colon cancer can have no symptoms until its later stages, screening tests for early detection are critical. The percentage of early stage diagnosis for colorectal cancer for the county was very positive when compared to the state. However, as preventative screenings are a priority for the Healthy People Initiative and are so successful in detecting pre-cancerous conditions, raising the local/county goal for screenings to higher than 70% should be a consideration.

Out of Wedlock Births: There has been an increase in the percentage of out of wedlock births over time. During 2002-04 the county percent was 39.6. This increased to almost half (48.9%) of county

The number of Cayuga County residents afflicted with Alzheimer's disease is about to increase dramatically.



births in 2009. According to a national vital statistics report (Aug/2012), the national percent in 2010 was 40.8.

Smoking during Pregnancy: In 2001 the percentage of mothers who gave birth in Cayuga County, and who smoked during pregnancy, was 24.8%. It was higher than Onondaga County (21.2%) and the region (23.7%). In 2003 that percentage increased to 28.5%, a trend opposite of Onondaga County (19.9%) and the region (22.8%). Continuing to track this data is an important task.

Cayuga County has a high rate of poor dental health.

Dental Health Adults: County residents reported a higher rate of poor dental health than state-wide. The percentage of adults who reported permanent teeth extracted due to decay or gum disease was 56.2% (NYS was 50.4%). In addition, Cayuga County residents were 24% more likely to have serious dental problems when they reached 65. The survey reported that 24.3% of respondents aged 65 and older (nearly one in four) had all permanent teeth extracted due to gum disease, a rate higher than their counterparts statewide.

Pneumonia Hospitalizations: Although upstate has been fairly stable, the pneumonia hospitalization rate for children ages 0 to 4 years has shown a gradual increase.

Asthma: Asthma related hospital discharges for children 0 to 4 years had been declining. However, there was a very significant spike in 2009 (the last year data is available). The adult asthma rate has been declining yet remains significantly higher than the region's rate.

Alcohol and Substance Abuse Treatment: In 2009, 34.7% of the 930 individuals admitted for treatment were under age 25, and 9.5% under 18. These percentages were much higher than the region. More recent data has not been reviewed and it is not clear if this reality is a result of Cayuga County teens having better access to treatment or they have higher, more serious drug use rates.

Alcohol-related Motor Vehicle Death or Injury: Deaths or injuries due to alcohol-related motor vehicle accidents have been declining over the past decade state-wide and in the county. However, the county rate is nearly twice the state-wide rate.