



ST PETER'S HEALTH PARTNERS

A Member of Trinity Health

# Community Health Needs Assessment Fiscal Year 2026



**Adopted by The St. Peter's Health Partners Board of Directors**

**on**

**April 24, 2026**

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## Executive Summary

### ABOUT ST. PETER'S HEALTH PARTNERS

More than 150 years ago, the Religious Sisters of Mercy, Daughters of Charity, and local municipalities founded our hospitals, schools of nursing and health ministries in New York's Capital Region. These groups were dedicated to improving the health of those living in their communities. To better serve those communities today, the facilities they created came together as St. Peter's Health Partners in 2011.

St. Peter's Health Partners is one of the Capital Region's largest, most comprehensive not-for-profit health care networks. Our full range of services, along with support and care coordination, help people achieve their health goals -centered, integrated care is at the heart of St. Peter's Health Partners (SPHP). With nearly 11,000 employees in more than 185 locations, our breadth of services across the continuum of care uniquely positions us to be the region's leader for quality, efficiency, and innovation in delivering compassionate health care and senior services.

As the most complete health care network in the region, St. Peter's Health Partners offers a systemwide care coordination program that includes:

- **Nearly 900 Primary Care and Specialty Physicians:**
  - [St. Peter's Health Partners Medical Associates](#)
  
- **Acute Care Services:**
  - [St. Peter's Hospital](#)
  - [Samaritan Hospital](#)
  
- **Inpatient and Outpatient Rehabilitation:**
  - [Sunnyview Rehabilitation Hospital](#)
  
- **Continuing Care Services:**
  - [Community Hospice](#)
  - [Eddy Senior Living](#)
  - [Home Health Care](#)
  - [Nursing Homes](#)
  - [Eddy SeniorCare PACE](#) (Program of All-Inclusive Care for the Elderly)
  
- **Schools of Nursing:**
  - [St. Peter's Hospital College of Nursing](#)
  - [Samaritan Hospital School of Nursing](#)

### OUR SERVICES

- Advanced Medical Care
- Inpatient Acute Care and Rehabilitation

- Outpatient Rehabilitation
- Primary and Specialty Physician Practices
- Alzheimer’s Services
- Enriched Housing/Adult Homes
- Home Care
- Hospice
- Independent Senior Living
- Nursing Homes
- PACE (Program of All-Inclusive Care for the Elderly)

St. Peter’s Health Partners is a member of Trinity Health, a national Catholic health system with an enduring legacy and a steadfast mission to be a transforming and healing presence within the communities we serve. For more information, please visit [www.sphp.com](http://www.sphp.com).

Today, St. Peter's Health Partners serves over 6,000 people every day with comprehensive medical services, and many community health programs intended to restore wholeness and well-being to people within the community.

Year after year, St. Peter’s Health Partners reinvest in communities with funding for charity care, primary care services, screenings, education, and research. This commitment has risen in proportion to the needs.

### **Sunnyview Rehabilitation Hospital**

Founded in 1928, Sunnyview Rehabilitation Hospital is a 115-bed hospital specializing in physical rehabilitation located in Schenectady County. Every year, more than 15,000 individuals come to Sunnyview from across the Northeast. Each one has a dedicated team of physicians, nurses, therapists and specialists all focused on one goal – helping patients recover from a stroke, traumatic injury, or disabling disease.

Sunnyview is the only nationally recognized specialty rehabilitation hospital in upstate New York. Patients travel to Sunnyview from 40 counties in New York State, as well as 10 other states, for our expertise, experience and technology and our reputation. Our outcomes show that we help patients attain their greatest level of independence and provide them with the best chance of going home. We’re proud that an overwhelming number of former patients say they would recommend us to family and friends.

#### **Several Recent Accolades and Awards Include:**

Sunnyview Rehabilitation Hospital has been accredited by the Commission on the Accreditation of Rehabilitation Facilities (CARF) since 1985. Sunnyview Rehabilitation Hospital holds CARF accreditations (2024-2025) in:

- Inpatient Rehabilitation Programs for adults and children
- Inpatient Amputation Specialty Program for adults
- Inpatient Brain Injury Specialty Programs for adults, children, and adolescents
- Inpatient Stroke Specialty Program for adults

- Interdisciplinary Outpatient Brain Injury Specialty Program for adults, children, and adolescents

Sunnyview Rehabilitation Hospital has been awarded The Gold Seal of Approval® accreditation from The Joint Commission®.

## **MISSION STATEMENT**

**We, St. Peter’s Health Partners and Trinity Health, serve together in the spirit of the gospel as a compassionate and transforming healing presence within our communities.**

## **CORE VALUES**

**Reverence** – We honor the sacredness and dignity of every person.

**Commitment to Those Experiencing Poverty** – We stand with and serve those who are experiencing poverty, especially those most vulnerable.

**Justice** – We foster right relationships to promote the common good, including sustainability of Earth.

**Stewardship** – We honor our heritage and hold ourselves accountable for the human, financial and natural resources entrusted to our care.

**Integrity** – We are faithful to who we say we are.

**Safety** – We embrace a culture that prevents harm and nurtures a healing, safe environment for all.

St. Peter’s Health Partners’ Mission guides everything we do. We strive to both serve others and transform care delivery. We reinvest our resources back into the community through new technology, health services, and access for everyone regardless of circumstance.

As a member of Trinity Health, St. Peter’s Health Partners’ Community Health & Well-Being (CHWB) strategy promotes optimal health for those who are experiencing poverty and other vulnerabilities in our communities- emphasizing the necessity to integrate social and clinical care; dismantling oppressive systems, including racism; and building community capacity and partnerships. We do this by:

- Addressing patient social needs
- Investing in our communities
- Strengthening community benefit impact

St. Peter’s Health Partners reinvests in communities through financial support, screenings, education, and research.

## **Review of the Previous Community Health Needs Assessment (FY25 Update)**

St. Peter’s Health Partners – Sunnyview Rehabilitation Hospital conducted an update to the 2022 CHNA in FY25 (July1, 2024-June 30, 2025) in the fall of 2024. St. Peter’s Health Partners – Sunnyview Rehabilitation Hospital, planned and took part in the full collaborative CHNA in FY26, which included Albany, Rensselaer, Schenectady, Saratoga, Columbia, and Greene counties and will be led by the Healthy

Capital District (HCD). HCD is an incorporated not-for-profit which works with others in the community to determine ways in which the Capital Region could be more effective in identifying and addressing public health problems. For the purposes of its CHNA, Sunnyview Rehabilitation Hospital used data and information from this assessment relating to Schenectady County, which represents the home zip code of 51% of its patients

The Sunnyview Rehabilitation Hospital FY25 CHNA Update identified several high priority health needs, including:

Priority Area: Chronic Disease Prevention Care and Management

- Focus Area – Diabetes and Obesity

Priority Area: Economic Security

- Social Determinants of Health, Specifically Nutrition Security

### **Impact of Previous CHNA Strategies**

The FY25 Sunnyview Rehabilitation Hospital Implementation Strategy Update identified diabetes & obesity and social determinants of health, specifically nutrition (food) security as key areas the hospital would address.

### **Chronic Disease Prevention Care and Management: Diabetes/Obesity**

Over the past year, our plan focused on increasing screening rates for pre-diabetes, especially among economically disparate populations. We worked to expand school and employee wellness programs. Lifestyle change and self-management strategies were promoted to significantly improve quality of life and reduce treatment costs for those with diabetes. These strategies helped to foster an environment that engages individuals in the prevention and self-management of diabetes.

**Collectively, the Schenectady Prevention Agenda Prioritization Work Group executed the following tactics:**

- Healthcare professionals were trained in prediabetes screening and resources within the community.
- Nearly 500 community members living in Schenectady County took part in evidence based chronic disease self-management programs, including Blood Pressure Self-Monitoring and Diabetes Self-Management Support and Educations (DSMS/E)
- Creating Health Schools and Communities Grant provided technical assistance in developing implementation strategies for health and wellness policies within Schenectady County school districts including:
  - Physical education equipment such as basketball hoops, balls and pumps, weights, mats, resistance bands, stationary bikes, and disc golf nets and discs
  - Gardening tools and classroom resources like grow towers, raised beds, and seed starters
  - Flexible and active seating options to promote movement and engagement

- Sensory-friendly wall and floor decals designed to encourage physical activity and learning
- These investments help create environments that foster healthy habits and active learning for all students.
- Professional development opportunities were provided to more than 60 educators and support staff. Training included:
    - Peaceful Playgrounds
    - Disc Golf
    - Physical Activity Learning Sessions – designed for early childhood educators
    - Learnin’ The Ropes (PE teacher training)
  - The National Diabetes Prevention Program was offered by St. Peter’s Health Partners and several other Community Based Organizations, including Catholic Charities Care Coordination Services, Lincoln Pharmacy and Crestwood Pharmacy.

**St Peter’s Health Partners (Sunnyview Rehabilitation Hospital) related initiatives over the past year:**

- Outreached to over 3,00 patients per month who meet criteria for prediabetes, to provide information about the National Diabetes Prevention Program/Lifestyle Change Program.
- Facilitated a total of 18 National Diabetes Prevention Program (NDPP) groups.
- Enrolled 345 participants into National Diabetes Prevention Program
- Provided employee wellness and physical activity programs to our 11,000 colleagues. Four wellness activities were offered over the past year, with a focus on mental health and well-being.
- Promoted the CDPHP Cycle!, which is a bike share program offered to all SPHP colleagues, as part of our Universal Access agreement with CDTA (Capital District Transit Authority).
- Provided technical assistance to school districts within Schenectady County to implement strong school wellness policies.
- On an outpatient basis, diabetes educators from St. Peter’s Health Partners (SPHP) Diabetes and Endocrine Care provided education and support to patients diagnosed with Type 2 Diabetes.

**Social Determinants of Health, specifically Nutrition (Food) Security**

Over the past year, our plan focused on increasing social needs screening rates and providing connections to community resources to mitigate social needs, specifically resources that address nutrition (food) security and to provide resources and programming aimed to increase food security rates in Albany and Rensselaer County. In addition, our goal was to improve access to affordable and healthy food options to community members, regardless of socioeconomic status.

**Collectively, members of the Schenectady Prevention Agenda Prioritization Workgroup executed the following tactics:**

- Through Healthy Alliance/Unite Us Platform, healthcare organizations, health departments and community-based organizations screened community members for social needs, including food insecurity

- Referrals were provided and community members were connected to needed resources through the Healthy Alliance and Find Help referral platforms
- Community Health Workers were utilized to screen and address social needs, including food security and other basic social needs through a collaborative care model, in a variety of settings, such as health care organizations, health departments and community-based organizations.
- Members of local hospitals, health departments and community-based organizations served on the NYS Food as Medicine (FAM) Coalition, to advocate for policy change and the institutionalization of funding for FAM programs into NYS Medicaid.
- Both hospital systems in Schenectady County operated Food as Medicine Programs, providing healthy foods and health education for patients with chronic conditions such as diabetes and hypertension, who also are experiencing food insecurity.

**St. Peter's Health Partners (Sunnyview Rehabilitation Hospital) Related Initiatives within the past year:**

- In the ambulatory care setting, 90.1% of our patients were screened for social needs. Patients who screened positive for a social need and requested assistance were referred to a member of our care coordination team (Community Health Worker and/or Social Worker) for mitigation of needs.
- In the acute care setting, 97% of our patients were screened for social needs. Patients who screened positive for a social need and requested assistance were referred to a member of our care coordination team (Community Health Worker and/or Social Worker) for mitigation of needs.
- Our Community Health Workers provided support and intervention to assist our patients with mitigating social needs such as food insecurity, access to care, transportation, health literacy and utility assistance.
- Implemented a Food as Medicine Program for individuals living with chronic conditions such as diabetes and hypertension and experiencing food insecurity. Over the past year, 222 individuals and 555 household members have been assisted with healthy foods and healthy lifestyle education through this program.
- St. Peter's Health Partners staff served on the NYS Food as Medicine Steering Committee, which drafted policy and practice recommendations to advocate and ensure food as medicine programs are fully funded by NYS Medicaid.
- Distributed emergency food bags to 1,058 patients (each bag contains a 3-day supply of shelf stable foods). These food bags were provided to food insecure patients needing emergency food assistance, who have presented to our emergency departments, behavioral health clinics and safety net sites. Additional resources for long-term assistance and connection to a Community Health Worker are provided with each bag distributed.
- A colleague food pantry was established at Sunnyview Rehabilitation Hospital to meet the needs of our colleagues experiencing food insecurity. In the past year 300 colleagues have obtained assistance from our pantry.

**Written Comments on Prior CHNA**

The CHNA is well-known in our community and local health departments as well as numerous community-based agencies have been involved throughout the process of selecting priorities and

developing improvement plans. To gather additional stakeholder feedback, St. Peter’s Health Partners provided an email address in which written comments could be solicited. No specific written comments were received. Further information and directions for providing feedback on the FY26 CHNA provided within this executive summary.

## Definition and Description of the Community Served

### Geographic Area Served

For the purposes of the Community Health Needs Assessment, Sunnyview Rehabilitation Hospital has defined its service area as Schenectady County. As a specialty hospital, it serves a broad geographic area and, in addition to Schenectady County, serves a significant number of patients from Albany, Rensselaer and Saratoga counties. However, given that the community health needs are being comprehensively addressed by the hospitals (including other SPHP hospitals) located in those counties, it was determined that Sunnyview would work with Ellis Hospital and the Schenectady County Health Department to address the needs in Schenectady County, which represents the home zip codes of 51% of its patients.



### Demographics of the Population

US Census Bureau Quick Facts	United States	New York	Schenectady County
Population, Census, April 1, 2020	331,449,281	20,201,249	158,061
Population, Census, April 1, 2010	308,745,538	19,378,102	154,727
Persons under 5 years old	5.5%	5.3%	7.0%
Persons under 18 years old, percent	21.7%	20.2%	21.3%
Persons 65 years old and over, percent	17.7%	18.6%	18.2%
Female Persons, percent	50.5%	51.2%	50.7%
White alone, percent	75.3%	68.5%	74.7%
Hispanic or Latino, percent	19.5%	19.8%	8.3%
Asian alone, percent	6.5%	9.7%	6.0%
Black or African American alone, percent	13.7%	17.7%	14.0%

Native Hawaiian and Other Pacific Islander alone, percent	0.3%	0.1%	0.3%
Two or More Races, percent	3.1%	2.9%	4.3%
White alone, not Hispanic or Latino, percent	58.4%	54.0%	69.3%
Foreign Born Persons, Percent, 2019-2023	13.9%	22.6%	10.2%
Veteran's, 2019-2023	16,569,149	607,728	7,025
High school graduate or higher, percent of persons age 25+ , 2019-2023	89.4%	87.9%	91.8%
Bachelor's degree or higher, percent of persons age 25+, 2019-2023	35.0%	39.6%	35.1%
Language other than English spoken at home, percent of persons aged 5 years +, 2019-2023	22%	30.6%	8.9%
Owner-occupied housing unit rate, 2019-2023	65.0%	54.3%	63.8%
Median households' income (in 2023 dollars), 2019-2023	\$78,538	\$84,578	\$76,989
Persons in poverty, percent**	11.1%	14.2%	14.0%
Percent with a disability, under age 65 years, percent	9.1%	8.1%	9.6%
Population per square mile, 2020	93.8	428.7	772.6

**Source: US Census Bureau QuickFacts, [www.census.gov](http://www.census.gov)**

\*\*These geographic levels of poverty and health estimates are not comparable to other geographic levels of these estimates

### **County Health Rankings, 2025**

The Robert Wood Johnson Foundation, together with the University of Wisconsin Population Health Institute, develop annual health rankings for every county in the United States (<http://www.countyhealthrankings.org>). Counties are ranked on “Population Health and Well-Being”, measuring the present health of the county and on “Community Conditions”, which contribute to the future health of the county. Below is a conditionally formatted table displaying the 2025 data measures and relative rankings for each of six Capital Region counties. Schenectady county ranked well against other NYS counties on measures of health infrastructure, especially flu vaccination, uninsured rates and preventable hospitalization days, as well as high school completion rates. Schenectady County ranked most poorly on access to exercise opportunities.

2025 County Health Rankings: Ratings out of 10, 1 being the best		
	Population Health and Well-being	Community Conditions
Albany	2	3
Columbia	3	5
Greene	3	5
Rensselaer	3	4
Saratoga	1	2
Schenectady	3	3

Additional details regarding demographics and health status of Schenectady County can be found in the [2025 Capital Region Community Health Needs Assessment](#).

### Health Status of the Population

Based on a review of the data available, below is a summary of the leading sociodemographic and health needs for Schenectady County. Sub-sections correspond with the sections of the [2025 Capital Region Community Health Needs Assessment](#).

#### Schenectady County

##### Sociodemographic

- High rates of poverty (greater than 15%) were observed in ZIP codes in and around the city of Schenectady in 2022 (U. S. Census)
- Close to one-third of rental units in Schenectady County had a gross rent of at least 35% of household income in 2022 (U. S. Census)
- Schenectady County had the highest overall Social Vulnerability Index (SVI) in the Capital Region (CDC)

##### General Health

- Schenectady had the highest percentage in the Capital Region of deaths that were premature in 2022, and ranked 45th out of 62 NYS counties (NYS Vital Statistics)
- In the Capital Region, Schenectady County had the lowest rates of Medicaid enrollees having seen a dentist in the past year in 2023, among those aged 2 to 20, and overall (NYS Medicaid Program)

##### Chronic Disease

- In the Capital Region, adult obesity rates were highest in Schenectady County in 2021 (BRFSS)
- Schenectady County had the highest percentage in the region of adults who ate less than one fruit and one vegetable daily in 2021 (BRFSS)
- Schenectady County had the second highest rates in the region for daily sugary beverage consumption in 2021 (BRFSS)
- Schenectady County had the lowest rates of physical activity in the Capital Region in 2021, both for all adults, and for adults aged 65 years and older (BRFSS)

- Asthma ED visit rates among children aged 0-17 years were highest in Schenectady County in the Capital Region in 2022 (NYS SPARCS)
- Schenectady County was in the bottom half of NYS counties for their rate of potentially preventable diabetes short-term complications hospitalizations among adults 18+ in 2022 (NYS SPARCS)
- Schenectady County had the highest heart attack hospitalization rate in the Capital Region in 2022 (NYS SPARCS)
- Schenectady County had the highest stroke hospitalization rate in the Capital Region in 2022 (NYS SPARCS)
- Schenectady County had a lower breast cancer screening rate than in NYS, excluding NYC, in 2021 (BRFSS)
- Schenectady County had the second highest breast cancer mortality rate in the region in 2019-2021, and ranked in the bottom 10 NYS counties (NYS Cancer Registry)

### **Healthy and Safe Environment**

- Schenectady County had the highest percentage in the region of school drinking water outlets that exceeded the state's lead action limit in 2020, and was the only county in the region with a higher rate than NYS, excluding NYC (NYS Lead in School Drinking Water Program)
- Schenectady County had the highest motor vehicle injury emergency department visit rate in the Capital Region in 2023 (NYS SPARCS)
- Schenectady County had the highest ratio of assault hospitalization rates the Capital Region in 2020, when comparing Hispanic residents and White non-Hispanic residents (NYS SPARCS)
- Schenectady County had the highest percentage in the Capital Region in 2021 of adults who had reported having experienced at least two adverse childhood experiences (ACEs) (BRFSS)
- Schenectady County had the second highest rate in the Capital Region of reports indicating child abuse or maltreatment in 2022 (National Child Abuse and Neglect Data System)
- Schenectady County had the highest rate of chronic absenteeism in the Capital Region among students in first to eighth grade in 2024 (NYS Education Department)
- More than two in five economically disadvantaged students in grades one through eight in Schenectady County was chronically absent in 2024; Schenectady had the highest rate in the Capital Region and the sixth highest rate in New York State (NYS Education Department)

### **Infant and Maternal Health**

- Schenectady County had the lowest 2025 County Health Ranking (among Capital Region counties) for the "low birth weight" measure
- Schenectady County had the highest percentage in the region for births with late or no prenatal care in 2022 (NYS Vital Statistics)
- Schenectady County had the largest disparity in the Capital Region for percent of births with early prenatal care in 2020-2022, between Hispanic and White non-Hispanic residents (NYS Vital Statistics)
- Schenectady County had the greatest difference in percentages in the Capital Region of births that were premature between Black non-Hispanic and White non-Hispanic residents, in 2020-2022 (NYS Vital Statistics)
- Schenectady County had the highest rate in the Capital Region of low birthweight among Asian or Pacific Islander residents in 2020-2022 (NYS Vital Statistics)
- Schenectady County had the highest rate of infant mortality in the Capital Region in 2020-2022, among counties with reportable data (NYS Vital Statistics)

### **Mental Health and Substance Use Disorder**

- Schenectady County had the highest percentage in the Capital Region in 2021 of adult residents who reported ever being diagnosed by a provider with a depressive disorder (BRFSS)
- Schenectady County had the highest rate of mental health emergency department visits in the Capital Region, in 2023, where a mental health condition was the primary diagnosis (NYS SPARCS)
- Schenectady County had the third highest intentional self-harm ED visit and hospitalizations rates in the region in 2023 (NYS SPARCS)
- Schenectady County had the third highest opioid overdose mortality rate in the Capital Region, in 2022 (NYS Vital Statistics)

### **Infectious Disease**

- Schenectady County had the second highest newly diagnosed HIV case rate in the Capital Region in 2022 (NYS STI Surveillance System)
- Schenectady County had the highest rate in the region, and fifth highest rate in the state, for gonorrhea diagnoses in 2022 (NYS STI Surveillance System)
- Schenectady County had the highest rate in the region for chlamydia diagnoses in 2022 (NYS STI Surveillance System)

Additional details regarding demographics and health status of Schenectady County can be found here: [2025 Capital Region Community Health Needs Assessment](#).

### **Social Influencers (Determinants) of Health and Health Equity**

The terminology of Social Influencers of Health (SloH) utilized throughout the CHNA is a collective set of indicators where people live, work, learn, pray, and play that influence health risks and outcomes. Many of the indicators and categories within this CHNA are social need focused and help inform our response to the CHNA. While SloH can be defined in a number of ways, the CDC categorizes them into five categories: healthcare access and quality, education access and quality, social and community context, economic stability, and neighborhood and built environment. Both negative health outcomes and SloH are disproportionately experienced by underserved populations. SloH such as housing stability, food security and transportation vary widely by geographic locations and overall access and availability to services also vary by population causing health inequities. Populations such as communities of color, LGBTQIA+, older adults, rural populations, new American or resettlement populations, individuals with a physical or mental disability, women, and others often experience challenges with SloH and health outcomes at a higher rate than others.

### **FY26 Community Health Needs Assessment**

Sunnyview Rehabilitation Hospital collaborated with other local health systems, county health departments and community-based agencies to complete a six county (Albany, Rensselaer, Schenectady, Saratoga, Columbia, and Greene) Community Health Needs Assessment, led by the Healthy Capital District (HCD). HCD is an incorporated not-for-profit which works with others in the community to determine ways in which the Capital Region could be more effective in identifying and addressing public health problems. For the purposes of its CHNA, Sunnyview Rehabilitation Hospital used data and

information from this assessment relating to Schenectady County (the defined service area). Other health systems will be addressing the needs of remaining counties in the assessment based on their location and patient population.

### Data sources and indicator selection

The health indicators selected for this report were based on a review of available public health data and New York State priorities promulgated through the 2025-2030 Prevention Agenda. The collection and management of these data have been supported by the state for an extended period and are likely to continue to be supported. This provides reliable and comparable data over time and across the state. These measures, when complemented by other data sources, such as the Behavioral Risk Factor Surveillance System and Prevention Quality Indicators, provide health indicators that can potentially be improved in the short-term. The Common Ground Health provided Statewide Planning and Research Cooperative System (SPARCS, hospitalizations and emergency department visit) and Vital Statistics (mortality) data, as well as sociodemographic data, that were utilized to conduct county and ZIP code level analyses of mortality, hospitalizations, and emergency department visits for all residents, by gender, and race/ethnicity. The most recent SPARCS data available was from 2023, while the most recent Vital Statistics data available was from 2022. For some measures with small case counts, 3- or 5-year periods of aggregate data were used to establish more reliable rates, especially for less populous geographic areas or demographic groups.

Additional data were examined from several sources:

- New York State Prevention Agenda Tracking Dashboard
- New York State Community Health Indicator Reports Dashboard
- New York State Leading Causes of Death Dashboard (2022)
- New York State Cancer Registry Dashboard
- New York State County Health Indicators by Race/Ethnicity (2020-2022)
- New York State Annual Vital Statistics Tables (2022)
- New York State Behavioral Risk Factor Surveillance System (BRFSS) (2016, 2018, and 2021)
- New York State Statewide Planning and Research Cooperative System (SPARCS) (2019-2023) – Prevention Quality Indicators (2021-2023)
- New York State Opioid Data Dashboard
- New York State Opioid Annual Report (2024)
- State Unintentional Drug Overdose Reporting System (SUDORS) (2023)
- New York State Communicable Disease Annual Reports (2021-2023)
- New York State Division of Criminal Justice County Crime Rates (1990-2024)
- New York State Department of Health, Health Data NY (2025)
- New York State Education Department Report Card Database (2024)
- New York State Department of Environmental Conservation, Climate Justice Working Group (2023)
- U.S. Census, American Community Survey (2022 and 2019-2023)
- U.S. Department of Agriculture, Economic Research Service (2019)
- Centers for Disease Control and Prevention, Agency for Toxic Substances and Disease Registry, Geospatial Research, Analysis, and Services Program (2023)
- Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System (2024)

- University of Wisconsin Population Health Institute and Robert Wood Johnson Foundation, County Health Rankings (2025)

These data sources were supplemented by the *2024 Capital Region Community Health Survey*. The 2024 Capital Region Community Health Survey was conducted by Healthy Capital District in November and December of 2024, with the assistance of the Albany, Columbia, Greene, Rensselaer and Schenectady health departments, and Albany Med Health System, Columbia Memorial Hospital, Ellis Hospital, and St. Peter’s Health Partners hospitals. The survey was a convenience sample of adult residents of the Capital Region (aged 18 years and older). The survey received 5,415 total responses from Capital Region residents. This survey was conducted to learn about the health needs, barriers and concerns of residents in the Capital Region. Appendix N of the [2025 Capital Region Community Health Needs Assessment](#) contains a detailed summary of survey findings, and [Appendix Q](#) contains the questionnaire used.

Local data were compiled from these data sources and draft sections were prepared by health condition for inclusion in this community health needs assessment. Drafts of this report were prepared by Spencer Keable, Data Analyst for Healthy Capital District. Drafts were reviewed for accuracy and thoroughness by Amanda Duff, Executive Director of Healthy Capital District. Drafts were then reviewed by the members of the Capital Region Prevention Agenda Work Group, local subject matter experts representing each of the participating health departments and hospitals in the Capital Region. Comments were addressed and changes were incorporated into the final report.

### Collaboration and Community Engagement

Engaging the community in the health needs assessment process was a priority of St. Peter’s Health Partners, Sunnyview Rehabilitation Hospital and its stakeholders. Broad community engagement began with participation in the *2024 Capital Region Community Health Survey*. The survey offered multiple choice and open-ended response options to learn about residents’ health needs and priorities, access or barriers to care, mental health, and social determinants of health. Demographic information collected by the survey allowed review of information by county, age, gender, race/ethnicity and income. Survey results, compiled by our partner, Healthy Capital District (HCD), regarding the public’s opinions on the seriousness of public health issues were incorporated into the priority scoring of health needs by the members of the Capital Region Prevention Agenda Prioritization Work Groups (Albany-Rensselaer, and Schenectady Counties). The Work Groups included community voices through representatives from community-based organizations that serve low-income residents, the homeless, and other vulnerable populations; federally qualified health centers; advocacy groups; academic institutions; public health departments; providers; and health insurers. Participants were encouraged to share data and observations of their own, and to advocate for the needs of their constituents. St. Peter’s Health Partners- Sunnyview Rehabilitation Hospital and its stakeholders strategically invited partners with access to medically underserved populations.

The Schenectady Prevention Agenda Prioritization Work Group’s health issue prioritization process included community voices through representatives from community-based organizations that serve low-income residents, the homeless, and other vulnerable populations; federally qualified health centers; advocacy groups; academic institutions; public health departments; providers; and health insurers. Participants were encouraged to share data and observations of their own, and to advocate for the needs of their constituents. HCD and its stakeholders strategically invited partners with access to medically underserved populations, as well as potential partner organizations who had traditionally not

been involved in this process, to align with the updated New York State Prevention Agenda 2025-2030 priority areas.

### Health Issue Ranking

Selection of the top health priorities for the Schenectady Prevention Agenda Prioritization Work Group was facilitated by a Public Health Issue Scoring Sheet. The Public Health Issue Scoring Sheet was created by HCD in 2021 for the 2022 Capital Region Community Health Needs Assessment (CHNA) and local Community Health Improvement Plans (CHIPs). It was based on feedback from prior CHNA/CHIP processes that the health issue prioritization process was difficult due to the multitude of pertinent considerations relating to each health issue. The Public Health Issue Scoring Sheet essentially assigns a score to the most relevant considerations, allowing for the health issues to be ranked and informing decision making. The Public Health Issue Scoring Sheet method was adapted from a modified version of the Hanlon Method for Prioritizing Health Problems. The Public Health Issue Scoring Sheet quantified considerations regarding both the need to address each health issue and the opportunity to make a positive impact. Opportunity considerations were based on guidance documents from the American Hospital Association, the National Association of County and City Health Officials as well as other public health authority resources. Need considerations included those used in prior prioritization processes, as well as a community priority score derived directly from the contributions of over 5,000 residents in the 2024 Capital Region Community Health Survey. The Public Health Issue Scoring Sheet also included “other” considerations, for both need and opportunity, to address additional factors not included in the sheet and to capture the knowledge and experience of local community partners.

The Schenectady Prevention Agenda Prioritization Work Group met in the Fall of 2024 to review the Public Health Issue Scoring Sheet and provide oversight and guidance during the prioritization process, especially given the recent changes to the structure and focus of the NYS 2025-2030 Prevention Agenda. In the Winter of 2024, HCD staff consolidated the twenty-five (25) public health issues from the 2022 CHNA/CHIP process into 15 public health issues, based on the updated NYS 2025-2030 Prevention Agenda priority areas. HCD staff then conducted an internal review of the most recent and relevant available data regarding the 15 identified health issues. Using publicly available and internal data, HCD generated five ‘data’ scores for each of the health issues, based on the number of people affected, rates compared to NYS, excluding NYC, recent trends in rates, disparities between race/ethnicity groups, and the seriousness of health outcomes. HCD also created ‘survey’ scores based on results from the 2024 Capital Region Health Needs Survey. Data and survey scores were then visualized in public dashboards and reviewed with each sub-regional Work Group to review. The list of 15 health issues was then shortened based on input from Work Group participants to allow for a more focused discussion at subsequent public meetings.

The Schenectady Prevention Agenda Prioritization Work Group held in-person or hybrid (virtual and in-person) public meetings to present progress to – and collect input from – local community-based organizations, academic researchers, and members of the public. At the meetings, the health issue scoring method, as well as the data and survey results related to each of the health issues, were reviewed with participants. Then, a discussion was held to answer questions, and individuals shared their understanding and recent observations of the current situation. Participants were provided with a method to vote on the need and opportunity to address each health issue, as a measurement of the discussion and their own experiences regarding each health issue. Group discussion often coalesced around mental health, food insecurity, and chronic diseases as issues that particularly affect residents’

livelihoods, are not fully addressed by existing resources, or are noticeably getting worse or affecting more people. Scores for opportunity considerations were self-assessed by hospitals and health departments and were based on criteria including their ability to sustainably devote resources, garner support, and make a measurable impact. More details on the prioritization method results for Schenectady county can be found here: [Prioritization Process](#).

## Public Health Issue Scoring Sheet

<b>Opportunity</b>	<b>Max Score</b>	<b>Score</b>
Health issue <b>aligns</b> with organizations' strategic goals	3	
If already working to address this issue, are our <b>efforts</b> working sustainably	2	
If not working on this issue, do we have <b>resources and expertise</b> to lead effort	1	
Are there potential partner organizations who would <b>support</b> our efforts	2	
Is it possible to make a measurable, positive <b>impact</b>	3	
Can we work on this issue, <b>sustainably</b> , for the next 5-6 years	2	
Other organizational considerations	3	
Community Partner considerations, gathered in public data review meeting	3	
<b>Total Opportunity Score</b>	<b>19</b>	

<b>Need</b>	<b>Max Score</b>	<b>Score</b>
Is this issue a major need in the community - <b>Total number</b> of cases	2	
Is this issue worse in our region than throughout NY - <b>Rates</b>	2	
Is this issue more common for some populations - <b>Disparities</b>	2	
Is this issue getting better or worse - <b>Trend</b>	2	
How <b>serious</b> are the health outcomes of this issue	2	
Is this issue a <b>priority for the community</b> based on the survey	3	
Other considerations about the data	2	
Community Partner considerations, gathered in public data review meeting	3	
<b>Total Need Score</b>	<b>18</b>	

	<b>Max Score</b>	<b>Score</b>
Total Organizational Score	16	
Total Data-based Score	10	
Total Community Partner Score	11	
<b>Total Priority Score</b>	<b>37</b>	

## Prevention Agenda Priority Selection

The public health issue prioritization process for the Schenectady Prevention Agenda Prioritization Work Group is summarized below:

### Schenectady Prevention Agenda Prioritization Work Group

The Schenectady County Prevention Agenda Prioritization Work Group was led by Schenectady County Public Health Services, Ellis Medicine, and Sunnyview Rehabilitation Hospital. The Work Group was comprised of members of the Schenectady Coalition for a Healthy Community (SCHC), an informal coalition of community organizations created following the State-mandated consolidation of Schenectady's hospitals, which has met regularly over the decade to share information on community health issues. Prior to the first public meeting, a planning meeting was held on March 26, 2025, where Healthy Capital District (HCD) provided the Work Group with a summary of the data and local survey results for the fifteen health issues, and the resulting scores. At the end of the meeting, the group prioritized a shortlist of eight health issues to present at the public meeting. The first public meeting was

held on April 2, 2025, at the Schenectady County Public Library, where HCD presented data on health issues and facilitated discussions. In the second public meeting, held on April 9, 2025, at the Schenectady County Public Library, HCD provided Work Group members and public attendees with an overview of the Community Health Needs Assessment process. Then, participants were provided with an opportunity to advocate for a particular health issue in a short presentation. Finally, a voting session was held to capture participants' top public health priorities, based on the data reviewed in the first meeting, the short advocacy presentations, and participants' personal and professional experience. Mental health and suicide, hunger and food insecurity, and obesity and diabetes were participant's top public health priorities. Community attendees at the public prioritization meetings included the following organizations:

- Capital District Tobacco Free Communities
- Catholic Charities Tri-County Services
- Capital District Physicians Health Plan
- Electric City Community Grocery
- Ellis Medicine
- Ellis Family Health Center
- MVP Healthcare
- New Choices Recovery Center
- Project Safe Point
- Safe Inc. of Schenectady,
- Schenectady City School District
- Schenectady Community Action Program
- Schenectady County Public Health Services
- Schenectady Food Coalition
- Schenectady Foundation
- St. Peter's Health Partners
- Sunnyview Rehabilitation Hospital

Attendance during the public prioritization meetings consisted of more than 30 participants at each meeting representing health care and community-based organizations, and public service providers. Participants were engaged in the data presentations, raised questions, and offered their perspectives as health planners and service providers. The Health Issue Prioritization materials presented at the public meetings can be found here: [Prioritization Process](#).

Following the public prioritization meetings, members of the Work Group were given a survey to rate their organizational capacity to sustainably address each issue. Their responses were scored and incorporated in the Health Issue Scoring Sheet. Based on the results of the health issue scoring, including the data, survey, community partner, and organizational scoring results.

**Health Issues Scoring: Sunnyview Rehabilitation Hospital, Schenectady County (listed in numerical order):**

- 1. Obesity and Diabetes**
- 2. Mental Health (Depression, Anxiety, Stress) and Suicide**

3. **Hunger and Food Insecurity**
4. **Addiction to Drugs or Alcohol**
5. **Cancer**
6. **Tobacco Use and Vaping**
7. **Sexually Transmitted Infections**
8. **Childhood Lead Poisoning**

### **Significant Health Priorities Selected**

Chronic disease, food insecurity (nutrition security), and mental health initiatives received the greatest number of votes during the prioritization process due to their impact on many people in the most significant ways, both directly and indirectly, and through their influence on other health conditions. Among these initiatives, many aspects are largely preventable and contribute significantly to the cost of health care. The group's priorities also reflect the participating entities' abilities to effectively align resources to make the most positive impact on the Schenectady County community. The Schenectady Prevention Agenda Prioritization Work Group selected three public health issues and grouped them into the following Prevention Agenda Priority Areas. These public health issues ranked as the most significant, prioritized health needs:

#### **Domain: Economic Security**

- Priority Area – Nutrition Security

#### **Domain: Social and Community Context**

- Priority Area – Adverse Childhood Experiences

#### **Domain: Health Care Access and Quality**

- Priority Area – Preventative Services for Chronic Disease Prevention and Control
  - Diabetes and Obesity

### **Assets and Resources**

The Schenectady Prevention Agenda Prioritization Work Group partnered with local organizations to support the top health priorities identified in Schenectady County. These resources play a vital role in improving community health and well-being. To explore additional programs and services, visit: [2025 Capital Region Community Health Needs Assessment](#).

### **Conclusion**

This assessment is an effort to analyze the current state of health and socioeconomic factors in the Sunnyview Rehabilitation Hospital service area, Schenectady County. Limitations and inconsistencies in available data can make it challenging to accurately compare indicator performance between the local communities, the state, and the nation as a whole. As areas of concern are selected for further conversation about community collaboration and community benefit planning, additional data may be sought if needed.

## **Governing Board Review**

The Board of Directors at St. Peter's Health Partners, which includes Sunnyview Rehabilitation Hospital adopted this Community Health Needs Assessment on April 24, 2026.

## **Implementation Strategy**

After reviewing the data and scoring from the Schenectady County External Workgroup, St. Peter's Health Partners- Sunnyview Rehabilitation Hospital will focus on developing/supporting initiatives and measure their effectiveness to improve the following health needs:

### **Domain: Economic Security**

- Priority Area: Nutrition Security

### **Domain: Social and Community Context**

- Priority Area: Adverse Childhood Experiences

### **Domain: Health Care Access and Quality**

- Priority Area: Preventative Services for Chronic Disease Prevention and Control
  - Diabetes and Obesity

Once drafted, the Community Health Implementation Strategy will be presented to the St. Peter's Health Partners Board for approval. Once approved, the Implementation Strategy will be posted to the websites listed below by October 2026.

## **Communication**

This Community Health Needs Assessment was made available to the many community members and organizations who participated in the process. Additionally, it is available on the St. Peter's Health Partners website ([www.sphp.com](http://www.sphp.com)).

Paper copies may be requested by contacting:

St. Peter's Health Partners Community Health and Well-Being  
315 S. Manning Boulevard Albany, NY 12208  
518-525-6640

Comments about this document may also be sent to the address above, **SUBJECT: CHNA Comments**

## **Next CHNA Due Date**

The next Community Needs Assessment will be scheduled for completion by June 23, 2029.

**Appendix**  
**2025 Capital Region Community Health**  
**Needs Assessment**  
**and**  
**Sunnyview Rehabilitation Hospital**  
**Full Assessment Report**



# 2025 Capital Region Community Health Needs Assessment

# Acknowledgments

The principal authors of this report were:

Amanda Duff, Ph.D.

Spencer Keable, M.P.H.

Amanda Duff, the Executive Director of the Healthy Capital District (HCD), managed and edited the presentation of findings for this *2025 Capital Region Community Health Needs Assessment*. She also facilitated the health issue prioritization process with our partner health departments and hospitals. Mr. Keable, Data Analyst at HCD, coordinated the *2024 Capital Region Community Health Survey* and conducted the analysis for our health issue prioritization process. Mr. Keable also prepared the appendices contained in the report. Ms. Lillie Ruby, Communications Coordinator at HCD, was invaluable in formatting this report.

This report benefited from the review and input of the members of the Prevention Agenda Workgroup of the Healthy Capital District. These individuals are subject matter experts from the local county public health departments and each of the Capital Region hospitals. Their review of the narrative and data resulted in helpful revisions to this report. During the development of this report, Prevention Agenda Workgroup members participated in four local health issue prioritization workgroups to select public health priorities aligned with the New York State 2025-2030 Prevention Agenda. Workgroup members considered local data prepared by HCD as well as feedback from members of their community when selecting Prevention Agenda priorities and interventions for their Community Health Improvement Plan (CHIP) or Community Services Plan (CSP). Community member participants represented more than one hundred (100) local organizations, including other county agencies, community-based organizations, businesses, universities, consumers, and other partners. Community participants attended public meetings where they reviewed data, contributed to discussions, voted on health priorities, and offered to collaboratively support health interventions.

The member organizations of HCD also provided valuable financial support for the development of this report and the *2024 Capital Region Community Health Survey*. We are grateful for the contributions of each one of these generous contributors.





## Health Profile of New York’s Capital Region, 2025

### MEMBER ORGANIZATIONS

- Albany County  
Department of Health
- Albany Guardian Society
- Albany Med Health System
  - Albany Medical Center
  - Columbia Memorial Hospital
  - Saratoga Hospital
- Healthy Alliance
- Catholic Charities of the  
Roman Catholic Diocese
- Capital District Physicians’  
Health Plan
- Columbia County  
Department of Health
- Ellis Medicine
- Greene County  
Department of Health
- Hometown Health Centers
  - MVP Health Care
- Rensselaer County  
Department of Health
- Schenectady Community  
Action Program
- Schenectady County  
Public Health Services
- St. Peter’s Health Partners
  - Samaritan Hospital
  - St. Peter’s Hospital
- Sunnyview Rehabilitation  
Hospital
- Whitney Young Health

In 1997, the counties of Albany, Rensselaer, and Schenectady implemented a joint project to engage health providers and community members in a regional health assessment and prioritization process. This was the first major collaborative venture undertaken by the three local governments, health care providers, insurers, other community organizations, and residents to assess health status, identify health priorities, and develop plans to improve the health status of the Capital District. The projects that resulted from these plans have directly resulted in improved health and access to the health services needed by residents in the Capital District.

The *2025 Capital Region Community Health Needs Assessment (CHNA)* is now the eighth analysis of the health needs in the region designed to support community health improvement planning. In addition to the original three Capital Region counties of Albany, Schenectady and Rensselaer, the *2025 CHNA* includes the counties of Saratoga, Columbia and Greene. The *2025 Capital Region CHNA* examines data on mortality, hospitalizations, emergency department visits, disease diagnoses, health behaviors, and population demographics. The structure of this report is based upon New York State’s *Prevention Agenda 2025-2030* and shares its focus on improving health and eliminating health disparities. Utilizing the Prevention Agenda framework for examining public health data aligns our analysis with that of the New York State Department of Health (NYSDOH), creating opportunities to compare the Capital Region to other Upstate counties and New York State goals.

This analysis is not completely comprehensive of every health condition or public health issue. In addition, individuals working on, or experiencing, a particular health issue firsthand will undoubtedly have additional information to contribute beyond the data reported here. This report’s analysis was conducted based upon the availability of reliable, comparable data and the delineated priority health areas of the New York State Department of Health. The results describe the prevalence and concentration of the major health issues in the Capital Region.

This document would not be possible without the labor, input and support of our sponsors and members of the community. It is the result of over a year of meetings with partner organizations and community members, and our community health needs survey, which gathered over 5,000 responses from Capital Region residents. The collaboration and contributions of everyone involved were invaluable. The *2025 Capital Region Community Health Needs Assessment* was completed in October 2025.

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# I. Introduction and Data Summary

The purpose of this report is to summarize the public health needs of communities in the Capital Region with the most recent and reliable data available. These indicators provide a broad array of health information that may be useful in determining and monitoring health promotion priorities for the community. The following sections provide an overview of the processes used to select indicators and priorities, and details about individuals and organizations who participated in these processes.

## Community Being Assessed

The communities being assessed in this report are the counties of Albany, Columbia, Greene, Rensselaer, Saratoga, and Schenectady. They form the common service area covered by the local health departments in Albany, Columbia, Greene, Rensselaer, Saratoga, and Schenectady counties and the primary patient population served by Albany Med Health System affiliates (Albany Medical Center, Columbia Memorial Hospital and Saratoga Hospital), Ellis Hospital, and St. Peter's Health Partners (Albany Memorial Hospital, Samaritan Hospital, St. Peter's Hospital, Seton Health/St. Mary's Hospital, Samaritan Hospital, Sunnyview Rehabilitation Hospital), which are located within the six counties.

Demographic information on the population in the Capital Region is based on estimates from the U.S. Census American Community Survey (ACS) 1-year estimates from 2022 and 5-year estimates from 2019-2023. The combined population in the Capital Region was 981,192 individuals. About 19% were under 18 years of age, while 18.9% were 65 years of age or older. Approximately 10.5% were living in poverty. The Capital Region race/ethnicity distribution was 84.3% White, 10.3% Black, 6.2% Hispanic or Latino, 5.7% Asian, 1.1% Native American, and 5.7% as another race. Additional sociodemographic details are provided in [Section III](#).

## Data Sources and Indicator Selection

The health indicators selected for this report were based on a review of available public health data and New York State priorities promulgated through the *2025-2030 Prevention Agenda*. The collection and management of these data has been supported by the state for an extended period and are likely to continue to be supported. This provides reliable and comparable data over time and across the state. These measures, when complemented by other data sources, such as the Behavioral Risk Factor Surveillance System and Prevention Quality Indicators, provide health indicators that can potentially be improved in the short-term.

The Common Ground Health provided Statewide Planning and Research Cooperative System (SPARCS, hospitalizations and emergency department visit) and Vital Statistics (mortality) data, as well as sociodemographic data, that were utilized to conduct county and ZIP code level analyses of mortality, hospitalizations, and emergency department visits for all residents, by gender, and race/ethnicity. The most recent SPARCS data available was from 2023, while the most recent Vital Statistics data available was from 2022. For some measures with small case counts, 3- or 5-year periods of aggregate data were used to establish more reliable rates, especially for less populous geographic areas or demographic groups.



Additional data were examined from several sources:

- New York State Prevention Agenda Tracking Dashboard
- New York State Community Health Indicator Reports Dashboard
- New York State Leading Causes of Death Dashboard (2022)
- New York State Cancer Registry Dashboard
- New York State County Health Indicators by Race/Ethnicity (2020-2022)
- New York State Annual Vital Statistics Tables (2022)
- New York State Behavioral Risk Factor Surveillance System (BRFSS) (2016, 2018, and 2021)
- New York State Statewide Planning and Research Cooperative System (SPARCS) (2019-2023)
  - Prevention Quality Indicators (2021-2023)
- New York State Opioid Data Dashboard
- New York State Opioid Annual Report (2024)
- State Unintentional Drug Overdose Reporting System (SUDORS) (2023)
- New York State Communicable Disease Annual Reports (2021-2023)
- New York State Division of Criminal Justice County Crime Rates (1990-2024)
- New York State Department of Health, Health Data NY (2025)
- New York State Education Department Report Card Database (2024)
- New York State Department of Environmental Conservation, Climate Justice Working Group (2023)
- U.S. Census, American Community Survey (2022 and 2019-2023)
- U.S. Department of Agriculture, Economic Research Service (2019)
- Centers for Disease Control and Prevention, Agency for Toxic Substances and Disease Registry, Geospatial Research, Analysis, and Services Program (2023)
- Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System (2024)
- University of Wisconsin Population Health Institute and Robert Wood Johnson Foundation, County Health Rankings (2025)

These data sources were supplemented by the *2024 Capital Region Community Health Survey*. The *2024 Capital Region Community Health Survey* was conducted by Healthy Capital District in November and December of 2024, with the assistance of the Albany, Columbia, Greene, Rensselaer and Schenectady health departments, and Albany Med Health System, Columbia Memorial Hospital, Ellis Hospital, and St. Peter’s Health Partners hospitals. The survey was a convenience sample of adult residents of the Capital Region (aged 18 years and older). The survey received 5,415 total responses from Capital Region residents. This survey was conducted to learn about the health needs, barriers and concerns of residents in the Capital Region. [Appendix N](#) contains a detailed summary of survey findings, and [Appendix O](#) contains the questionnaire used.

Local data were compiled from these data sources and draft sections were prepared by health condition for inclusion in this community health needs assessment. Drafts of this report were prepared by Spencer Keable, Data Analyst for Healthy Capital District. Drafts were reviewed for accuracy and thoroughness by Amanda Duff, Executive Director of Healthy Capital District. Drafts were then reviewed by the members of the Capital Region Prevention Agenda Work Group, local subject matter experts representing each of the participating health departments and hospitals in the Capital Region. Comments were addressed and changes were incorporated into the final report.



## Structure of this Report: Health Indicators

Every year, the New York State Department of Health (NYSDOH) provides updated information on major health indicators for each county. NYSDOH has provided state, regional, and county level information on the 2019-2024 Prevention Agenda indicators and objectives that can be used for tracking Prevention Agenda-based efforts. NYSDOH plans to update the Prevention Agenda Tracking Dashboard to reflect the new 2025-2030 Prevention Agenda, but as of the time of this report's writing, the Dashboard still reflects indicators and objectives for the 2019-2024 Prevention Agenda. There is significant overlap between the indicators for the 2019-2024 and 2025-2030 Prevention Agendas, although they are not identical. To supplement available information, this report focuses on more the most relevant and recent information available, including analyses by ZIP code, gender, race, ethnicity and trends, where possible. To present meaningful information for smaller areas or subgroups, data for several years was combined in some instances. Still, some areas or demographic groups had too few cases for rates to be published, due to confidentiality concerns.

After presenting information on demographics and leading causes of death for the Capital Region, a summary of general health status is provided, including information on health care access and usage. This is followed by sections specific to each of the five 2019-2024 New York State Prevention Agenda Priority Areas. Topics within each Priority Area contain a brief synopsis of the condition and why it is of concern. Prevention Agenda 2025-2030 objectives are presented and compared to statistics for New York State, New York State excluding New York City, the Capital Region, and the six Capital Region counties. Where available and relevant, data are presented by year or demographic group.

For some indicators, data is presented for ZIP code groups, which aggregate ZIP codes with small populations and allow for reliable and publishable rates to be generated. Census tracts generally have a more consistent population size than ZIP codes, but health data is rarely available at the census tract level. ZIP code groups were selected based on a minimum of 2,000 residents and meaningful groupings, following municipal boundaries and sub-municipal neighborhoods in urban areas.

Detailed data are available in the [appendices](#) for:

- Socio-demographic (age, race/ethnicity, poverty) estimates, by county and ZIP code group
- Leading causes of death and premature death, by county
- County hospitalization rates, by race/ethnicity, gender, and ZIP code group
- County emergency department visit rates, by race/ethnicity, gender, and ZIP code group
- Prevention Quality Indicators (PQI), by county and ZIP code group
- County mortality rates, by race by ZIP code group
- 2025 County Health Rankings results
- County-specific methods and results for the health issue prioritization process
- *2024 Capital Region Community Health Survey* results

## Rates and Comparisons

For most indicators, age-adjusted rates are presented in tables. Age-adjustment considers the differing age distributions within populations to calculate rates that can be used for comparison purposes. Direct standardization



was used for this report. The advantage of this method is that comparisons of Capital Region data can be made with Prevention Agenda 2025-2030 objectives for most indicators. Prevention Agenda and NYSDOH indicators have been age-standardized to the United States 2000 population, thus age-adjusted rates presented in this report are standardized similarly. Also, most comparisons are made between Capital Region data and data for the 57 counties in New York State which are not within the City of New York (referenced as “NYS, excluding NYC”). This is a well-accepted methodology to allow comparison with typically similar populations, excluding the unique population dynamics of the nation’s largest city.

## Data Summary

### Sociodemographic Information

In 2019-2023, the most recent demographic profile available from the U.S. Census, the Capital Region was home to 981,192 residents, equally distributed between males and females. The median age of Capital Region counties ranged from 38.3 years in Albany County to 49.5 years in Columbia County, compared to 39.6 years in New York State. About 15.5% of the Capital Region population was 14 years of age or younger, while 18.9% was 65 years of age and older. 84.3% of the Capital Region population identify as White, 10.3% identify as Black, 5.7% identify as Asian, 1.1% identify as Native American, and 6.2% identify as Hispanic. County level poverty rates ranged from 6.6% in Saratoga County to 12.5% in Albany County. Poverty among children under the age of 18 ranged from 7.0% in Saratoga County to 16.6% in Rensselaer County. The proportion of population with less than a high school education, in each county, ranged from 6.0% in Saratoga County to 11.5% in Greene County. Albany County had the highest percentage of population that speaks English less than very well, at 4.8%, while the other counties percentages were between 2% and 3%. Unemployment was relatively low in the Capital Region, compared to the rest of the state, and was highest in Schenectady County, at 3.8%. Columbia and Schenectady counties had the highest percentages of housing units built before 1940 at 33.4% and 33.1%, while Saratoga County had the lowest at 16.0%. Columbia County had the highest percentage of rental units with rent that costs occupants more than 35% of their income, at 43.7% of rental units.

### General Health Status

Overall mortality indicators for the Capital Region were consistent with other New York State (NYS) counties outside New York City (NYC), although Capital Region residents had a higher overall age-adjusted mortality rate. The Capital Region overall also has a slightly higher percentage of deaths that were premature (before age 65 years) than NYS, excluding NYC. The Capital Region’s rate of Years of Potential Life Lost (YPLL) was also higher than NYS excluding NYC. Chronic diseases were the leading causes of death in the Capital Region, with heart disease, cancer, COVID-19, chronic lower respiratory disease (CLRD), unintentional injuries, and diabetes being the major causes of death in 2022.

### Health care access

Health care access indicators show some Capital Region counties had better, and some worse, access to health care, when compared with NYS excluding NYC, depending on the indicator and county. Capital Region residents, both children and adults, had higher health insurance coverage rates compared to NYS excluding NYC. Greene County had a better rate than NYS, excluding NYC, of adults having a regular health care provider, while Columbia County had a rate lower than NYS, excluding NYC. Local survey data showed that Medicaid-insured residents, roughly 50% more often than residents with other types of insurance, said they had not received a physical exam in the past year. Those without a recent physical often pointed to not going to a doctor’s office for routine care, not having time, or not having a primary care provider. Based on data from the 2021 Behavioral Risk Factor Surveillance



System, Capital Region counties ranked in the top half of NYS counties for their rates of adults who avoided medical care due to concerns about out-of-pocket cost. When looking at preventable hospitalizations, the Capital Region overall had much lower rates than NYS, excluding NYC, although Columbia County had higher rates for Acute, Circulatory, and Diabetes measures. Preventable hospitalization rates were highest among Black non-Hispanic residents of the Capital Region.

## Chronic Disease

For adult obesity, nutrition and physical activity indicators, Schenectady County was doing significantly worse than the other Capital Region counties and was ranked in the bottom 10 of NYS counties. Capital Region counties were doing well in terms of smoking, each ranking in the top half of NYS counties for their low percentage of smoking among adults, although Saratoga County had a relatively high rate (41%) of smoking among adults with an income of less than \$25,000. Rensselaer County had a high chronic lower respiratory disease mortality rate, but otherwise the Capital Region counties ranked in the top half of NYS counties for lung disease measures. Greene County had the second highest rate of adults with current asthma in 2021, at nearly 1 in 5 adults, while Albany and Schenectady counties had relatively high rates of asthma hospitalizations and emergency department visits. Albany and Schenectady counties also had high rates of stroke hospitalizations and ranked in the bottom 10 of NYS counties. Rensselaer County had high rates of female breast cancer incidence, for late stage and any stage, although Greene County had the highest rate in the Capital Region for female breast cancer mortality. Columbia County had a high rate of late-stage incidence of prostate cancer, while Rensselaer and Greene counties had relatively high rates of lung and bronchus cancer incidence and mortality.

## Healthy and Safe Environment

Columbia, Albany, and Greene counties had relatively low rates of children being screened twice for lead by 36 months, with less than half of children being tested, compared with 59% in NYS, excluding NYC. Schenectady County had the only rate in the Capital Region that was higher than the NYS, excluding NYC, rate for their percentage of school drinking water outlets that exceeded the state's lead action limit. Greene County had a relatively high rate of motor vehicle injury mortality. Rensselaer, Columbia, and Greene counties had some of the highest rates in the state, out of 37 NYS counties with available data, for falls hospitalizations among children under the age of 10 years. Four of the six Capital Region counties ranked in the bottom 10 NYS counties for hospitalizations rate due to falls among adults aged 75 to 84 years. Columbia County had the highest rate in the state, among 47 counties with available data, for the ratio of work-related emergency department visit rates between Black non-Hispanic and White non-Hispanic workers. Columbia County was the only county in the Capital Region to have less than 50% of its cooling towers in compliance with New York's "*Protection Against Legionella*" regulation. Columbia and Greene counties also had very low rates of population served by optimally fluoridated public water systems.

## Healthy Women, Infants and Children

Greene County had the lowest rates in the region of births with adequate prenatal care and early prenatal care. Schenectady and Albany counties had high rates of premature and low birthweight births. Schenectady County had the highest infant mortality rate in the Capital Region. Albany and Rensselaer counties were the only counties in the Capital Region with maternal deaths from 2020 to 2022: Albany County had four deaths and Rensselaer County had two deaths. Capital Region counties generally had good rates of breastfeeding, especially for Hispanic and Black non-Hispanic infants, although Schenectady County was the only county in the Capital Region with less than half of infants exclusively breastfed in the hospital, among all infants. Rensselaer and Schenectady counties had low rates of breastfeeding at 6 months among WIC-enrolled infants, with rates around 20% of WIC-enrolled infants, which were roughly half of the NYS rate of 38%.



## Mental Health

Greene County had the highest rate of frequent mental distress in the Capital Region, and the fourth highest rate in the state, in 2021, based on Behavioral Risk Factor Surveillance System (BRFSS) data. In our local health needs survey, Medicaid-Insured and lesbian, gay, bisexual, and transgender (LGBT) residents had about twice the rate of poor mental health, when compared with other residents, as well as higher rates for frequent stress or anxiety. Schenectady County had the highest percentage region of adults with provider-diagnosed depressive disorder. Rensselaer County had the highest rates in the Capital Region for mental health hospitalizations, intentional self-harm hospitalizations, and self-harm ED visits. Schenectady County had the highest rate in the region for mental health ED visits. Black non-Hispanic residents had the highest rates of intentional self-harm hospitalization and ED visits in each Capital Region county: self-harm hospitalizations were highest in Columbia County, while hospitalizations were highest in Rensselaer County. Columbia County female residents had a 35% higher self-harm ED visit rate than male residents, while other counties' rates by gender were more similar. Columbia County had the highest suicide mortality rate, from 2020 to 2022, although the rate ranked in the middle of NYS counties. Suicide mortality rates were highest among White non-Hispanic and male Capital Region residents.

## Substance Use Disorder

Saratoga, Rensselaer, Columbia, and Greene counties had relatively high percentages of binge drinking among adults, and these counties ranked in the bottom half of NYS counties. Greene and Columbia counties had some of the highest rates of alcohol-related motor vehicle injuries and deaths; Greene County's rate of alcohol-related motor vehicle injuries and deaths was the third highest in the state. Greene County's cirrhosis hospitalization rate ranked in the bottom 10 of NYS counties, and the county had the highest rate of cirrhosis mortality in the Capital Region. Columbia, Albany, and Schenectady counties had the highest opioid overdose mortality rates, in 2022, based on NYS Vital Statistics data. Greene County had the highest rates in the Capital Region for drug overdose mortality in 2024, based on National Vital Statistics data, and the highest rate for opioid analgesic prescriptions in 2023. All Capital Region counties were meeting the Prevention Agenda objective for buprenorphine prescribing rates. Saratoga County had the lowest rate of naloxone kit distribution via NYS OASAS's supply program. Albany County had the highest rate in the Capital Region of opioid overdose emergency department visits. Neonatal abstinence syndrome rates have gone down significantly in Capital Region counties over the past 7 years, to the point where only Schenectady County had a reportable rate in 2022.

## Infectious Disease

Schenectady County was the only Capital Region county with a lower rate than NYS, excluding NYC, for the percentage of children aged 24-35 months who are up to date with the seven-vaccine series of immunizations. In 2022, about two-thirds of 13-year-olds in the Capital Region were not completely immunized for HPV. Columbia County had the lowest percentage in the Capital Region for 13-year-olds who were completely immunized for HPV. Incidence rates of COVID-19 have dropped precipitously since the first few years of the pandemic. Capital Region counties had some of the lowest rates of COVID-19 positive tests, from August 2024 to July 2025. Albany and Schenectady counties had the highest newly diagnosed HIV case rates in the Capital Region. Gonorrhea and early syphilis diagnoses rates in the Capital Region had an increasing trend over the last eight years of data, while chlamydia diagnoses rates were slightly lower in 2023 than in 2015, after sharp decreases in 2020 and 2021, possibly due to the impacts of the COVID-19 pandemic. Schenectady, Albany, and Rensselaer counties had the highest rates in the Capital Region for gonorrhea diagnoses. Schenectady and Albany counties had the highest rates in the Capital Region for chlamydia diagnoses. Albany County had a much higher rate than other Capital Region counties for early syphilis diagnoses, in 2022; the sixth highest in New York State.



## Brief Summary of 2024 Capital Region Community Health Survey

The *2024 Capital Region Community Health Survey* (survey) was conducted from November 6, 2024, to December 11, 2024, and was promoted by Healthy Capital District (HCD), as well as the local health departments of Albany, Columbia, Greene, Rensselaer and Schenectady counties, and the local hospitals of Albany Medical Center, Columbia Memorial Hospital, Ellis Hospital, and St. Peters Health Partners. The survey involved a convenience sample of adults aged 18 years and older who reside in a Capital Region county. The survey collected 5,415 total responses from Capital Region residents. The survey aimed to identify the major needs, gaps, and priorities facing Capital Region residents regarding their public health priorities, healthcare access and barriers, mental health, social determinants of health, and preferred methods of health communication.

The convenience sample underrepresented males, Saratoga County residents, adults under the age of 35, Asian and Black residents, residents with a household income at least four times the federal poverty line, and individuals with private or Medicaid health insurance. More information about the *2024 Capital Region Community Health Survey*, including respondent sociodemographic distributions and results for each question – some with demographic group comparisons – can be found in [Appendix N](#). Reports with detailed survey results for each Capital Region county can be found [on the HCD website](#). A selection of key regional findings is summarized by survey section, below:

### Public Health Priorities

- Depression, anxiety & stress, cancer, obesity & diabetes, heart disease & stroke, and addiction to drugs or alcohol were the top five issues of concern for Capital Region residents
  - Hispanic residents were more concerned, than others, about asthma and sexually transmitted infections
  - Black residents were more concerned, than others, about sexually transmitted infections and violence
  - Lesbian, gay, bisexual, or transgender (LGBT) residents were more concerned, than others, about depression, anxiety, and stress, hunger and food insecurity, and suicide
- Public health priority results were used to rank health issues in the prioritization process described in [Section II](#)

### Healthcare Access & Barriers

- Primary care and mental health services were the top two services that Capital Region residents wished were more available
  - Medicaid-insured, Black, and Hispanic residents, more often than others, reported they wish dental care services were more available
  - LGBT residents, more often than others, wished that mental health services were more available
- 15% of Capital Region residents had not received a physical exam in the past year
  - 22% of Medicaid-insured residents had not received a physical exam in the past year
- 23% of Capital Region residents had received care in an emergency room in the past year
  - 41% of Medicaid-insured residents had received care in an emergency room in the past year
- 29% of Capital Region residents had not had a routine dentist visit in the past year
  - 51% of Medicaid-insured residents had not had a routine dentist visit in the past year



## Social Needs

- Affordable housing was the community resource most often rated “very difficult” to access
- Parents of children under the age of 18 more often reported they usually have trouble paying for education, housing and utilities, other bills, and food
- Mold was the most frequently reported housing issue, followed by temperature regulation and water leaks
  - Hispanic and Black residents more often reported the place they live is too hot or too cold

## Health Information & Communication

- 8% of Capital Region residents reported having limited health literacy
  - 19% of Medicaid-insured residents reported having limited health literacy
- Most respondents get their health information from a doctor or health professional, or the internet
- Respondents most often reported they would participate in community health education offered in online video format, followed by in-person, one-on-one meetings and health worker phone call or text

## Mental Health

- 27% of Capital Region residents reported having frequent stress or anxiety in the past month
  - 40% of Medicaid-insured residents reported having frequent stress or anxiety in the past month
  - 49% of LGBT residents reported having frequent stress or anxiety in the past month
- 13% of Capital Region residents reported having poor mental health in the past month
  - 25% of Medicaid-insured residents reported having poor mental health in the past month
  - 29% of LGBT residents reported having poor mental health in the past month
- 5% of Capital Region residents reported having needed, but unable, to visit a mental health care provider in the past year
  - 11% of LGBT residents reported having needed, but unable, to visit a mental health care provider in the past year

## Substance Use

- More than half of Capital Region residents reported they are most concerned about opioids (like heroin and fentanyl) and alcohol in their community



## Race/Ethnicity Data Summary

Black non-Hispanic (Black NH) Capital Region residents, overall, were at greater health risk, compared to White non-Hispanic (White NH) residents, of having a hospitalization or emergency department visit for most major health conditions. Black and Hispanic residents also had higher prevalence of health risk factors, in some cases, as well. Black and Hispanic residents had poverty rates over 20% in Albany, Rensselaer, and Schenectady counties, while poverty rates were below 10% among White residents in those counties. Columbia County had the highest rate of poverty among Black residents, at 33.1%, compared to 7.1% among Hispanic residents and 9.2% among White residents. Each Capital Region county had higher rates of child poverty among Black NH residents than White NH residents. Black NH and Hispanic residents of each Capital Region county also had higher percentages, compared with White NH residents, of population with no health insurance, unemployment, population aged 25 and older without a bachelor's degree, population in single parent families, population who speak English less than very well, arrests per population aged 18 years and older, births without early prenatal care, and fee-for-service Medicare enrollees without an annual flu vaccination.

Black NH residents in each Capital Region county had higher rates than White NH of total mortality, percentage of deaths that are premature, years of potential life lost, and potentially preventable hospitalizations. Hispanic residents in each Capital Region county also had higher percentages of deaths that are premature (before age 75), when compared with White NH residents.

Capital Region Hospitalization and ED Visit Rate Ratios, by Race/Ethnicity, 2021-2023				
Condition	Black NH to White NH Rate Ratio		Hispanic to White NH Rate Ratio	
	Hospitalizations	ED Visits	Hospitalizations	ED Visits
Assault	5.9	5.9	1.3	3.5
Asthma	5.2	9.1	2.1	0.8
Cerebrovascular Disease	2.2	1.4	1.1	1.5
COPD	1.9	3.1	0.7	2.0
Diabetes (Primary DX)	2.6	5.1	1.2	0.9
Falls	0.8	1.7	0.6	0.8
Heart Disease	1.6	2.1	0.7	0.9
Intentional Self-Harm	1.8	2.5	0.7	1.3
Motor Vehicle Accident	1.8	4.0	1.1	1.3
Opioid Overdose	2.3	2.1	0.8	1.0
Substance Use Disorders	2.2	2.5	0.8	1.0

From 2021 to 2023, Black NH Capital Region residents had rates of assault and asthma emergency department (ED) visits and hospitalizations that were five (5) times higher than White NH residents (SPARCS). Black NH Capital Region residents had a five (5) times higher rate of diabetes (primary diagnosis) ED visits than White NH residents. Most other ED visit and hospitalization rates for Black NH residents were at least 50% higher than White NH residents for most other conditions, including chronic obstructive pulmonary disease (COPD), heart disease, intentional self-harm, motor vehicle accidents, opioid overdose, and substance use disorders. Black NH Capital Region residents also had higher rates of poisoning hospitalizations, compared to White NH residents, in each Capital Region county.



Hispanic residents had similar rates of ED visits and hospitalizations, compared to White NH residents, for most health conditions. Rates for Hispanic residents were at least 50% higher than White NH residents for asthma hospitalizations and ED visits for assault, cerebrovascular disease (stroke), and COPD. White NH residents had higher rates of fall hospitalizations and ED visits than both Black NH and Hispanic residents. Hospitalization and ED visit rates, by race and ethnicity, for the Capital Region and each of the six Capital Region counties, can be found in [Appendices E and F](#).

Black NH Capital Region residents also had higher Prevention Quality Indicators (PQI) rates than White NH and Hispanic residents (SPARCS). PQI rates measure hospitalizations and emergency department visits due to potentially preventable disease complications that place extra burden on hospital resources. Combined (acute, circulatory, diabetes, and respiratory) PQI rates were 2.3 times higher among Black, than White, non-Hispanic Capital Region residents. Hispanic Capital Region residents had lower acute and slightly lower circulatory and respiratory, and slightly higher diabetes PQI rates, when compared with White NH Capital Region residents.

Capital Region Prevention Quality Indicator Rate Ratios, by Race/Ethnicity, 2021-2023		
Condition	Black NH to White NH Rate Ratio	Hispanic to White NH Rate Ratio
Acute	1.2	0.5
Circulatory	2.7	0.9
Diabetes	3.4	1.1
Respiratory	2.2	0.9
Combined	2.3	0.9

There were, conditions where the Capital Region White NH population fared more poorly compared to their Black NH and Hispanic counterparts. In addition to falls hospitalizations, White NH residents also had suicide mortality rates that were almost twice as high as Black NH and Hispanic residents. In contrast to the previous edition of the *Capital Region Community Health Needs Assessment*, Black NH residents now have higher rates of opioid overdose ED visits and hospitalizations, compared to White NH residents, as the demographics of those most affected by the opioid epidemic has shifted. The relatively small number of Asian non-Hispanic and other races of Capital District residents did not allow for a thorough interpretation of indicators for these populations.

## References

- U.S. Census, American Community Survey 5-Year Estimates. 2019-2023.
- U.S. Census, American Community Survey 1-Year Estimates. 2022.
- Hospitalization, ED Visit, and Prevention Quality Indicator (PQI) rates are based on data from the New York State Statewide Planning and Research Cooperative System (SPARCS), supplied by Common Ground Health.



## County Level Data Summary

Based on a review of the data available, below is a summary of the leading sociodemographic and health needs for each Capital Region county. Sub-sections under each county correspond with the sections of this report.

### Albany County

#### Sociodemographic

- Albany had the highest county-level poverty rate in 2022, at 12.5% (U. S. Census)
- Albany County also contained the two Capital Region ZIP codes with the highest rates of poverty in 2022, 12207 (41.3%) and 12206 (40.6%) (U. S. Census)
- Albany County had the highest percentage in the Capital Region in 2023 for residents who speak English less than very well, with almost half of the Capital Region residents who speak English less than very well (U. S. Census)

#### General Health Status

- Albany County had the highest rate in the Capital Region of adults who did not receive medical care due to cost in 2021, although the rate ranked in the top half of NYS counties and was lower than NYS, excluding NYC rate (BRFSS)

#### Chronic Disease

- Albany County had the highest prevalence in the Capital Region of chronic obstructive pulmonary disease in 2021, at 6% (BRFSS)
- Albany County had the highest rate in the Capital Region in 2022 for age-adjusted asthma hospitalization and ranked in the worst half of NYS counties with available data (NYS SPARCS)
- Albany County had a relatively high rate of asthma emergency department visits in 2022 among those aged 17 years or younger (NYS SPARCS)
- Albany County's 2020-2022 rate of diabetes hospitalizations was 3.9 times higher among Black non-Hispanic residents than White non-Hispanic residents (NYS CHIRE)
- Albany County had one of the highest stroke hospitalization rates in the Capital Region in 2022 (NYS SPARCS)
- Albany County had a lower breast cancer screening rate than NYS, excluding NYC, in 2021 (NYS Cancer Registry)

#### Healthy and Safe Environment

- Albany County had the highest motor vehicle injury hospitalization rate in the Capital Region in 2023 (NYS SPARCS)
- Albany County had the highest falls hospitalization rate in the Capital Region among older adults aged 65+ in 2021-2023 and the highest falls hospitalization rate in the Capital Region among older adults aged 75-84 in 2020-2022 (NYS SPARCS)
- Albany County had the highest assault emergency department visit rate in the Capital Region in 2023 (NYS SPARCS)



- Albany County had the highest firearm assault-related hospitalization rate in the Capital Region in 2023 (NYS SPARCS)
- More than one in three economically disadvantaged students in grades one through eight in Albany County were chronically absent in 2024 (NYS Education Department)
- Albany County had only about 1 in 7 residents receiving optimally fluoridated water in 2023 (NYS Safe Drinking Water Information System), although this rate is expected to increase significantly by the end of 2025 after the City of Albany decided in 2024 to add fluoride to its public water supply

### Infant and Maternal Health

- Albany County had the largest disparities in the Capital Region for percent of births with adequate prenatal care in 2020-2022, when comparing Black, and White, non-Hispanic residents (NYS CHIRE)
- Albany County had the second highest rate in the Capital Region in 2022 for premature births (NYS Vital Records)
- Albany County had the highest rate of low birthweight births among Hispanic residents in the Capital Region in 2020-2022 (NYS CHIRE)
- Albany County had four (4) maternal deaths from 2020 to 2022 (NYS Vital Records)

### Mental Health and Substance Use Disorder

- Albany County had the second highest rates in the Capital Region for intentional self-harm ED visits and intentional self-harm hospitalizations in 2023 (NYS SPARCS)
- Albany County had the second highest opioid overdose mortality rate in the Capital Region in 2022 (NYS Vital Statistics)
- Albany County had the second lowest buprenorphine prescribing rate in the Capital Region in 2022 (Prescription Monitoring Program Registry)
- Albany County had the highest rate in the Capital Region of emergency department visits involving any opioid overdose in 2022 (NYS SPARCS)

### Infectious Disease

- Albany County had the highest newly diagnosed HIV case rate in the Capital Region in 2022 (NYS STI Surveillance System)
- Albany County had the second highest rate in the Capital Region for gonorrhea diagnoses in 2022 (NYS STI Surveillance System)
- Albany County had the second highest rate in the Capital Region for chlamydia diagnoses in 2022 (NYS STI Surveillance System)
- Albany County had the highest rate in the Capital Region for early syphilis diagnoses in 2022 (NYS STI Surveillance System)

## Columbia County

### Sociodemographic

- Columbia County had the oldest population in 2023, with more than 25% of the county's population aged 65 or older (U. S. Census)



- About one-third of rental units in Columbia County had a gross rent of at least 35% of household income in 2022 (U. S. Census)
- Columbia County had the highest Capital Region county rate of households with severe housing problems in 2017-2021, at 15.4%, which ranked 44th out of 62 NYS counties (U.S. Department of Housing and Urban Development)

## General Health Status

- Columbia County had the highest Prevention Quality Indicator (PQI) rates in the Capital Region for the acute, circulatory, diabetes, and overall measures in 2021-2023 (NYS SPARCS)

## Chronic Disease

- Columbia County had the highest age-adjusted prevalence in the Capital Region of adults with health care provider-diagnosed diabetes in 2021 (BRFSS)
- Columbia County had the worst age-adjusted percentage in NYS of adults having a test for high blood sugar in the past three years in 2021, at 38% (BRFSS)
- Columbia County's rate of Diabetes hospitalizations in 2020-2022 was 4.4 times higher among Black non-Hispanic residents than White non-Hispanic residents (NYS CHIRE)
- Columbia County had the lowest rate in the region for cervical cancer screening in 2018, and ranked in the bottom 10 NYS counties (NYS Cancer Registry)
- Columbia County ranked in the bottom 10 NYS counties for prostate cancer incidence in 2019-2021 (NYS Cancer Registry)

## Healthy and Safe Environment

- Columbia County had the lowest 2025 County Health Ranking in the Capital Region for the access to exercise opportunities measure
- Columbia County had the lowest rate in the region of children born in 2019 with at least two lead screenings by age 3 (NYS Child Health Lead Poisoning Prevention Program)
- Columbia County also had the second lowest rate in NYS for children born in 2019 who received at least one lead screening by the age of 2, with less than 1 in 2 children being screened for lead (NYS Child Health Lead Poisoning Prevention Program)
- Columbia County had the highest incidence rate in the region in 2022 of elevated blood lead level among children under 6 years (NYS Child Health Lead Poisoning Prevention Program)
- Columbia County had the highest emergency department visit rate in the Capital Region due to falls among older adults aged 65+ in 2021-2023 (NYS SPARCS)
- Columbia County had the highest ratio in the Capital Region of work-related injury emergency department visit in 2022, when comparing rates for Black non-Hispanic residents and White non-Hispanic residents (NYS SPARCS)
- Less than half of cooling towers in Columbia County were in compliance with NY's "Protection Against Legionella" regulation in 2023 (NYS Cooling Tower Registry)
- Columbia County had 0% of residents receiving optimally fluoridated water in 2023 (Safe Drinking Water Information System)



## Infant and Maternal Health

- Columbia County had the highest rate infant mortality rate in the Capital Region in 2020-2022 (NYS Vital Records)

## Mental Health and Substance Use Disorder

- Columbia County had the second highest rate of mental health hospitalizations in the Capital Region, in 2023, where a mental health condition was the primary diagnosis (NYS SPARCS)
- Columbia County had the highest self-harm hospitalization rate in the Capital Region for Black non-Hispanic residents in 2021-2023 (NYS SPARCS)
- Columbia County female residents had a 35% higher self-harm ED visit rate than male residents in 2021-2023 (NYS SPARCS)
- Columbia County had the highest suicide mortality rate in the Capital Region 2020 to 2022 (Vital Statistics)
- Columbia County had the highest opioid overdose mortality rate in the Capital Region in 2022 (Vital Statistics)

## Infectious Disease

- Columbia County had the lowest percentage in the Capital Region for 13-year-olds who were completely immunized for Human Papillomavirus (HPV) in 2022 (NYS Immunization Information System)
- Columbia County had the highest Anaplasmosis and Babesiosis incidence rates in New York State in 2023 (NYS Communicable Disease Reports)

## Greene County

### Sociodemographic

- Greene County had the highest percentage of population with less than a high school education in 2023, at 11.5%, compared to 8.3% or less among the other Capital Region counties (U. S. Census)
- Greene County had the lowest 2025 County Health Ranking in the Capital Region for the “some college” measure

### General Health Status

- Total mortality rates in the Capital Region were highest in Greene County in 2022 (NYS Vital Statistics)
- Greene had the lowest percentage in the Capital Region of adults with a routine health checkup in the past year in 2021 (BRFSS)

### Chronic Disease

- Greene County had the second highest rates in the region for daily sugary beverage consumption in 2021 (BRFSS)
- Greene County had the second highest age-adjusted rate in NYS for adults with current asthma in 2021 (BRFSS)
- Greene County had the lowest breast cancer screening rate in the region in 2021; one of the lowest rates in NYS (BRFSS)



- Greene County had the second highest rate in the region for breast cancer late-stage incidence in 2019-2021, and ranked among the bottom 10 NYS counties (NYS Cancer Registry)
- Greene County had the 5th highest breast cancer mortality rate in 2019-2021 among NYS counties with available data (NYS Cancer Registry)
- Greene County had the highest rate in the Capital Region for both colorectal cancer incidence and mortality in 2019-2021 (NYS Cancer Registry)
- Greene counties had the 6th highest lung cancer incidence rate in New York State in 2019-2021 (NYS Cancer Registry)
- Greene County ranked in the bottom 10 New York State counties for lung cancer mortality in 2019-2021 (NYS Cancer Registry)

## Healthy and Safe Environment

- Greene County had the lowest 2025 County Health Ranking (among Capital Region counties) on the “injuries deaths” measure
- Greene County had the highest motor vehicle injury mortality rate in the Capital Region in 2020-2022 (NYS Vital Records)
- Greene County had the highest assault hospitalization rate in the Capital Region in 2023 (NYS SPARCS)
- Greene County had the third highest percentage in the Capital Region in 2021 of adults who had reported having experienced at least two adverse childhood experiences (ACEs) (BRFSS)
- Greene County had the highest rate in the Capital Region of reports indicating child abuse or maltreatment in 2022 (National Child Abuse and Neglect Data System)
- Greene County had the third highest rate of chronic absenteeism in the Capital Region among students in first to eighth grade in 2024 (NYS Education Department)
- More than one in three economically disadvantaged students in grades one through eight in Greene County was chronically absent in 2024 (NYS Education Department)
- Greene County had the lowest percentage in the Capital Region of high school students in the Class of 2023 who enrolled at a postsecondary institution within 16 months of their high school graduation (NYS Education Department)
- Greene County had less than 1 in 8 residents living in a certified Climate Smart Community in 2024 (NYS Department of Environmental Conservation)
- Greene County had less than 1 in 15 residents receiving optimally fluoridated water in 2023 (Safe Drinking Water Information System)

## Infant and Maternal Health

- Greene County had the lowest percentage in the region for births with adequate prenatal care in 2022 (NYS Vital Records)
- Greene County had the lowest percentage in the region for births with early prenatal care in 2022 (NYS Vital Records)
- Greene County had the largest disparities in the Capital Region for percent of births with adequate prenatal care in 2020-2022, when comparing Hispanic and White non-Hispanic residents (NYS CHIRE)

## Mental Health and Substance Use Disorder

- Greene County had a low 2025 County Health Ranking (among Capital Region counties) on the “poor mental health days” and “Mental Health Providers ratio” measures



- Greene County had the highest rate of frequent mental distress in the Capital Region in 2021; the 4th highest rate of frequent mental distress in New York State in 2021 (BRFSS)
- Greene County had the third highest rate of mental health hospitalizations in the Capital Region, in 2023, where a mental health condition was the primary diagnosis (NYS SPARCS)
- Greene County had the highest rate in New York State for alcohol-related motor vehicle injuries and deaths (combined) in 2020-2022 (NYS Department of Motor Vehicles)
- Greene County had the highest cirrhosis hospitalization rate in the Capital Region in 2020-2022 (NYS SPARCS)
- Greene County had the highest cirrhosis mortality rate in the Capital Region in 2020-2022 (NYS Vital Statistics)
- Greene County had the highest drug overdose mortality rate in the Capital Region in 2024, based on National Vital Statistics System data
- Greene County had the highest opioid analgesic prescribing rate in the Capital Region in 2022 (Prescription Monitoring Program Registry)

### Infectious Disease

- Greene County had the lowest rate in the Capital Region of children aged 24-35 months who had received the full seven-vaccine immunization series (NYS Immunization Information System)
- Greene County had the highest rate of Lyme Disease incidence in the Capital Region in 2023 (NYS Communicable Disease Reports)
- Greene County had the second highest Babesiosis incidence rate in New York State in 2023 (NYS Communicable Disease Reports)

## Rensselaer County

### Sociodemographic

- High rates of poverty (greater than 15%) were observed in ZIP codes in and around the city of Troy in 2022 (U.S. Census)
- Rensselaer County had the highest rate of unemployment in the Capital Region in 2023, at 3.6%, but this rate was still low when compared to all NYS counties (U. S. Census)
- Close to one-third of rental units in Rensselaer County had a gross rent of at least 35% of household income in 2022 (U. S. Census)

### General Health Status

- Rensselaer County had the highest difference in percent of death that were premature, when comparing Black and White non-Hispanic residents, in 2022 (NYS CHIRE)

### Chronic Disease

- Rensselaer County childhood obesity rates have risen significantly over the last 5 years of available data, increasing by roughly 50%, and in 2021-2023 the county had the highest rates of childhood obesity in the Capital Region (Student Weight Status Category Reporting System)
- Rensselaer County had the highest rate of COPD mortality in the Capital Region in 2022. The county's 2022 COPD mortality rate ranked 56th out of 62 NYS counties (NYS Vital Statistics)



- Rensselaer County had the region's highest coronary heart disease hospitalization rate in 2022 (NYS SPARCS)
- Rensselaer County had one of the highest stroke hospitalization rates in the Capital Region in 2022 (NYS SPARCS)
- In Rensselaer County, the cerebrovascular disease (stroke) mortality among Black non-Hispanic residents in 2020-2022 was the highest in the Capital Region and 2.5 times higher than the rate for White non-Hispanic residents (NYS CHIRE)
- Rensselaer County had the highest rates in the region for overall breast cancer incidence in 2021 and late-stage breast cancer incidence in 2019-2021, and ranked among the bottom 10 NYS counties for both measures (NYS Cancer Registry)
- Rensselaer and Greene counties had the 5th highest lung cancer incidence rate in NYS in 2019-2021 (NYS Cancer Registry)

## Healthy and Safe Environment

- Rensselaer County had the highest rate of falls hospitalizations among children aged under 10 years in the Capital Region in 2020-2022 (NYS SPARCS)
- Rensselaer County had the highest homicide mortality rate in the Capital Region in 2020-2022, among counties with reportable data (Vital Statistics)
- Rensselaer County had the highest ratio in the Capital Region of assault hospitalization rates in 2020, when comparing Black non-Hispanic residents and White non-Hispanic residents (NYS SPARCS)
- Rensselaer County had the second highest rate in the Capital Region of reports indicating child abuse or maltreatment in 2022 (National Child Abuse and Neglect Data System)
- Rensselaer County had the second highest rate of chronic absenteeism in the Capital Region among students in first to eighth grade in 2024 (NYS Education Department)
- More than one in three economically disadvantaged students in grades one through eight in Rensselaer County was chronically absent in 2024 (NYS Education Department)
- Rensselaer County had the second lowest percentage in the Capital Region of high school students in the Class of 2023 who enrolled at a postsecondary institution within 16 months of their high school graduation (NYS Education Department)
- Less than one in two economically disadvantaged high school students in Rensselaer County in the Class of 2023 enrolled at a postsecondary institution within 16 months of their high school graduation, the lowest percentage in the Capital Region. (NYS Education Department)
- 0% of Rensselaer County residents live in a certified Climate Smart Community in 2023 (NYS Department of Environmental Conservation)

## Infant and Maternal Health

- Rensselaer County had the largest disparities in the Capital Region for percent of births with adequate prenatal care and early prenatal care in 2020-2022, when comparing Asian/Pacific Islander, and White, non-Hispanic residents (NYS CHIRE)
- Rensselaer County had the highest rates in the Capital Region of low birthweight births among White, and Black, non-Hispanic residents in 2020-2022 (NYS CHIRE)
- Rensselaer County had the highest disparities in the Capital Region for infant mortality when comparing 2020-2022 rates among Black non-Hispanic and Hispanic residents to White non-Hispanic residents (NYS CHIRE)



- Rensselaer County had 2 maternal deaths from 2020 to 2022 (NYS Vital Records)

### Mental Health and Substance Use Disorder

- Rensselaer County had the highest rate of mental health hospitalizations in the Capital Region, in 2023, where a mental health condition was the primary diagnosis (NYS SPARCS)
- Rensselaer County had the third highest rate of mental health emergency department visits in the Capital Region, in 2023, where a mental health condition was the primary diagnosis (NYS SPARCS)
- Rensselaer County had the highest rates in the Capital Region of intentional self-harm ED visits and hospitalizations in 2023 (NYS SPARCS)
- Rensselaer County had the highest self-harm ED visit rate for Black non-Hispanic residents in 2023 (NYS SPARCS)
- Rensselaer County had the second highest rate in the Capital Region of binge drinking among adults in 2021 (BRFSS)
- Rensselaer County had the second highest drug overdose mortality rate in the region, in 2024, based on National Vital Statistics System data
- Rensselaer County had the third lowest buprenorphine prescribing rate in the Capital Region in 2022 (Prescription Monitoring Program Registry)

### Infectious Disease

- Rensselaer County had the third highest rate in the region for gonorrhea diagnoses in 2022 (NYS STI Surveillance System)

## Saratoga County

### Sociodemographic

- Saratoga had the lowest rates in the region of adults aged 25 years and older with less than a high school education, poverty rate, housing units built before 1940, and rental units with rent that cost more than 35% of occupants' income (U. S. Census)

### General Health Status

- Saratoga County had the highest disparity in the Capital Region between Hispanic and White non-Hispanic residents for percent of deaths that were premature in 2022 (NYS Vital Statistics)

### Chronic Disease

- Saratoga County had the highest prevalence of smoking prevalence among adults with income less than \$25,000, among Capital Region counties with 2021 data (BRFSS)
- Saratoga County had the highest stroke mortality rate in the Capital Region in 2022 (NYS Vital Statistics)
- Saratoga County had the second highest rate in the region for breast cancer incidence at any stage in 2021, and ranked among the bottom 10 NYS counties (NYS Cancer Registry)

### Healthy and Safe Environment

- Saratoga County had the highest percentage in the Capital Region in 2021 of adults who had reported having experienced at least two adverse childhood experiences (ACEs) (BRFSS)



- Saratoga County had less than 1 in 8 residents living in a certified Climate Smart Community in 2023 (NYS Department of Environmental Conservation)

### Infant and Maternal Health

- Saratoga County had the largest disparities in percent of births with early prenatal care between Black, and White, non-Hispanic residents in 2020-2022 (NYS CHIRE)

### Mental Health and Substance Use Disorder

- Saratoga County had the second highest rate of mental health emergency department visits in the Capital Region, in 2023, where a mental health condition was the primary diagnosis (NYS SPARCS)
- Saratoga County had the highest rate in the Capital Region of binge drinking among adults in 2021 (BRFSS)
- Saratoga County had the lowest buprenorphine prescribing rate in the Capital Region in 2022 (Prescription Monitoring Program Registry)

### Infectious Disease

- Saratoga County had the Capital Region's highest rate of COVID-19 positive tests from August 2024 to July 2025, although the county's rate was still lower than most other NYS counties' rates (Health Data NY)

## Schenectady County

### Sociodemographic

- High rates of poverty (greater than 15%) were observed in ZIP codes in and around the city of Schenectady in 2022 (U. S. Census)
- Close to one-third of rental units in Schenectady County had a gross rent of at least 35% of household income in 2022 (U. S. Census)
- Schenectady County had the highest overall Social Vulnerability Index (SVI) in the Capital Region (CDC)

### General Health

- Schenectady had the highest percentage in the Capital Region of deaths that were premature in 2022, and ranked 45th out of 62 NYS counties (NYS Vital Statistics)
- In the Capital Region, Schenectady County had the lowest rates of Medicaid enrollees having seen a dentist in the past year in 2023, among those aged 2 to 20, and overall (NYS Medicaid Program)

### Chronic Disease

- In the Capital Region, adult obesity rates were highest in Schenectady County in 2021 (BRFSS)
- Schenectady County had the highest percentage in the region of adults who ate less than one fruit and one vegetable daily in 2021 (BRFSS)
- Schenectady County had the second highest rates in the region for daily sugary beverage consumption in 2021 (BRFSS)
- Schenectady County had the lowest rates of physical activity in the Capital Region in 2021, both for all adults, and for adults aged 65 years and older (BRFSS)



- Asthma ED visit rates among children aged 0-17 years were highest in Schenectady County in the Capital Region in 2022 (NYS SPARCS)
- Schenectady County was in the bottom half of NYS counties for their rate of potentially preventable diabetes short-term complications hospitalizations among adults 18+ in 2022 (NYS SPARCS)
- Schenectady County had the highest heart attack hospitalization rate in the Capital Region in 2022 (NYS SPARCS)
- Schenectady County had the highest stroke hospitalization rate in the Capital Region in 2022 (NYS SPARCS)
- Schenectady County had a lower breast cancer screening rate than in NYS, excluding NYC, in 2021 (BRFSS)
- Schenectady County had the second highest breast cancer mortality rate in the region in 2019-2021, and ranked in the bottom 10 NYS counties (NYS Cancer Registry)

### Healthy and Safe Environment

- Schenectady County had the highest percentage in the region of school drinking water outlets that exceeded the state’s lead action limit in 2020, and was the only county in the region with a higher rate than NYS, excluding NYC (NYS Lead in School Drinking Water Program)
- Schenectady County had the highest motor vehicle injury emergency department visit rate in the Capital Region in 2023 (NYS SPARCS)
- Schenectady County had the highest ratio of assault hospitalization rates the Capital Region in 2020, when comparing Hispanic residents and White non-Hispanic residents (NYS SPARCS)
- Schenectady County had the highest percentage in the Capital Region in 2021 of adults who had reported having experienced at least two adverse childhood experiences (ACEs) (BRFSS)
- Schenectady County had the second highest rate in the Capital Region of reports indicating child abuse or maltreatment in 2022 (National Child Abuse and Neglect Data System)
- Schenectady County had the highest rate of chronic absenteeism in the Capital Region among students in first to eighth grade in 2024 (NYS Education Department)
- More than two in five economically disadvantaged students in grades one through eight in Schenectady County was chronically absent in 2024; Schenectady had the highest rate in the Capital Region and the sixth highest rate in New York State (NYS Education Department)

### Infant and Maternal Health

- Schenectady County had the lowest 2025 County Health Ranking (among Capital Region counties) for the “low birth weight” measure
- Schenectady County had the highest percentage in the region for births with late or no prenatal care in 2022 (NYS Vital Statistics)
- Schenectady County had the largest disparity in the Capital Region for percent of births with early prenatal care in 2020-2022, between Hispanic and White non-Hispanic residents (NYS Vital Statistics)
- Schenectady County had the greatest difference in percentages in the Capital Region of births that were premature between Black non-Hispanic and White non-Hispanic residents, in 2020-2022 (NYS Vital Statistics)
- Schenectady County had the highest rate in the Capital Region of low birthweight among Asian or Pacific Islander residents in 2020-2022 (NYS Vital Statistics)



- Schenectady County had the highest rate of infant mortality in the Capital Region in 2020-2022, among counties with reportable data (NYS Vital Statistics)

### **Mental Health and Substance Use Disorder**

- Schenectady County had the highest percentage in the Capital Region in 2021 of adult residents who reported ever being diagnosed by a provider with a depressive disorder (BRFSS)
- Schenectady County had the highest rate of mental health emergency department visits in the Capital Region, in 2023, where a mental health condition was the primary diagnosis (NYS SPARCS)
- Schenectady County had the third highest intentional self-harm ED visit and hospitalizations rates in the region in 2023 (NYS SPARCS)
- Schenectady County had the third highest opioid overdose mortality rate in the Capital Region, in 2022 (NYS Vital Statistics)

### **Infectious Disease**

- Schenectady County had the second highest newly diagnosed HIV case rate in the Capital Region in 2022 (NYS STI Surveillance System)
- Schenectady County had the highest rate in the region, and fifth highest rate in the state, for gonorrhea diagnoses in 2022 (NYS STI Surveillance System)
- Schenectady County had the highest rate in the region for chlamydia diagnoses in 2022 (NYS STI Surveillance System)



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## County Health Rankings, 2025

The Robert Wood Johnson Foundation, together with the University of Wisconsin Population Health Institute, develop annual health rankings for every county in the United States (<http://www.countyhealthrankings.org/>). Counties are ranked on “Population Health and Well-Being” (measuring the present health of the county) and on “Community Conditions” (which contribute to the future health of the county). Below is a conditionally formatted table displaying the 2025 data measures and relative rankings for each of six Capital Region counties. [Appendix K](#) contains a more detailed breakdown of data by county and information on the data sources.

2025 County Health Rankings: Ratings out of 10, 1 being the best		
	Population Health and Well-being	Community Conditions
Albany	2	3
Columbia	3	5
Greene	3	5
Rensselaer	3	4
Saratoga	1	2
Schenectady	3	3

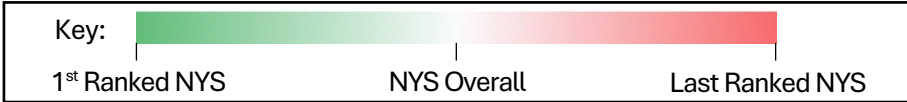
Capital Region counties fared relatively well in the overall ratings, with no county having a rating higher than 5 out of 10. Greene and Columbia counties, compared to the other regional counties, had the worst ratings, while Saratoga County garnered the best ratings in the Capital Region. The Capital Region counties, other than Saratoga County, had relatively high rates of premature death, which is the highest-weighted factor in their “Population Health and Well-Being” rating. Physical health, low birth weight, and mental health measures had mixed rankings the counties, while the counties ranked well on the overall “Poor or Fair Health” measure.

Albany and Saratoga counties ranked well against other NYS counties on measures of health infrastructure, especially flu vaccination and uninsured rates. Columbia County fared well on the preventable hospital stays measure, and poorly on the access to exercise opportunities. Greene County ranked lower on these measures, while Rensselaer and Schenectady counties ranked somewhere in the middle on most of the health infrastructure measures. Albany County ranked most poorly on the Particulate Matter (PM2.5) measure. Capital Region counties ranked very well on the social and economic factors, especially income inequality, unemployment, and high school completion rates. Greene County had lower ranks on the “some college” and “injury deaths” measures.



### County Health Rankings, 2025: Capital Region Heat Map

Measure	Albany County	Columbia County	Greene County	Rensselaer County	Saratoga County	Schenectady County	New York State	Min. NY County	Max. NY County	Top Performers	US Overall
<b>POPULATION HEALTH AND WELL-BEING</b>											
LENGTH OF LIFE											
Premature Death	7,276	7,810	8,286	7,122	5,526	8,452	6,637	4,624	10,681	6,200	8,400
QUALITY OF LIFE											
Poor Physical Health Days	3.7	3.8	4.1	4.0	3.4	3.7	3.9	3.3	5.1	3.6	3.9
Low Birth Weight	8.5%	7.2%	7.1%	8.5%	6.5%	9.2%	8.3%	3.9%	10.3%	6.0%	8.0%
Poor Mental Health Days	5.2	5.6	5.6	5.4	5.0	5.3	4.9	4.5	6.1	4.9	5.1
Poor or Fair Health	12.4%	14.2%	15.0%	13.5%	10.3%	13.3%	16.1%	10.3%	28.2%	14.0%	17.0%
<b>COMMUNITY CONDITIONS</b>											
HEALTH INFRASTRUCTURE											
Flu Vaccinations	58%	54%	45%	54%	57%	54%	51%	38%	58%	54%	48%
Access to Exercise Opportunities	93.9%	61.5%	81.3%	78.4%	85.7%	88.6%	93.1%	35.0%	100.0%	91.0%	84.0%
Food Environment Index	8.4	8.4	8.8	8.5	9.1	8.7	8.7	6.4	9.9	8.8	7.4
Primary Care Physicians (pop. ratio)	1,039	2,471	3,464	2,081	1,439	1,255	1245	727	13,397	1,030	1,330
Mental Health Providers (pop. ratio)	222	403	960	478	417	351	265	90	1,694	220	300
Dentists (pop. ratio)	1,124	2,786	2,827	2,422	1,465	1,251	1205	534	5,972	1,180	1,360
Preventable Hospital Stays	2,369	2,082	2,367	2,247	2,389	2,217	2,595	1,600	4,187	1,596	2,666
Mammography Screening	49%	46%	39%	47%	52%	45%	44%	35%	56%	53%	44%
Uninsured	5%	6%	5%	4%	4%	5%	6%	4%	10%	6%	10%
PHYSICAL ENVIRONMENT											
Severe Housing Problems	14%	15%	14%	13%	11%	15%	23%	9%	39%	8%	17%
Driving Alone to Work	68%	68%	73%	73%	75%	72%	50%	6%	82%	69%	70%
Long Commute - Driving Alone	21%	37%	45%	31%	37%	31%	39%	15%	68%	17%	37%
Air Pollution: Particulate Matter	8.7	7.8	7.4	8.1	8.2	8.0	6.9	3.2	8.8	5.6	7.3
Drinking Water Violations	Yes	Yes	Yes	Yes	Yes	No					
Broadband Access	89%	88%	85%	90%	92%	88%	90%	78%	95%	92%	90%
Library Visits per Person per Year	3	4	2	2	3	3	3	1	13	5	2
SOCIAL AND ECONOMIC FACTORS											
Some College	78%	63%	57%	73%	78%	71%	71%	42%	86%	74%	68%
High School Completion	93%	92%	89%	93%	94%	92%	88%	75%	96%	95%	89%
Unemployment	3.3%	3.0%	3.8%	3.3%	2.9%	3.5%	4.2%	2.9%	6.8%	2.3%	3.6%
Income Inequality	4.6	4.9	5.1	4.6	4.2	4.4	5.8	3.9	7.3	3.7	4.9
Children in Poverty	15%	18%	19%	16%	8%	19%	19%	6%	36%	10%	16%
Injury Deaths	61	68	83	62	47	60	60	43	110	67	84
Social Associations	14.6	9.5	8.9	8.3	7.3	7.7	7.9	2.9	16.6	18.0	9.1
Child Care Cost Burden	37%	41%	35%	36%	32%	40%	38%	24%	65%	20%	28%



## II. Community Public Health Priorities

### Collaboration and Community Engagement

The Capital Region Prevention Agenda Work Group (PAWG), consisting of stakeholders from local health departments and hospitals and supported by Healthy Capital District (HCD), convened to identify local public health needs and find opportunities for regional alignment in health intervention planning. The PAWG began by engaging local residents with the *2024 Capital Region Health Needs Survey*. The survey offered multiple choice and open-ended response options to learn about Capital Region residents' health needs and priorities, access or barriers to care, mental health, and social determinants of health. Demographic information collected by the survey allowed review of information by county, age, gender, race/ethnicity, income level, health insurance type, parental status, and sexual orientation or gender identity.

HCD created several reports which visualized and described results from the *2024 Capital Region Health Needs Survey* (see [Appendix N](#)). Reports were created for Capital Region residents, overall, and for each county to compare results for their residents to other Capital Region residents. Results for key questions were further broken down for demographic groups of interest. The first question of the survey asked residents which public health issues were most important in their community. The public health priority results from this question were incorporated into the health issue prioritization process. Once survey reports were shared, and results reviewed with the Capital Region PAWG, the group members reconvened into four local Work Groups, each supported by HCD, to complete separate health issue prioritization processes, with the goal of returning to compare results and find regional alignment. Each local Work Group's health issue prioritization process included community voices through representatives from community-based organizations that serve low-income residents, the homeless, and other vulnerable populations; federally qualified health centers; advocacy groups; academic institutions; public health departments; providers; and health insurers. Participants were encouraged to share data and observations of their own, and to advocate for the needs of their constituents. HCD and its stakeholders strategically invited partners with access to medically underserved populations, as well as potential partner organizations who had traditionally not been involved in this process, to align with the updated New York State Prevention Agenda 2025-2030 priority areas.

### Health Issue Ranking

Selection of the top health priorities for each local Work Group was facilitated by a Public Health Issue Scoring Sheet (see next page). The Public Health Issue Scoring Sheet was created by HCD in 2021 for the *2022 Capital Region Community Health Needs Assessment* (CHNA) and local Community Health Improvement Plans (CHIPs). It was based on feedback from prior CHNA/CHIP processes that the health issue prioritization process was difficult due to the multitude of pertinent considerations relating to each health issue. The Public Health Issue Scoring Sheet essentially assigns a score to the most relevant considerations, allowing for the health issues to be ranked and informing decision making.

The Public Health Issue Scoring Sheet method was adapted from a modified version of the *Hanlon Method for Prioritizing Health Problems*. The Public Health Issue Scoring Sheet quantified considerations regarding both the



**need** to address each health issue and the **opportunity** to make a positive impact. Opportunity considerations were based on guidance documents from the American Hospital Association, the National Association of County and City Health Officials as well as other public health authority resources. Need considerations included those used in prior prioritization processes, as well as a community priority score derived directly from the contributions of over 5,000 residents in the *2024 Capital Region Community Health Survey*. The Public Health Issue Scoring Sheet also included “other” considerations, for both need and opportunity, to address additional factors not included in the sheet and to capture the knowledge and experience of local community partners.

The PAWG met in the Fall of 2024 to review the Public Health Issue Scoring Sheet and provide oversight and guidance during the prioritization process, especially given the recent changes to the structure and focus of the NYS 2025-2030 Prevention Agenda. In the Winter of 2024, HCD staff consolidated the twenty-five (25) public health issues from the 2022 CHNA/CHIP process into 15 public health issues, based on the updated NYS 2025-2030 Prevention Agenda priority areas. HCD staff then conducted an internal review of the most recent and relevant available data regarding the 15 identified health issues. Using publicly available and internal data, HCD generated five ‘data’ scores for each of the health issues, based on the number of people affected, rates compared to NYS, excluding NYC, recent trends in rates, disparities between race/ethnicity groups, and the seriousness of health outcomes. HCD also created ‘survey’ scores based on results from the *2024 Capital Region Health Needs Survey*. Data and survey scores were then visualized in public dashboards and reviewed with each sub-regional Work Group to review. The list of 15 health issues was then shortened based on input from Work Group participants to allow for a more focused discussion at subsequent public meetings.

Local Prevention Agenda Prioritization Work Groups each held in-person or hybrid (virtual and in-person) public meetings to present progress to – and collect input from – local community-based organizations, academic researchers, and members of the public. At the meetings, the health issue scoring method, as well as the data and survey results related to each of the health issues, were reviewed with participants. Then, a discussion was held to answer questions, and individuals shared their understanding and recent observations of the current situation. Participants were provided with a method to vote on the need and opportunity to address each health issue, as a measurement of the discussion and their own experiences regarding each health issue. Group discussion often coalesced around mental health, food insecurity, and chronic diseases as issues that particularly affect residents’ livelihoods, are not fully addressed by existing resources, or are noticeably getting worse or affecting more people.

Scores for opportunity considerations were self-assessed by hospitals and health departments and were based on criteria including their ability to sustainably devote resources, garner support, and make a measurable impact. More details on the prioritization method results for each county can be found here:

County or Counties	Link to Health Issue Prioritization Materials
Schenectady	<a href="https://www.healthycapitaldistrict.org/content/sites/hcdi/CHNA2025/2025-Schenectady-County-Prioritization-Process-materials.pdf">https://www.healthycapitaldistrict.org/content/sites/hcdi/CHNA2025/2025-Schenectady-County-Prioritization-Process-materials.pdf</a>
Albany & Rensselaer	<a href="https://www.healthycapitaldistrict.org/content/sites/hcdi/CHNA2025/2025-Albany-and-Rensselaer-counties-Prioritization-Process-materials.pdf">https://www.healthycapitaldistrict.org/content/sites/hcdi/CHNA2025/2025-Albany-and-Rensselaer-counties-Prioritization-Process-materials.pdf</a>
Columbia & Greene	<a href="https://www.healthycapitaldistrict.org/content/sites/hcdi/CHNA2025/2025-Columbia-and-Greene-counties-Prioritization-Process-materials.pdf">https://www.healthycapitaldistrict.org/content/sites/hcdi/CHNA2025/2025-Columbia-and-Greene-counties-Prioritization-Process-materials.pdf</a>
Saratoga	<a href="https://www.healthycapitaldistrict.org/content/sites/hcdi/CHNA2025/2025-Saratoga-County-Prioritization-Process-materials.pdf">https://www.healthycapitaldistrict.org/content/sites/hcdi/CHNA2025/2025-Saratoga-County-Prioritization-Process-materials.pdf</a>

# Public Health Issue Scoring Sheet

## Opportunity

	Max Score	Score
Health issue <b>aligns</b> with organizations' strategic goals	3	
If already working to address this issue, are our <b>efforts</b> working sustainably	2	
If not working on this issue, do we have <b>resources and expertise</b> to lead effort	1	
Are there potential partner organizations who would <b>support</b> our efforts	2	
Is it possible to make a measurable, positive <b>impact</b>	3	
Can we work on this issue, <b>sustainably</b> , for the next 5-6 years	2	
Other organizational considerations	3	
Community Partner considerations, gathered in public data review meeting	3	
<b>Total Opportunity Score</b>	<b>19</b>	

## Need

	Max Score	Score
Is this issue a major need in the community - <b>Total number</b> of cases	2	
Is this issue worse in our region than throughout NY - <b>Rates</b>	2	
Is this issue more common for some populations - <b>Disparities</b>	2	
Is this issue getting better or worse - <b>Trend</b>	2	
How <b>serious</b> are the health outcomes of this issue	2	
Is this issue a <b>priority for the community</b> based on the survey	3	
Other considerations about the data	2	
Community Partner considerations, gathered in public data review meeting	3	
<b>Total Need Score</b>	<b>18</b>	

	Max Score	Score
Total Organizational Score	16	
Total Data-based Score	10	
Total Community Partner Score	11	
<b>Total Priority Score</b>	<b>37</b>	



## Prevention Agenda Priority Selection

The public health issue prioritization process for each local Work Group is summarized below:

### Schenectady County Prevention Agenda Prioritization Work Group

The Schenectady County Prevention Agenda Prioritization Work Group was led by Schenectady County Public Health Services, Ellis Medicine, and Sunnyview Rehabilitation Hospital. The Work Group was comprised of members of the Schenectady Coalition for a Healthy Community (SCHC), an informal coalition of community organizations created following the State-mandated consolidation of Schenectady's hospitals, which has met regularly over the decade to share information on community health issues. Prior to the first public meeting, a planning meeting was held on March 26, 2025, where Healthy Capital District (HCD) provided the Work Group with a summary of the data and local survey results for the fifteen health issues, and the resulting scores. At the end of the meeting, the group prioritized a shortlist of eight health issues to present at the public meeting.

The first public meeting was held on April 2, 2025, at the Schenectady County Public Library, where HCD presented data on the health issues and facilitated discussions. In the second public meeting, held on April 9, 2025, at the Schenectady County Public Library, HCD provided Work Group members and public attendees with an overview of the Community Health Needs Assessment process. Then, participants were provided with an opportunity to advocate for a particular health issue in a short presentation. Finally, a voting session was held to capture participants' top public health priorities, based on the data reviewed in the first meeting, the short advocacy presentations, and participants' personal and professional experience. Mental health and suicide, hunger and food insecurity, and obesity and diabetes were participants' top public health priorities. Community attendees at the public prioritization meetings included the following organizations:

- Capital District Tobacco Free Communities
- Catholic Charities Tri-County Services
- Capital District Physician Health Plan
- Electric City Community Grocery
- Ellis Medicine
- Ellis Family Health Center
- MVP Healthcare
- New Choices Recovery Center
- Project Safe Point
- Safe Inc. of Schenectady,
- Schenectady City School District
- Schenectady Community Action Program
- Schenectady County Public Health Services
- Schenectady Food Coalition
- Schenectady Foundation
- St. Peter's Health Partners
- Sunnyview Rehabilitation Hospital



Attendance during the public prioritization meetings consisted of more than 30 participants at each meeting representing health care and community-based organizations, and public service providers. Participants were engaged in the data presentations, raised questions, and offered their perspectives as health planners and service providers. The Health Issue Prioritization materials presented at the public meetings can be found [on the HCD website](#).

Following the public prioritization meetings, members of the Work Group were given a survey to rate their organizational capacity to sustainably address each issue. Their responses were scored and incorporated in the Health Issue Scoring Sheet. Based on the results of the health issue scoring, including the data, survey, community partner, and organizational scoring results, the Schenectady County Work Group selected the following Prevention Agenda priorities:

Domain	Priority
Economic Stability	Nutrition Security
Social and Community Context	Adverse Childhood Experiences
Health Care Access and Quality	Preventive Services for Chronic Disease Prevention and Control

## Albany-Rensselaer Prevention Agenda Prioritization Work Group

The Albany-Rensselaer Prevention Agenda Prioritization Work Group was led by the Albany County Department of Health, the Rensselaer County Department of Health, Albany Medical Center, and St. Peter's Health Partners. Albany and Rensselaer counties created a joint Work Group, consistent with prior NYS Prevention Agenda cycles, as the hospitals' catchment areas cover both counties. An initial planning meeting was held on April 16, 2025, at which Healthy Capital District (HCD) presented data and survey results related to the fifteen health issues and facilitated discussions. The Albany-Rensselaer Prevention Agenda Prioritization Work Group then identified a shortlist of eleven health issues to present at the public prioritization meetings and combined the issues of food insecurity and obesity/diabetes, based on their intersectionality and potential for combined intervention planning.

In the first public prioritization meeting, held on April 22, 2025, at the Samaritan Hospital Margaret W. Krause Center in Rensselaer County, HCD presented data and survey results related to the health issues, answered questions, and facilitated discussion. At the second public prioritization meeting, held on May 6, 2025, at the University at Albany ETEC Building in Albany County, HCD presented a brief review of the health issues and provided an overview of the NYS 2025-2030 Prevention Agenda and the Community Health Needs Assessment process. HCD also answered questions and facilitated an opportunity for attendees to advocate for a particular health issue. HCD then administered a hybrid voting session for participants to capture attendees' top public health issues based on the data reviewed, the short advocacy presentations, and participants' personal and professional experience. Community attendees at the public prioritization meetings included the following organizations:

- Albany County Department of Health



- Albany Guardian Society
- Albany Medical Center
- Albany Medical College
- Addictions Care Center of Albany
- Alliance of New York State YMCAs
- Alzheimer's Association of Northeastern NY
- American Foundation for Suicide Prevention - Capital Region New York Chapter
- American Heart Association
- Arbor Hill Development Corp
- Boys and Girls Club of the Capital Region
- Capital District Latinos
- Capital District Physicians' Health Plans, Inc.
- Capital District YMCA
- Capital Roots
- Catholic Charities Care Coordination Services
- CEK RN Consulting Inc.
- Center for Employment Opportunities
- Chasing Health Integrative Care
- Clean + Healthy
- Cornell Cooperative Extension
- Ellis Medicine Family Health Center
- Food Pantries for the Capital District
- Girls Inc. of the Greater Capital Region
- Hope House, Inc.
- Healthy Alliance
- Hudson Valley Community College
- Jewish Family Services of Northeastern NY
- Joseph's House and Shelter
- Logan Strong Foundation
- MVP Health Care
- National Alliance on Mental Illness (NAMI)
- New York State Department of Health Cancer Services Program
- Nopiates Committee, Inc.
- Northeastern New York Safety & Health Council Inc
- Northern Rivers Family Services Planned Parenthood
- Refugee and Immigrant Support Services of Emmaus
- Rensselaer County Department for Aging
- Rensselaer County Department of Health
- Rensselaer County Department of Mental Health
- Rensselaer County Youth Services
- Rensselaer Polytechnic Institute
- St. Peter's Health Partners (SPHP) Acute Care



- SPHP Behavioral Health Dept
- SPHP Capital District Tobacco-Free Communities
- SPHP Community Health Connections Health Home Program
- SPHP Community Health Programs
- SPHP Community Relations
- St. Catherine's Center for Children
- Stratton Veterans Administration Medical Center
- TCY Women
- ToLife!
- Trinity Alliance of the Capital Region, Inc.
- Trinity Health
- United Way of the Greater Capital Region
- University at Albany Center for Elimination of Health Disparities
- University at Albany Center for Health Workforce Studies
- University at Albany School of Public Health
- Upper Hudson Planned Parenthood
- Upstate New York Poison Center
- Warren and Denyse Mackey Foundation
- Whitney M. Young Jr. Health Services Inc.

Attendance during the public prioritization meetings consisted of more than 50 unique participants representing health care providers, academic institutions, and community-based and public service organizations. Participants were engaged in the data presentations, raised many questions, and offered their perspectives as service providers and researchers, including on the intersectionality of several issues and the underlying role that social factors play in the public health issues. The Health Issue Prioritization materials presented at the public meetings are posted [on the HCD website](#).

Following the public prioritization meetings, members of the Albany-Rensselaer Work Group responded to a survey to rate their organizational capacity to sustainably address each issue. Their responses were scored and incorporated in the Health Issue Scoring Sheet. Based on the results of the health issue scoring, including the data, survey, community partner, and organizational scoring results, the Albany-Rensselaer Work Group selected the following Prevention Agenda priorities:

Domain	Priority
Economic Stability	Nutrition Security
Social and Community Context	Suicide
	Primary Prevention, Substance Misuse, and Overdose Protection
Health Care Access and Quality	Preventive Services for Chronic Disease Prevention and Control



## Columbia-Greene Prevention Agenda Prioritization Work Group

The Columbia-Greene Prevention Agenda Prioritization Work Group was led by the Columbia County Department of Health, Greene County Public Health, Columbia Memorial Hospital—collectively known as the “Columbia-Greene Planning Partners”—with support from the Healthcare Consortium, a local public health organization that serves Columbia and Greene Counties. The rural communities of Columbia and Greene Counties share a single community hospital and have similar demographic characteristics and health metrics, so the Planning Partners elected, as they had in previous cycles, to align their assessment and planning efforts and submit a Joint Plan. Two initial planning meetings were held on April 21 and May 5, 2025, respectively, during which Healthy Capital District (HCD) provided an overview of the data, survey findings, and scores related to the fifteen initial public health issues and received input from the partners. The Work Group discussed the data and survey findings, and the health issues themselves, and selected a shortlist of eleven health issues to present at the public prioritization meetings.

The first public prioritization meeting took place at Columbia-Greene Community College on May 19, 2025. In the first half of the meeting, the Healthcare Consortium provided attendees with a detailed overview of the NYS Prevention Agenda and the health issue prioritization process. Then, HCD provided a data snapshot for each health issue, which covered the number of people affected, how the prevalence rates compared to NYS (excluding NYC), and how rates have trended in recent years. After each health issue’s data snapshot was reviewed, a brief discussion was facilitated by the Healthcare Consortium to encourage attendees to supplement the data findings with their own professional insights. The second public prioritization meeting, held on May 22, 2025, at the Greene County Department of Emergency Services, followed the same format. Both public prioritization meetings garnered rich discussion that informed the Work Group’s prioritization process. The materials presented at the public health issue prioritization meetings are posted [on the HCD website](#). Community attendees at the public prioritization meetings represented the following organizations:

- Addictions Care Center of Albany
- Alliance for Positive Health
- Alzheimer's Association
- BOCES
- Cancer Services Program, St. Peter's Health Partners
- Catholic Charities of Columbia and Greene Counties
- Columbia County Community Services Board
- Columbia County Department of Human Services
- Columbia County Mental Health Center
- Columbia County Office for the Aging
- Columbia Greene Workforce Development Board
- Columbia Kitchen
- Columbia Memorial Hospital
- Columbia-Greene Addiction Coalition
- Columbia-Greene Community College Health Services
- Cornell Cooperative Extension of Columbia-Greene Counties
- Gateway Hudson Valley
- Greene County Community Action



- Greene County Community Services Board
- Greene County Department of Human Services
- Greene County Department of Social Services
- Greene County Public Health
- Greene County Rural Health Network
- Greene County Sheriff's Office
- Mental Health Association of Columbia-Greene Counties
- NYS Department of Health
- St. Peter's Health Partners
- Sun River Health
- The Healthcare Consortium
- The Mountaintop Cares Coalition
- Tobacco-Free Action of Columbia-Greene
- Tobacco-Free Communities, St. Peter's Health Partners
- Town of Cairo
- Town of Canaan
- Town of Catskill
- Twin County Recovery Services
- University at Albany

Based on the results of the prioritization process, the Work Group hosted three focused group discussions on related groups of health issues, colloquially termed the “Belly” (hunger and food insecurity, nutrition and physical activity, and obesity and diabetes ), the “Brain” (mental health, suicide, and substance use), and the “Breath” (tobacco use and vaping), based on commonalities between the health issues and the potential for overlap in the interventions. Representatives from community partner organizations that work on these issues were invited to participate in the discussions to gather additional information that would help them better understand the community’s existing activities, assets and resources related to those issues. The “Brain” and “Breath” focused group discussions occurred on August 5, 2025, while the “Belly” group discussion occurred on August 7, 2025. The group discussions were well attended and garnered rich discussion on the issues and potential collaborative efforts. The Work Group reconvened on September 2, 2025, to review the information gathered in the focused group discussions and select Prevention Agenda priority areas, and again on September 16<sup>th</sup> to select interventions, related measures, and potential partner organizations to work with on their community health intervention plans. Based on the results of the focus group meetings and the prioritization process, which included data, survey, community partner, and organizational scoring, the Columbia-Greene Work Group selected the following Prevention Agenda priorities:

Domain	Priority
Economic Stability	Nutrition Security
Social and Community Context	Tobacco/ E-cigarette Use
	Suicide



## Saratoga Prevention Agenda Prioritization Work Group

The Saratoga Prevention Agenda Prioritization Work Group was led by Saratoga Hospital. An initial planning meeting was held on Jun 5, 2025, for Saratoga Hospital staff. Healthy Capital District (HCD) provided a brief overview of the Prevention Agenda and the prioritization process, then reviewed the data and survey findings for Saratoga County. At the end of the meeting, Saratoga Hospital staff selected a shortlist of seven public health issues, based on the data scores of the starting fifteen issues. A meeting was then held by the Saratoga Communities of Excellence Taskforce on June 17, 2025, where HCD reviewed the NYS Prevention Agenda and the Community Services Plan health issue prioritization process, and provided a data snapshot for each of the seven health issues, which covered the number of people affected by the issue, how the relevant rates compared to NYS, excluding NYC, and how rates for the issue have trended in recent years. The materials presented at the meeting can be found [on the HCD website](#). A survey was sent to attendees after the meeting, to collect their rating of the opportunity and need to address each issue, as part of the prioritization process. Saratoga Hospital then met with key internal stakeholders on September 29<sup>th</sup> to review the process and preliminary findings with the goal of selecting Prevention Agenda priority areas. The group rated each Prevention Agenda priority on feasibility and potential impact. The following week, the group voted on the ten highest rated priority areas to finalize their three priority areas selections. Once priority areas are selected, Saratoga Hospital will decide on interventions, keeping in mind potential regional intervention alignment and partner organizations they could work collaboratively with on their Community Service Plan.

## Capital Region Prevention Agenda Prioritization Work Group

In an effort to advance a collaborative regional initiative, Healthy Capital District (HCD) and the Capital Region Prevention Agenda Work Group (CR-PAWG) issued a Key Partner Survey. The survey invited community organizations to identify the health topics and counties where they were most interested in partnering. A total of 68 community partners across the region responded. HCD compiled and shared a detailed summary of the survey results with CR-PAWG partners to help inform invitations for participation in their respective Community Health Improvement Plans (CHIPs) and Community Service Plans (CSPs). With Nutrition Security identified as a region-wide 2025–2030 Prevention Agenda Priority Area, HCD convened a collaborative group of community partners working in food security, nutrition, obesity, and diabetes. The first meeting of the Nutrition Security Regional Partners took place on September 23, 2025, focusing on learning about current initiatives, identifying opportunities to strengthen and expand efforts, and fostering regional alignment in health intervention planning. Participants received a detailed grid outlining existing initiatives along with associated assets and opportunities. Next steps will be determined by CR-PAWG partners at their next meeting on October 29, 2025, as they finalize their objectives and work to identify interventions, metrics, and key partners.



# III. Sociodemographic Information

## Summary

The Capital Region consists of Albany, Columbia, Greene, Rensselaer, Saratoga, and Schenectady counties and had a combined population of 981,192 in 2023, based on the latest data from the American Community Survey. Albany County had the largest population, making up about 32% of the total Capital Region population. Saratoga County was the second most populous county, while Columbia and Greene counties had the smallest populations in the Capital Region.

## Total Population, 2023, American Community Survey

		Area	Total Population
		NYS (excl. NYC)	11,356,117
		Capital Region	981,192
Geography	County	Albany	315,374
		Saratoga	237,075
		Rensselaer	160,341
		Schenectady	159,603
		Columbia	61,245
		Greene	47,554

## Selected Sociodemographic Indicators, 2019-2023

County	Total Pop.	Age (years)		Race/Ethnicity				
		0-14	65+	Asian	Black	Hispanic	Native	White
Albany	<b>315,374</b>	15.0%	17.8%	<b>8.4%</b>	<b>15.5%</b>	7.0%	0.9%	76.8%
Saratoga	<b>237,075</b>	15.8%	19.4%	3.9%	2.8%	3.8%	0.8%	<b>93.7%</b>
Rensselaer	<b>160,341</b>	15.7%	17.8%	3.8%	9.5%	5.9%	0.9%	87.3%
Schenectady	<b>159,603</b>	<b>17.8%</b>	17.6%	6.9%	14.9%	<b>8.1%</b>	<b>1.8%</b>	77.4%
Columbia	<b>61,245</b>	12.6%	<b>25.4%</b>	3.0%	5.8%	6.0%	1.4%	90.5%
Greene	<b>47,554</b>	13.4%	23.5%	1.7%	6.5%	6.6%	1.0%	91.7%

**Conditional formatting key:** Darker cells contain larger values. Largest value in each column is bolded and italicized

Schenectady County had largest percentage of population aged 14 years and under, while Columbia and Greene counties had the highest percentages of population aged 65 years and older. Albany County had the highest proportions of Asian and Black or African American residents, Saratoga County had the highest proportions of White residents, and Schenectady County had the highest proportion of Hispanic and Native American, residents.

Greene County had the highest proportion of residents over the age of 25 with less than a high school diploma or equivalent. Albany County had the highest proportion of their population who speak English less than very well. Poverty was highest in Albany County, and highest in Albany County ZIP codes 12206 and 12207. Unemployment was low in the Capital Region compared to the rest of NYS but was highest in Schenectady County. Capital Region counties all ranked in the top half of NYS counties for nutrition security measures: food environment index and food insecurity rate. Columbia County had the highest percentages of housing units built before 1940, and rental units where the gross rent costs more than 35% of the household’s income.



County	Total Pop.	Social		Economic			
		< High School	Speak English LTVW	Poverty	Unemployed	Pre-1940 Housing	Rent >35% of Income
Albany	<b>315,374</b>	7.4%	<b>4.8%</b>	<b>12.5%</b>	3.4%	27.5%	36.8%
Saratoga	237,075	6.0%	2.0%	6.6%	2.3%	16.0%	31.6%
Rensselaer	160,341	7.6%	2.4%	11.5%	3.6%	32.5%	37.8%
Schenectady	159,603	8.4%	2.8%	11.6%	<b>3.8%</b>	33.1%	41.0%
Columbia	61,245	8.0%	2.9%	10.3%	3.5%	<b>33.4%</b>	<b>43.7%</b>
Greene	47,554	<b>11.5%</b>	2.6%	10.4%	1.5%	26.2%	37.8%

**Conditional formatting key:** Darker cells contain larger values. Largest value in each column is bolded and italicized  
**Note:** LTVW = Less than very well

Appendix B contains sociodemographic data on age, race/ethnicity, and poverty rate for each Capital Region county and ZIP code-aggregated neighborhood.

### Age Group

In 2023, the Capital Region had a slightly larger female (496,588) than male (484,604) population. The Capital Region’s median age ranged from 38.3 years in Albany County to 49.5 years in Columbia County. There were more Capital Region residents aged 18 years and under (186,374 – 19.0%) than 65 years and older (185,537 – 18.9%). While the population 18 years and under changed by less than 0.1%, since 2019 (was 186,504), the population aged 65 and older increased by almost 10% since 2019 (was 167,422).

#### Percent of Population by Age Group, 2023, American Community Survey

Area	< 5 years	5-14 years	15-19 years	20-44 years	45-64 years	65-74 years	75+ years
NYS (excl. NYC)	5.3%	11.7%	6.7%	30.9%	26.8%	10.8%	7.7%
Capital Region	4.8%	10.7%	6.5%	32.6%	26.4%	11.2%	7.7%
Albany	4.7%	10.3%	7.3%	35.6%	24.3%	10.4%	7.4%
Columbia	3.9%	8.7%	5.2%	27.3%	29.5%	15.1%	10.3%
Greene	4.3%	9.1%	4.5%	29.7%	29.0%	13.8%	9.7%
Rensselaer	4.9%	10.8%	7.0%	33.2%	26.3%	10.9%	6.9%
Saratoga	4.7%	11.1%	5.9%	30.4%	28.6%	11.7%	7.7%
Schenectady	5.8%	12.0%	6.6%	32.5%	25.5%	10.3%	7.3%

## Race/Ethnicity

The Capital Region has continued to become more diverse, in terms of race and ethnicity. The percentage of residents who identified their race as something other than White alone increased from 17.0% in 2019 to 21.5% in 2023 (was 16% in 2016). This percentage ranged from 29.2% in Albany County (was 24.7% in 2019) to 10.7% in Saratoga County (was 7.3% in 2019). The proportion of Hispanic residents in the Capital Region in 2023 was 6.2%, up from 5.2% in 2019, and ranged from 8.1% in Schenectady County to 3.8% in Saratoga County.

### Percent of Population by Race/Ethnicity, 2023, American Community Survey

Area	Asian	Black or African American	Hispanic	Native American or		Other Race	White
				Alaskan	Native Hawaiian or Pacific Islander		
NYS (excl. NYC)	5.5%	11.0%	13.0%	1.2%	0.1%	10.6%	79.8%
Capital Region	5.7%	10.3%	6.2%	1.1%	0.2%	5.7%	84.3%
<b>Geography</b> County							
Albany	8.4%	15.5%	7.0%	0.9%	0.2%	5.6%	76.8%
Saratoga	3.9%	2.8%	3.8%	0.8%	0.1%	3.7%	93.7%
Rensselaer	3.8%	9.5%	5.9%	0.9%	0.1%	5.3%	87.3%
Schenectady	6.9%	14.9%	8.1%	1.8%	0.4%	8.9%	77.4%
Columbia	3.0%	5.8%	6.0%	1.4%	0.3%	6.2%	90.5%
Greene	1.7%	6.5%	6.6%	1.0%	0.0%	6.0%	91.7%

## Level of Education

Of the Capital Region’s population aged 25 years or older, 7.5% had less than a high school education, down from 8.1%. Saratoga County had the lowest percentage at 6.0%, while Greene County had the largest percentage at 11.5%, which was down from 13.3% during the 2015-2019 period.

### Percent of Population by Level of Education, 2023, American Community Survey

Area	Less than 9th grade	9th to 12th grade, no diploma	High school graduate (or equivalenc..	Associate's degree	Bachelor's degree	Graduate or professional degree
Albany	2.9%	4.5%	21.7%	11.4%	22.5%	21.9%
Saratoga	1.9%	4.1%	24.3%	11.1%	24.1%	19.3%
Rensselaer	2.7%	4.9%	26.7%	13.7%	20.6%	14.7%
Schenectady	3.1%	5.2%	26.7%	12.7%	18.9%	15.3%
Columbia	2.7%	5.2%	29.3%	12.6%	19.0%	17.4%
Greene	4.0%	7.5%	34.9%	11.0%	16.2%	11.4%



## Languages Spoken

As of 2023, close to 30,000 (about 1 in 30) residents speak English less than very well. Almost half of these residents live in Albany County. Albany County also had the largest percent of population who speak English less than very well.

6.4% of the Capital Region population speaks a language other than English, with just over 90% of the population speaking English, alone. 2.5% of Capital Region residents speak another Indo-European language, 1.8% speak Spanish, 1.6% speak an Asian or Pacific Islander language, and 0.5% speak another language.

### Population who speak English less than very well, 2023, American Community Survey

	Capital Region	29,607	3.2%
County	Albany	14,394	4.8%
	Saratoga	4,430	2.0%
	Rensselaer	3,684	2.4%
	Schenectady	4,200	2.8%
	Columbia	1,688	2.9%
	Greene	1,211	2.6%

### Population who speak English less than very well by Language Spoken, 2023, American Community Survey

	Language						
	English only	Language other than English	Other Indo-European languages	Spanish	Asian and Pacific Islander languages	Other languages	
Capital Region	90.4%	6.4%	2.5%	1.8%	1.6%	0.5%	
County	Albany	86.1%	9.3%	3.6%	2.2%	2.8%	0.9%
	Saratoga	93.2%	4.4%	2.0%	1.0%	1.1%	0.3%
	Rensselaer	92.4%	5.0%	1.6%	1.5%	1.3%	0.6%
	Schenectady	91.3%	5.8%	2.0%	2.4%	1.0%	0.4%
	Columbia	91.9%	5.5%	2.6%	2.3%	0.5%	0.1%
	Greene	92.4%	5.1%	2.7%	2.0%	0.4%	0.1%

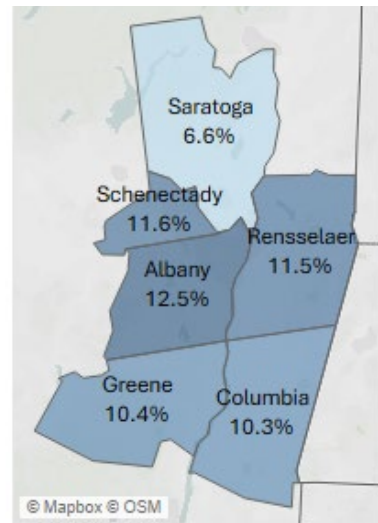
## Poverty

### Objectives – New York State Prevention Agenda 2025-2030

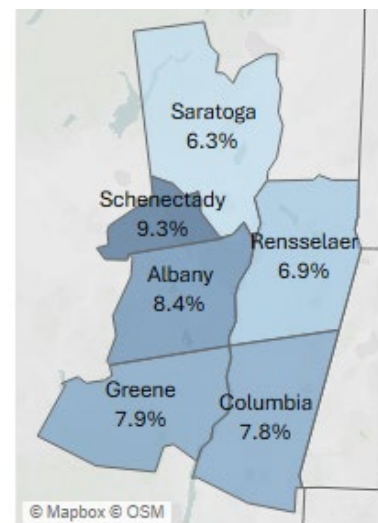
- **1.0:** Reduce the percentage of people living in poverty from 13.6% to 12.5%.
- **1.1:** Reduce the percentage of people aged 65+ living in poverty from 12.2% to 11%.

In 2022, Capital Region counties each met the two New York State 2025-2030 Prevention Agenda objectives related to poverty: percentage of total population living in poverty and percentage of population aged 65 years and older living in poverty. Albany County had the highest poverty rate among the total population, while Schenectady had the highest poverty rate among adults aged 65 years and older. Saratoga County had the lowest percentage in the Capital Region for each measure. Columbia and Greene counties had the highest income ratios, when comparing their 80<sup>th</sup> percentile income to their 20<sup>th</sup> percentile income. Saratoga County had the lowest income ratio in the Capital Region.

Percent Living in Poverty, 2022, American Community Survey



Percent aged 65+ Living in Poverty, 2022, American Community Survey



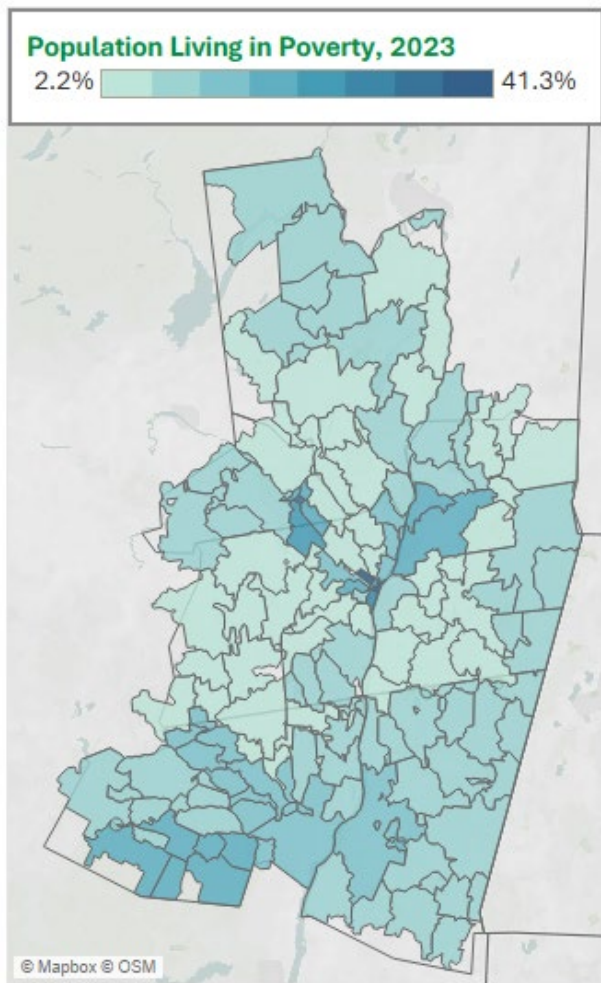
2025 County Health Rankings: Income Ratio, 2023, American Community Survey		
County	Percent	NY Rank
New York State	5.8	
Saratoga	4.2	11
Schenectady	4.4	21
Rensselaer	4.6	33
Albany	4.6	34
Columbia	4.9	45
Greene	5.1	50



**Percent Poverty by Demographic Group, 2023, American Community Survey**

County	Total	Demographic / Group									
		Age				Ethnicity			Race		
		Under 18	18 to 34	35 to 64	65+	Hispanic or Latino	Asian	Black	Another race	Two or more races	White
Albany	12.5%	15.8%	17.6%	9.5%	8.4%	21.2%	16.6%	27.2%	25.1%	23.2%	8.5%
Columbia	10.3%	14.0%	13.7%	8.9%	7.8%	7.1%	23.2%	33.1%	19.1%	6.5%	9.2%
Greene	10.4%	11.2%	12.2%	10.7%	7.9%	9.4%	5.7%	23.8%	14.7%	14.8%	9.7%
Rensselaer	11.5%	16.6%	15.6%	8.7%	6.9%	20.6%	15.7%	28.2%	16.2%	21.7%	9.2%
Saratoga	6.6%	7.0%	8.7%	5.4%	6.3%	13.8%	2.3%	12.6%	14.6%	11.2%	6.3%
Schenectady	11.6%	15.3%	14.6%	8.9%	9.3%	26.2%	8.5%	26.8%	31.8%	17.0%	7.7%

In 2023, there were 95,528 Capital Region residents (10.5%) with an income below poverty level, which was very similar to 2019 (less than 0.1% difference). Albany County had the largest percentage of population below the poverty level (12.5%), while Saratoga County had the smallest at 6.6%. Rensselaer County had the highest poverty rate among residents under the age of 18 years. Schenectady County had the highest poverty rate among Hispanic or Latino residents. Columbia County had the highest poverty rate among Asian and Black residents. The Capital Region’s median household income in 2022 ranged from \$70,294 in Greene County to \$97,038 in Saratoga County, up from \$53,601 and \$84,291, respectively, in 2019.



The highest ZIP-code level percentages of population with income below poverty level in 2023 was in the City of Albany, ZIP codes 12207 (41.3%) and 12206 (40.6%). Other high rates of poverty (between 15% and 25%) were found in ZIP codes in and around the cities of Schenectady and Troy, as well as many of the ZIP codes in the Hunter/Tannersville area in Greene County.



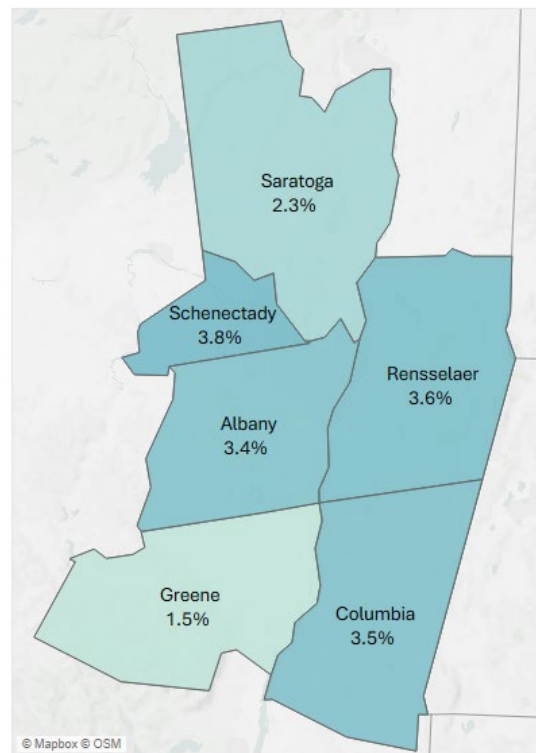
## Unemployment

### Objectives – New York State Prevention Agenda 2025-2030

- **2.0:** Reduce unemployment among individuals aged 16 and older from 6.2% to 5.5%.
- **2.1:** Reduce unemployment among Black non-Hispanic individuals from 9.3% to 7.9%.

Based on U.S. Census data from 2022, unemployment rates were relatively low (below 4%) among Capital Region counties. Schenectady County had the highest rate of unemployment in the Capital Region in 2022 (3.8%), based on U.S. Census data. Based on data from the Bureau of Labor and Statistics, though, Greene County had the highest rate of unemployment in the Capital Region in 2023 (3.8%).

Percent Unemployed, 2022 (Census)



County Health Rankings: % Unemployed, 2023 (Bureau of Labor Statistics)		
County	Percent	NY Rank
New York State	4.2	
Saratoga	2.9	1
Columbia	3.0	2
Albany	3.3	10
Rensselaer	3.3	10
Schenectady	3.5	20
Greene	3.8	33



## Nutrition Security

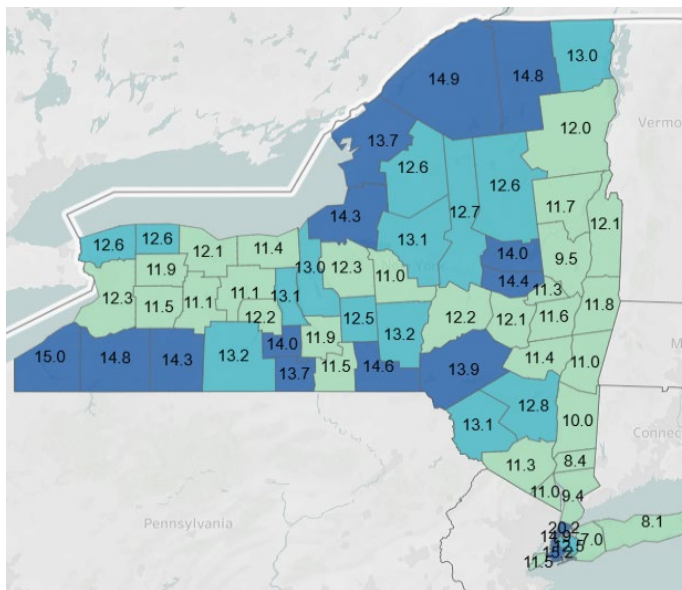
### Objectives – New York State Prevention Agenda 2025-2030

- **3.0:** Increase consistent household food security from 74% to 79%.
- **3.1:** Increase food security in households with an annual total income of less than \$25,000 from 46.6% to 56.7%.

Based on data from Feeding America, accessed through the New York State Prevention Agenda Dashboard, the Capital Region compared favorably in 2020 to the rest of New York State (NYS) in terms of food security. Rates of food insecurity were between 11% and 12% for each Capital Region county, except in Saratoga County, which had one of the lowest rates in the state. All six (6) Capital Region counties’ rates of food insecurity were relatively low compared to other counties in NYS. Capital Region counties also compared favorably to other NYS counties, based on 2022 U.S. Department of Agriculture (USDA) Food Environment Index data, accessed through the 2025 County Health Rankings dataset. Each Capital Region county ranked in the top half of NYS counties for food environment index, and Saratoga and Greene counties ranked in the top 10 NYS counties.

Percent of Population with Food Insecurity, 2020

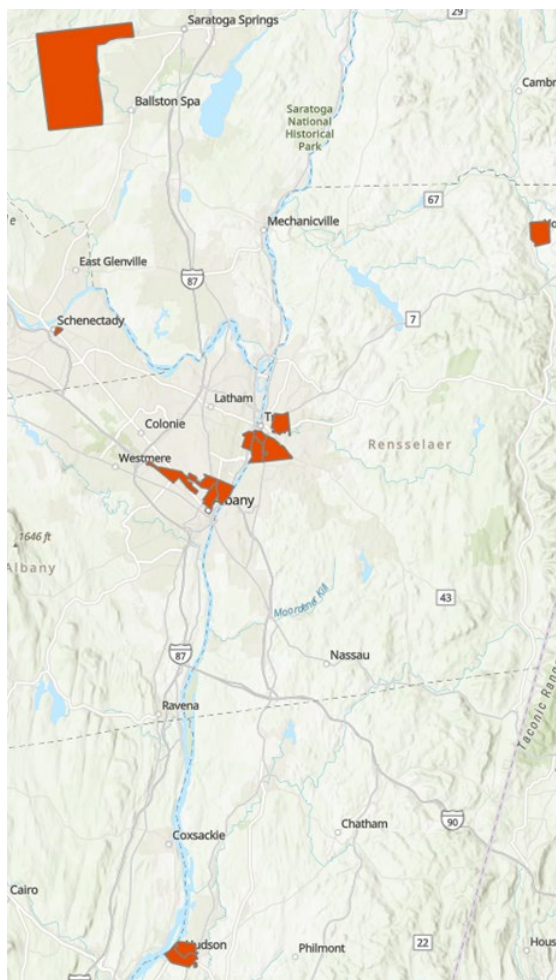
2025 County Health Rankings: Food Environment Index, 2022, U.S. Department of Agriculture		
County	Percent	NY Rank
New York State	8.7	
Saratoga	9.1	4
Greene	8.8	8
Schenectady	8.7	12
Rensselaer	8.5	20
Albany	8.4	25
Columbia	8.4	25



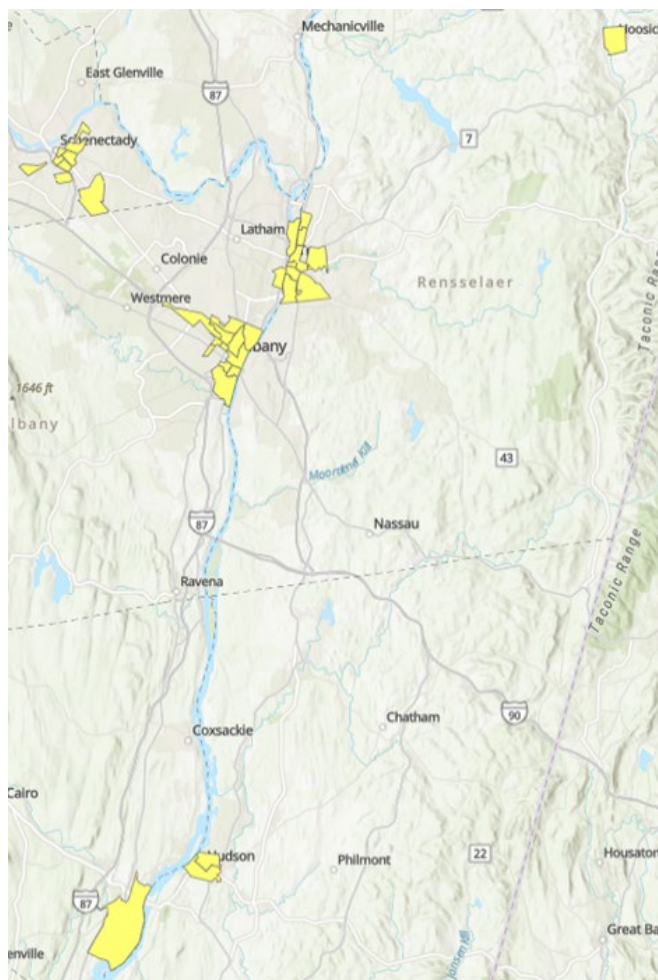
The U.S. Department of Agriculture (USDA) Economic Research Service created a Food Access Research Atlas to measure communities’ level of access to healthy and affordable food. The Food Access Research Atlas has four measures of food access, each based on a local-level estimates of income level in conjunction with an estimate of a community’s level of access to a superstore, supermarket, or large grocery store. Low-access census tracts had at least 500 residents, or at least 33 percent of residents, that lived at least 0.5 miles or 1 mile away from a food store, in urban areas, or 10 or 20 miles from a food store, in rural areas. Low-vehicle

access census tracts had more than 100 households without a vehicle and were more than 0.5 miles away from a food store or had a significant portion of residents more than 20 miles from a food store. Low-income census tracts had a poverty rate of at least 20 percent, had a median household income 20 percent lower than the statewide median household income, or the tract was in a metropolitan area with a median household income that was 20 percent lower than the statewide median household income.

**Census Tracts with Low-income and Low-Access to a Food Store, 2019**



**Census Tracts with Low-income and Low-Vehicle Access to a Food Store, 2019**



Capital Region census tracts with low income and low access to a food store in 2019 were identified in Arbor Hill, North Albany, and Upper Washington Avenue neighborhoods, as well as in southern Watervliet in Albany County; in South Troy, around Troy High School, and in Hoosick Falls in Rensselaer County; in Hudson in Columbia County; in downtown Schenectady in Schenectady County; and around Rock City Falls in Saratoga County. Each of these census tracts, other than the Rock City Falls census tract in Saratoga County, were also identified as having low-vehicle access to a food store. Other Capital Region census tracts with low income and low-vehicle access to a food store in 2019 were identified in the Albany County neighborhoods of Downtown Albany, South End, Second Avenue, West Hill, parts of Pine Hills, and Green Island; in Downtown Troy, North Troy, and Lansingburgh in Rensselaer County; in Catskill in Greene County; and in Schenectady County in the neighborhoods of Hamilton Hill, Goose Hill, near Union College, as well as parts of Mont Pleasant and Bellevue.



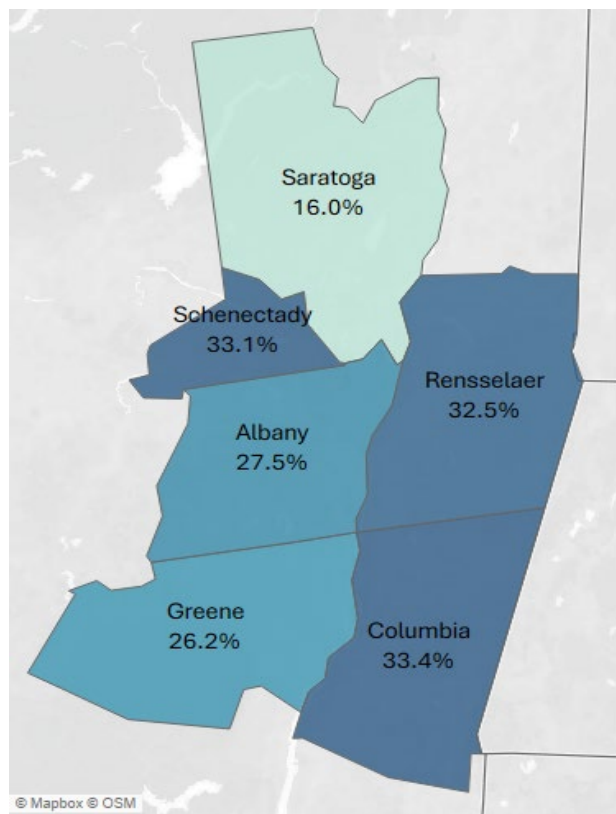
## Housing Quality and Affordability

### Objectives – New York State Prevention Agenda 2025-2030

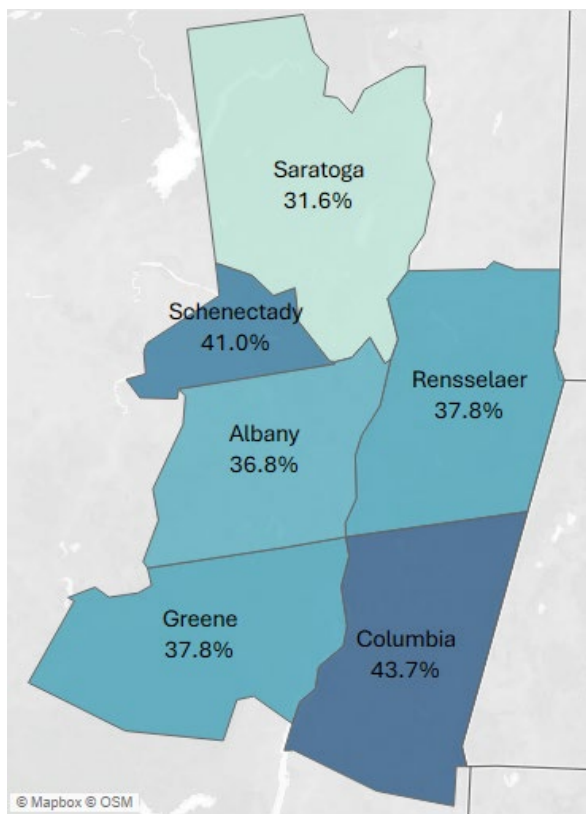
- **4.0:** Increase the number of people living in HUD-subsidized housing from 987,957 to 1,092,000.
- **4.1:** Increase the percentage of adults, with an annual income of less than \$25,000, who were able to pay their mortgage, rent, or utility bills in the past 12 months from 65.1% to 75.1%.

Close to a third of housing structures in Columbia, Schenectady, and Rensselaer counties were built prior to 1940. Saratoga County had about half the percentage of pre-1940 housing, compared to these counties. Albany County and Greene County had percentage of pre-1940 housing around 27%. Some of the highest ZIP code-level pre-1940 housing percentages were in the cities of Hudson, Albany, Schenectady, Troy, and Cohoes. Columbia and Schenectady counties had the highest rate of rental units with a gross rent of at least 35% of the occupying tenant’s household income.

**Percent of housing structures built before 1940, 2022**



**Percent of Rental Units with Gross Rent at least 35% of Household Income, 2022**

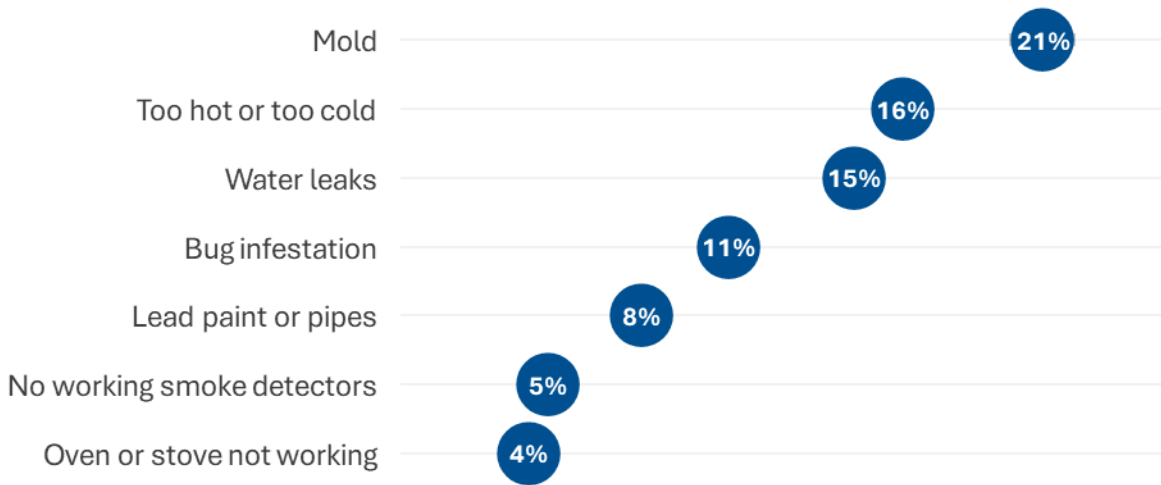


Columbia and Schenectady counties also had the highest percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities, based on 2017-2021 data from the Comprehensive Housing Affordability Strategy (CHAS), accessed through the 2025 County Health Rankings dataset.

2025 County Health Rankings: % Severe Housing Problems, 2017-2021 Comprehensive Housing Affordability Strategy (CHAS) data		
County	Percent	NY Rank
New York State	22.5	
Saratoga	10.9	6
Rensselaer	12.8	27
Greene	14.2	36
Albany	14.2	37
Schenectady	15.0	38
Columbia	15.4	44

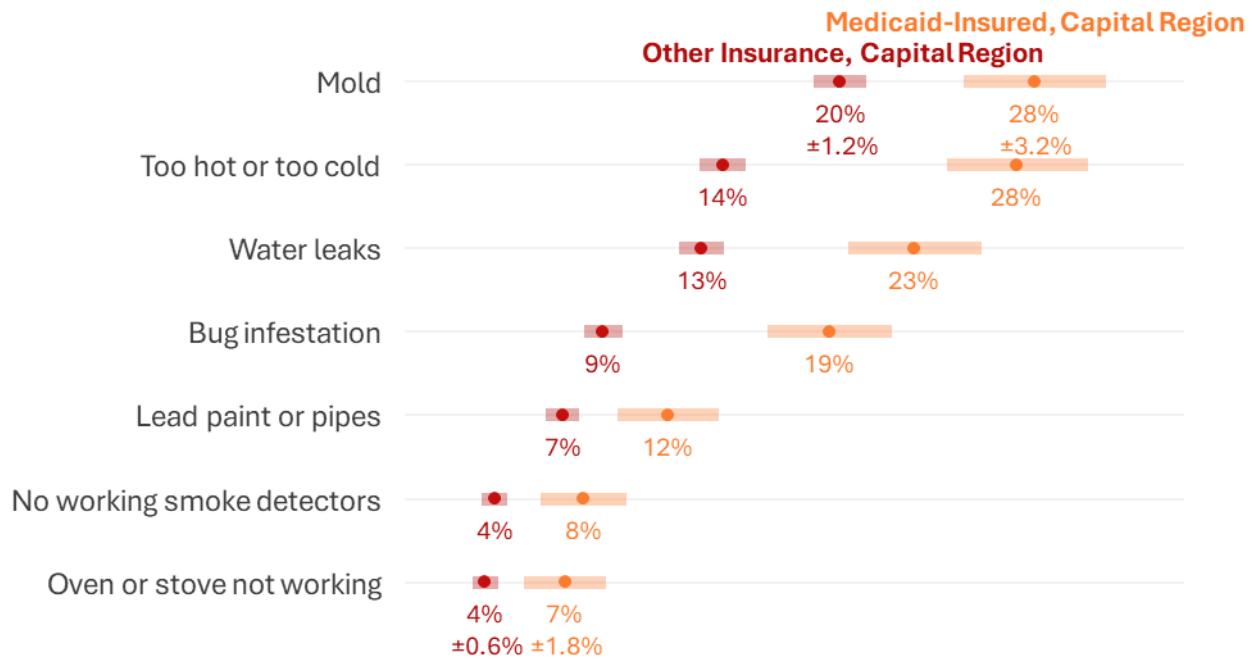
### Local Survey Data

**1 in 5** residents said they have a **mold** problem where they live



The *2024 Capital Region Community Health Survey* was conducted in the Fall of 2024 and garnered over 5,000 responses from residents of one of the six Capital Region counties. 21% of respondents reported that the place they live has a mold problem, while 16% reported the place they live is too hot or too cold, 15% said they have water leaks where they live, and 11% said their place of living has a bug infestation. Medicaid-insured residents of the Capital Region, more often than Capital Region residents with other types of insurance, reported having a problem with mold, temperature regulation, water leaks, bug infestation, lead paint or pipes, no working smoke detectors, or a non-working stove where they live. More information about the *2024 Capital Region Community Health Survey* is available in [Appendix N](#), along with additional results.





### Social Vulnerability Index

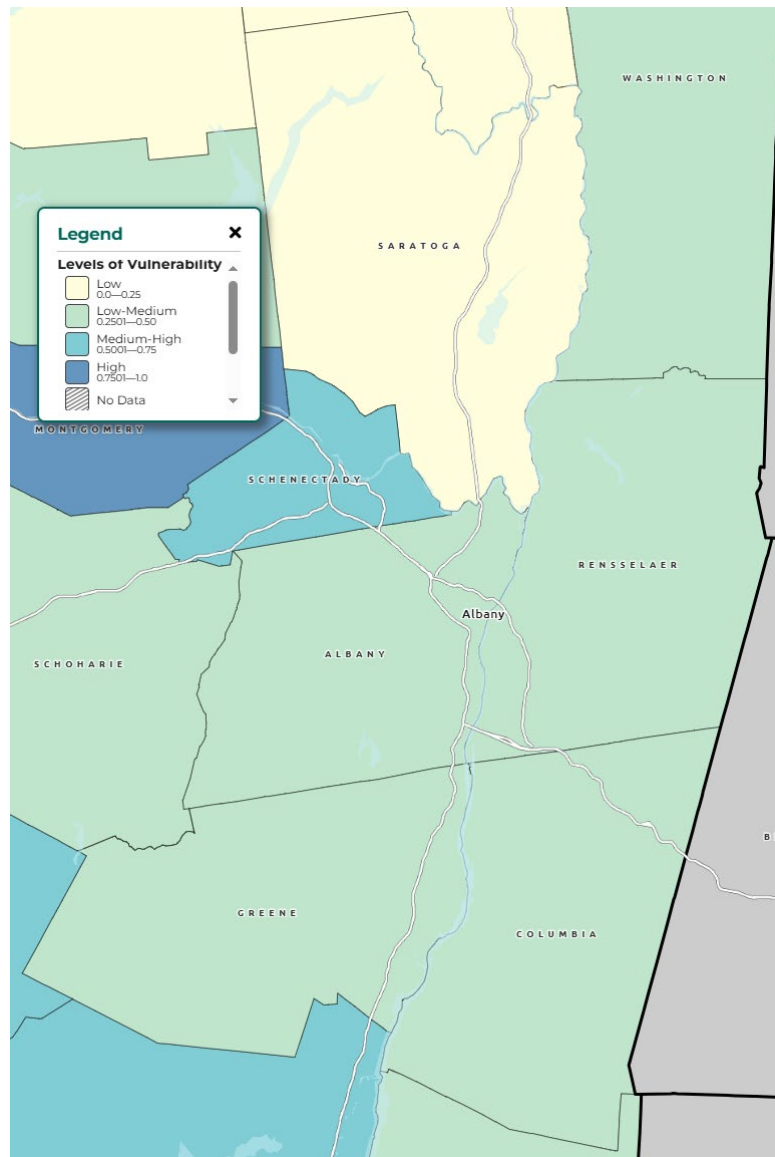
The Centers for Disease Control and Prevention (CDC) and Agency for Toxic Substances and Disease Registry (ATSDR) created the Social Vulnerability Index (SVI) to prepare for natural disasters, public health emergencies, and other major hazards, aiming to identify areas at high risk of needing additional resources (CDC). SVI is based on sixteen U.S. Census 5-year American Community Survey variables, which are grouped into four themes: socioeconomic status, household characteristics, racial and ethnic minority status, and housing type and transportation. The four themes are also combined to provide one single measure of communities’ overall social vulnerability. SVI measures are created for counties, Census tracts, and ZIP codes.

Social Vulnerability Index, 2022, NYS County Ranking (out of 62)					
County	Socioeconomic Status	Household Characteristics	Race and Ethnicity	Housing and Transportation	Overall
Saratoga	1	4	26	7	1
Rensselaer	8	26	39	30	19
Columbia	22	43	34	6	21
Greene	25	17	35	37	26
Albany	11	19	49	52	30
Schenectady	30	28	48	39	35

Schenectady County had the highest overall SVI in the Capital Region, as well as the highest socioeconomic status SVI in the region. Albany County had the highest SVI values for the themes of race and ethnicity and housing and transportation. Columbia County had the highest SVI value for household characteristics.

### County Level Social Vulnerability Index Map

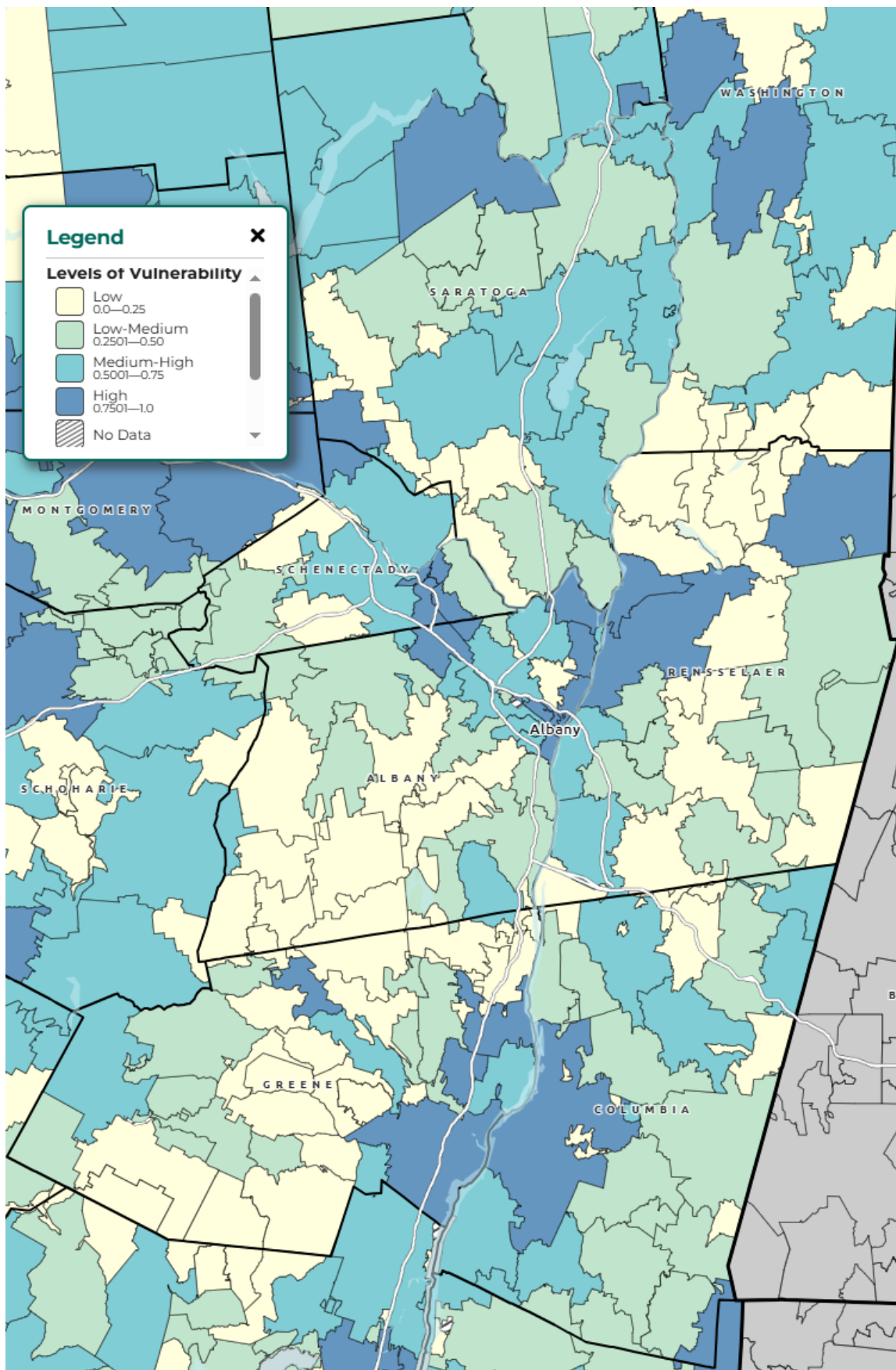
When comparing New York State counties, there were no Capital Region counties with a “high” level of overall vulnerability, based on CDC and ATSDR’s classification. Schenectady County had a medium-high level of overall vulnerability, Saratoga County had a “low” level of overall vulnerability, and the other Capital Region counties had a “low-medium” level of overall vulnerability.



### ZIP Code Level Social Vulnerability Index Map

When comparing New York State ZIP codes, several had a “high” overall SVI rating (CDC/ATSDR). Albany County’s downtown Albany, South End, Arbor Hill, West End, North Albany, Menands, Watervliet/Green Island, and Cohoes/North Colonie ZIP code groups had “high” levels of overall vulnerability. Rensselaer County’s Troy and Lansingburgh ZIP codes had “high” levels of overall vulnerability. Columbia County’s Hudson ZIP Code group had a “high” level overall vulnerability. In Greene County, ZIP codes around East Durham and Coxsackie as well as ZIP code 12414 in the Catskill area had a “high” level overall vulnerability. Saratoga County’s only ZIP code with a “high” level overall vulnerability was around Corinth. Schenectady County ZIP codes with a “high” level overall vulnerability in their City/Stockade, Goose Hill/Union, Hamilton Hill, Upper State Street, and Mont Pleasant neighborhoods.

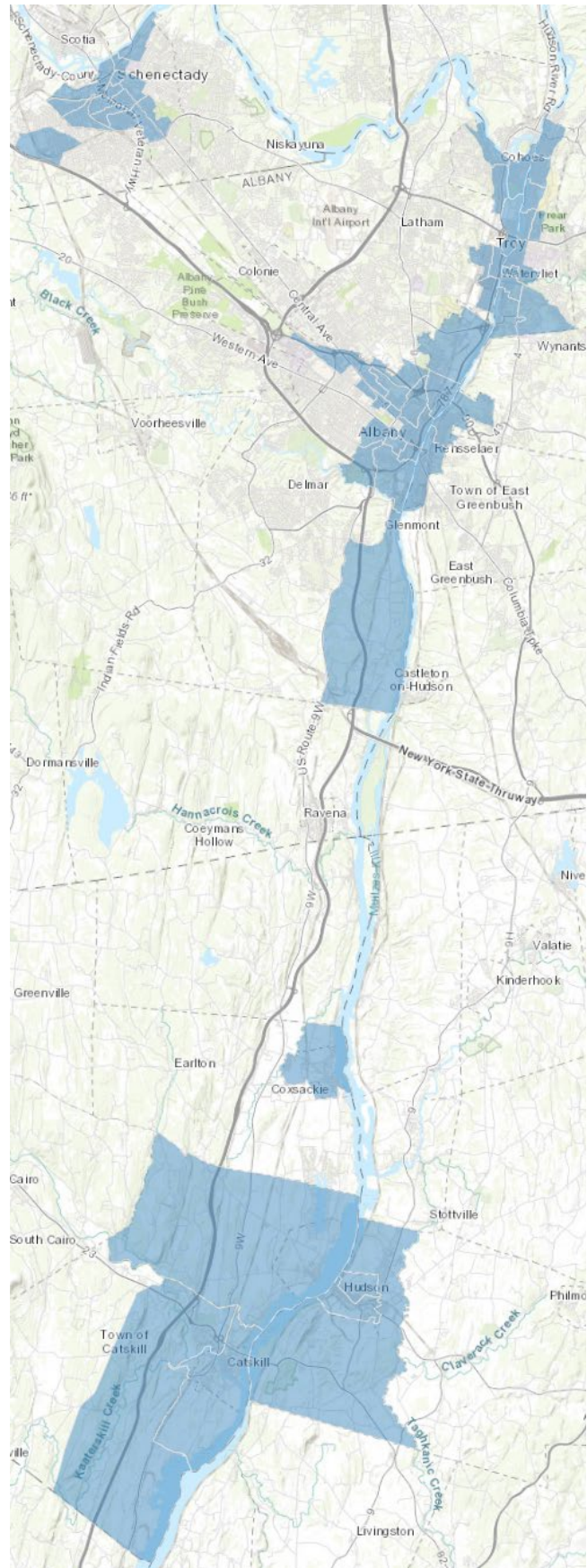




## New York State Disadvantaged Communities

New York State’s Climate Leadership and Community Protection Act, signed into law on July 18, 2019, charged an interagency Climate Justice Working Group with identifying disadvantaged communities for the state to invest in and prioritize in its ambitious efforts required by the Climate Act (NYSDEC). In March 2023, the Climate Justice Working Group finalized criteria to identify frontline and otherwise underserved communities based on forty five indicators of environmental burdens, climate change risk, population characteristics, and public health vulnerabilities at the Census Tract level (NYSDEC).

21% of Capital Region Census tracts were identified as disadvantaged communities (NYSDEC). In Albany County, Census Tracts designated as disadvantaged communities were in the neighborhoods of downtown Albany, South End, Delaware/2<sup>nd</sup> Avenue, Arbor Hill, West End, South Colonie, Menands, Watervliet/Green Island, and Cohoes. In Rensselaer County, Census Tracts in Troy, Lansingburgh, and Rensselaer were designated as disadvantaged communities. In Columbia County Census Tracts in Hudson and Lorenz Park were designated as disadvantaged communities. In Greene County, Census Tracts in Catskill, Athens, Coxsackie, and Jefferson Heights were designated as disadvantaged communities. In Schenectady County, Census Tracts were identified as disadvantaged communities in the City/Stockade and Hamilton Hill neighborhoods, along the Mohawk River near Union College, and in Rotterdam near the Industrial Park. Saratoga County did not have any Census Tracts designated as disadvantaged communities.



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# IV. General Health Status

## Highlights

- Total mortality rates in the Capital Region were highest in Rensselaer and Greene counties
- Heart disease and cancer were the top 2 leading causes of death and premature death in the Capital Region
- In NYS, Black non-Hispanic residents had the highest rates of death due to the top leading causes, except for cancer, which White non-Hispanic residents had the highest mortality rate for
- Schenectady County had the highest percentage in the Capital Region of deaths that were premature (before 65 years), and ranked 45<sup>th</sup> out of 62 NYS counties
- Rensselaer and Schenectady counties had the highest differences in percent of death that were premature in the Capital Region, when comparing Black and White non-Hispanic residents
- Saratoga County had the highest disparity between Hispanic and White non-Hispanic residents for percent of deaths that were premature in the Capital Region.

## Total Age-Adjusted Mortality

Rensselaer and Greene counties had the highest age-adjusted mortality rates in the Capital Region, in 2022; the two counties ranked 39<sup>th</sup> and 40<sup>th</sup> out of 62 NYS counties. Schenectady County ranked in the middle of NYS counties for its mortality rate. Albany County ranked in the top half of counties for age-adjusted mortality but was still higher than NYS (excluding NYC). Columbia and Saratoga counties had mortality rates lower than NYS (excluding NYC) and ranked 11<sup>th</sup> and 12<sup>th</sup> among NYS counties.

Age-Adjusted Total Mortality Rate, 2022		
County	Mortality Rate	County Rank
NYS (excl. NYC)	744.2	
Columbia	705.6	11
Saratoga	714.7	12
Albany	755.0	19
Schenectady	821.5	32
Rensselaer	848.6	39
Greene	856.2	40

## Leading Causes of Death

The leading causes of death in the Capital Region in 2022 were heart disease, cancer, COVID-19, chronic lower respiratory disease (CLRD), unintentional injury, and stroke. Regional and county-level leading causes of death and premature death are outlined in [Appendices C and D](#).

Capital Region Leading Causes of Death, 2022		
Cause of Death	Count	Percent of Deaths
All Causes	10,185	
Heart Disease	2,293	22.5%
Cancer	2,019	19.8%
COVID-19	498	4.9%
Chronic Lower Respiratory Diseases	457	4.5%
Unintentional Injury	367	3.6%
Diabetes	210	2.1%

New York State Age-Adjusted Mortality Rates per 100,000, by Race/Ethnicity, 2022				
Leading Causes of Death	Non-Hispanic			Hispanic
	Asian or Pacific Islander	Black	White	
All Causes	373.2	758.9	702.2	536.2
Heart Disease	95.9	192.8	166.8	122.7
Cancer	80.0	123.2	132.4	87.6
Unintentional Injury	15.0	67.0	48.5	51.9
COVID-19	31.8	50.0	40.9	42.2
Cerebrovascular Disease	18.0	29.8	24.5	21.1

Black non-Hispanic New Yorkers had the highest rates of heart disease and stroke, among all major race and ethnicity groups. Asian and Pacific Islander (PI) non-Hispanic New Yorkers had the lowest mortality rates for all causes of death and for each of the top five causes. Hispanic New Yorkers had the lowest rates of mortality due to chronic lower respiratory diseases.

## Premature Death and Years of Potential Life Lost (YPLL)

Premature deaths occur prior to the expected length of life. Premature death can be measured by the percent of all deaths that occurred before a certain age, typically 65 or 75 years, or by Years of Potential Life Lost (YPLL), the average years a person would have lived if they had not died prematurely. YPLL is a measure of premature



mortality that gives more weight to deaths that occur among younger people. Deaths that occur among younger people are often preventable and indicative of failures in the health care system and/or one’s lifestyle.

Percentage of deaths that are premature (before age 65 years)						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	21.3	21.0	21.5	22.7	22.0	
Capital Region	22.6	21.6	22.1	23.8	22.1	
Saratoga	22.1	18.6	20.2	20.0	20.5	9
Columbia	21.0	19.2	19.9	24.3	21.0	16
Greene	25.4	25.2	21.5	24.7	21.8	20
Rensselaer	24.5	23.0	22.1	24.2	22.0	25
Albany	22.1	22.6	23.0	24.9	22.5	31
Schenectady	22.0	22.4	23.7	26.1	23.9	45

The Capital Region had a very slightly higher percentage of deaths that were premature (before age 65 years) compared to NYS, excluding NYC. In 2022, Schenectady had the highest NYS county rank among Capital Region counties, at 45<sup>th</sup>, followed by Albany County, at 31<sup>st</sup>.

Capital Region Leading Causes of Premature Death (before age 75), 2022		
Cause of Premature Death	Count	Percent of Premature Deaths
All Causes	4,231	
Cancer	1,075	25.4%
Heart Disease	807	19.1%
Unintentional Injury	288	6.8%
Chronic Lower Respiratory Diseases	188	4.4%
COVID-19	179	4.2%
Diabetes	142	3.4%

The major leading causes of premature death (before age 75) were cancer and heart disease, followed by unintentional injury.



Premature deaths (before age 65 years), difference in percentages between Black non-Hispanics and White non-Hispanics						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	18.6	20.2	19.7	22.2	21.7	
Capital Region	25.9	29.9	28.4	31.4	30.1	
Saratoga	17.2	6.5	23.2	10.0	16.2	17
Greene	19.5	39.5	15.5	33.9	18.8	25
Albany	32.2	30.9	30.1	28.5	26.8	38
Columbia	7.5	26.9	16.4	24.2	27.4	41
Schenectady	23.6	35.2	33.8	45.4	37.4	53
Rensselaer	23.0	26.0	23.7	34.4	40.8	56

Premature deaths (before age 65 years), difference in percentages between Hispanics and White non-Hispanics						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	22.5	21.1	23.9	23.7	24.6	
Capital Region	27.9	30.5	31.5	31.3	34.1	
Columbia	4.5	1.9	34.8	30.6	23.4	25
Albany	41.8	30.3	37.8	35.1	27.7	32
Schenectady	26.4	40.1	32.2	30.9	31.3	40
Rensselaer	29.3	40.3	27.8	39.8	36.8	48
Greene	15.1	23.2	39.1	16.8	44.6	51
Saratoga	15.8	8.2	8.1	18.7	61.5	59

When comparing differences between the most populous race/ethnicity groups, Rensselaer County had the greatest difference (40.8) when comparing percentages for Black non-Hispanic and White non-Hispanic residents, and the county was ranked 56<sup>th</sup> out of 62 NYS counties. Schenectady County was close behind, ranked 53<sup>rd</sup> out of 62. When comparing the difference in percentages of premature deaths among Hispanic residents and White non-Hispanic residents, Saratoga County had the greatest difference at 61.5, which was ranked 59<sup>th</sup> out of 62 NYS counties. Greene and Rensselaer counties also had low NYS county ranks for this measure.

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## Health Care: Usage and Access

### Highlights

- Columbia County had the lowest Capital Region age-adjusted percentage of adults with a regular health care provider in 2021
- Greene County had the lowest Capital Region percentage of adults with a routine health checkup in the past year in 2021
- Columbia County had the highest Capital Region Prevention Quality Indicator (PQI) rates for the acute, circulatory, diabetes, and overall measures in the Capital Region in 2021-2023
- Capital Region residents with Medicaid insurance more often said they had not received a physical in the past year in 2021
- Capital Region counties with available data were all ranked in the top half of NYS counties for the percentage of adults who did not receive medical care in the past year due to cost in 2021

### Health Care Usage

In 2021, more than 3 million adults in New York State lacked a regular primary care provider (BRFSS, 2021). A lack of access to a primary care provider can result in negative health outcomes. Primary care, including prenatal care, offers a prime opportunity for prevention education, early detection, early treatment, and referral to other necessary health and social services. Sustained contact with a primary care provider improves the consistency and efficacy of treatment for long-term chronic care patients (Healthy People 2030).

Age-Adjusted Percentage of adults who have a regular health care provider				
County	2016	2018	2021	2021 County Rank
NYS (excl. NYC)	84%	82%	87%	
Capital Region	86%	85%	88%	
Greene	80%	84%	92%	7
Saratoga	88%	89%	91%	14
Rensselaer	88%	85%	89%	28
Schenectady	85%	85%	87%	34
Albany	85%	85%	85%	40
Columbia	83%	88%	83%	48

About 88% of adults in the Capital Region indicated that they had a regular health care provider (BRFSS). Thus, close to 100,000 Capital Region adults did not have a regular health care provider. Most Capital Region counties



saw their percentage of adults with regular health care provider in 2021 improve, compared to their rate in 2018. Columbia County, however, saw a decrease in their percentage of adults with regular health care provider, which was lower than the NYS (excluding NYC) percentage. Greene County had the highest percentage of adults with regular health care provider, at 92.2%.

Regular health exams and tests can identify problems before they advance. Early detection of health problems improves the chances of successful treatment; therefore, receiving the right health services, screenings and treatment increases the chances of living a longer, healthy and productive life (Healthy People 2030).

In 2018, approximately 21% of Capital Region adults had not seen a doctor for a routine checkup in the past year; up from 18% in 2016. The highest percentage in the Capital Region of adults who had a checkup in the past year in 2021 was in Schenectady County, while Greene County had the lowest percentage of adults who had a checkup within the past year (BRFSS).

Percent of adults with a routine health checkup in the past year		
County	2018	2021
NYS (excl. NYC)	82%	79%
Capital Region	82%	79%
Schenectady	86%	81%
Columbia	82%	80%
Saratoga	81%	79%
Albany	82%	78%
Rensselaer	80%	77%
Greene	80%	73%

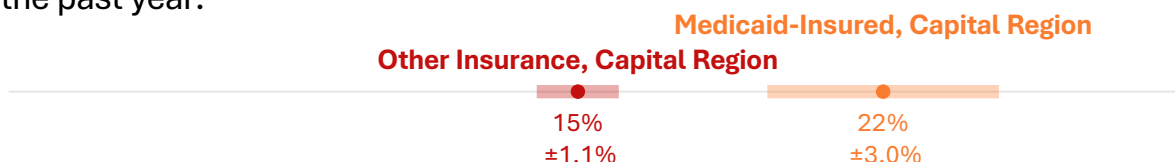
### Local Survey Data

The 2024 Capital Region Community Health Survey was conducted in the Fall of 2024 and garnered over 5,000 responses from residents of one of the six Capital Region counties. 84% of respondents said they visited their primary care provider for a physical exam in the past year, up from 79% in 2021. Individuals who did not receive a physical in the past year most often said it was due to one of the following reasons: “only go for health problems” (27%), “no time” (23%), or they did not have a primary care provider (23%).

**15.4%** of respondents had not received a physical exam in the past year.



Percent of respondents who did not receive a physical exam in the past year:



Medicaid-insured respondents, more often than respondents with other types of insurance, said they did not receive a physical exam in the past year. Additional information about the *2024 Capital Region Community Health Survey*, and a more thorough summary of the results, are available in the [Appendix N](#).

Age-Adjusted Percentage of adults who did not receive medical care because of cost				
County	2016	2018	2021	NY County Rank (of 62)
NYS (excl. NYC)	11%	10%	7%	
Capital Region	9%	9%	5%	
Greene	9%	11%	5%	14
Schenectady	8%	10%	5%	16
Rensselaer	11%	7%	6%	20
Columbia	9%	10%	6%	23
Albany	9%	9%	6%	28
Saratoga	7%	7%		

In 2021, approximately 5% of adult Capital Region residents indicated that monetary cost prevented them from visiting a doctor within the past year, down from 9% in 2018. Compared to NYS, excluding NYC, the Capital Region counties were on par or had lower rates of adults avoiding medical care due to costs. Data for Saratoga County was not available in 2021, due to a small sample size.

### Access to Primary and Preventive Care

Access to quality primary and preventive care is the cornerstone of a comprehensive health care system. Prevention Quality Indicators (PQIs) are used to assess access to and use of primary and preventive health care. PQIs measure ambulatory-care sensitive conditions where hospitalization could have potentially been prevented with primary and preventative health care. This data includes information on 12 PQIs, rolled up into four categories: diabetes (including short-term complications, long-term complications, uncontrolled diabetes, lower-extremity amputations among diabetics); circulatory (including hypertension, congestive heart failure, angina); respiratory (including chronic obstructive pulmonary disease (COPD, asthma); and acute (including dehydration, bacterial pneumonia, urinary tract infection).



PQI Hospitalization Age-Adjusted Rates per 100,000 Adults, by County, 2021-2023					
County	Acute	Circulatory	Diabetes	Respiratory	Overall
NYS (excl. NYC)	811	1813	1077	560	4262
Capital Region	558	1562	799	458	3376
Albany	538	1613	803	464	3418
Columbia	863	1891	1296	351	4955
Greene	599	1502	122	499	3425
Rensselaer	503	1895	1009	406	3936
Saratoga	403	886	429	89	2003
Schenectady	631	1700	856	456	3639

The Capital Region’s PQI rates were better than the comparable rates for NYS, excluding NYC. Columbia County had PQI rates higher than NYS, excluding NYC, for the acute, diabetes, and respiratory roll-up categories. Greene County had a respiratory PQI rate that was higher than NYS, excluding NYC. Otherwise, Capital Region counties performed better than the “Upstate” region of NYS, excluding NYC.

PQI Hospitalization Age-Adjusted Rates per 100,000 Adults, by Gender and Race/Ethnicity, 2021-2023						
	Gender		Race/Ethnicity			
	Female	Male	Black NH	Hispanic	Other NH	White NH
Overall	672	581	1326	543	948	559
Acute	164	88	140	93	201	124
Circulatory	285	257	651	228	447	236
Diabetes	111	168	329	140	212	118
Respiratory	112	68	206	82	88	81

Capital Region females had higher PQI rates for acute, circulatory, and respiratory PQI categories, whereas Capital Region males had higher PQI rates for diabetes conditions. PQI rates by race/ethnicity indicate that the Capital Region’s Black non-Hispanic population had most of the highest PQI rates (“Other” race had a higher rate of acute PQI). The Black non-Hispanic PQI rates were each about 50% to 150% higher than the Hispanic and White non-Hispanic PQI rates. Hispanic and White non-Hispanics PQI rates were mostly similar. Additionally, there are neighborhoods within the Capital Region counties that presented up to 10 times higher rates for PQI conditions compared to the Capital Region overall rate (see [Appendix I](#)).



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- Prevention Quality Indicator (PQI) rates, based on data from the New York State Statewide Planning and Research Cooperative System (SPARCS), were supplied by Common Ground Health.



## Dental Visits

### Objectives – New York State Prevention Agenda 2025-2030

- **34.0:** Increase the percentage of Medicaid enrollees with at least one preventive dental visit within the last year from 25.8% to 27.1%.
- **34.1:** Increase the percentage of Medicaid enrollees aged 2-20 with at least one preventive dental visit within the last year from 42.8% to 44.9%.

### Highlights

- In the Capital Region in 2023, Schenectady County had the lowest rates of Medicaid enrollees having seen a dentist in the past year, among those aged 2 to 20, and overall

Poor oral health negatively impacts a person's general health and well-being. Chronic pain from oral disease can also make eating difficult, threatening a person's ability to obtain adequate nutrition and function normally (CDC). Oral disease can also affect social interactions as well as educational achievement and job opportunities. On average, 34 million hours of school are missed by children due to emergency dental care. Over \$45 billion in productivity is lost in the US each year due to untreated dental conditions.

Oral diseases affect a large proportion of the United States population. About 1 in 5 adults in the United States have at least one untreated cavity. Children aged 6 to 9 years were more likely to have untreated cavities if they lived in a lower income household. Studies also have demonstrated an association between periodontal disease and diabetes, although the relationship is not yet fully understood (CDC).

Routine dental examinations and prophylaxis are effective prevention measures for improving oral health and reducing the burden of oral disease. Untreated dental disease is more common in populations whose access to oral health care services is limited. These limitations include the inability to pay, inadequate insurance coverage and the lack of available providers (including those accepting third party reimbursements like Medicaid). Lack of awareness of oral health treatment importance, limited oral health literacy, fears about treatment, transportation issues and language barriers also limit oral health care access.



Percentage of Medicaid enrollees with at least one dental visit within the last year						
County	2019	2020	2021	2022	2023	2023 County Rank
New York State	33.5	26.3	29.8	29.8	29.5	
Albany	34.2	28.2	32.8	33.0	32.0	8
Columbia	34.5	30.2	31.1	30.0	30.6	14
Rensselaer	33.1	28.0	29.7	28.5	28.2	28
Saratoga	30.9	24.7	26.8	28.4	28.2	28
Greene	31.5	26.1	27.6	27.2	27.1	33
Schenectady	33.0	27.4	28.1	26.6	25.7	43

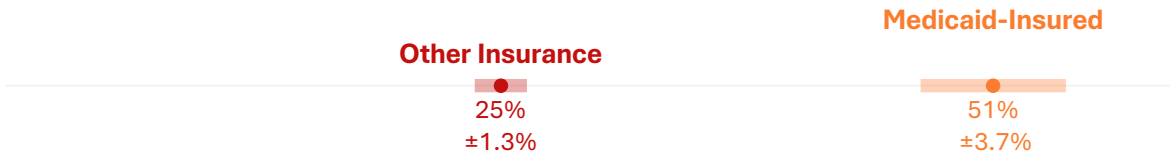
In 2020, dental visit rates among Medicaid enrollees dropped in NYS, possibly due to the COVID-19 pandemic, and rates have yet to fully recover in many areas. In 2023, the dentist visit rate among Medicaid enrollees was highest in Albany County, where rates are similar to pre-pandemic levels. The lowest Capital Region dentist visit rate was seen in Schenectady County, followed by Greene County.

Percentage of Medicaid enrollees (aged 2-20 years) who had at least one dental visit within the last year						
County	2019	2020	2021	2022	2023	2023 County Rank
New York State	50.5	40.0	45.7	46.9	46.8	
Rensselaer	54.1	49.0	55.9	55.9	57.3	4
Albany	48.1	40.3	49.4	52.1	54.8	5
Columbia	50.0	44.9	48.3	51.4	54.4	7
Saratoga	46.2	37.8	43.8	48.5	50.5	22
Greene	48.4	40.3	45.4	46.9	48.7	27
Schenectady	47.5	38.7	40.8	40.4	41.4	44

Capital Region county rates ranked better among NYS counties for percentage of Medicaid enrollees aged 2 to 20 years who had at least one dental visit within the last year. Each county in the Capital Region had a similar or better percentage than NYS, except for Schenectady County, which ranked 44<sup>th</sup> amongst all 62 NYS counties. Rensselaer County had one of the best percentages, with more than half of Medicaid enrollees aged 2 to 20 years having seen a dentist in the past year.



Percent of Capital Region respondents who did **not visit a dentist** for a **routine cleaning or checkup** in the past year:



In the *2024 Capital Region Community Health Needs Survey*, Medicaid enrollees twice as often reported they had not seen a dentist for a routine cleaning or checkup in the past year. The most frequently selected reasons for not seeing a dentist routinely were concerns about out-of-pocket price (30%), that nearby dentists don't accept their insurance (24%), or that they did not have dental insurance (19%).

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# V. Chronic Disease



## Obesity, Nutrition, and Physical Activity

### Adult Obesity

#### Objectives – New York State Prevention Agenda 2025-2030

- **19.0:** Decrease the percentage of adults who consume no fruits or vegetables daily from 28.4% to 27.0%.
- **19.1:** Decrease the percentage of adults with an annual household income less than \$50,000 who consume no fruits or vegetables daily from 31.7% to 30.1%.
- **21.0:** Increase the prevalence of physical activity among all adults 18 years of age and older from 73.9% to 77.6%.
- **21.1:** Increase the prevalence of physical activity among all adults 18 years of age and older with an annual household income less than \$25,000 from 56.7% to 59.5%.

#### Highlights

- In the Capital Region in 2021, adult obesity rates were highest in Schenectady County
- Rensselaer County childhood obesity rates have risen almost 50% over the last 5 years of data, and in 2021-2023, was the highest in the Capital Region
- Schenectady County had the highest percentage in the Capital Region of adults who ate less than one fruit and one vegetable daily in 2021
- Greene and Schenectady counties had the highest rates in the Capital Region of daily sugary beverage consumption in 2021
- Schenectady County had the lowest rates of physical activity in the Capital Region in 2021, both for all adults, and for adults aged 65 years and older

Being overweight or obese is defined as falling into a range of weight that is greater than what is considered healthy for a given height. For adults, obesity ranges are determined by using weight and height to calculate a body mass index (BMI). An adult with a BMI between 25 and 29.9 is considered overweight, and an adult with a BMI of 30 or higher is considered obese. Obesity is caused by a complex interaction of genetic, metabolic, behavioral, social and environmental factors. Obesity is associated with adverse health, social, and economic consequences. It is the primary cause of type 2 diabetes, and more than 80% of people with type 2 diabetes are



overweight or obese. It is also a contributing factor to heart disease, stroke, cancer, asthma, arthritis, and several psychological conditions, including depression (NIDDK, National Institutes of Health).

At least 1 in 3 Capital Region adults have obesity (BRFSS). In 2021, Schenectady County had one of the highest percentages in New York State (NYS) for adults with obesity, at 43%. Greene, Rensselaer, and Saratoga counties had obesity rates that were higher than NYS, excluding New York City (NYC) (BRFSS).

Percentage of adults with obesity			
County	2018	2021	2021 County Rank
NYS (excl. NYC)	29.1	31.6	
Capital Region	29.6	34.0	
Columbia	24.3	24.8	5
Albany	26.9	30.1	12
Saratoga	30.1	32.3	25
Rensselaer	30.9	35.0	38
Greene	34.5	35.6	40
Schenectady	33.7	43.0	57

### Childhood Obesity

For children and teens ages 2-19 years, overweight and obese are defined differently than for adults. Overweight is defined as a BMI at or above the 85<sup>th</sup> percentile to below the 95<sup>th</sup> percentile and obese is at or above the 95<sup>th</sup> percentile on Centers for Disease Control and Prevention (CDC) growth charts for children. Additionally, an age- and sex-specific percentile is used for children and adolescent BMI rather than the BMI categories used for adults. Children's body compositions vary at different ages and vary between boys and girls (CDC).

Percentage of children and adolescents with obesity						
County	2016-2018	2017-2019	2019-2021	2020-2022	2021-2023	2021-2023 County Rank
NYS (excl. NYC)	17.2	17.3	18.2	19.2	20.6	
Capital Region	16.1	16.5	18.6	18.9	20.4	
Saratoga	13.2	13.1	15.1	15.9	17.1	3
Albany	16.0	16.3	17.8	17.6	20.2	12
Schenectady	18.9	18.8	21.0	21.4	22.7	24
Greene	21.4	23.0	24.4	24.2	23.0	28
Columbia	18.9	17.3	21.9	23.8	23.1	29
Rensselaer	16.4	18.7	20.6	21.8	23.8	35

Childhood obesity rates in 2021-2023 were relatively low in the Capital Region, based on data from the Student Weight Status Category Reporting System (SWSCRS). Saratoga County had the 3<sup>rd</sup> lowest rate in the state, at 17.1% of children, and Albany County had the 12<sup>th</sup> lowest rate, at 20.2%. Childhood obesity rates in NYS climbed from 2016-2018 to 2021-2023, continuing a pattern that has been occurring for at least a few decades now. Rensselaer County's child and adolescent obesity rate climbed the fastest in the Capital Region, and it had the highest rate in 2021-2023, followed by Columbia County.

Percentage of elementary school students with obese (95th percentile or higher), SWSCRS						
County	2016-2018	2017-2019	2019-2021	2020-2022	2021-2023	2021-2023 County Rank
NYS (excl. NYC)	16.0	16.2	17.1	18.0	19.8	
Saratoga	13.0	12.7	13.6	14.8	16.5	5
Albany	15.5	15.6	17.8	17.5	20.3	17
Schenectady	15.9	15.9	19.8	20.2	21.6	27
Greene	20.4	21.9	23.6	23.2	23.1	35
Columbia	17.8	17.5	21.7	24.3	23.2	38
Rensselaer	14.1	17.6	17.4	20.4	23.4	40

Data from the Student Weight Status Category Reporting System (SWSCRS) also shows obesity has been climbing in NYS in recent years. For the 2021-2023 period, Columbia and Rensselaer counties had the highest percentages of obese elementary school students in the Capital Region, based on this measure as well. Rensselaer County showed large increases for percentages of obese elementary school students from 2016-2018 to 2021-2023.

## Healthy Eating

Nutrition is an important health factor at all ages. People require balanced diets that include a variety of foods to supply their body with a source of energy to support the functions of organ systems, as well as molecular building blocks to help grow and repair the body. CDC has linked diet to seven of the top ten leading causes of death in the United States (US). Micronutrients, otherwise known as vitamins and minerals, are also an important part of the food we eat, especially during childhood development and pregnancy. When individuals do not consume enough vitamins and minerals in their diet, they can increase their risk for certain health conditions, like scurvy (vitamin C deficiency) or anemia (which is often caused by iron deficiency). Based on the latest guidance from the US Department of Agriculture (USDA) and US Department of Health and Human Services, most people need to eat more foods with fiber, vitamin D, calcium, and potassium, but less sugar, saturated fat, and sodium.

Age-Adjusted Percentage of adults who report consuming less than one fruit and less than one vegetable daily (no fruits or vegetables)				
County	2016	2018	2021	2021 County Rank
NYS (excl. NYC)	29%	26%	33%	
Capital Region	26%	26%	33%	
Greene	19%	23%	20%	1
Albany	27%	24%	29%	8
Saratoga	22%	25%	29%	8
Columbia	22%	25%	31%	24
Rensselaer	29%	28%	33%	32
Schenectady	31%	31%	40%	54



The USDA has a MyPlate diagram which replaced the classic food pyramid and visualizes the types and amounts of foods people should focus on eating to have a healthy diet. There are five main food groups in the MyPlate diagram: fruits, vegetables, grains, proteins, and dairy. The two food groups most Americans are lacking in their diets are fruits and vegetables. In 2021, Greene County had the best percentage in the state for adults who eat at least one fruit and one vegetable daily, with 80% of adults reporting they eat one fruit and one vegetable, every day (BRFSS). Saratoga and Albany counties also had favorable percentage of adults reporting they eat one fruit and one vegetable, every day and tied for the 8<sup>th</sup> best rate in NYS. Schenectady County had the highest percentage in the Capital Region for adults who ate less than one fruit and one vegetable, daily, at 40%.

### Sugary Beverages

Sugar-sweetened beverages include drinks such as fruit juices, soda, sports drinks, and coffee beverages with sugar. In the US, half of the population consumes at least one sugary beverage daily. Sugar-sweetened beverages can be deceptive in the number of calories they contain. Caloric intake from the consumption of sugary beverages does not create a feeling of being “full” in the same way that solid foods do, and therefore people may not compensate by consuming less (CDC). Consumption of sugar-sweetened beverages has been attributed to increased risk of obesity, type 2 diabetes, heart disease, and gout. Studies in children have found that replacing sugary beverages with non-caloric options, like water, can improve weight management among children who are overweight (CDC).

All Capital Region counties, except Greene County, were in the top half of NYS counties for their percentage of sugary drink consumption among adults (BRFSS). Columbia County had the 3<sup>rd</sup> best (lowest) percentage in the state for sugary beverage consumption, and Saratoga and Rensselaer counties were among the 10 NYS counties with the lowest percentages of sugary drink consumption among adults.

Age-Adjusted Percentage of adults who consume one or more sugary drinks daily				
County	2016	2018	2021	2021 County Rank
NYS (excl. NYC)	25%	26%	20%	
Capital Region	23%	23%	18%	
Columbia	21%	21%	13%	3
Saratoga	22%	21%	15%	7
Rensselaer	24%	21%	15%	8
Albany	22%	21%	18%	14
Schenectady	22%	24%	22%	28
Greene	26%	25%	23%	34

## Physical Activity

Physical inactivity is a significant factor leading to overweight and obese children and adults. A lack of physical activity can also lead to many chronic diseases or conditions, including hypertension, heart disease, stroke, type 2 diabetes, and some cancers. Physical activity has been proven to help maintain a healthy weight and lower the risk of heart disease and related risk factors, diabetes, and premature mortality. It can also help reduce depression and increase cognitive function in older adults (CDC).

Percentage of adults who participate in leisure-time physical activity			
County	2018	2021	2021 County Rank
NYS (excl. NYC)	77.6	75.7	
Capital Region	80.3	78.2	
Saratoga	86.0	85.5	2
Columbia	79.9	83.2	3
Albany	81.1	80.4	5
Greene	74.3	77.9	17
Rensselaer	76.6	77.4	22
Schenectady	81.0	68.5	59

Percentage of adults who participate in leisure-time physical activity, aged 65+ years			
County	2018	2021	2021 County Rank
NYS (excl. NYC)	68.9	68.5	
Capital Region	70.1	70.6	
Saratoga	78.2	77.7	5
Albany	73.8	74.4	12
Rensselaer	67.1	74.1	14
Columbia	74.5	70.8	26
Greene	64.4	67.4	42
Schenectady	69.9	64.2	54

In 2021, most Capital Region counties had favorable physical activity participation, with 3 counties ranking in the top 5 among NYS counties for percentage of adults who engage in physical activity in their free time (BRFSS). Schenectady County had one of the bottom 5 rates among NYS counties, though, with close to 1 in 3 adults not engaging in leisure-time physical activity, a significant decrease from their estimate in 2018. In 2021, several Capital Region counties had better rates than in NYS (excluding NYC) for physical activity among adults aged 65 years and older (BRFSS). Schenectady County had the worst rate in the Capital Region for this indicator.





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## Tobacco Use

### Objectives – New York State Prevention Agenda 2025-2030

- **14.0:** Reduce the percentage of adults who use tobacco products from 9.3% to 7.9%.
- **14.1:** Reduce the percentage of high school students who use tobacco products from 14.8% to 12.6%.

### Highlights

- Capital Region counties all ranked in the top half of NYS counties for adult cigarette smoking in 2021
- Rensselaer, Saratoga, and Greene counties had the highest adult smoking prevalence in the Capital Region in 2021
- Saratoga County had the highest prevalence of smoking prevalence among adults with income less than \$25,000, among Capital Region counties with 2021 data

Preventing and reducing tobacco use is a cornerstone of public health. Tobacco use is the leading preventable cause of morbidity and mortality in New York State, and in the country. Cigarette smoking and secondhand smoke result in an estimated 30,000 deaths each year in New York State. In addition to its direct impact on people who smoke, smoking negatively affects non-smokers in proximity to smokers. The Surgeon General has stated that there is no safe level of exposure to secondhand smoke, and the U.S. Environmental Protection Agency has classified secondhand smoke as a known human carcinogen. Tobacco use and secondhand smoke exposure causes heart disease and stroke; chronic lung disease; cancers of the lung, mouth, pharynx, esophagus, and bladder; and other lung and vascular diseases.

Prevalence of cigarette smoking among adults				
County	2016	2018	2021	2021 County Rank
NYS (excl. NYC)	16%	14%	13%	
Capital Region	16%	14%	13%	
Columbia	19%	16%	12%	12
Albany	14%	12%	12%	14
Schenectady	18%	11%	14%	20
Greene	15%	19%	15%	21
Saratoga	17%	13%	15%	27
Rensselaer	19%	17%	15%	28



In 2021, Capital Region counties all ranked in the top half of NYS counties with the lowest adult cigarette smoking prevalences (BRFSS). The prevalence of current smokers was highest in Rensselaer, Saratoga, and Greene counties. Columbia and Albany counties had current smoking rates lower than NYS, excluding NYC. Adult smoking prevalence decreased in most of the Capital Region counties from 2016 to 2021, as it did in New York State, excluding NYC.

Smoking prevalence, however, did not decrease in NYS, excluding NYC, or the Capital Region, from 2016 to 2021, when looking specifically at adults with an income of less than \$25,000 (BRFSS). Schenectady and Columbia counties did see decreases in their prevalence of smoking among low-income adults over the same time period, and they ranked in the top half of NYS counties. Albany County ranked in the top half of NYS counties for smoking among low-income adults, but their prevalence increased from 2016 to 2021. Saratoga County had the highest prevalence among Capital Region counties with 2021 data, with more than 1 in 3 low-income adults being current smokers in 2021. Greene and Rensselaer counties did not have 2021 data available.

Percentage of adults who smoke cigarettes among adults with income less than \$25,000				
County	2016	2018	2021	2021 County Rank
NYS (excl. NYC)	25%	25%	27%	
Capital Region	27%	29%	29%	
Schenectady	28%	22%	24%	16
Columbia	42%	27%	27%	23
Albany	21%	24%	30%	26
Saratoga	24%	28%	41%	40
Greene	14%	24%		
Rensselaer	37%	37%		

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## Chronic Obstructive Pulmonary Disease

### Highlights

- Albany County had the highest prevalence of chronic obstructive pulmonary disease in 2021, at 6%
- Capital Region counties all ranked in the top half of NYS counties for COPD hospitalization rates in 2022
- Rensselaer County had the highest rate of COPD mortality in the Capital Region in 2022; sixth highest in NYS

Chronic obstructive pulmonary disease (COPD), or chronic lower respiratory disease (CLRD), is a lung disease that makes it harder to breathe over time as the tubes that carry air into and out of the lungs are partially blocked or damaged. It is a group of diseases and includes emphysema, chronic bronchitis, or a combination of these and can coexist with asthma. The severity of COPD/CLRD can vary, but when severe, it can affect the most basic tasks and daily living. Early detection of COPD/CLRD might alter its course and progress. A simple spirometry test can detect COPD/CLRD before the symptoms become severe (NIH, NHLB).

In the United States, a history of current or former tobacco use is a key factor in the development and progression of COPD/CLRD. Smoking accounts for 8 out of 10 COPD-related deaths. COPD/CLRD is the fourth leading cause of death in the United States and was the fourth leading cause of death in the Capital Region in 2022. It is estimated that there are over 16 million people living with COPD in the United States, with millions more suffering from the disease without a diagnosis. In addition, COPD/CLRD is an important cause of hospitalization in older populations.

Age-Adjusted Percentage of adults with COPD				
County	2016	2018	2021	2021 County Rank
NYS (excl. NYC)	6%	6%	6%	
Capital Region	6%	6%	6%	
Rensselaer	6%	9%	4%	7
Columbia	4%	8%	5%	13
Greene	7%	7%	5%	18
Schenectady	7%	6%	6%	24
Saratoga	5%	5%	6%	30
Albany	7%	6%	6%	32

Based on data from the Behavioral Risk Factor Surveillance System (BRFSS), almost all the Capital Region counties were in the top half of NYS counties for age-adjusted COPD prevalence among adults. In 2021, Albany County had the highest prevalence of COPD, at 6%.



Age-adjusted chronic lower respiratory disease hospitalization rate per 10,000					
County	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	23.7	13.0	14.1	16.0	
Saratoga	16.9	9.3	8.0	9.3	5
Greene	29.5	15.3	15.9	9.7	9
Columbia	34.1	10.2	8.5	10.3	19
Rensselaer	17.3	8.5	9.8	11.4	25
Albany	19.6	13.3	11.1	11.7	27
Schenectady	17.8	8.3	9.8	12.4	31

In 2022, Capital Region counties all had a lower age-adjusted rate of COPD hospitalization than NYS, excluding NYC, and ranked in the top half of NYS counties (SPARCS). Schenectady County had the highest COPD hospitalization rate, while Saratoga County had the lowest. For age-adjusted COPD mortality rate per 10,000, Rensselaer County was the only Capital Region county not ranked in the top half of NYS counties; its latest COPD mortality rate per 10,000 ranked 56<sup>th</sup> out of 62 (NYS Vital Statistics).

Age-adjusted chronic lower respiratory disease mortality rate per 100,000					
County	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	27.7	25.8	22.5	22.8	
Albany	25.9	32.5	25.3	24.9	11
Columbia	38.3	35.9	25.3	29.0	15
Saratoga	40.3	36.1	33.6	31.6	19
Schenectady	33.6	34.3	35.2	32.0	22
Greene	27.9	31.8	25.6	32.3	24
Rensselaer	45.0	43.8	34.4	50.0	56

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## Asthma

### Objectives – New York State Prevention Agenda 2025-2030

- **31.0:** Decrease the asthma emergency department visit rate per 10,000 among children aged 0-17 years from 93.8 to 89.1.
- **31.1:** Decrease the asthma emergency department visit rate per 10,000 among Black, non-Hispanic children aged 0-17 years from 235.9 to 212.3.

### Highlights

- Greene County had the second highest age-adjusted rate in NYS for adults with current asthma in 2021
- Albany and Schenectady counties had the highest rates in the Capital Region for age-adjusted asthma hospitalization and ranked in the bottom half of New York State counties with available data in 2022
- Asthma hospitalization rates in 2020-2022 were highest among Black, non-Hispanic residents in all Capital Region counties.
- Asthma ED visit rates (age 0-17) in the Capital Region were highest in Schenectady, Albany, and Rensselaer counties in 2022

Asthma is a disease that affects the lungs and is characterized by difficulty breathing. In most cases the causes of asthma are unknown. Symptoms of asthma include wheezing, tightness in the chest, breathlessness, and coughing at night or early in the morning. It is one of the most common long-term diseases of children but is prevalent in adults as well. Nationwide, about 4.5 million children, or 6.2% of children, and 22.3 million adults, or 8.7% of adults, are living with asthma (CDC). In New York State, more than 1.5 million adults (10.1%) have current asthma (BRFSS).

An asthma attack is a distressing and potentially life-threatening experience. When an attack occurs, the sides of the airways in the lungs swell, causing the airways to shrink. As a result, less air can move in and out of the lungs. If poorly treated, asthma can lead to persistent hospitalization and possibly death. Triggers for an asthma attack vary from person to person. Some triggers include tobacco smoke, dust mites, outdoor air pollution, cockroach allergens, pets, mold, and smoke from burning wood or grass (CDC).



Age-Adjusted Percentage of adults with current asthma				
County	2016	2018	2021	2021 County Rank
NYS (excl. NYC)	10%	11%	11%	
Capital Region	13%	13%	11%	
Columbia	11%	10%	6%	3
Rensselaer	12%	13%	10%	20
Saratoga	15%	14%	10%	20
Albany	13%	12%	12%	29
Schenectady	11%	16%	14%	46
Greene	12%	14%	19%	61

Adult asthma prevalence varied among the Capital Region counties (BRFSS). Greene County had the second highest NYS County rank of adults with current asthma in 2021, at nearly 1 in 5 adults, while Columbia County had the third lowest rate, at less than 1 in 15 adults.

Age-adjusted asthma hospitalization rate per 10,000					
County	2019	2020	2021	2022	2022 County Rank of (44)
New York State	9.8	5.0	6.6	8.5	
Greene	7.9	2.9	4.8	2.8	6
Saratoga	3.4	2.1	1.9	3.3	11
Columbia	6.2		3.6	3.5	13
Rensselaer	5.0	2.6	2.9	5.0	24
Schenectady	6.2	2.9	4.6	6.3	32
Albany	7.5	4.6	4.5	6.5	34

Severe asthma attacks and complications can lead to hospitalizations. Asthma hospitalizations often indicate a lack of properly managing the condition. A combination of early medical intervention and the avoidance of asthma triggers can help to prevent such severe flare-ups. All Capital Region counties had asthma hospitalization rates below the NYS rate, in part because the NYS rate is skewed high by rates in New York City (NYC) counties (SPARCS). The County Health Indicators Reports (CHIRS) dataset did not have a rate for NYS, excluding NYC. Another caveat was that data was not available for 18 counties, due to small numbers. So, Albany, Schenectady, and Rensselaer counties had age-adjusted asthma hospitalization rates in the bottom half of NYC counties with available data. Greene County had the lowest asthma hospitalization rate in the Capital Region, and ranked 6 out of 44 NYS counties with available data.

Asthma hospitalizations per 10,000 population, age-adjusted, 2020-2022					
County	Non-Hispanic			Hispanic	Total
	White	Black	Asian/Pacific Islander		
NYS (excl. NYC)	2.4	11.9	2.4	5.4	4.2
Albany	2.3	16.5	2.2	6.3	5.2
Columbia	1.7	11.0	0.0		2.8
Greene	2.7	16.3	0.0		3.5
Rensselaer	1.9	14.2		4.3	3.5
Saratoga	2.1	6.2			2.4
Schenectady	2.7	8.7	4.9	6.7	4.6

When breaking down asthma hospitalization rates from 2020-2022 by race/ethnicity, Black non-Hispanic residents had the highest rates in each county and in NYS, excluding NYC, overall (NYS CHIRE). Black non-Hispanic asthma hospitalization rates were around 3.0 to 7.5 times higher than comparable rates for White non-Hispanic residents – some of the largest disparities among hospitalization rates, when comparing by race and ethnicity. Asthma hospitalization rates were not available in all Capital Region counties for non-Hispanic Asian or Pacific Islander and Hispanic residents. Where data was available for Hispanic residents, they had higher asthma hospitalization rates at least twice as high as White non-Hispanic residents.

Asthma emergency department visits, rate per 10,000, aged 0-17 years						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	65.3	57.7	22.4	37.0	57.4	
Capital Region	56.5	51.8	24.4	34.6	58.2	
Saratoga	20.0	21.3	11.1	10.7	30.3	2
Greene	63.1	59.2	19.3	31.9	48.3	31
Columbia	53.4	40.8	17.5	35.7	48.5	32
Rensselaer	52.8	43.1	23.5	28.8	63.6	48
Albany	78.9	81.0	37.0	46.9	71.9	50
Schenectady	71.7	54.1	25.6	51.5	73.1	51

In 2022, asthma emergency department visits among children age 17 years and younger were relatively high in Schenectady, Albany, and Rensselaer counties, with ranks around 50 out of 62 NYS counties (SPARCS). Saratoga County, however, had the second lowest rate in NYS. Greene and Columbia counties had rates below NYS, excluding NYC.





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## Diabetes

### Objectives – New York State Prevention Agenda 2025-2030

- **30.0:** Increase the percentage of adults aged 35+ who had a test for high blood sugar in the past year from 78.1% to 82.4%.
- **30.1:** Increase the percentage of younger adults aged 35-44 who had a test for high blood sugar in the past year from 62.4% to 65.5%.

### Highlights

- Columbia County had the highest age-adjusted prevalence in the Capital Region in 2021 of adults with health care provider-diagnosed diabetes
- Columbia County had the lowest age-adjusted percent in NYS of adults having had a test for high blood sugar in the past three years, at just 38% in 2021
- Greene and Albany counties had the highest age-adjusted rates in the Capital Region for diabetes mortality in 2022
- Schenectady County was in the bottom half of NYS counties for rate of potentially preventable diabetes short-term complications hospitalizations, among adults 18 and over, in 2021
- Black non-Hispanic Capital Region residents had diabetes hospitalization rates 2.4 to 4.4 times higher than rates for White non-Hispanic residents, in each Capital Region county in 2020-2022

Diabetes is a group of diseases marked by high levels of blood glucose resulting from defects in insulin production, insulin action, or both. There are two major types of diabetes: type 1 and type 2. Type 2 diabetes accounts for about 90% to 95% of all diagnosed cases of diabetes. It was formerly called “adult-onset” diabetes, but has become more frequently diagnoses among children, a concerning trend. About 1 in 10 people in the US have diabetes. In 2021, the total cost of diagnosed diabetes in the U.S. was estimated to be a total of \$413 billion yearly, up from \$82 billion 2012 (American Diabetes Association). Medical costs for people with diabetes are 2.6 times higher than those without. Diabetics can reduce their chances of future health complications and subsequent healthcare costs, with lifestyle changes like diet, exercise, and regular blood glucose monitoring.



Age-Adjusted Percentage of adults with health care provider diagnosed diabetes				
County	2016	2018	2021	2021 County Rank
NYS (excl. NYC)	9%	9%	9%	
Capital Region	8%	9%	9%	
Saratoga	7%	9%	6%	1
Albany	9%	8%	9%	15
Rensselaer	7%	10%	9%	17
Schenectady	9%	10%	9%	27
Greene	6%	13%	10%	31
Columbia	4%	8%	10%	33

Almost every Capital Region county was in the top half of NYS counties for age-adjusted prevalence of health care provider-diagnosed diabetes (BRFSS). In 2021, Columbia County had the highest prevalence of health care provider-diagnosed diabetes in the Capital Region, with about 1 in 10 adults being diabetic, while Saratoga County had the lowest health care provider-diagnosed diabetes prevalence, with about 1 in 15 adults.

Age-Adjusted Percentage of adults who had a test for high blood sugar or diabetes within the past three years				
County	2016	2018	2021	2021 County Rank
NYS (excl. NYC)	57%	48%	49%	
Capital Region	58%	48%	47%	
Greene	56%	56%	55%	7
Saratoga	58%	46%	48%	33
Albany	59%	44%	47%	38
Schenectady	55%	52%	46%	44
Rensselaer	58%	50%	42%	54
Columbia	50%	50%	38%	61

Columbia County had the lowest age-adjusted percent in NYS of adults having a test for high blood sugar in the past three years (in 2021), at 38% (BRFSS). One NYS county did not have data available for 2021. More than half of Greene County adults had had a blood sugar test in the past year, placing Green County in the top 10 2021 rank of NYS counties.

Age-adjusted diabetes hospitalization rate per 10,000 (primary diagnosis)						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	19.1	19.6	17.4	17.8	17.7	
Saratoga	11.0	11.4	9.3	9.8	10.0	5
Albany	18.1	16.8	14.6	14.1	13.8	16
Schenectady	19.6	18.3	15.9	15.0	14.2	17
Columbia	14.7	16.1	15.1	16.5	15.2	27
Rensselaer	18.9	17.8	15.4	16.4	15.3	29
Greene	15.5	21.7	20.5	17.0	15.8	31

Capital Region counties had favorable rates for age-adjusted diabetes hospitalizations, where diabetes was the primary diagnosis (i.e. the main reason for hospitalization), with each county being in the top half of ranked NYS counties in 2022 (SPARCS).

Potentially preventable diabetes short-term complications hospitalization rate per 10,000 - Aged 18 years and older						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	7.1	7.0	7.1	6.9	6.9	
Saratoga	4.8	4.3	4.0	4.4	4.7	12
Albany	7.1	6.0	5.6	5.9	4.8	14
Greene	6.1	8.8	7.3	6.2	6.0	20
Rensselaer	9.1	8.1	6.2	8.2	6.0	20
Columbia	4.8	5.6	6.5	9.8	6.2	25
Schenectady	10.2	8.3	6.7	5.7	7.3	39

Short-term complications of diabetes are a result of extreme fluctuation in blood sugar levels. They include hypoglycemia (low blood sugar), hyperglycemia (high blood sugar), diabetic ketoacidosis (high blood sugar with ketones), hyperglycemic hyperosmolar non-kenotic syndrome (high blood sugar without ketones) (UPMC). In 2022, Schenectady County was the only Capital Region county not in the top half of NYS counties ranked for their rate of potentially preventable hospitalizations due to short-term complications, among residents aged 18 years and older (SPARCS). Schenectady County also was alone in having a higher diabetes short-term diabetes hospitalization rate than NYS, excluding NYC.



Diabetes (primary diagnosis) hospitalizations per 10,000 population, age-adjusted, 2020-2022					
County	Non-Hispanic			Hispanic	Total
	White	Black	Asian/Pacific Islander		
NYS (excl. NYC)	12.3	38.4	5.0	16.4	15.7
Albany	9.8	38.5	3.1	14.8	14.2
Columbia	12.5	55.3		6.6	15.6
Greene	16.5	37.5	0.0	15.2	17.8
Rensselaer	13.1	36.6		25.4	15.7
Saratoga	9.5	25.1			9.7
Schenectady	11.7	27.8	16.4	13.8	15.0

In each Capital Region county, and in NYS (excluding NYC), Black non-Hispanic Capital Region residents had diabetes hospitalization rates 2.4 to 4.4 times higher than rates for White non-Hispanic residents in 2022 (NYS CHIRE). Diabetes hospitalization rates among Hispanic residents were closer to rates among White non-Hispanic residents, with rate ratios ranging from 0.9 to 1.9. Asian or Pacific Islander rates were unavailable in most counties.

Age-adjusted diabetes mortality rate per 100,000						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	18.0	18.1	21.6	18.7	18.3	
Saratoga	14.5	17.6	19.1	22.2	14.1	7
Rensselaer	14.6	21.8	26.1	18.6	23.5	26
Schenectady	26.0	21.0	30.7	37.1	24.9	31
Columbia	18.8	20.5	27.4	26.9	25.8	36
Albany	22.4	15.9	19.5	19.8	27.8	40
Greene	13.4		17.3	28.5	28.3	42

In 2022, Greene, Albany, and Columbia counties had the highest age-adjusted diabetes mortality rates in the Capital Region, while Saratoga County had the lowest diabetes mortality rate in the Capital Region, which was half as high as Greene County’s diabetes mortality rate (SPARCS).

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## Cardiovascular Disease

### Objectives – New York State Prevention Agenda 2025-2030

- **32.0:** Increase the percentage of adults 18 years of age and older with hypertension who are currently taking medication to manage their high blood pressure from 77.0% to 81.7%.
- **32.1:** Increase the percentage of adult Medicaid members 18 years of age and older with hypertension who are currently taking medication to manage their high blood pressure from 66.9% to 75.5%.

### Highlights

- In 2021, Rensselaer County had the lowest percentage in the Capital Region of adults with hypertension in currently taking medicine to manage their high blood pressure
- In 2022, Schenectady County had the Capital Region’s highest heart attack hospitalization age-adjusted rate
- In 2022, Rensselaer County had the Capital Region’s highest coronary heart disease hospitalization rate
- For 2022, in the Capital Region counties, coronary heart disease hospitalization age-adjusted rates were generally highest among Black non-Hispanic residents
- In 2022, Capital Region counties ranked in the top half of NYS counties for congestive heart failure mortality rate
- In 2022, Schenectady, Albany, and Rensselaer counties had the highest stroke hospitalization age-adjusted rates in the Capital Region
- In 2022, Saratoga County had the highest stroke mortality age-adjusted rate in the Capital Region
- In Rensselaer County, the cerebrovascular disease (stroke) mortality among Black non-Hispanic residents was the highest in the Capital Region and 2.5 times higher than the rate for White non-Hispanics in 2020-2022

Cardiovascular disease refers to a group of diseases that affect the heart and the circulatory system. In 2023, almost 920,000 Americans died from cardiovascular disease, which accounted for 1 in every 3 deaths. Risk factors for cardiovascular disease include high blood pressure, high low-density lipoprotein (LDL), cholesterol, and smoking, of which 49% of Americans live with at least one of the three (CDC). More than one third of the population live with some form of cardiovascular disease. Heart disease was the leading cause of death in the Capital Region in 2022, responsible for 22.5% of all deaths (NYSDOH). In New York State, cardiovascular disease was responsible for 27% of statewide mortality.





In 2021, less than 3 in 4 adults with hypertension in Rensselaer County were taking medicine at the time to manage their high blood pressure (BRFSS). Rensselaer County had the lowest percentage of hypertensive adults taking medicine in the Capital Region and ranked in the bottom 10 of NYS counties. Saratoga County, on the other hand, had the highest percentage of hypertensive adults taking medicine in NYS.

Percentage of adults with hypertension who are currently taking medicine to manage their high blood pressure			
County	2018	2021	2021 County Rank
NYS (excl. NYC)	77.6	81.2	
Capital Region	73.3	81.8	
Saratoga	71.9	89.8	1
Columbia	83.8	83.1	17
Schenectady	71.6	82.7	18
Albany	71.3	79.3	36
Greene	72.3	75.3	50
Rensselaer	76.8	73.5	57

## Heart Attack and Coronary Heart Disease

Heart disease is the leading cause of death both in the United States and in New York State. Coronary heart disease is a disorder that affects coronary arteries (blood vessels that supply blood to the heart) and the heart muscle (CDC). A serious consequence of coronary heart disease is a heart attack, which occurs when the supply of blood to the heart is greatly reduced or stopped due to blockage in a coronary artery and the heart muscle is damaged. In the U.S., in 2023, over 450,000 (14.6% of) death certificates mentioned heart failure (CDC). Approximately every 40 seconds, an American will suffer a heart attack.

Age-adjusted heart attack hospitalization rate per 10,000						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	13.4	13.4	10.9	11.1	10.7	
Saratoga	12.0	12.6	9.9	11.2	9.9	14
Albany	11.3	13.6	10.3	10.3	11.6	23
Greene	12.3	14.0	13.5	11.7	12.0	26
Columbia	11.3	13.1	12.2	10.0	12.1	27
Rensselaer	11.3	12.8	9.1	14.0	14.6	40
Schenectady	15.4	16.2	14.7	14.3	15.3	48

Schenectady County had the highest heart attack hospitalization rate in the Capital Region in 2022, followed by Rensselaer County (SPARCS). Other Capital Region counties were favorably ranked in the top half of NYS counties.





Age-adjusted coronary heart disease hospitalization rate per 10,000						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	24.8	25.2	19.5	20.2	19.5	
Saratoga	19.3	20.7	15.8	17.7	15.1	12
Albany	17.5	20.0	17.7	15.9	17.0	21
Columbia	16.7	20.4	18.5	16.9	17.9	24
Greene	19.8	22.8	22.0	20.2	18.3	26
Schenectady	22.4	24.6	20.7	20.9	20.6	38
Rensselaer	17.6	20.3	15.6	21.4	21.1	40

Rensselaer County had the highest coronary heart disease hospitalization rate in the Capital Region in 2022, followed by Schenectady County (SPARCS). Other Capital Region counties were ranked favorably in the top half of NYS counties.

Age-adjusted coronary heart disease mortality rate per 100,000						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	132.0	130.0	149.0	123.5	122.7	
Saratoga	82.4	90.1	90.1	90.0	96.1	11
Albany	88.6	95.6	121.6	112.0	100.5	16
Rensselaer	98.7	102.4	116.2	107.4	101.6	19
Columbia	118.6	107.2	128.6	122.8	103.2	22
Schenectady	104.6	86.3	103.4	94.9	107.2	25
Greene	139.4	145.1	140.5	166.7	117.9	31

Capital Region counties ranked slightly better for rates of coronary heart disease mortality than NYS, excluding NYC (SPARCS). Each Capital Region county was ranked favorably in the top half of NYS counties. Greene County had the highest Capital Region coronary heart disease mortality rate in 2022, although it was still lower than the rate for NYS, excluding NYC, and had decreased by almost 30% from 2021.

Coronary heart disease mortality per 100,000 population, age-adjusted, 2020-2022					
County	Non-Hispanic			Hispanic	Total
	White	Black	Asian/Pacific Islander		
NYS (excl. NYC)	117.9	146.9	70.3	83.9	117.7
Albany	106.5	178.4	73.0	55.2	111.2
Columbia	118.2	183.2	42.8	51.8	117.5
Greene	141.8	194.0	0.0	135.3	141.3
Rensselaer	106.3	136.6	61.0	118.8	108.0
Saratoga	94.2	89.2	32.1	26.6	91.8
Schenectady	95.9	133.1	69.4	82.7	101.6

When comparing Capital Region coronary heart disease mortality rates by race/ethnicity from 2020-2022, rates for Black non-Hispanic residents were higher than rates for White non-Hispanic residents in all but Saratoga County (NYS CHIRE).

## Congestive Heart Failure

Congestive heart failure is a disorder where the heart loses its ability to pump blood efficiently, causing fatigue and shortness of breath. The most common risk factors of congestive heart failure are coronary artery disease, high blood pressure, obesity, and diabetes (CDC).

Age-adjusted congestive heart failure mortality rate per 100,000						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	11.1	10.8	10.1	11.2	11.3	
Saratoga	11.8	13.0	8.3	11.4	9.4	8
Columbia	18.2			15.3	10.5	10
Greene	19.0	12.2	19.5		12.0	15
Rensselaer	18.6	18.8	12.8	15.3	15.2	23
Albany	15.6	20.8	11.9	16.4	16.9	26
Schenectady	13.2	15.7	13.2	19.2	17.3	29

Each Capital Region county was ranked favorably in the top half of NYS counties for congestive heart failure mortality rates in 2022 (SPARCS). Of the Capital Region counties, Schenectady County had the highest rate of congestive heart failure mortality. Saratoga and Columbia counties were the only Capital Region counties with a lower congestive heart failure mortality rate than NYS, excluding NYC.



## Cerebrovascular Disease

Cerebrovascular disease, or stroke, is the sixth leading cause of death in the Capital Region and is a major cause of adult disability. According to the Centers for Disease Control and Prevention (CDC), each year 1 in 6 deaths are due to stroke. In the United States, someone has a stroke every forty seconds and dies from a stroke every three minutes and fourteen seconds (CDC).

Stroke occurs when a blood vessel, which brings oxygen and nutrients to the brain, bursts or is blocked by a blood clot or some other particle. With this rupture or blockage, part of the brain does not get the blood and oxygen it needs (CDC). Deprived of oxygen, nerve cells in the affected area of the brain die within minutes. A stroke can be fatal or result in serious long-term disability. Stroke costs the nation about \$56 billion annually including health care and medication costs, as well as lost productivity. Some risk factors for stroke are uncontrollable, such as heredity, age, gender, and ethnicity. Other conditions such as high blood pressure, high cholesterol, heart disease, diabetes, smoking, being overweight or obese, and previous stroke or transient ischemic attack, can increase your risk of stroke(CDC).

Age-adjusted cerebrovascular disease (stroke) hospitalization rate per 10,000						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	21.3	21.8	19.6	20.0	19.9	
Columbia	17.8	16.4	14.4	16.8	14.0	10
Saratoga	20.1	19.4	18.4	17.2	16.9	19
Greene	20.9	23.0	21.6	21.8	18.6	30
Rensselaer	20.9	20.1	22.7	22.2	22.4	49
Albany	22.8	23.2	23.2	20.5	24.3	56
Schenectady	27.2	28.7	24.2	28.8	24.8	57

For 2022, Schenectady, Albany, and Rensselaer counties had the highest stroke hospitalization age-adjusted rates in the Capital Region; Schenectady and Albany counties ranked in the bottom 10 NYS counties for stroke hospitalization age-adjusted rates (SPARCS). Columbia County had the lowest stroke hospitalization age-adjusted rate and ranked 10<sup>th</sup> among NYS counties.

Age-adjusted cerebrovascular disease (stroke) mortality rate per 100,000						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	24.1	23.9	25.1	25.7	25.1	
Albany	27.5	20.5	28.4	24.4	23.7	17
Columbia	24.1	15.4	18.7	27.4	25.5	24
Greene	16.2	28.9	20.0	23.8	25.6	26
Schenectady	30.4	30.9	28.5	35.1	27.3	29
Rensselaer	27.5	23.6	25.0	27.2	28.2	31
Saratoga	30.5	27.0	22.6	32.0	29.3	34

For stroke mortality, the Capital Region counties ranked roughly in the middle of the 62 NYS counties in 2022 (SPARCS). Saratoga County had the highest stroke mortality age-adjusted rate in the Capital Region, while Albany County was the only county with a rate lower than NYS, excluding NYC, in 2022.

Cerebrovascular disease (stroke) mortality per 100,000 population, age-adjusted, 2020-2022					
County	Non-Hispanic			Hispanic	Total
	White	Black	Asian/Pacific Islander		
NYS (excl. NYC)	26.7	39.5	21.3	23.3	27.6
Albany	23.1	47.8	18.9	23.5	25.5
Columbia	23.0	21.8	0.0	34.1	23.8
Greene	24.0	20.3	0.0	0.0	23.1
Rensselaer	25.4	64.3	30.5	18.7	26.8
Saratoga	28.5	28.3	6.9	13.3	27.9
Schenectady	27.3	39.6	29.3	30.4	30.2

When comparing cerebrovascular disease (stroke) mortality by race/ethnicity for 2020-2022, the rate among Black non-Hispanic residents in Rensselaer County was the highest in the Capital Region, about 34% higher than the next highest race/ethnicity rate in the Capital Region, and 2.5 times higher than the rate for White non-Hispanic residents in the county (NYS CHIRE). The Black non-Hispanic stroke mortality rate was 2.1 times higher than the White non-Hispanic rate in Albany County, and 1.5 times higher in Schenectady County. In Columbia County, the stroke mortality rate for Hispanic residents was 1.5 times higher than the White non-Hispanic rate.



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## Cancer

### Objectives – New York State Prevention Agenda 2025-2030

- **33.0:** Increase the percentage of adults aged 45 to 75 years who are up to date on their colorectal cancer screening based on the most recent guidelines from 71.6% to 80.0%.
- **33.1:** Increase the percentage of adults aged 45 to 54 years who are up to date on their colorectal cancer screening based on the most recent guidelines from 54.7% to 62.2%.

### Highlights

- Greene County had the lowest breast cancer screening rate in the Capital Region; one of the lowest in NYS
- Two Capital Region counties ranked in the bottom 10 of NYS counties for both late-state and overall breast cancer incidence:
  - Rensselaer County had the highest rates in the Capital Region for late-stage and overall breast cancer incidence
  - Saratoga County had the second highest rate in the Capital Region for breast cancer incidence, overall
  - Greene County had the second highest rate in the Capital Region for breast cancer late-state incidence
- Greene County had the 5<sup>th</sup> highest breast cancer mortality rate among NYS counties with available data
  - Schenectady County ranked in the bottom 10 NYS counties for breast cancer mortality
- Columbia County had the lowest rate in the Capital Region for cervical cancer screening, and ranked in the bottom 10 NYS counties
- Most Capital Region counties ranked in the top half of NYS counties for colorectal cancer screening
- Greene County had the highest rate in the Capital Region for both colorectal cancer incidence and mortality
- Columbia County ranked in the bottom 10 NYS counties for prostate cancer incidence
- Rensselaer and Greene counties had the 5<sup>th</sup> and 6<sup>th</sup> highest lung cancer incidence rates in NYS
- Greene County ranked in the bottom 10 NYS counties for lung cancer mortality





Cancer is a disease in which abnormal cells in the body grow out of control (NYSDOH). It can be caused by various factors, such as genetics, lifestyle, and the environment. Cancer is the second leading cause of death in New York State, as well as in the Capital Region (NYSDOH Leading Causes of Death). Each year, more than 118,000 New Yorkers are diagnosed with cancer and over 32,000 New Yorkers die from malignant cancers each year (NYSDOH Cancer Registry). Lung, colorectal, breast and prostate cancers account for most cancers in New York State.

Many cancer deaths are preventable through early detection (NYSDOH). For several types of cancer, detection at an early stage significantly increases the options for treatment and its overall success. “Early stage” is defined as identifying invasive cancers before they have spread from the tissue of origin (Cleveland Clinic). Cancer screening helps to identify cancers at an early stage before the onset of clinical symptoms.

In general, gender and race are important factors in the frequency of different types of cancers. At all ages, women have lower cancer incidence and mortality rates than men in the same age group. This gender difference has remained stable over time in New York State (NYSDOH Cancer Registry).

## Female Breast Cancer

Breast cancer is the second leading cause of cancer death among women in the United States, exceeded only by lung cancer. All women are at risk for breast cancer. Men can also get breast cancer, but it is uncommon. In New York State, about 17,250 women are diagnosed with breast cancer, each year, and 2,250 die due to it (NYSDOH Cancer Registry).

Risk factors that can potentially be controlled include obesity after menopause, heavy consumption of alcohol and, possibly, high-fat diets and lack of exercise (American Cancer Society). Reproductive factors, including having a first child after age 30 and never having children, increase the risk of breast cancer.

In 2018-2022, female breast cancer was most often diagnosed among women aged 65 to 74 years, although some women receive a diagnosis in their 20s or 30s (NIH, National Cancer Institute). Screening for breast cancer allows early identification and treatment and is the primary way of reducing mortality. It is recommended that all women perform monthly self-breast exams and have routine clinical breast exams. The most recent screening guidelines from the U.S. Preventive Services Task Force (2024) recommend women between the ages of 40 and 74 receive a screening mammogram every two years. Their recommendation report was released in 2024, and prior to then, the recommendation was for women aged 50 to 74 years. Women at a higher risk of breast cancer may need to begin screening earlier.

Percentage of women aged 50-74 years receiving breast cancer screening based on recent guidelines				
County	2016	2018	2021	2021 County Rank
NYS (excl. NYC)	79%	81%	79%	
Capital Region	80%	85%	80%	
Saratoga	78%	88%	92%	1
Columbia	82%	88%	82%	17
Rensselaer	77%	83%	81%	18
Albany	84%	85%	75%	45
Schenectady	79%	80%	75%	48
Greene	81%	76%	70%	59

In 2021, when the breast cancer screening recommendations were still for women aged 50 to 74 years, 80% of women aged 50-74 years in the Capital Region reported having had a mammogram based on those guidelines (BRFSS). Greene County had the lowest percentage in the Capital Region and one of the lowest percentages in NYS. Schenectady and Albany counties also had low percentages of women meeting the breast cancer screening recommendations at the time. Saratoga County, however, had the highest percentage in NYS, with more than 9 in 10 women meeting the screening recommendations at the time.

Age-adjusted female breast cancer incidence rate per 100,000						
County	2017	2018	2019	2020	2021	2021 County Rank
NYS (excl. NYC)	135.6	136.6	139.5	122.5	140.7	
Greene	114.7	118.1	172.2	158.2	109.8	10
Columbia	133.7	116.5	165.0	129.2	139.5	35
Schenectady	134.8	143.9	138.5	137.5	152.4	48
Albany	153.7	142.1	165.0	125.9	152.5	49
Saratoga	140.5	143.2	156.9	138.8	165.3	55
Rensselaer	128.8	121.1	132.1	119.5	166.8	56

The fatality of breast cancer is influenced by the stage of the disease at diagnosis. Early detection of breast cancer plays a significant role in the reduction of breast cancer mortality. In 2015-2021, when breast cancer was diagnosed at an early, or localized, stage, 98.8% of women in NYS survived for at least five years (NYS Cancer Registry). Late-stage diagnosed women in NYS only had a 31.8% 5-year survival rate.



Age-adjusted female breast cancer late stage incidence rate per 100,000						
County	2015-2017	2016-2018	2017-2019	2018-2020	2019-2021	2019-2021 County Rank
Columbia	51.4	47.5	45.9	45.3	37.8	25
Schenectady	52.8	43.6	38.1	36.9	41.7	39
Albany	46.0	41.7	42.0	41.1	41.9	41
Saratoga	44.7	42.2	44.1	39.2	42.6	44
Greene	46.0	34.0	28.1	41.0	45.8	53
Rensselaer	39.3	35.9	34.5	36.9	45.9	54

From 2018 to 2022, each year more than 900 women in the Capital Region were diagnosed with female breast cancer (NYS Cancer Registry). From 2019 to 2021, Rensselaer County had the highest incidence rates for both late-stage breast cancer, and breast cancer at any stage (NYS Cancer Registry). Saratoga County had the second highest incidence rate for any stage breast cancer, while Greene County had second highest incidence rate for late-stage breast cancer. For both breast cancer incidences, most of the Capital Region counties ranked in the bottom half of NYS counties.

Age-adjusted female breast cancer mortality rate per 100,000						
County	2015-2017	2016-2018	2017-2019	2018-2020	2019-2021	2019-2021 County Rank (of 54)
Columbia	13.6	14.1	17.3	14.8	15.2	10
Saratoga	17.0	17.9	17.4	17.6	17.0	26
Albany	20.6	20.8	19.7	19.0	17.1	27
Rensselaer	22.0	21.2	21.3	18.5	18.9	38
Schenectady	19.2	19.1	18.0	21.1	21.6	47
Greene		24.9	29.5	30.9	22.1	50

Greene County had the highest rate in the Capital Region for breast cancer mortality, from 2019 to 2021, and had the 5<sup>th</sup> worst rate among NYS counties with available data (NYS Cancer Registry). Greene County did, however, have a significant drop in their rate from 2018-2022 to 2019-2021. In Albany County, the female breast cancer mortality rate was 2.2 times higher among Black non-Hispanic residents than White non-Hispanic residents. Rates by race and ethnicity were not available for other counties.



## Cervical Cancer

Cervical cancer is preventable with proper screening tests and human papillomavirus (HPV) vaccination. Almost all cervical cancers are caused by (HPV), a common sexually transmitted infection (CDC). Cervical cancer risk factors include smoking and HIV (CDC). When found at an early stage, cervical cancer is highly treatable. In the United States, approximately 13,000 women are diagnosed with cervical cancer, and 4,000 women die from the disease each year (CDC). In New York State, from 2019 to 2021, there were 677 cervical cancer diagnoses and 213 deaths each year due to cervical cancer (NYS Cancer Registry).

The Pap test (or Pap smear) is an effective screening test that can detect cervical cell abnormalities that, without treatment, could lead to cancer. In New York State, the cervical screening recommendation is for women to start receiving Pap tests at the age of 21 and have them every 3 years, more frequently if there is an abnormal finding, and Pap tests and HPV tests every five years between the ages of 30 and 65, even if they are not having sex or had the HPV vaccine (NYSDOH).

In 2018, Saratoga County had the highest percentage of women aged 21 to 65 years getting regular Pap tests according to New York State guidelines (BRFSS). Columbia County had the lowest rate in the Capital Region, with only 4 in 5 women following the latest guidelines for cervical cancer screening, at the time. More recent data from the Behavioral Risk Factor Surveillance System was not available.

Percentage of women aged 21-65 years receiving cervical cancer screening based on recent guidelines		
County	2018	2018 County Rank
NYS (excl. NYC)	84%	
Capital Region	81%	
Saratoga	96%	1
Rensselaer	90%	16
Albany	89%	24
Schenectady	88%	28
Greene	85%	41
Columbia	80%	57

Schenectady and Albany counties had highest incidence rates in the Capital Region for cervical cancer from 2018 to 2022, followed by Rensselaer County (NYS Cancer Registry). Saratoga County had the lowest rate in the Capital Region. Data was not available for Columbia and Greene counties.

Cervical Cancer Incidence, 2018-2022	
County	Rate
NYS (excl. NYC)	6.4
Schenectady	7.6
Albany	7.5
Rensselaer	7.2
Saratoga	4.2
Columbia	
Greene	



## Colorectal Cancer

Colorectal cancer is the third most common cancer in men and women. It is also the second leading cause of death from cancers that affect both men and women (NYS Leading Causes of Death). From 2019 to 2021, each year, about 8,700 adults in New York State were diagnosed with colorectal cancer (NYS CHIRS). Lifestyle factors that contribute to increased risk of colorectal cancer include lack of regular physical activity, low fruit and vegetable intake, a low-fiber and high-fat diet, excess body weight, alcohol consumption and tobacco use. Routine screening can reduce colorectal cancer deaths by at least 60%. Colorectal cancer screening is recommended for men and women aged 50–75 using high-sensitivity fecal occult blood testing (FOBT), sigmoidoscopy, or colonoscopy. From 2015-2021, when colorectal cancer was diagnosed in NYS in its earliest stage, 88.8% of individuals live five years after diagnosis. In comparison, for late-stage diagnosis the five-year survival rate dramatically decreases to 15.4% (NYS Cancer Registry). From 2018 to 2022, approximately 150 men and women die due to colorectal cancer each year in the Capital Region (NYS Vital Statistics).

Percentage of adults who receive a colorectal cancer screening based on the most recent guidelines, aged 50-64 years			
County	2016	2018	2018 County Rank
NYS (excl. NYC)	63.7	66.5	
Capital Region	72.5	70.0	
Saratoga	70.6	76.8	6
Rensselaer	73.1	75.4	9
Greene	64.0	72.9	16
Schenectady	73.7	68.9	28
Columbia	65.9	68.6	31
Albany	76.2	68.1	34

In 2018, each of the Capital Region counties had a higher percentage than NYS, excluding NYC, of adults aged 50 to 64 years receiving a colorectal cancer screening based on the most recent guidelines at the time (BRFSS). Saratoga County had the highest percentage, and along with Rensselaer County, had about 3 in 4 of its residents aged 50 to 64 receiving a colorectal screening. Albany County had the lowest percentage, with about 2 in 3 of its residents aged 50 to 64 receiving a colorectal screening.

Age-adjusted colon and rectum cancer incidence rate per 100,000						
County	2015-2017	2016-2018	2017-2019	2018-2020	2019-2021	2019-2021 County Rank
Rensselaer	38.5	40.8	36.6	35.8	30.8	8
Schenectady	35.8	35.8	34.6	32.4	32.0	10
Saratoga	37.5	38.7	39.9	37.3	36.9	30
Albany	37.4	35.0	35.5	38.3	38.4	36
Columbia	39.1	35.1	33.6	31.4	39.0	39
Greene	47.2	42.3	45.0	42.6	45.8	57

Age-adjusted colon and rectum cancer mortality rate per 100,000						
County	2015-2017	2016-2018	2017-2019	2018-2020	2019-2021	2019-2021 County Rank
Schenectady	9.5	8.8	8.7	8.5	8.7	4
Rensselaer	13.1	10.3	10.3	9.3	9.8	12
Albany	12.6	11.0	9.9	9.4	10.9	20
Saratoga	13.5	14.0	13.7	12.3	11.4	23
Columbia	16.9	16.1	14.0	10.7	12.0	29
Greene	14.8	11.3	9.9	11.0	14.2	46

Greene County had the highest age-adjusted colorectal cancer incidence in the Capital Region from 2015-2017 to 2019-2021, and ranked in the bottom five NYS counties for their latest available age-adjusted colorectal cancer incidence rate, from 2019 to 2021 (NYS Cancer Registry). Greene County also had the highest colorectal cancer mortality rate in the Capital Region from 2019 to 2021 (NYS Cancer Registry). Columbia County had the second highest colorectal cancer incidence and mortality rates in the in the Capital Region from 2019 to 2021; Rensselaer and Schenectady counties had the two lowest colorectal cancer incidence and mortality rates in the Capital Region.

## Prostate Cancer

Prostate cancer is the most common form of cancer in men and the second leading cause of cancer mortality in men. In New York State, around 16,600 men are diagnosed with prostate cancer annually and there are about 1,600 deaths due to prostate cancer each year (NYS Cancer Registry). The causes and risk factors for prostate cancer are not well understood. The chance of having prostate cancer greatly increases after age 50. Black men are more likely to have prostate cancer, be diagnosed at a late state, have an advanced stage of prostate cancer when its diagnosed, and die of prostate cancer as White males (CDC). A family history of prostate cancer also increases the risk of getting the disease (American Cancer Society).



Age-adjusted prostate cancer incidence rate per 100,000						
County	2015-2017	2016-2018	2017-2019	2018-2020	2019-2021	2019-2021 County Rank
Greene	88.7	89.6	95.8	99.1	104.7	11
Rensselaer	113.9	112.7	118.4	120.0	118.3	19
Saratoga	121.2	129.8	127.2	125.4	122.4	24
Columbia	100.5	120.1	124.4	123.0	123.0	25
Albany	118.9	126.2	135.5	138.6	129.7	34
Schenectady	105.4	118.8	121.3	132.8	131.6	36

The Capital Region averaged almost 900 cases of prostate cancer annually, from 2018 to 2022 (NYS Cancer Registry). The Capital Region had counties mostly ranked in the top half, or near the middle, of NYS counties for 2019-2021, for prostate cancer incidence at any stage (NYS Cancer Registry).

Age-adjusted prostate cancer late stage incidence rate per 100,000						
County	2015-2017	2016-2018	2017-2019	2018-2020	2019-2021	2019-2021 County Rank
Greene	20.3	17.7	19.1	21.6	25.0	25
Rensselaer	22.3	25.9	25.4	24.1	26.3	29
Schenectady	22.8	23.9	25.6	28.5	28.5	38
Albany	26.2	28.4	29.7	30.9	29.8	41
Saratoga	24.9	29.4	28.2	28.8	30.8	45
Columbia	18.9	26.8	34.0	37.8	39.1	54

For late-stage prostate cancer, however, the Capital Region’s counties ranked further down the list, with four of the six counties ranking in the bottom half of NYS counties in 2019-2021 (NYS Cancer Registry). Schenectady and Albany counties had the highest prostate cancer incidence at any stage of the disease, while Columbia County had the highest rate of late-stage incidence and ranked 54<sup>th</sup> out of 60 NYS counties with available 2019-2021 data.

Age-adjusted prostate cancer mortality rate per 100,000						
County	2015-2017	2016-2018	2017-2019	2018-2020	2019-2021	2019-2021 County Rank
Columbia	17.8	13.8			11.8	2
Rensselaer	17.8	14.3	10.1	9.8	12.1	4
Albany	20.1	20.5	19.8	15.5	15.6	21
Greene			14.1	17.7	17.1	27
Saratoga	16.8	18.7	19.6	18.3	18.2	36
Schenectady	19.4	20.0	15.4	16.6	19.1	38

Schenectady and Saratoga counties had the highest prostate cancer mortality rates in the Capital Region, for 2019 to 2021 (NYS Cancer Registry). The other regional counties ranked in the top half of NYS counties for their prostate cancer mortality rates, with Columbia and Rensselaer counties both ranking in the top five of NYS counties.

## Lung Cancer

Lung cancer continues to be a serious public health concern. It is the leading cause of cancer death among men and women, and the most diagnosed cancer in New York State. In the Capital Region, there was an average of almost 950 lung cancer cases from 2019 to 2021, and almost 500 deaths per year from 2018 to 2022 (NYS Vital Statistics).

Age-adjusted lung and bronchus cancer incidence rate per 100,000						
County	2015-2017	2016-2018	2017-2019	2018-2020	2019-2021	2019-2021 County Rank
Saratoga	71.8	69.1	66.9	64.1	58.3	20
Columbia	66.9	66.2	71.3	68.4	65.6	35
Schenectady	72.4	69.2	69.8	66.8	67.1	39
Albany	74.0	69.1	70.1	67.6	67.2	40
Greene	80.5	78.0	80.8	75.9	78.3	57
Rensselaer	80.1	78.7	81.4	78.2	78.9	58

Rensselaer and Greene counties had the highest lung cancer incidence rates in the Capital Region and had the 5<sup>th</sup> and 6<sup>th</sup> highest rates in NYS (NYS Cancer Registry). For the 2019-2021 period, Albany, Schenectady, and Columbia counties also ranked in the bottom half of NYS counties, while Saratoga County had the lowest rate of lung cancer incidence in the Capital Region, and ranked 20<sup>th</sup> out of 62 NYS counties.

Age-adjusted lung and bronchus cancer mortality rate per 100,000						
County	2015-2017	2016-2018	2017-2019	2018-2020	2019-2021	2019-2021 County Rank
Albany	42.0	40.9	38.5	35.5	31.8	18
Columbia	34.2	35.2	35.8	36.5	32.0	20
Saratoga	42.6	42.2	37.9	37.6	33.2	22
Schenectady	39.0	42.3	41.1	40.3	35.0	31
Rensselaer	45.1	45.9	43.0	40.2	38.6	41
Greene	50.8	40.9	40.2	37.6	44.2	54

Greene County also had a high rate of lung cancer mortality from 2019 to 2021, the highest rate of lung cancer mortality in the Capital Region and ranked in the bottom 10 NYS counties (NYS Cancer Registry). Albany County had the lowest lung cancer mortality rate in the Capital Region, followed by Columbia and Saratoga counties.



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# VI. Healthy and Safe Environment



## Childhood Lead Poisoning

### Objective – New York State Prevention Agenda 2025-2030

- **38.0:** Increase the percentage of children in a single birth cohort year tested at least twice for lead before 36 months of age from 61.0% to 70.0%.

### Highlights

- In 2022, Columbia County had the lowest rate of children born in 2019 having at least two lead screenings by 3 years of age
- Columbia County also had the second lowest rate in NYS for children born in 2019 who received at least one lead screening by the age of 2, with less than 1 in 2 children being screened for lead
- Elevated blood lead level incidence among children under 6 years of age decreased in the Capital Region from 2019 to 2022, continuing a favorable trend that started prior to 2019
- In 2022, Columbia County had the highest incidence rate in the Capital Region of elevated blood lead level among children under 6 years of age
- The rate of Capital Region school drinking water outlets exceeding the lead action limit was halved, from 2016 to 2020
- In 2020, Schenectady County had the highest percentage in the Capital Region for school drinking water outlets exceeding the state's lead action limit, and had a higher rate than NYS, excluding NYC

Lead poisoning is a potentially preventable public health problem that can have long-lasting impact on a child's life (NYSDOH). Lead is a heavy metal that was used in many products and materials before the risk to young children was identified. For example, paint containing lead was used in many houses built before 1978. Products that can be hazardous may still be present where children live, learn, and play. Lead can be found in air, water, soil, or dust (NYSDOH). Lead poisoning leads to serious adverse health, developmental, and cognitive outcomes that can affect individuals throughout their lives (CDC).



## Lead Screening

Lead poisoning can manifest without obvious symptoms. Therefore, it is important to screen children preemptively for elevated blood lead levels to hopefully catch lead poisoning cases as early as possible. Screening is performed by physicians using a blood draw or a finger prick. In New York State, healthcare providers are required to obtain a blood test on all children at 1 and 2 years of age. In addition, children aged 6 months to 6 years are required to be assessed annually as a part of routine care, with a blood lead level obtained for any child with an increased risk of exposure. Early identification of lead exposure can prevent harm and minimize further exposures (CDC).

Percentage of children with at least two lead screenings by 36 months					
County	2016	2017	2018	2019	2019 County Rank
NYS (excl. NYC)	63.3	62.4	61.0	59.3	
Saratoga	73.1	74.3	72.4	69.4	4
Rensselaer	64.0	62.0	57.8	52.0	32
Schenectady	62.7	61.3	58.2	50.1	38
Greene	56.4	55.2	52.8	46.1	43
Albany	54.6	55.2	51.7	44.3	48
Columbia	40.4	36.9	36.1	36.7	55

Columbia County ranked in the bottom 10 of NYS counties for their percentage of children born in 2019 with at least two lead screenings by 36 months, with just more than 1 in 3 (36.7% of) children receiving both required lead screenings before 3 years of age (NYS Child Health Lead Poisoning Prevention Program). Albany and Greene counties also had relatively low percentages as well, with less than half of children receiving the two required lead screenings by 3 years of age; these two counties ranked lower out of 62 NYS counties for percentage of children born with at least two lead screenings.

Columbia County also had the second lowest rate in NYS for children born in 2019 who received at least one lead screening by the 2 years of age, with just under 1 in 2 (48.4% of) children receiving the required screening, while the rest of the Capital Region counties had roughly around two-thirds or more of their children screened for lead by 2 years of age (NYS Child Health Lead Poisoning Prevention Program).

## Children Younger than 6 Years with Elevated Lead Levels

Children under six years of age, but particularly children living at or below the poverty level in older housing, are at risk of lead poisoning (CDC). While both incidence and severity of childhood lead poisoning have steadily decreased in New York State, it is still a serious public health concern (NYSDOH).



Incidence of confirmed high blood lead level (5 micrograms or higher per deciliter) - rate per 1,000 tested children aged <72 months					
County	2019	2020	2021	2022	2022 County Rank (of 53)
New York State	12.1	10.4	10.4	9.5	
Saratoga	11.0	6.2	6.6	5.5	5
Schenectady	29.5	27.5	24.9	14.9	23
Rensselaer	33.9	24.5	25.7	18.1	31
Albany	33.7	34.0	28.8	19.7	34
Columbia	34.7	47.0	42.2	21.3	35
Greene	25.6	25.9			

Columbia County had the highest incidence rate of elevated blood lead levels (5 micrograms of lead or more per deciliter of blood) with about 21 out of every 1,000 children tested having elevated blood lead levels (NYS Child Health Lead Poisoning Prevention Program). Albany County had the next highest rate with close to 20 out of every 1,000 children having elevated blood lead levels. Of the Capital Region counties, only Saratoga County had a rate lower than NYS, excluding NYC. Data from 2021 or 2022 was not available for Greene County.

## Lead in School Drinking Water

Schools are an important place to monitor for potential environmental exposures, as children spend much of their time away from home. New York State Public Health Law and Regulations enacted in 2016, require all schools to test drinking water sources for lead contamination and make changes if the action level is exceeded. Revisions to the law in 2022 reduced the level of lead requiring schools to make changes (the “action limit”) from 15 micrograms of lead per liter of water ( $\mu\text{g/L}$ ) to 5  $\mu\text{g/L}$  and requires testing every three years (NYSDOH).

Testing for the 2020 compliance period was conducted from January 1, 2020, to June 30, 2021, and schools have since taken action to remove or remediate outlets that exceeded the action limit of 15 micrograms of lead per liter of water (Health Data NY). Two hundred and forty-four (244) Capital Region schools sampled about 17,500 outlets for the 2020 compliance period. Capital Region schools more than halved the percentage of outlets exceeding the action limit from the 2016 compliance period (Health Data NY). Schenectady County was the only county in the Capital Region with a higher percentage than NYS, excluding NYC, of outlets exceeding the lead action limit.

Percentage of School Drinking Water Outlets that Exceeded the State's Lead Action Limit, by Compliance Period			
County	2016	2020	2020 County Rank
NYS (excl. NYC)	8.7	7.8	
Capital Region	10.8	4.6	
Greene	10.8	2.7	9
Albany	6.7	3.1	14
Saratoga	16.6	3.4	16
Rensselaer	3.5	4.4	21
Columbia	13.4	6.1	35
Schenectady	16.5	10.1	50



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## Injury

### Objectives – New York State Prevention Agenda 2025-2030

- **23.0:** Decrease the rate of emergency department visits of motor vehicle-related pedestrian injuries per 10,000 people from 4.7 to 4.5.
- **23.1:** Decrease the ratio of motor vehicle-related pedestrian injury emergency department visits of Black, non-Hispanic persons compared to White, non-Hispanic persons from 4.0 to 3.8.

### Highlights

- Motor Vehicle Injury:
  - Emergency department visit rate was highest in Schenectady County
  - Hospitalization rate was highest in Albany County
  - Mortality rate was highest in Greene County
- Falls:
  - Hospitalization rate among children aged under 10 years was highest in Rensselaer County
  - Emergency department visit rate among older adults aged 65+ was highest in Columbia County
  - Hospitalization rates among older adults (65+ and 75-84 years) were highest in Albany County
- Work-related Injury:
  - The ratio of emergency department visit rates between Black non-Hispanic and White non-Hispanic residents was highest in Columbia County, and relatively high in all Capital Region counties

## Motor Vehicle-Related Injuries

Motor vehicle crashes are the leading cause of injury death in the United States. Every month in the U.S., there are more than 3,000 deaths due to traffic-related motor vehicle injuries, including more than 500 pedestrians (CDC WISQARS). Motor vehicle injuries can cause death, trauma, impairment, higher insurance premiums, productivity loss at work, and other costs to individuals, their families and communities. Motor vehicle crashes, in 2022, resulted in more than \$470 billion in expenses, including medical costs and the estimated cost of lives lost (CDC).



Motor Vehicle Accident Emergency Department Visit, Age-Adjusted Rates per 100,000					
County	2019	2020	2021	2022	2023
NYS (excl. NYC)	764.0	521.7	618.5	648.0	700.7
Capital Region	495.5	350.2	442.8	437.8	468.0
Saratoga	366.1	229.4	277.1	314.5	330.7
Columbia	593.5	447.3	756.3	545.2	429.7
Greene	568.4	321.2	303.3	322.5	439.4
Albany	523.1	352.5	446.8	464.0	515.9
Rensselaer	476.5	349.2	451.6	449.2	518.9
Schenectady	621.7	516.4	623.9	570.6	559.3

Motor Vehicle Accident Hospitalization, Age-Adjusted Rates per 100,000					
County	2019	2020	2021	2022	2023
NYS (excl. NYC)	50.1	48.4	54.6	52.7	54.3
Capital Region	53.3	48.7	57.1	50.9	52.9
Schenectady	42.7	58.4	51.6	50.2	44.8
Rensselaer	58.2	48.0	53.8	53.8	45.2
Greene	82.1	52.1	85.3	85.1	47.6
Columbia	63.8	70.1	65.9	56.0	50.0
Saratoga	42.6	36.3	48.5	40.0	54.3
Albany	59.4	49.1	62.7	52.6	62.5

In 2023, Schenectady County had the highest rate in the Capital Region of emergency department (ED) visits, but the lowest rate of hospitalizations, due to motor vehicle accidents (SPARCS). Albany County had the highest rate of hospitalizations in the Capital Region, and the third highest rate of emergency department visits, due to motor vehicle accidents. Greene County’s hospitalization rate due to motor vehicle accidents in 2023 was much lower than the two previous years, where it had been the highest in the Capital Region.

Age-adjusted motor vehicle injury mortality rate per 100,000						
County	2016-2018	2017-2019	2018-2020	2019-2021	2020-2022	2020-2022 County Rank
Albany	4.2	4.0	5.3	6.2	6.2	9
Rensselaer	4.4	4.3	5.5	6.1	6.8	13
Schenectady	6.0	7.5	7.0	7.2	7.0	14
Saratoga	6.5	6.7	6.5	6.0	7.2	16
Columbia	11.6	10.2	9.6	10.7	10.7	36
Greene	14.3	11.1	8.2	7.6	14.4	51

For the 2020-2022 period, Greene County had the highest rate in the Capital Region for deaths due to motor vehicle injuries, with a mortality rate that was twice as high as most of the other counties in the Capital Region (NYS Vital Statistics). Columbia County had the second highest motor vehicle accident mortality rate in the Capital Region.

## Falls in Children

The primary location of falls for children is in the home. Falls are the leading cause of injury-related hospitalizations and ED visits for children up to 14 years of age (NYSDOH). Rapid early development provides various opportunities for children to fall. Babies and young children have bigger heads in comparison to the rest of their bodies, causing the head to hit the ground first. This increases the likelihood of head trauma due to falls. When babies start to roll and kick, they are at increased risk of falling off high surfaces. Similarly, when children learn to crawl and walk, they increase their chances of falling out of windows and off furniture (NYSDOH).

Falls hospitalization rate per 10,000 - Aged <10 years						
County	2016-2018	2017-2019	2018-2020	2019-2021	2020-2022	2020-2022 County Rank (of 37)
Saratoga	6.5	6.3	5.6	5.1	5.6	19
Albany	9.9	10.3	8.5	7.5	7.0	23
Schenectady	6.4	7.8	7.9	8.8	7.2	25
Greene	14.4	10.4			8.0	30
Columbia	6.9			9.1	8.6	32
Rensselaer	11.4	13.0	12.2	11.0	10.0	33

Rensselaer County had the highest rate of falls hospitalizations in the Capital Region, from 2020 to 2022, for residents aged under 10 years of age, and ranked 33<sup>rd</sup> out of 37 NYS counties with available data (SPARCS). Columbia and Greene counties had the second and third highest rates of falls hospitalizations in the Capital Region.

## Falls in Older Adults

Falls are the leading cause of injury deaths among older adults and the most common cause of nonfatal injuries and hospital admissions for trauma. Due to falls, 130 older New Yorkers are hospitalized daily (NYSDOH SPARCS). Falls in older adults that lead to hospitalization often necessitate the individual to move to a nursing home or rehabilitation center. Such falls incur \$80 billion in annual hospitalization charges, nationally (CDC).

Unintentional falls are a serious threat to the lives, independence and well-being of adults aged 65 and older. Each year in the United States, more than 1 in 4 older adults fall, leading to more than 3 million visits the ER (CDC). These falls can cause injuries such as fractures, bruises, and head traumas, which can increase the risk of early death and make it difficult to live independently (CDC). Falls are also the most common cause of



traumatic brain injury (TBI) (CDC). Developing a fear of falling is common among people who fall, even among those who are not injured. This fear can cause them to limit activities, leading to reduced mobility, which actually increases the risk of falling (CDC).

<b>Falls Emergency Department Visit, Aged 65+, Age-Adjusted Rates per 100,000</b>			
<b>County</b>	<b>2015-2017</b>	<b>2018-2020</b>	<b>2021-2023</b>
NYS (excl. NYC)	4475	4465	4836
Capital Region	3977	3837	4262
Greene	3206	3340	2223
Saratoga	3517	3585	4012
Rensselaer	4383	3785	4224
Albany	4124	3961	4449
Schenectady	4219	4194	4551
Columbia	4126	3885	5490

In the Capital Region, there were over 6,500 emergency department visits annually, from 2021 to 2023, due to falls in the 65 years and older population (SPARCS). Columbia County had the highest rate in the Capital Region of emergency department visits due to falls, among residents aged 65 years and older, from 2021 to 2023. The other five Capital Region counties had lower rates than NYS, excluding NYC. Greene County had the lowest rate of emergency department visits due to falls, among residents aged 65 years and older in the Capital Region.

<b>Falls Hospitalization, Aged 65+, Age-Adjusted Rates per 100,000</b>			
<b>County</b>	<b>2015-2017</b>	<b>2018-2020</b>	<b>2021-2023</b>
NYS (excl. NYC)	2064	2296	2380
Capital Region	2026	2458	2553
Greene	2254	2096	1708
Saratoga	1905	2392	2432
Schenectady	1296	2201	2535
Columbia	1874	2211	2589
Rensselaer	2243	2483	2704
Albany	2397	2770	2748

From 2021 to 2023, each year the Capital Region had 4,100 fall-related hospitalizations among adults aged 65 years and over (SPARCS). Albany County had the highest rate in the Capital Region of falls hospitalization among residents aged 65 years and older. Rensselaer County had the second highest rate in the Capital Region. Greene County had the lowest rate for fall-related hospitalizations among adults aged 65 years and over in the Capital Region and was the only Capital Region county with a lower rate than NYS, excluding NYC.

Falls hospitalization rate per 10,000 - Aged 75-84 years						
County	2016-2018	2017-2019	2018-2020	2019-2021	2020-2022	2020-2022 County Rank (of 62)
Columbia	223.4	236.6	233.9	226.5	218.5	33
Saratoga	205.7	233.4	252.4	255.6	237.8	42
Schenectady	166.7	215.7	246.8	245.1	258.8	54
Greene	235.8	223.7	217.4	235.9	264.7	56
Rensselaer	246.6	258.3	263.8	262.8	265.0	57
Albany	267.5	278.3	272.2	272.6	274.8	59

The Capital Region had four counties ranked in the bottom 10 of NYS counties for falls hospitalizations among residents aged 75 to 84 years, for 2020 to 2022 (SPARCS). Albany County had the highest rate in the Capital Region, followed by Rensselaer, Greene, and Schenectady counties. Columbia County had the Capital Region's lowest rate for falls hospitalizations among residents aged 75 to 84 years.

## Workplace Injuries

Workplace injuries continue to be a major health problem in the United States. A worker died about every 100 minutes from a work-related injury in the U.S. in 2023, most often due transportation incidents (Bureau of Labor Statistics). Occupational fatalities and losses arising from workplace disabilities also cause tremendous personal and economic costs. The top three causes of injuries at work causing time away from work are exposure to harmful substances or environment, overexertion or bodily reaction, and falls, slips, or trips (National Safety Council).

Work-related emergency department (ED) visits, ratio of rates between Black non-Hispanics and White non-Hispanics						
County	2018	2019	2020	2021	2022	2022 County Rank (of 47)
NYS (excl. NYC)	1.9	1.9	1.8	2.0	2.1	
Capital Region	2.7	2.9	3.3	2.5	2.9	
Schenectady	0.3	0.2	2.4	22.4	2.7	32
Saratoga			1.7	0.2	2.8	34
Rensselaer	3.4	3.4	3.7	3.4	2.9	35
Albany	3.8	3.6	3.5	3.8	3.0	38
Columbia	3.4	4.0	4.3	7.9	6.5	47
Greene			4.5	5.6		

In New York State, excluding NYC, Black non-Hispanic residents visited emergency departments for work-related injuries about 2.1 times as often as White non-Hispanic residents, in 2022 (SPARCS). In Columbia County, the ratio between the Black non-Hispanic residents and White non-Hispanic residents for work-related



ED visits was 6.5, the highest in NYS among the 47 counties with available data for 2022. Schenectady County had the lowest rate ratio for work-related ED visits in the Capital Region in 2022, although it still ranked in the bottom half of NYS counties.

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## Violence

### Objectives – New York State Prevention Agenda 2025-2030

- **24.0:** Decrease the rate of emergency department visits of assault-related injuries per 10,000 people from 42.2 to 40.1.
- **24.1:** Decrease the ratio of assault-related emergency department visits of Black, non-Hispanic persons compared to White, non-Hispanic persons from 4.4 to 4.2.

### Highlights

- Rensselaer County had the highest homicide mortality rate in the Capital Region in 2020-2022
- Albany and Schenectady counties had the highest assault emergency department visit rate in the Capital Region in 2023
- Greene County had the highest assault hospitalization rate in the Capital Region in 2023
- Rensselaer County had the highest ratio in the Capital Region of assault hospitalization rates for Black non-Hispanic residents compared to White non-Hispanic residents in 2020
- Schenectady and Albany counties had the highest rate ratios in the Capital Region in 2020, when comparing assault hospitalization rates for Hispanic residents and White non-Hispanic residents
- Albany County had the highest firearm assault-related hospitalization rate in the Capital Region in 2020
- In the Capital Region, since 1990, violent crime rates have overall trended downward, while firearm crime rates have increased.
- In 2024, violent and firearm crime rates were higher in the Capital Region than NYS, excluding NYC

Although violent crime is usually considered to be in the domain of law enforcement and the criminal justice system, there is a growing acknowledgement that public health can play a role in preventing violence as well. Crime compromises physical safety and emotional and social well-being (CDC). These effects may contribute to future chronic health conditions, like cardiovascular disease, diabetes, cancer, and lung disease. Research has also found that individuals who experience one form of violence are at a higher risk of experiencing it in other forms as well. Further, people who commit violence towards one group (like their peers) are more likely to engage in violence towards other groups (like a dating partner) (CDC). CDC employs a four-level social-ecological model to understand and prevent violence. Their model acknowledges the interconnectedness of individual, interpersonal, community, and societal factors that affect one's risk of experiencing violence.



Homicide mortality rate per 100,000						
County	2016-2018	2017-2019	2018-2020	2019-2021	2020-2022	2020-2022 County Rank (of 23)
Schenectady	2.2		2.4	3.8	4.4	12
Albany	2.6	2.8	4.0	4.3	5.3	15
Rensselaer	2.7	2.3	2.9	5.0	5.6	17
Columbia						
Greene						
Saratoga						

Rensselaer County had the highest rate of homicide mortality in the Capital Region, from 2020 to 2022, and ranked 17<sup>th</sup> out of 22 NYS counties with available data; Albany County ranked 15<sup>th</sup>; Schenectady, County 12<sup>th</sup> of 23 NYS counties for homicide mortality (NYS Vital Statistics).

Assault Emergency Department Visit, Age-Adjusted Rates per 100,000					
County	2019	2020	2021	2022	2023
NYS (excl. NYC)	361.1	299.0	305.2	318.7	338.0
Capital Region	397.0	331.4	351.5	368.2	369.9
Saratoga	132.8	131.5	166.2	157.0	146.7
Columbia	345.8	233.2	406.0	394.5	281.3
Greene	372.8	367.7	265.1	418.2	353.8
Rensselaer	458.7	334.0	360.3	356.6	408.8
Schenectady	574.5	534.9	459.0	514.4	464.0
Albany	485.3	393.1	435.5	449.6	486.7

Assault Hospitalization, Age-Adjusted Rates per 100,000					
County	2019	2020	2021	2022	2023
NYS (excl. NYC)	25.2	27.0	26.8	26.4	25.8
Capital Region	30.9	32.3	35.7	34.0	29.4
Saratoga	12.8	16.2	23.2	12.8	14.8
Columbia	40.1	27.3		31.1	18.9
Schenectady	40.5	39.9	39.9	37.3	25.7
Rensselaer	31.7	25.6	31.4	34.5	28.7
Albany	37.9	44.8	50.0	46.0	40.8
Greene	36.4	28.6	32.2	54.9	50.1

From 2021 to 2023, annually, the Capital Region had 3,450 assault-related ED visits and 295 assault-related hospitalizations (SPARCS). Albany County had the highest rate in the Capital Region for assault-related emergency department visits, in 2023, and the second highest rate for assault-related hospitalizations. Greene

County had the highest assault hospitalization rate, as it did in 2022. Schenectady County had the second highest rate in the Capital Region for assault emergency department visits, after having led the Capital Region the four prior years. Saratoga County had the lowest rates for assault-related emergency department visits and hospitalizations.

Assault-related hospitalizations, ratio of rates between Black non-Hispanics and White non-Hispanics						
County	2016	2017	2018	2019	2020	2020 County Rank (of 30)
NYS (excl. NYC)	6.4	5.5	6.0	5.6	6.6	
Capital Region	7.7	6.7	6.7	6.7	7.7	
Columbia					0.0	1
Schenectady	5.0	4.2	3.9	5.0	3.0	9
Albany	7.9	5.8	6.2	7.5	8.7	23
Rensselaer	5.5	7.4	4.2	7.6	11.1	29
Greene	7.3			0.0		
Saratoga		0.0	0.0			

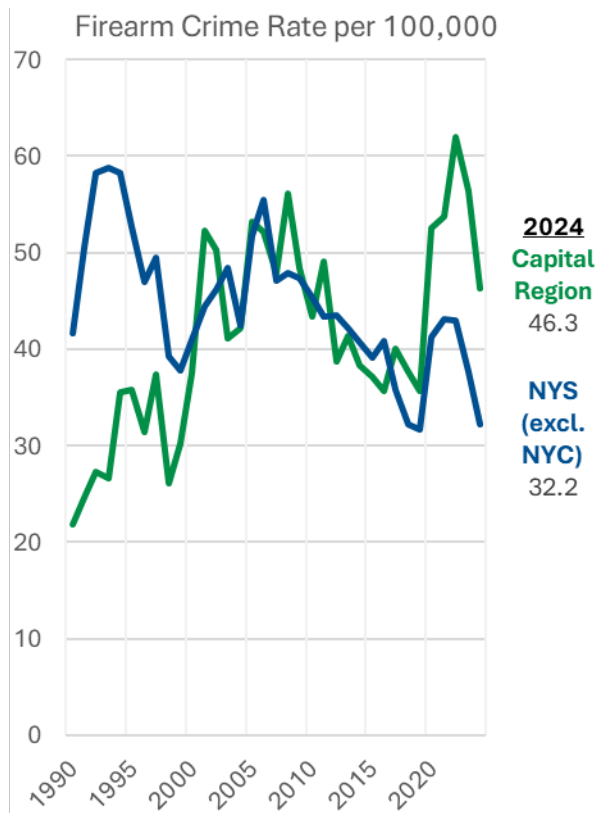
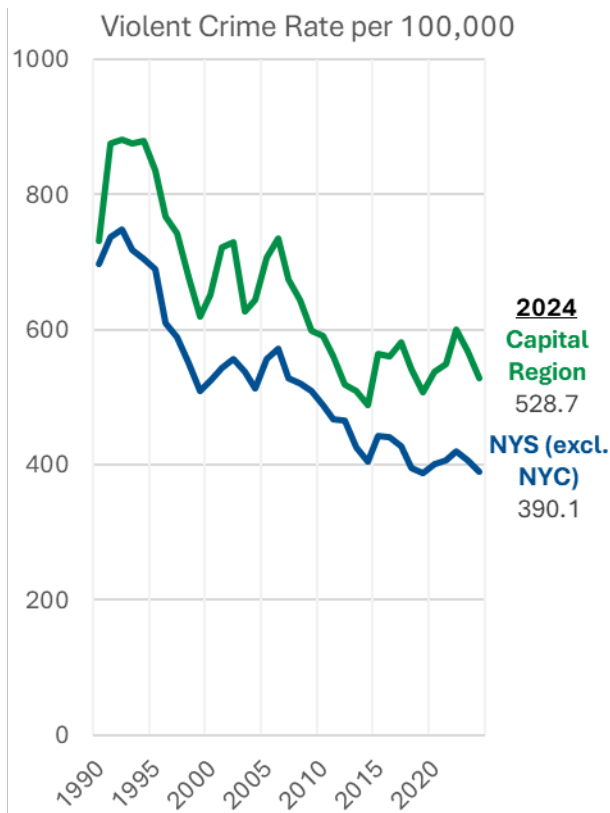
Assault-related hospitalizations, ratio of rates between low-income ZIP Codes and non-low-income ZIP Codes						
County	2016	2017	2018	2019	2020	2020 County Rank (of 25)
NYS (excl. NYC)	2.9	2.9	3.0	3.0	3.3	
Capital Region	4.9	4.4	4.2	3.7	4.7	
Rensselaer	3.3	3.0	2.8	2.5	2.9	15
Albany	6.8	5.2	4.8	5.2	5.9	20
Schenectady	5.3	4.9	3.3	3.6	6.2	22
Columbia						
Greene						
Saratoga						

Stark disparities exist between rates of assault-related hospitalizations for Black non-Hispanic residents and White non-Hispanic residents, and when comparing rates for residents of low-income ZIP codes and other ZIP codes (SPARCS). For instance, in Rensselaer County, the assault-related hospitalization rate for Black non-Hispanic residents was more than 10 times higher than the same rate for White non-Hispanic residents, which was the second highest rate ratio among NYS counties with available data for 2020 (SPARCS). In Albany County the rate of assault hospitalizations for Black non-Hispanic residents was 8.7 times higher than for White non-Hispanic residents. Schenectady County had the highest rate ratio (6.2) in the Capital Region, when comparing the assault hospitalization rates for residents of low-income and non-low-income ZIP codes; Albany County had the second highest rate ratio comparing the assault hospitalization rates for residents of low-income and non-low-income ZIP code in the Capital Region, at 5.9. Columbia, Greene and Saratoga counties had sparsely available data for these measures.



Firearm assault-related hospitalizations, rate per 10,000 population						
County	2016	2017	2018	2019	2020	2020 County Rank (of 47)
NYS (excl. NYC)	0.3	0.3	0.2	0.2	0.4	
Capital Region	0.2	0.4	0.3	0.3	0.5	
Greene	0.0		0.0	0.0	0.0	1
Saratoga		0.0		0.0	0.0	1
Rensselaer					0.4	37
Albany	0.4	0.7	0.5	0.7	1.3	45
Columbia	0.0					
Schenectady	0.5	0.4	0.5			

In 2024, there were 455 firearm-related crimes and more than 5,000 violent crimes in the Capital Region (SPARCS). Violent crime rates, overall, have decreased in the Capital Region and NYS, excluding NYC, since 1990, although rates appear to be steady or slowly rising over the last 10 years. Since 1990, firearm-involved violent crime overall has trended upward in the Capital Region and downward in NYS, excluding NYC, although rates have been coming down in both regions over the past few years after a spike in 2020. The Capital Region rate of firearm crime spiked in 2020, reaching 53.5 per 100,000 population. Both violent and firearm crime rates were higher in the Capital Region, in 2024, than in NYS, excluding NYC.



In 2024, Albany County had the highest rate of violent crime in the Capital Region and the second highest in NYS, after Bronx County (NYS Division of Criminal Justice Services). Albany County also had the highest firearm crime rate in the Capital Region, in 2024, and the third highest in NYS. Schenectady County had the second highest violent crime rate in the Capital Region and the third highest in the state. Schenectady County's firearm crime rate was the second highest in the Capital Region and the sixth highest in NYS.

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## Adverse Childhood Experiences

### Objectives – New York State Prevention Agenda 2025-2030

- **16.0:** Increase the percentage of adults who, as a child, always had an adult in the household who made them feel safe and protected and tried hard to make sure their basic needs were met from 65.1% to 66.9%.
- **16.1:** Increase the percentage of Hispanic adults who, as a child, always had an adult in the household who made them feel safe and protected and tried hard to make sure their basic needs were met from 51.0% to 52.7%
- **17.0:** Reduce the percentage of adults who, as a child, experienced three or more adverse childhood experiences (ACEs) from 25.3% to 23.8%.
- **17.1:** Reduce the percentage of Black, non-Hispanic adults who, as a child, experienced three or more adverse childhood experiences (ACEs) from 29.0% to 27.5%.
- **17.2:** Reduce the percentage of Hispanic adults who, as a child, experienced three or more adverse childhood experiences (ACEs) from 28.5% to 26.1%.
- **18.0:** Reduce the rate of indicated reports of abuse/maltreatment per 1,000 children and youth aged 0-17 years from 11.3 to 9.8.
- **18.1:** Reduce the rate of indicated reports of abuse/maltreatment per 1,000 Black, non-Hispanic children and youth from 21.8 to 19.9.
- **18.2:** Reduce the rate of indicated reports of abuse/maltreatment per 1,000 Hispanic children and youth from 13.9 to 12.5.

### Highlights

- Saratoga, Schenectady, and Greene counties had the highest percentages in the Capital Region in 2021 of adults who had experienced at least two adverse childhood experiences (ACEs)
- Greene and Rensselaer counties had highest rates in the Capital Region of reports indicating child abuse or maltreatment in 2022

Adverse Childhood Experiences (ACEs) are events experienced by children under the age of 18 that can potentially be traumatic (CDC). Examples of ACEs include experiencing abuse, violence, or neglect, witnessing violence in one's home or community environment, or having a close relative attempt or die by suicide. ACEs can also include growing up in an environment with individuals experiencing substance use disorder or mental health problems, or can be related to social determinants of health, like poverty, housing insecurity, or discrimination, among many other events that can occur. ACEs are common, with almost two-thirds of U.S. residents reporting that they experienced at least one type of ACE by age 18 (CDC). Almost one in six U.S. adults



has experienced four or more ACEs. ACEs are more common among some groups of people, for example, females and non-Hispanic Native American adults (CDC).

Preventing ACEs could have substantial health benefits for the population. ACEs are associated with an increased risk of maternal and child health problems, suicide, and many chronic conditions like cancer, diabetes, and heart disease (CDC). It has been estimated that ACE prevention could have prevented almost 1.9 million cases of heart disease and over 20 million cases of depression among adults, as well as almost 90% of suicide attempts among high school students (CDC). ACE-related health impacts also cost the U.S. economically, on the order of hundreds of billions of dollars annually.

Percentage of adults who have experienced two or more adverse childhood experiences (ACEs)			
County	2016	2021	2021 County Rank
NYS (excl. NYC)	36.1	40.5	
Capital Region	41.0	43.8	
Columbia	40.4	24.6	1
Rensselaer	51.6	39.8	30
Albany	34.9	41.3	35
Greene	41.6	46.7	47
Schenectady	45.3	47.3	50
Saratoga	39.2	49.6	55

In 2021, Saratoga County had the highest percentage in the Capital Region of adults who had experienced at least two adverse childhood experiences (ACEs), with almost half of adults reporting having experienced 2 or more ACEs (BRFSS). Schenectady and Greene counties had high percentages of adults reporting having experienced 2 or more ACEs, both over 45%. Columbia County had the lowest percentage of adults reporting having experienced 2 or more ACEs in New York State.



Indicated reports of abuse/maltreatment, rate per 1,000 children, aged 0-17 years						
County	2018	2019	2020	2021	2022	2022 County Rank (of 57)
NYS (excl. NYC)	16.7	17.7	16.1	16.4	13.7	
Schenectady	14.6	15.0	15.3	15.2	12.2	10
Saratoga	16.8	17.6	21.7	16.2	12.9	12
Columbia	18.7	23.0	20.9	21.3	13.8	15
Albany	14.2	16.4	19.3	18.8	17.0	21
Rensselaer	27.0	33.5	31.6	29.7	24.7	41
Greene	21.4	26.6	27.1	30.9	27.3	46

Greene County, in 2022, had the highest rate in the Capital Region of reports indicating child abuse or maltreatment (National Child Abuse and Neglect Data System). Rensselaer County also had a high rate in 2022 of reports indicating child abuse or maltreatment. Rensselaer County had the highest rate of reports indicating child abuse or maltreatment in prior years, 2018, 2019, and 2020,

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- Centers for Disease Control and Prevention. About Adverse Childhood Experiences. <https://www.cdc.gov/aces/about/index.html>
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## Health and Wellness Promoting Schools

### Objectives – New York State Prevention Agenda 2025-2030

- **41.0:** Decrease the percentage of chronic absenteeism (defined as missing more than 18 days (>10%) per academic year) among public school students in grades K-8 from 26.4% to 18.5%.
- **41.1:** Decrease the percentage of chronic absenteeism (defined as missing more than 18 days (>10%) per academic year) among public school students in grades K-8 who are economically disadvantaged from 34.9% to 24.4%.
- **42.0:** Increase the percentage of high school seniors that attend a 2- or 4-year college from 70.2% to 77.0%.
- **42.1:** Increase the percentage of high school seniors who are economically disadvantaged that attend a 2- or 4- year college from 63.1% to 69.4%.

### Highlights

- Schenectady, Rensselaer, and Greene counties had the highest rates of chronic absenteeism in the Capital Region in 2024 among students in first to eighth grade
- More than one in three economically disadvantaged students in grades one through eight in Schenectady, Rensselaer, Greene, and Albany counties were chronically absent in 2024
- Greene and Rensselaer counties had the lowest percentages in the Capital Region of high school students in the Class of 2023 who enrolled at a postsecondary institution within 16 months of their high school graduation
- Less than one in two economically disadvantaged high school students in Rensselaer County in the Class of 2023 enrolled at a postsecondary institution within 16 months of their high school graduation, the lowest percentage in the Capital Region.

## Chronic Absenteeism

Chronic absenteeism (missing 10% or more of enrolled days of school within a year) among grade school students can lead to decreased academic performance and school engagement, and is associated with poorer health outcomes later in life (CDC). Chronic absenteeism was found by CDC researchers to be higher among children living in poorer households and children with disabilities or in fair or poor health (CDC). Chronic absenteeism has also been found to be associated with engaging in health risk behaviors, like substance use and risky sexual activity (Allison, et. al., 2019). Chronic absenteeism has also increased since the COVID-19 pandemic (CDC).



Chronic Absenteeism (absent for 10% or more of enrolled days) among All Students in Grades 1-8			
County	2023	2024	2024 County Rank
New York State	26%	25%	
Saratoga	16%	14%	3
Albany	24%	21%	28
Columbia	25%	22%	31
Rensselaer	26%	24%	37
Greene	28%	24%	38
Schenectady	32%	28%	52

More than one in four students in grades one through eight in Schenectady County in 2024 were chronically absent (missed 10% or more of enrolled days of school within a year), the highest percentage in the Capital Region (NYS Education Department Report Card Database). Almost one in four students in grades one through eight in Rensselaer and Greene were chronically absent (missed 10% or more of enrolled days of school within a year) in 2024. Saratoga County had the lowest rate of chronic absenteeism in the Capital Region in 2024 among students in first to eighth grade.

Chronic Absenteeism (absent for 10% or more of enrolled days) among Economically Disadvantaged Students in Grades 1-8			
County	2023	2024	2024 County Rank
New York State	35%	33%	
Saratoga	30%	28%	23
Columbia	34%	30%	33
Albany	38%	34%	41
Greene	38%	35%	46
Rensselaer	40%	37%	50
Schenectady	45%	41%	57

More than one in three economically disadvantaged students in grades one through eight in Schenectady, Rensselaer, Greene, and Albany counties were chronically absent in 2024 (NYS Education Department Report Card Database). Schenectady County had the highest rate in the Capital Region, with more than two in five economically disadvantaged students in grades one through eight having been chronically absent in 2024, the sixth highest percentage in New York State.

## Opportunities for Continued Education

Higher education can improve many aspects of an individual's life, including their health and social determinant of health (Forbes). Workers with higher levels of education have lower unemployment rates and higher average earnings (Department of Labor). Workers with higher levels of education also have safer and more secure housing, typically in areas with less environmental pollution, and have a higher level of health literacy (Forbes).

Percent of all high school graduates who enrolled at a postsecondary institution within 16 months of high school graduation			
County	Class of 2022	Class of 2023	Class of 2023 County Rank
New York State	71%	73%	
Saratoga	77%	76%	5
Albany	71%	72%	15
Columbia	64%	67%	23
Schenectady	63%	68%	25
Rensselaer	62%	65%	26
Greene	61%	64%	30

Just under two in three high school students in Greene and Rensselaer counties in the Class of 2023 enrolled at a postsecondary institution within 16 months of their high school graduation, the lowest percentages in the Capital Region, although both counties still ranked in the top half of NYS counties (NYS Education Department Report Card Database).

Percent of economically disadvantaged high school graduates who enrolled at a postsecondary institution within 16 months of high school graduation			
County	Class of 2022	Class of 2023	Class of 2023 County Rank
New York State	63%	65%	
Saratoga	58%	55%	14
Columbia	52%	53%	21
Schenectady	51%	57%	24
Albany	53%	55%	25
Greene	50%	54%	26
Rensselaer	41%	46%	48

Less than one in two economically disadvantaged high school students in Rensselaer County in the Class of 2023 enrolled at a postsecondary institution within 16 months of their high school graduation, the lowest percentage in the Capital Region (NYS Education Department Report Card Database).



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## Built Environment

### Objectives – New York State Prevention Agenda 2025-2030

- **22.0:** Increase the number of completed Climate Smart Community Actions related to community resilience from 363 to 382.
- **22.1:** Increase the number of cooling centers on the Cooling Center Finder, accessible to individuals living in high heat-vulnerable areas and disadvantaged communities from 698 to 768.

### Highlights

- 0 % of Rensselaer County residents in 2024 were living in a certified Climate Smart Community
- Greene, and Saratoga counties had less than 1 in 8 residents living in a certified Climate Smart Community in 2024
- Saratoga County had the lowest percentage of people who commute to work using alternate modes of transportation (public transit, carpool, bike, or walk) in the Capital Region in 2018-2022
- Less than half of cooling towers in Columbia County were in compliance with New York State’s “Protection Against *Legionella*” regulation in 2023
- Columbia County had 0% of residents receiving optimally fluoridated water in 2023
- Greene County had less than 1 in 15 residents receiving optimally fluoridated water in 2023
- Albany County had about 1 in 7 residents receiving optimally fluoridated water in 2023, although this percentage should increase with the City of Albany’s decision to add fluoride to its public water supply

## Climate Smart Communities

Municipalities across New York State are encouraged to participate in New York’s Climate Smart Communities (CSC) program to protect public health in the presence of climate change. The CSC program provides local governments with guidance on how to reduce greenhouse gas emissions, save taxpayer dollars, and advance local goals for health and safety, economic strength, energy independence, and quality of life. Any community in New York State can register to become a Climate Smart Communities by taking the CSC pledge and documenting a suite of actions that mitigate and adapt to climate change at the local level (NYSDOH).



Percentage of population living in a certified Climate Smart Community						
County	2020	2021	2022	2023	2024	2024 County Rank
NYS (excl. NYC)	46.8	54.2	52.6	60.3	61.6	
Capital Region	30.5	52.2	43.4	47.6	47.6	
Albany	35.5	100.0	100.0	100.0	100.0	1
Columbia	0.0	14.3	22.5	78.6	78.6	16
Schenectady	100.0	100.0	42.7	42.7	42.7	18
Saratoga	12.1	12.1	12.1	12.1	12.1	26
Greene	0.0	3.4	3.4	11.7	11.7	27
Rensselaer	0.0	0.0	0.0	0.0	0.0	40

The Capital Region’s percentage of population living in Climate Smart Communities has increased in recent years as communities in Albany and Columbia counties became CSCs, although the Capital Region’s percentage of population living in a certified Climate Smart Community was lower than in NYS, excluding NYC (New York State Department of Environmental Conservation Climate Smart Communities Program).

### Alternate Modes of Transportation

Part of the goal of promoting a healthy and safe environment is to improve environmental design and infrastructure to, in turn, promote healthy lifestyles and sustainability. An important part of this effort is to increase the percentage of commuters who use alternative modes of transportation. Public transit provides many health benefits, but alternative modes of transportation are not particularly popular in the U.S. While people who use alternative modes of transportation are more likely to stay fit, less than half of Americans achieve this goal (CDC). Active transportation typically requires more physical activity and active people generally live longer and have less risk for common chronic diseases like obesity, type 2 diabetes, and heart disease. Physical activity can also help manage chronic conditions, like those listed above (CDC).

Percentage of people who commute to work using alternate modes of transportation (e.g., public transportation, carpool, bike/walk) or who telecommute						
County	2014-2018	2015-2019	2016-2020	2017-2021	2018-2022	2018-2022 County Rank
NYS (excl. NYC)	22.9	22.9	24.3	25.7	27.2	
Capital Region	19.4	19.9	21.5	23.7	25.8	
Albany	23.2	23.7	25.6	27.9	30.0	9
Columbia	22.8	23.4	23.3	24.9	28.5	11
Schenectady	16.7	17.7	20.5	22.9	25.5	21
Greene	17.0	17.6	19.6	23.4	24.2	24
Rensselaer	18.1	19.0	19.6	21.9	23.8	28
Saratoga	16.2	16.2	17.8	19.8	21.5	41

About 1 in 4 Capital Region residents used alternative modes of transportation to get to work from 2018 to 2022, up from about 1 in 5 from 2014 to 2018 (U.S. Census, American Community Survey). The highest percentage of alternate transportation usage was in Albany County (30.0%), while the lowest percentage was in Saratoga County, (21.5%).

## Cooling Towers

Title 10 of New York Codes, Rules, and Regulations (10 NYCRR) Subpart 4-1: “Protection Against *Legionella*” was enacted in 2016, following a large outbreak of Legionnaires’ Disease in the South Bronx during the Summer of 2015. The regulation mandates all cooling towers be registered and regularly certified, tested, and disinfected. *Legionella* can be found in cooling towers and other water systems, if they are not properly maintained, as the bacteria grow best in warm water. People can get Legionnaires’ disease if they inhale air containing mist or vapor contaminated with *Legionella* bacteria. People at a higher risk of getting sick are those aged 50 years and older, current and former smokers, those with chronic lung disease, and those with a weakened or suppressed immune system (NYSDOH). Symptoms of Legionnaire's Disease can occur within 2-10 days after exposure and may include cough, shortness of breath, high fever, muscle aches, and headaches. People with Legionnaires’ disease are not contagious.

Percentage of registered cooling towers in compliance with 10 NYCRR Subpart 4-1						
County	2019	2020	2021	2022	2023	2023 County Rank
NYS (excl. NYC)	62.4	66.5	58.7	56.8	56.7	
Capital Region	65.4	71.1	65.3	66.0	70.3	
Rensselaer	85.7	96.8	96.4	96.6	95.0	2
Greene	76.2	83.3	73.9	83.3	83.3	7
Schenectady	53.7	50.5	52.8	46.3	80.0	13
Saratoga	62.3	89.3	65.0	62.5	71.4	25
Albany	63.8	62.4	59.6	63.6	61.5	34
Columbia	38.3	40.2	25.0	22.2	47.4	46

The Capital Region, overall, had a better percentage of registered cooling towers in compliance with 10 NYCRR Subpart 4-1 compared to NYS, excluding NYC (NYS Cooling Tower Registry). Rensselaer County had the highest rate of cooling tower in compliance in 2023, at 95.0%, ranking 2<sup>nd</sup> in NYS, while Columbia County had the Capital Region’s lowest cooling tower compliance rate, at 47.4%.



## Water Fluoridation

Fluoride in water has been proven effective at preventing tooth decay (CDC). Drinking water with a fluoridation level of 0.7 to 1.2 ppm can reduce tooth decay by 25% over a person’s lifetime. Since tap water is accessible to all parts of the population, fluoridated water systems have been a very cost-effective way of reducing cavities across the public spectrum. The percentage of people receiving fluoridated water in the United States steadily rose from 57.4% in the early 2000s to 72.3% in 2022 (CDC). The percentage of people receiving fluoridated water in New York State was at 71.6% in 2023 (NYS Safe Drinking Water Information Systems).

Percentage of residents served by community water systems that have optimally fluoridated water						
County	2019	2020	2021	2022	2023	2023 County Rank
NYS (excl. NYC)	46.9	47.0	47.0	47.9	48.0	
Capital Region	38.5	38.9	38.9	38.9	39.0	
Rensselaer	84.6	85.4	85.4	85.4	85.4	12
Schenectady	67.2	67.6	67.6	67.6	67.7	23
Saratoga	40.6	40.1	40.1	41.2	40.9	34
Albany	13.3	13.3	13.3	13.2	13.2	41
Greene	6.0	6.0	6.0	6.0	6.0	43
Columbia	0.0	0.0	0.0	0.0	0.0	55

Rensselaer County had the highest percentage of residents receiving optimally fluoridated water, at 85.4% (NYS Safe Drinking Water Information Systems). Columbia County consistently had the lowest percentage, 0.0%. With the City of Albany Common Council voting in 2024 to add fluoride to its public water supply at 0.7 ppm, Albany County’s percentage of residents receiving optimally fluoridated water is expected to rise by the end of 2025 (WAMC Northeast Public Radio).

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# VII. Infant and Maternal Health



## Prenatal Care

### Objectives – New York State Prevention Agenda 2025-2030

- **25.0:** Increase the percentage of birthing persons who receive prenatal care during the first trimester from 80.7% to 83.0%.
- **25.1:** Increase the percentage of uninsured birthing persons who receive prenatal care during the first trimester from 41.4% to 45.0%.

### Highlights

- Greene County had the lowest percentage in the Capital Region for births with adequate prenatal care
- Greene County had the lowest percentage in the Capital Region for births with early prenatal care
- Schenectady County had the highest percentage in the Capital Region for births with late or no prenatal care
- Among race/ethnicity groups, the largest Capital Region disparities in percent of births with adequate prenatal care:
  - between Black, and White, non-Hispanic residents was in Albany County
  - between Asian/Pacific Islander, and White, non-Hispanic residents was in Rensselaer County
  - between Hispanic and White non-Hispanic residents was in Greene County
- Among race/ethnicity groups, the largest Capital Region disparities in percent of births with early prenatal care:
  - between Black, and White, non-Hispanic residents was in Saratoga County
  - between Asian/Pacific Islander, and White, non-Hispanic residents was in Rensselaer County
  - between Hispanic and White non-Hispanic residents was in Schenectady County

Prenatal care improves the likelihood of both a healthier mother and a healthier baby. Comprehensive prenatal care not only includes routine ultrasounds and screening for potential health conditions but also focuses on improving nutrition and health habits. It can also provide psychological and social support to assist in quitting smoking and drinking alcohol during pregnancy. The *2025-2030 Prevention Agenda* promotes pre-conception health care, emphasizes screening, education, and risk assessment. As many health factors can affect birth outcomes, women of reproductive age should maintain regular preventive health care and inquire with their



health care provider about environmental toxins, medications, nutrition, genetic conditions and family history. Proactive health monitoring can help reduce disparities in birth outcomes across racial, ethnic, and income groups.

Adequacy of prenatal care utilization is measured using the Adequacy of Prenatal Care Utilization Index. This is determined by the month of pregnancy when prenatal care began and the number of prenatal care visits. Women who attend 80% or greater of the recommended number of visits are considered to have received adequate prenatal care.

Percentage of births with adequate prenatal care						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	75.2	76.0	74.1	75.3	74.3	
Saratoga	85.1	87.8	86.2	86.5	87.0	1
Rensselaer	81.0	83.1	83.5	80.4	83.1	16
Schenectady	80.0	82.8	80.7	82.5	79.4	29
Albany	81.2	80.1	80.7	78.2	78.9	31
Columbia	73.9	79.3	73.4	73.9	77.4	32
Greene	76.2	76.0	72.8	75.3	71.3	47

In 2022, Saratoga County had the highest percentage of births with adequate prenatal care in the Capital Region at 87.0% (NYS Vital Statistics). Greene County had the lowest percentage of births with adequate prenatal care in the Capital Region, at 71.3%, the only rate in the Capital Region that was lower than the NYS, excluding NYC, and ranked in the bottom third of NYS counties.

Percentage of births with early (1st trimester) prenatal care						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	76.0	76.7	75.7	75.4	73.8	
Rensselaer	79.9	81.1	77.1	78.5	81.3	10
Saratoga	79.0	78.3	78.9	79.9	79.7	14
Columbia	72.8	77.5	70.0	73.4	73.9	34
Albany	79.9	77.0	77.1	77.4	73.7	36
Schenectady	78.0	76.5	73.6	77.4	73.6	37
Greene	72.4	70.3	70.6	72.4	69.1	48



Percentage of births with late (3rd trimester) or no prenatal care						
County	2018	2019	2020	2021	2022	2022 County Rank (of 59)
NYS (excl. NYC)	5.4	5.5	5.1	5.4	6.2	
Saratoga	3.5	3.3	3.2	3.2	3.6	10
Rensselaer	3.5	4.3	4.5	5.2	4.8	22
Greene	7.0	5.6	6.3	6.8	5.6	34
Columbia	6.4	4.7	8.7	6.2	6.1	39
Albany	4.9	5.8	5.6	5.9	6.2	40
Schenectady	5.3	5.6	7.8	7.2	8.0	52

Rensselaer County had the highest (best) percentage of births with early (1<sup>st</sup> trimester) prenatal care in the Capital Region, while Greene County, again, had the lowest (worst) percentage in the Capital Region (NYS Vital Statistics). Schenectady County had the highest (worst) percentage of births with late (3<sup>rd</sup> trimester) or no prenatal care, at 8.0%, ranking in the bottom 10 NYS counties, while Saratoga County had the lowest (best) percentage in the Capital Region.

Percentage of births with adequate prenatal care, 2020-2022					
County	Non-Hispanic			Hispanic	Total
	White	Black	Asian/Pacific Islander		
NYS (excl. NYC)	80%	71%	78%	72%	77%
Saratoga	87%	76%	84%	80%	87%
Rensselaer	85%	77%	74%	77%	82%
Schenectady	85%	74%	76%	78%	81%
Albany	84%	71%	78%	72%	79%
Columbia	75%	78%	66%	71%	75%
Greene	75%			63%	73%

Percentage of births with early (1st trimester) prenatal care, 2020-2022					
County	Non-Hispanic			Hispanic	Total
	White	Black	Asian/Pacific Islander		
NYS (excl. NYC)	81%	69%	77%	71%	78%
Saratoga	81%	65%	76%	74%	80%
Rensselaer	82%	69%	71%	72%	79%
Albany	81%	67%	74%	70%	76%
Schenectady	81%	66%	70%	68%	75%
Columbia	75%	74%	64%	63%	73%
Greene	72%			66%	71%



In New York State, excluding NYC, and in the Capital Region counties, percentages of births with adequate or early prenatal care were generally highest among White non-Hispanic mothers (NYS CHIRE). Columbia County, from 2020 to 2022, was the only Capital Region county where the percentage of births with adequate prenatal care was higher among Black non-Hispanic mothers. Disparities between race/ethnicity groups were slightly larger for the percentages of births with early prenatal care, especially when comparing percentages among White and Black non-Hispanic mothers. Greene and Columbia counties had some of the lowest percentages of births with prenatal care among White non-Hispanic, Asian or Pacific Islander, and Hispanic mothers (data was not available for Asian or Pacific Islander mothers in Greene County). The percentage of births with adequate prenatal care among Black non-Hispanic mothers was lowest in Albany County. The percentage of births with early prenatal care among Black non-Hispanic mothers was lowest in Saratoga and Schenectady counties.

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## Adverse Birth Outcomes

### Objectives – New York State Prevention Agenda 2025-2030

- **26.0:** Decrease the rate of infant mortality per 1,000 live births from 4.3 to 3.5.
- **27.0:** Decrease the rate of maternal mortality per 100,000 live births from 19.8 to 16.1.
- **27.1:** Decrease the rate of maternal mortality per 100,000 live births among Black, non-Hispanic birthing persons from 65.2 to 55.0.
- **28.0:** Decrease percentage of birthing persons who experience depressive symptoms during pregnancy from 12.4% to 11.5%.
- **28.1:** Decrease percentage of birthing persons aged 20-24 who experience depressive symptoms during pregnancy from 26.2% to 19.0%.
- **29.0:** Decrease percentage of birthing persons who experience depressive symptoms after birth from 11.9% to 9.9%.
- **29.1:** Decrease percentage of birthing persons aged 20-24 who experience depressive symptoms after birth from 19.2% to 18.0%.

### Highlights

- Schenectady County had the highest rate in the Capital Region for premature births (11.1%)
- Albany County had the second highest rate in the Capital Region for premature births (10.9%)
- Schenectady County had the greatest difference in percentages in the Capital Region of births that were premature between Black non-Hispanic and White non-Hispanic residents.
- Rensselaer County had the highest rates in the Capital Region of low birthweight births among White, and Black, non-Hispanic residents
- Schenectady County had the highest rate in the Capital Region of low birthweight among Asian or Pacific Islander residents
- Albany County had the highest rate in the Capital Region of low birthweight births among Hispanic residents.
- Schenectady and Columbia counties had the highest rates in the Capital Region of infant mortality in the Capital Region
- Rensselaer County had the highest disparities in the Capital Region when comparing rates among Black non-Hispanic and Hispanic residents to White non-Hispanic residents.
- Albany County had 4 maternal deaths from 2020 to 2022; Rensselaer County had 2 maternal deaths from 2020 to 2022



## Preterm Births

Preterm births are those that occur any time before 37 weeks of gestation. Although the direct causes are still uncertain, there are known risk factors. Smoking, alcohol consumption, stress, late or no prenatal care, certain gum diseases, vaginal infections, high blood pressure, diabetes, being overweight or underweight, and short spacing between pregnancies can all contribute to preterm births. Additionally, having a prior preterm birth significantly increases the risk of preterm delivery in subsequent pregnancies (CDC).

Preterm birth is a leading cause of infant death in the United States and a leading cause of long-term neurological problems in children (CDC). The final weeks of pregnancy are vital – it is when the baby’s organ systems develop to maturity. Infants born preterm may exhibit cerebral palsy, vision and hearing impairment, and developmental delays. Earlier delivery results in a higher risk for infant death or severe disability (CDC).

Percentage of premature births with <37 weeks gestation						
County	2018	2019	2020	2021	2022	2022 County Rank (of 62)
NYS (excl. NYC)	9.0	9.2	9.2	9.7	9.4	
Rensselaer	9.0	11.2	10.5	9.5	7.8	11
Columbia	8.3	8.9	9.7	8.9	8.1	13
Saratoga	6.8	8.2	9.4	8.6	8.9	21
Greene	8.7	10.4	7.3	7.7	9.3	28
Albany	9.2	9.5	10.3	10.2	10.9	56
Schenectady	9.6	10.6	10.5	10.6	11.1	57

In 2022, about 1 in 9 births in Schenectady County were premature, the highest percentage in the Capital Region and the 6<sup>th</sup> worst percentage in NYS (NYS Vital Statistics). Albany County ranked 7<sup>th</sup> worst among NYS counties for percentage of premature births. The other Capital Region counties had premature birth percentages in the top half of counties, each with a percentage lower than in NYS, excluding NYC.

Percentage of premature births (< 37 weeks gestation - clinical estimate), 2020-2022					
County	Non-Hispanic			Hispanic	Total
	White	Black	Asian/Pacific Islander		
NYS (excl. NYC)	9%	14%	9%	10%	10%
Greene	8%			11%	8%
Columbia	10%	5%	2%	9%	9%
Saratoga	9%	12%	8%	10%	9%
Rensselaer	9%	14%	5%	10%	9%
Albany	9%	14%	10%	12%	11%
Schenectady	9%	16%	10%	12%	11%



Black non-Hispanic mothers had the highest percentages of preterm births in every Capital Region county, except Columbia County (NYS CHIRE). Schenectady County had the greatest differences in premature birth percentages rates for Black non-Hispanic and White non-Hispanic mothers. Premature birth percentage among Hispanic mothers were a bit higher than among White non-Hispanic mothers in each Capital Region county, except, Columbia County. Preterm birth percentages among Asian or Pacific Islander non-Hispanic mothers were similar to, or lower than, rates among White non-Hispanic mothers.

### Low Birth Weight Births

Infants born weighing less than 2,500 grams (about 5.5 pounds) at birth are considered low birthweight, a condition associated with infant mortality and long-term disability. Risk factors for low birthweight are high or low maternal age, poor nutrition, inadequate prenatal care, cigarette smoking, drug use, history of having a low birthweight baby, some infections, lower levels of income or education, and preterm labor (March of Dimes).

Percentage low birthweight (<2.5 kg) births						
County	2018	2019	2020	2021	2022	2022 County Rank (of 59)
NYS (excl. NYC)	8.1	8.1	8.2	8.4	8.6	
Columbia	6.5	6.4	7.8	7.2	5.7	5
Saratoga	5.9	6.2	7.4	6.8	6.3	8
Greene	6.2	8.7	5.0	8.5	7.1	17
Rensselaer	7.0	9.8	8.9	7.7	7.6	23
Albany	7.7	8.5	8.3	8.4	9.1	47
Schenectady	9.9	8.7	9.0	8.4	9.9	56

In 2022, almost 1 in 10 births in Schenectady County were low birthweight, the highest percentage in the Capital Region and 4<sup>th</sup> worst rate among NYS counties (NYS Vital Statistics). Albany County had the next highest low birthweight percentage in the Capital Region, at about 1 in 11 births being low birthweight. Other Capital Region counties ranked in the top half of NYS counties.

Percentage of low birthweight births (< 2.5 kg), 2020-2022					
County	Non-Hispanic			Hispanic	Total
	White	Black	Asian/Pacific Islander		
NYS (excl. NYC)	7%	14%	9%	8%	8%
Saratoga	7%	12%	8%	6%	7%
Columbia	7%	7%	7%	8%	7%
Greene	7%			8%	7%
Rensselaer	7%	15%	7%	8%	8%
Albany	7%	13%	9%	11%	9%
Schenectady	7%	15%	11%	10%	9%

Black non-Hispanic mothers had the highest percentages of low birthweight births in every Capital Region county, except Columbia County (NYS CHIRE). In Schenectady, Rensselaer, and Albany counties, percentages of low birthweight births were at least twice as high among Black non-Hispanic mothers than White non-Hispanic mothers. Rensselaer County had the highest low birthweight percentage rates among White, and Black, non-Hispanic residents; Schenectady County had the highest percentage rate of low birthweight births among Asian or Pacific Islander residents; Albany County had the highest low birthweight percentages among Hispanic residents.

### Infant Mortality

Infant mortality has long been considered an important indicator of a community’s health status. The leading causes of infant death in the U.S. in 2022 were birth defects, preterm birth or low birth weight, sudden infant death syndrome, unintentional injuries (like motor vehicle accidents), and maternal pregnancy complications (CDC). Infant mortality can be reduced with healthy lifestyle choices, such as smoking cessation and avoidance of other harmful substances, maintenance of a nutritious diet and obtaining early and consistent prenatal care (NIH, NICHD). Public health also recognizes that healthy choices can be more difficult for individuals based on their social correlates of health, like poverty, housing stability, access to transportation, and education level.



Mortality rate per 1,000 live births - Infant (<1 year)						
County	2016-2018	2017-2019	2018-2020	2019-2021	2020-2022	2020-2022 County Rank (of 37)
Saratoga	4.1	3.5	3.6	2.8	3.2	5
Rensselaer	7.0	6.7	6.1	3.6	3.5	7
Albany	4.2	5.5	5.9	6.6	5.5	19
Schenectady	6.9	7.1	6.9	6.5	6.2	28
Columbia						
Greene						

In 2022, New York State had one of the lowest 10 state-level infant mortality rates in the US (CDC). From 2020 to 2022, Saratoga County had the lowest infant mortality rate and ranked 5<sup>th</sup> among 37 NYS counties with available data, while Rensselaer County was close behind, ranked 7<sup>th</sup> (NYS Vital Statistics). Schenectady County had the highest infant mortality rate in the Capital Region, with about 6 out of 1,000 live births resulting in death within the first year of life.

Infant mortality per 1,000 live births, 2020-2022					
County	Non-Hispanic			Hispanic	Total
	White	Black	Asian/Pacific Islander		
NYS (excl. NYC)	3.5	9.7	2.8	4.6	4.6
Saratoga	3.0	6.8	0.0	3.2	3.2
Rensselaer	1.2	9.4	0.0	13.1	3.5
Greene	5.1			10.4	5.1
Albany	2.8	12.9	2.2	6.9	5.5
Schenectady	4.1	13.5	3.7	8.6	6.2
Columbia	7.5	0.0	0.0	6.2	6.4

For 2020-2022, infant mortality rates were higher than 1 in 100 births among Black non-Hispanic residents of Schenectady and Albany counties and Hispanic residents of Rensselaer and Greene counties (NYS CHIRE). Rensselaer County had the highest disparities when comparing infant mortality rates among Black non-Hispanic and Hispanic residents to White non-Hispanic residents, partly due to a low rate among White non-Hispanic residents.

## Maternal Mortality

The World Health Organization considers a maternal death to have occurred if a woman dies while pregnant, or within 42 days of the end of their pregnancy, from any non-accidental cause. Maternal deaths have devastating long-lasting impacts on families and other survivors. The U.S. is one of only a few countries in the world to have a higher maternal mortality rate in recent years than in 2000 (NYSDOH). New York State saw a similar increasing trend after the turn of the millennium, but maternal mortality rates have decreased in recent years (NYSDOH).

Some of the top causes of pregnancy-related deaths are hemorrhage (significant loss of blood from the circulatory system), infection, or sepsis, and pulmonary or other embolisms (blood clots that restrict blood flow) (NYSDOH). Maternal mortality risk is associated with several social factors, like many other health outcomes. Access to quality medical care is an important influence on maternal health, as it can help identify health conditions or risk factors and, in turn, provide preventive measures to positively influence birth outcomes.

Maternal mortality, rate per 100,000 live births						
County	2016-2018	2017-2019	2018-2020	2019-2021	2020-2022	2020-2022 County Rank
NYS (excl. NYC)	17.8	18.8	19.3	21.9	22.6	
Capital Region	14.1	14.3	18.2	21.9	22.2	
Columbia	0.0	0.0	0.0	0.0	0.0	1
Greene	0.0	0.0	0.0	0.0	0.0	1
Saratoga	15.7	16.1	16.5	0.0	0.0	1
Schenectady	0.0	0.0	0.0	0.0	0.0	1
Rensselaer	0.0	0.0	21.0	42.9	44.0	52
Albany	32.4	32.9	34.1	45.6	46.4	53

From 2020 to 2022, Rensselaer County had 2 maternal deaths and Albany County had 4 maternal deaths, resulting in the two counties being ranked 52<sup>nd</sup> and 53<sup>rd</sup> out of 62 NYS counties (NYS Vital Records). Twenty-eight NYS counties recorded zero deaths from 2020 to 2022. Columbia, Greene, Saratoga, and Schenectady counties had 0 deaths over the 2020-2022 period.



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## Breastfeeding

### Objectives – New York State Prevention Agenda 2025-2030

- **20.0:** Increase the percentage of infants who are exclusively breastfed in the hospital from 45.9% to 48.2%.
- **20.1:** Increase the percentage of Black, non-Hispanic infants who are exclusively breastfed in the hospital from 34.1% to 35.8%.

### Highlights

- Schenectady County had the lowest percentage in the Capital Region of infants exclusively breastfed in the hospital in 2022, but was higher than the *2025-2030 Prevention Agenda* objective
- Capital Region counties had relatively favorable percentages of infants exclusively breastfed in the hospital, among Black non-Hispanic infants and Hispanic infants, in 2022
- Rensselaer County had the lowest percentage in the Capital Region, in 2022, of WIC-enrolled infants being breastfed at 6 months

Breastfeeding is the healthiest way to feed a baby. A mother's milk provides vital vitamins and nutrients for the baby, supporting the developing brain and boosting the immune system (WHO). Additionally, breastfed babies are less likely to develop diseases and infections such as diabetes, asthma, sudden infant death syndrome (SIDS), childhood obesity, and allergies (CDC). Breast milk protects the infant against a growing list of chronic diseases, including cardiovascular disease, cancer, and diabetes. Since breast milk is easier to digest than baby formulas, it also causes less vomiting and diarrhea. Mothers' bodies will naturally adjust the constitution of breast milk to accommodate a baby's changing needs. Breastfeeding also strengthens the bond between mother and baby and may help prevent certain cancers, depression, and osteoporosis in the mother (CDC). The positive economic impact of exclusive breastfeeding is well documented, saving \$1,200-\$1,500 in formula expenses in the first year (NIH National Library of Medicine). More than \$3 billion a year in medical costs for mothers and children in the United States are attributable to low rates of breastfeeding (CDC).



Percentage of infants who are exclusively breastfed in the hospital among all infants						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	50.7	49.6	48.8	47.9	46.7	
Capital Region	59.6	57.4	56.5	57.5	56.2	
Saratoga	69.6	70.8	68.7	65.9	65.1	13
Greene	62.3	63.3	61.0	58.6	62.2	19
Columbia	67.0	63.1	54.8	61.5	59.6	28
Rensselaer	59.3	56.9	55.8	56.8	54.4	33
Albany	56.0	52.1	52.2	55.2	53.4	37
Schenectady	51.4	48.0	49.7	50.5	48.8	45

In the Capital Region, about 4,500 infants (56%) of almost 8,000 born in 2022 were exclusively breastfed in the hospital (NYS Vital Records). The Capital Region’s percentage of infants exclusively breastfed in the hospital peaked at 67.4%, in 2015, and has been less than 60% since 2018. Of the Capital Region counties, Saratoga County had the highest percentage of infants exclusively breastfed in the hospital at almost 2 in 3 infants. Schenectady County had the lowest percentage in the Capital Region, with just under 1 in 2 infants being exclusively breastfed in the hospital.

Percentage of infants who are exclusively breastfed in the hospital among Black non-Hispanic infants						
County	2018	2019	2020	2021	2022	2022 County Rank (of 26)
NYS (excl. NYC)	34.1	33.2	33.1	34.2	34.4	
Capital Region	39.3	37.2	36.9	41.9	42.7	
Albany	37.7	31.6	33.3	40.2	43.3	4
Schenectady	36.8	38.2	35.9	37.1	41.7	5
Rensselaer	40.5	42.2	44.1	50.0	37.8	9
Columbia						
Greene						
Saratoga						

Breastfeeding percentages were much lower for Black non-Hispanic and Hispanic infants than for White non-Hispanic residents (NYS Vital Records). When comparing exclusive breastfeeding in hospital percentages for these groups at the county level, though, Capital Region counties ranked well into the top half of NYS counties with available data. Albany and Schenectady counties had the two highest exclusive breastfeeding in hospital percentages in the Capital Region for Black non-Hispanic infants, and the counties ranked 4th and 5th out of 26 NYS counties with available data.

Percentage of infants who are exclusively breastfed in the hospital among Hispanic infants						
County	2018	2019	2020	2021	2022	2022 County Rank (of 33)
NYS (excl. NYC)	35.2	35.4	34.4	33.8	32.3	
Capital Region	48.7	47.0	42.4	48.1	44.2	
Saratoga	65.3	73.7	64.6	65.3	57.4	2
Schenectady	36.2	36.8	32.6	41.4	44.1	9
Albany	43.5	41.3	40.0	45.6	42.5	11
Rensselaer	54.5	48.6	43.6	56.4	39.7	13
Columbia						
Greene						

For Hispanic infants, Saratoga County had a very high exclusive breastfeeding in hospital percentage at 57.4% and ranked 2nd out of 33 NYS counties with available data (NYS Vital Records). Data was not available for Columbia and Greene counties for both race/ethnicity groups’ indicators. Saratoga County did not have data available for Black non-Hispanic infants.

Many mothers initiate breastfeeding, but few babies are still exclusively breastfed a few months later. The World Health Organization recommends exclusive breastfeeding for the first 6 months of life (WHO). In the United States, while nearly half of infants are exclusively breastfed through three months, only one in four are still doing so through six months (CDC). CDC has identified numerous obstacles to mothers who wish to breastfeed, including healthcare providers who do not provide up-to-date information and instructions and hospital policies and childbirth practices that interfere with breastfeeding initiation. Other obstacles include lack of support and understanding from family and community members, and lack of accommodation at the workplace (CDC).

Percentage of WIC enrolled infants who are breastfed at 6 months				
County	2020	2021	2022	2022 County Rank (of 47)
New York State	34.8	36.9	38.0	
Albany	23.1	24.9	29.5	15
Saratoga	18.5	22.0	22.8	34
Schenectady	15.7	20.4	20.4	39
Rensselaer	17.4	16.8	18.3	44
Columbia	16.7			
Greene				

The Women, Infant and Children (WIC) Program offers nutritious food, nutrition education, and breastfeeding support for mothers with low income and their children. In 2022, Capital Region counties had percentages of breastfeeding at six months among WIC infants that were markedly lower than in New York State, overall (Pediatric Nutrition Surveillance System). Rensselaer County had the lowest percentage among Capital Region



counties with available data, at less than 20% of WIC enrolled infants being breastfed at 6 months, which ranked in the bottom 5 NYS counties with available data.

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# VIII. Mental Health & Substance Use Disorder



## Mental Health

### Objectives – New York State Prevention Agenda 2025-2030

- **5.0:** Decrease the percentage of adults who experience frequent mental distress from 15.9% to 14.3%.
- **5.1:** Decrease the percentage of adults in households with an annual income of less than \$25,000 who experience frequent mental distress from 21.0% to 18.9%.
- **6.0:** Reduce the suicide mortality rate from 7.9% to 6.7%.
- **6.2:** Reduce adolescent suicide attempts from 9.4% to 8.5% for New York State outside New York City.
- **7.0:** Reduce the percentage of adults with a major depressive episode in the past year from 6.7% to 5.7%.
- **7.1:** Increase the percentage of postpartum women who seek counseling after being told they have depression from 53.1% to 62.0%.
- **7.2:** Increase the percentage of postpartum women who receive a medication prescription after being told they have depression from 61.7% to 70.0%.

### Highlights

- Greene County had the highest percentage in the Capital Region, and the 4<sup>th</sup> highest percentage in NYS, in 2021, of residents who reported feeling down, depressed, or hopeless in past 30 days
- Schenectady County had the highest percentage in the Capital Region in 2021 of adult residents who reported ever being diagnosed by a provider with a depressive disorder
- Rensselaer, Columbia, and Greene counties had the highest rates of mental health hospitalizations in the Capital Region, in 2023, where a mental health condition was the primary diagnosis
- Schenectady, Saratoga, and Rensselaer counties had the highest rates of mental health emergency department visits in the Capital Region, in 2023, where a mental health condition was the primary diagnosis
- The 2024 *Capital Region Community Health Needs Survey* indicated that:
  - Poor mental health was twice as prevalent among Medicaid-insured and lesbian, gay, bisexual, or transgender (LGBT) Capital Region residents, compared to other Capital Region residents
  - About 1 in 4 Capital Region residents reported having frequent stress or anxiety
  - Rates of frequent stress or anxiety were higher among Medicaid-insured and LGBT Capital Region residents



### Highlights (cont.)

- Rensselaer County had the highest rates of intentional self-harm ED visits and hospitalizations in the Capital Region in 2023
- Black non-Hispanic residents had the highest rates of intentional self-harm hospitalization and ED visits in each Capital Region county in 2021-2023
  - Columbia County had the highest self-harm hospitalization rate in the Capital Region for Black non-Hispanic residents
  - Rensselaer County had the highest self-harm ED visit rate in the Capital Region for Black non-Hispanic residents
- Columbia County female residents had a 35% higher self-harm ED visit rate than male residents in 2021-2023
- Columbia County had the highest suicide mortality rate in the Capital Region, from 2020 to 2022
- Suicide mortality rates were highest among White non-Hispanic and male Capital Region residents

Mental health is a core function which has physical, spiritual, and socio-economic impacts. Poor mental health is a cause of adverse physical health outcomes, academic under-achievement, homelessness, unemployment and isolation. One in five New Yorkers experiences a diagnosable mental disorder annually; and one in ten experiences an illness serious enough to impair functioning.

Frequent mental distress during the past month among adults, age-adjusted percentage				
County	2016	2018	2021	2021 County Rank
NYS (excl. NYC)	11.2	11.8	13.2	
Capital Region	11.5	11.2	12.8	
Saratoga	9.9	13.7	9.6	4
Rensselaer	12.5	12.5	12.2	11
Schenectady	14.9	13.0	13.0	14
Columbia	8.3	7.3	13.5	18
Albany	10.6	10.1	15.6	36
Greene	15.8	16.4	20.6	59

In 2021, Greene County had the highest prevalence of frequent mental distress (reporting feeling down, depressed, or hopeless for 14 or more of the past 30 days) in the Capital Region and the 4<sup>th</sup> highest prevalence in NYS (BRFSS). Greene and Albany counties were the only Capital Region counties not meeting the *2025-2030 Prevention Agenda* objective, in 2021.



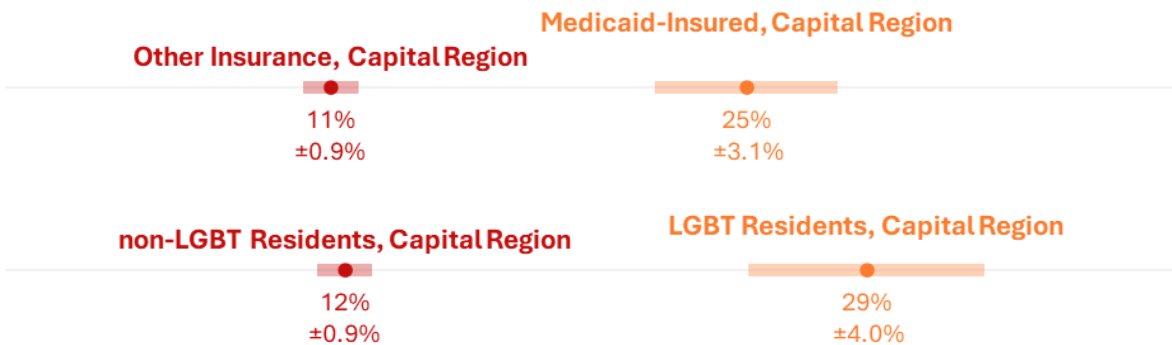
Age-Adjusted percentage of adults reporting a provider-diagnosed depressive disorder				
County	2016	2018	2021	2021 County Rank
NYS (excl. NYC)	13%	17%	19%	
Capital Region	16%	18%	19%	
Saratoga	14%	19%	15%	6
Columbia	11%	17%	17%	13
Rensselaer	15%	20%	19%	17
Greene	18%	22%	21%	22
Albany	18%	19%	21%	23
Schenectady	15%	19%	25%	38

In 2021, Schenectady County had the highest prevalence in the Capital Region of having provider-diagnosed depressive disorder (BRFSS). Greene and Albany counties also had prevalences of provider-diagnosed depression that were higher than in NYS, excluding NYC, in 2021.

### Local Survey Data

In the *2024 Capital Region Community Health Needs Survey* (see [Appendix N](#)), 13% of Capital Region respondents reported frequent mental distress. This prevalence was very similar to the estimate, from the 2021 New York State Behavioral Risk Factor Surveillance System (BRFSS), of 12.8% (see table above).

### Percent of respondents who reported having **poor mental health**:



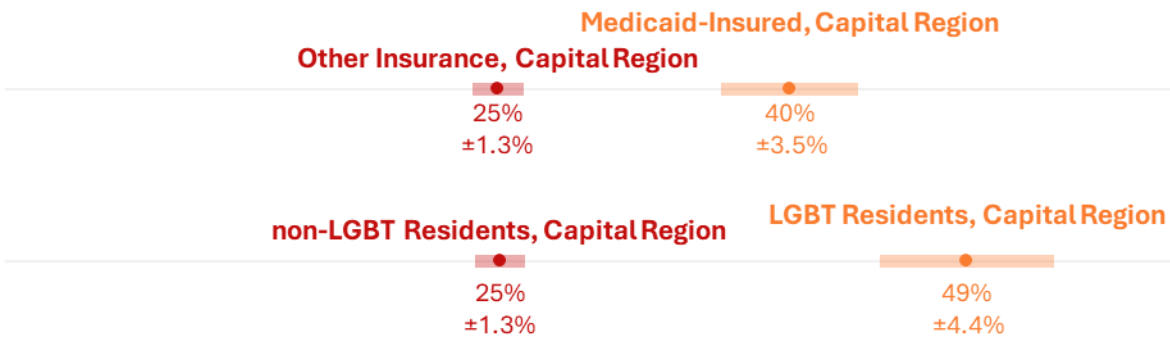
Percentages of frequent mental distress (reporting feeling down, depressed, or hopeless for 14 or more of the past 30 days) were also higher among Capital Region Medicaid-insured residents (25%) and Capital Region residents who identified as lesbian, gay, bisexual, or transgender (LGBT) (29%). This finding among LGBT residents was also consistent with BRFSS data from 2021-2022, where frequent mental distress was



estimated to be prevalent among 29.1% of adults who self-identify as lesbian, gay, bisexual, or other sexual orientation, and among 32.1% of adults who identify as transgender.

More than 1 in 4 (27%) of respondents to the *2024 Capital Region Community Health Needs Survey* (survey) indicated that they frequently (for 14 or more of the past 30 days) felt tense, stressed, nervous, or anxious). Like frequent mental distress, frequent stress or anxiety was more prevalent among Medicaid-insured (40%) and LGBT (49%) survey respondents.

### Percent of respondents who reported having **frequent stress or anxiety**:



Mental illness is treatable and preventable, and New York State has one of the world’s largest mental health systems in the United States (NYSDOH). The Capital Region provides a broad network of mental hygiene services to meet the needs of residents affected by mental illness or emotional disturbance. These services include public, private, and not-for-profit providers that target mental health needs from early childhood identification to the unique challenges of seniors. While many New Yorkers with mental illness are eligible for Medicaid, considerable numbers are part of the “working poor,” who have an income too high to qualify for public insurance, but their income is not high enough to afford regular mental health care (Hodgkinson, Godoy, Beers, & Lewin, 2017). Additionally, many people with mental illness are also uninsured, or underinsured, and have difficulty paying for needed services. Even those with Medicaid insurance can find it hard to find mental health care, as many psychiatric practices do not accept Medicaid. This stretches already overburdened public mental health service providers and can lead to delays in care or require patients to travel long distances to seek care (HHS Office of the Inspector General).

In the *2024 Capital Region Community Health Survey*, 25% of Capital Region respondents said they had seen or talked to a mental health care provider in the past 12 months, up from 22% in 2021 and 16% in 2013. An additional 5% of survey respondents indicated that they needed to see a mental health care provider but were unable, most often due to concerns about cost, lack of insurance, lack of nearby providers with availability, lack of nearby providers that accept their insurance, or a lack of time or transportation. LGBT residents more often (11%) reported having needed, but unable, to see a mental health care provider.



5% of respondents **needed, but were unable**, to visit a **mental health care provider** in the past year



Percent of respondents who **needed, but were unable**, to visit a **mental health care provider**:



In 2023, when all mental health conditions were combined, Rensselaer County had the highest rate in the Capital Region of hospitalizations, and the third highest rate in the Capital Region of emergency department visits (SPARCS). Both rates were limited to visits where a mental health condition was the primary diagnosis (i.e. reason for the visit). Columbia and Greene counties also had high rates of hospitalizations where a mental health condition was the primary diagnosis. Schenectady County had the highest rate in the Capital Region, in 2023, of emergency department visits where any mental health condition was the primary diagnosis. Saratoga County had the second highest rate of emergency department visits in the Capital Region in 2023 where any mental health condition was the primary diagnosis.

All Mental Health Conditions (Primary Diagnosis) Hospitalizations, Age-Adjusted Rates per 100,000					
County	2019	2020	2021	2022	2023
NYS (excl. NYC)	543	469	466	436	436
Capital Region	644	536	491	411	443
Saratoga	455	426	441	402	382
Schenectady	772	551	483	383	410
Albany	614	539	488	402	446
Greene	925	604	164	141	510
Columbia	925	721	851	795	527
Rensselaer	728	631	578	447	544



All Mental Health Conditions (Primary Diagnosis) Emergency Department Visits, Age-Adjusted Rates per 100,000					
County	2019	2020	2021	2022	2023
NYS (excl. NYC)	1089	884	963	980	1011
Capital Region	1173	952	1120	1171	1111
Albany	1030	840	1046	983	967
Columbia	1361	884	263	381	998
Greene	1110	911	1036	1156	1102
Rensselaer	1522	1371	1393	1275	1254
Saratoga	1164	865	1252	1405	1261
Schenectady	1270	984	1647	1966	1273

## Intentional Self-Harm & Suicide

Mental health is closely linked to intentional self-harm and suicide. In general, more than 45 percent of people who die by suicide are suffering from a diagnosable mental condition (NAMI). One half of all chronic mental health conditions begin by the age of 14, with depression being the leading cause of disability worldwide. Suicide rates have increased in the U.S. by more than one-third over the past two decades (CDC). Suicide was one of the top ten leading causes of death for individuals aged 10 to 64 years and was the 2<sup>nd</sup> leading cause of death for people aged 10 to 34 years (CDC). Those more at risk of suicide are teens and young adults, especially those that identify as lesbian, gay, bisexual, or transgender. Lesbian, gay, and bisexual youth have almost four times higher risk of attempting suicide than straight youth. Transgender adults have an almost nine times higher risk of attempting suicide, compared to cisgender adults (NAMI). The impact of suicidal behavior is not fully represented in the number of deaths, as suicidal attempts are not always successful. Intentional self-harm can also lead to an emergency department visit or hospitalization or may not reach public health data systems.

Intentional Self-Harm Hospitalization, Age-Adjusted Rates per 100,000					
County	2019	2020	2021	2022	2023
NYS (excl. NYC)	313.4	273.7	272.7	261.8	255.2
Capital Region	443.9	332.9	320.6	290.2	296.1
Saratoga	284.6	288.1	305.3	284.0	217.4
Greene	554.7	367.6	162.7	113.0	252.3
Columbia	520.6	386.1	489.3	469.1	260.7
Schenectady	569.1	393.6	321.2	266.1	294.5
Albany	432.5	321.4	314.0	289.4	330.9
Rensselaer	557.6	367.4	365.9	336.0	388.9



Intentional Self-Harm Emergency Department Visit, Age-Adjusted Rates per 100,000					
County	2019	2020	2021	2022	2023
NYS (excl. NYC)	296.7	275.4	324.1	344.1	343.1
Capital Region	497.7	386.4	494.4	600.7	557.9
Saratoga	198.8	175.1	232.9	271.0	242.9
Columbia	190.5	246.8	389.3	268.6	290.6
Greene	245.3	204.1	147.1	209.8	300.1
Schenectady	646.4	468.6	555.4	647.0	444.6
Albany	625.7	511.1	594.1	768.9	764.5
Rensselaer	734.4	487.1	772.2	943.0	904.5

In the Capital Region, from 2021 to 2023, self-inflicted injuries resulted in more than 5,000 emergency department (ED) visits and almost 3,000 hospitalizations, each year. Rensselaer County had the highest rates in the Capital Region of both ED visits and hospitalizations due to intentional self-harm; Albany County had the second highest rates of both ED visits and hospitalizations due to intentional self-harm; Schenectady County, the third highest rates of both ED visits and hospitalizations due to intentional self-harm in the Capital Region. Saratoga County had the lowest rates in the Capital Region of ED visits and hospitalizations due to intentional self-harm.

Intentional Self-Harm Hospitalization, Age-Adjusted Rates per 100,000, 2021-2023				
County	Black NH	Hispanic	White NH	Total
NYS (excl. NYC)	318.2	142.9	268.3	263.3
Capital Region	495.9	208.9	281.7	302.4
Greene	199.8	131.5	168.4	176.0
Saratoga	441.5	86.4	272.7	269.0
Schenectady	450.3	195.8	266.9	294.1
Albany	539.7	249.3	276.2	311.4
Rensselaer	536.8	280.8	333.1	363.8
Columbia	581.3	248.9	393.2	408.8

Intentional Self-Harm Emergency Department Visit, Age-Adjusted Rates per 100,000, 2021-2023				
County	Black NH	Hispanic	White NH	Total
NYS (excl. NYC)	526.8	223.9	321.1	337.1
Capital Region	1194.2	425.9	470.9	550.9
Greene	312.4	122.8	196.5	217.6
Saratoga	736.3	115.7	238.8	249.0
Columbia	589.1	154.0	302.8	317.5
Schenectady	939.4	369.6	506.1	549.0
Albany	1363.7	527.0	600.2	709.3
Rensselaer	1607.2	786.4	759.5	872.4



Black non-Hispanic residents had the highest rates of intentional self-harm hospitalization and ED visits in each Capital Region county. Hispanic residents generally had the lowest intentional self-harm hospitalization and ED visit rates of the three race/ethnicity groups. The highest intentional self-harm hospitalization rate in 2021-2023 was among Black non-Hispanic Columbia County residents, while the highest ED visit intentional self-harm rate was among Black non-Hispanic Rensselaer County residents.

Intentional Self-Harm, Ratio of Female and Male Age-Adjusted Rates per 100,000, 2021-2023		
County	Hospitalization	ED Visit
NYS (excl. NYC)	1.05	1.14
Capital Region	0.97	0.99
Schenectady	0.94	0.85
Albany	0.87	0.94
Greene	0.92	1.10
Rensselaer	1.06	0.98
Saratoga	1.06	1.26
Columbia	1.00	1.35

Female and male residents had similar intentional self-harm hospitalization rates in each Capital Region county. For intentional self-harm ED visits, Columbia County female residents had a 35% higher intentional self-harm rate than male residents; in Saratoga County, the female intentional self-harm ED visit rate was 26% higher than the male intentional self-harm ED visit rate.

Suicide mortality, age-adjusted rate per 100,000 population						
County	2016-2018	2017-2019	2018-2020	2019-2021	2020-2022	2020-2022 County Rank
NYS (excl. NYC)	9.9	9.9	9.8	9.7	9.7	
Capital Region	11.3	11.5	10.5	10.0	9.3	
Albany	9.7	10.8	9.7	9.0	7.9	10
Greene	15.7	20.8	16.3	14.3	8.4	12
Saratoga	11.5	11.1	10.2	9.6	9.5	17
Rensselaer	11.8	11.7	11.8	10.4	10.2	20
Schenectady	10.2	8.7	7.5	9.9	10.4	21
Columbia	15.9	14.3	14.9	14.2	12.4	32

The Capital Region averaged about 96 suicide deaths per year from 2020 to 2022, down from 111 per year from 2016 to 2018. None of the Capital Region counties met the *2025-2030 Prevention Agenda* objective for suicide mortality, in 2020-2022. The Capital Region counties almost all ranked in the top half of NYS counties, though. Columbia County had the highest suicide mortality rate in the Capital Region, from 2020 to 2022.



In the Capital Region, overall, from 2020 to 2022, the age-adjusted suicide mortality rate among White non-Hispanic residents was 1.8 times higher than the rate among Black non-Hispanic residents and 1.9 times higher than the age-adjusted suicide mortality rate among Hispanic residents. The Capital Region-wide age-adjusted suicide mortality rate among male residents was 3.2 times higher than among female residents, ranging from 2.0 to 3.8 times higher in counties with available 2020-2022 data.

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## Substance Use Disorder

National Survey on Drug Use and Health (NDUH) estimates suggest about 1 out of every 6 New Yorkers aged 18 or older has a substance use disorder, representing about 2.75 million New Yorkers (SAMHSA). Substance use disorder (SUD), however, affects many more New Yorkers, including the friends and family of individuals with SUD. Opioid overdose deaths increased sharply in 2015 and again around 2020, although in 2024 overdose fatality rates dropped significantly (NYSDOH). Opioid mortality rates are still high, and too many people are dying to overdose.

Substance Use Disorders (SUD) Hospitalization, Age-Adjusted Rates per 100,000					
County	2019	2020	2021	2022	2023
NYS (excl. NYC)	1181.3	1084.9	1088.6	1012.2	1040.4
Capital Region	1286.1	1150.0	1131.3	1038.8	1040.9
Saratoga	859.6	818.9	844.9	825.6	796.4
Columbia	1471.8	1160.9	1465.8	1356.3	983.9
Schenectady	1404.1	1182.9	1154.2	1005.9	1084.7
Rensselaer	1400.0	1223.6	1171.4	1068.1	1107.5
Greene	1554.0	1231.8	713.1	784.5	1186.0
Albany	1463.1	1370.5	1351.0	1216.4	1194.8

Substance Use Disorders (SUD) Emergency Department Visit, Age-Adjusted Rates per 100,000					
County	2019	2020	2021	2022	2023
NYS (excl. NYC)	1414.9	1347.8	1447.1	1510.3	1645.8
Capital Region	1510.2	1375.4	1604.8	1690.7	1433.9
Saratoga	994.8	935.3	1023.4	1111.1	1125.4
Rensselaer	1593.2	1343.4	1736.3	1675.7	1305.2
Greene	1354.2	1185.1	528.9	540.9	1447.8
Schenectady	1790.3	1740.4	1767.8	1607.6	1600.7
Albany	1835.4	1632.3	1759.4	1774.0	1623.8
Columbia	1334.8	1320.8	3619.8	5397.7	1880.4

Albany County, in 2023, had the highest rate of Substance Use Disorder (SUD) hospitalizations in the Capital Region and the second highest rate in the Capital Region for SUD emergency department visits (SPARCS). Columbia County had the highest SUD emergency department visit rate in the Capital Region in 2023. Greene County had the second highest SUD hospitalization rate in the Capital Region in 2023. Schenectady County had the third highest in the Capital Region for SUD emergency department visits in 2023.



## Alcohol Use Disorder

### Objectives – New York State Prevention Agenda 2025-2030

- **8.0:** Reduce the percentage of high school students reporting alcohol use before the age of 13 from 17.2% to 15.5% in New York City.
- **8.1:** Reduce the percentage of high school students reporting alcohol use before the age of 13 from 13.6% to 12.2% for New York State outside New York City.
- **15.0:** Decrease the prevalence of binge or heavy drinking among all adults 18 years of age and older from 16.2% to 14.6%.
- **15.1:** Decrease the prevalence of drinking by high school students from 16.8% to 13.4% (New York City).
- **15.2:** Decrease the prevalence of drinking by high school students from 23.9% to 19.1% (New York State outside New York City)

### Highlights

- Saratoga and Rensselaer counties had the highest rates of binge drinking in the Capital Region in 2021
- Greene County had the highest rate in New York State for alcohol-related motor vehicle injuries and deaths in 2020-2022
- Greene County had the highest cirrhosis hospitalization rate in the Capital Region in 2020-2022
- Greene County had the highest cirrhosis mortality rate in the Capital Region in 2020-2022

Alcohol is the substance most commonly used by adults, with 85% of adults over the age of 21 reporting they ever drank alcohol (NIH NIAAA). Binge drinking is a common pattern of excessive alcohol use that brings a person's blood alcohol concentration (BAC) to 0.08 percent or above (NIH NIAAA). Binge drinking is associated with many health problems, like alcohol poisoning, unintentional and intentional injuries, sexually transmitted infections, unintended pregnancy, cardiovascular disease, neurological damage and more (CDC).



Binge drinking during the past month among adults, age-adjusted percentage				
County	2016	2018	2021	2021 County Rank
NYS (excl. NYC)	19.1	18.4	16.1	
Capital Region	18.1	18.5	16.8	
Schenectady	18.3	15.8	12.6	8
Albany	13.1	19.2	15.8	22
Greene	17.3	16.1	20.9	48
Columbia	18.4	21.1	21.2	50
Rensselaer	20.1	23.5	21.9	54
Saratoga	24.0	19.5	22.1	55

Four Capital Region counties ranked in the bottom quarter of NYS counties for percentages of adults who binge drink, each with at least 1 in 5 adults reporting binge drinking in the past month, in 2021 (BRFSS). Saratoga County had the highest adult binge drinking rate, at 22.1%, with Rensselaer County close behind at 21.9%. Columbia and Greene counties also had high rates of adult binge drinking.

Alcohol related motor vehicle injuries and deaths per 100,000						
County	2016-2018	2017-2019	2018-2020	2019-2021	2020-2022	2020-2022 County Rank (of 60)
Rensselaer	33.5	34.1	30.9	27.3	26.3	16
Saratoga	41.4	38.1	32.0	28.4	29.4	26
Albany	35.5	31.2	27.8	26.4	29.5	27
Schenectady	34.0	35.5	37.8	36.5	33.7	37
Columbia	48.6	46.7	42.3	46.2	42.1	55
Greene	54.1	52.7	48.5	54.0	55.4	60

Greene County had the highest rate in New York State for alcohol-related motor vehicle injuries and deaths in 2020-2022 (NYS Department of Motor Vehicles). Columbia County also had a relatively high alcohol-related motor vehicle injury and death rate and ranked in the bottom 10 of NYS counties.



Cirrhosis hospitalization rate per 10,000						
County	2016-2018	2017-2019	2018-2020	2019-2021	2020-2022	2020-2022 County Rank (of 60)
Rensselaer	2.8	3.3	3.2	3.7	3.2	9
Schenectady	3.4	3.9	4.0	4.0	3.7	17
Albany	3.7	3.9	3.6	3.8	4.2	27
Columbia	2.7	3.1	3.2	4.2	4.2	27
Saratoga	3.3	3.1	3.4	3.3	4.2	27
Greene	4.8	4.2	4.3	4.4	5.0	51

Cirrhosis mortality rate per 100,000						
County	2016-2018	2017-2019	2018-2020	2019-2021	2020-2022	2020-2022 County Rank (of 59)
Rensselaer	9.8	9.6	8.2	9.8	9.4	11
Columbia	13.3	12.8	14.5	14.3	10.9	15
Saratoga	10.9	10.7	10.9	11.0	12.9	24
Albany	6.8	8.6	11.5	13.3	13.2	25
Schenectady	10.8	12.0	12.4	13.0	14.3	31
Greene	11.2	10.5	14.8	16.1	16.1	42

Greene County had the highest hospitalization and mortality rates in the Capital Region due to cirrhosis, in 2020-2022 (SPARCS). Greene County’s cirrhosis hospitalization rate ranked in the bottom 10 of NYS counties (NYS Vital Statistics).



## Opioid Use Disorder

### Objectives – New York State Prevention Agenda 2025-2030

- **9.0:** Maintain (no increase) the rate of opioid analgesics prescriptions per 1,000 people at 273.1.
- **9.1:** Decrease the percentage of patients who were opioid naïve and received an opioid prescription of more than 7 days per 1,000 people from 15.1 to 13.6.
- **10.0:** Increase the number of unique individuals enrolled in OASAS treatment programs from 1,107.8 to 1,218.6.
- **10.1:** Increase the number of unique individuals enrolled in OASAS treatment programs, who reported any opioid as the primary substance at admission from 402.8 to 443.
- **10.2:** Increase the number of unique individuals enrolled in OASAS treatment programs, who reported alcohol as the primary substance at admission from 403.5 to 443.9.
- **11.0:** Increase the number of patients who received at least one buprenorphine prescription for opioid use disorder from 443.6 to 488.0.
- **12.0:** Reduce the rate of overdose deaths involving drugs per 100,000 people from 32.3 to 22.6.
- **12.1:** Reduce the rate of overdose deaths for Black, non-Hispanic residents from 59.2 to 35.5 per 100,000.
- **13.0:** Increase the number of naloxone kits distributed from 401,856 to 602,784.

### Highlights

- Columbia, Albany, and Schenectady counties had the highest opioid overdose mortality rates in the Capital Region in 2022, based on New York State Vital Statistics data
- Greene and Rensselaer counties had high rates of drug overdose mortality in 2024, based on National Vital Statistics System data
- Saratoga, Albany, and Rensselaer counties had relatively low buprenorphine prescribing rates, compared to other NYS counties, although all Capital Region counties were meeting the New York State Prevention Agenda 2025-2030 objective in 2023
- Saratoga County had the lowest rate in the Capital Region for naloxone kits distributed through the OASAS harm reduction supply program in 2024
- Greene County had the highest opioid analgesic prescribing rate in the Capital Region in 2023
- Albany County had the highest rate in the Capital Region of opioid overdose emergency department visits in 2022
- Neonatal abstinence syndrome rates have decreased significantly in Capital Region counties over the past 7 years, to the point where only Schenectady County had a reportable rate in 2022



The opioid epidemic has evolved and changed over time. It started in the 1990s with a rise in prescription opioid overdose deaths due to an overprescribing of prescription opioids, which led many people to become addicted to opioids (CDC). The second ‘wave’ of the opioid epidemic started in the U.S. in 2010 with a noticeable increase in heroin overdose deaths. The third wave took overdose fatality rates to unprecedented levels and was driven by the introduction of synthetic opioids to the unregulated drug supply. Synthetic opioids (like fentanyl) are orders of magnitude more potent than heroin, which makes them more dangerous and addictive. In recent years, synthetic opioids are still the main driver of overdoses, but the epidemic has shifted more to poly-substance use. In New York State, in 2023, about 7 out of 8 (87%) drug overdose deaths involved an opioid, with about 4 out of 5 (81%) involving an illegally made fentanyl or analogue of fentanyl (NYSDOH). At the same time, 62% of drug overdose deaths in NYS in 2023 involved a stimulant, with more than 50% of overdose deaths involving cocaine, specifically.

Overdose deaths involving any opioids, age-adjusted rate per 100,000 population, NYS Vital Statistics						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	18.5	17.3	24.3	26.8	27.5	
Capital Region	15.2	16.1	21.8	27.1	24.1	
Saratoga	12.1	9.6	18.3	18.0	14.4	9
Rensselaer	14.5	17.0	24.1	24.5	23.3	24
Greene	27.6	17.9	34.5	55.4	24.8	27
Schenectady	17.5	21.3	19.4	31.0	29.0	38
Albany	15.5	17.3	23.7	29.1	29.3	39
Columbia	9.9	18.7	18.4	27.5	29.4	40

Based on the latest data from NYS Vital Statistics, opioid overdose mortality in the Capital Region was more than 50% higher in 2022 than it was in 2018 and almost seven times higher than it was in 2010 (3.5 per 100,000). Columbia, Albany, and Schenectady counties had the highest opioid overdose mortality rates in the Capital Region, in 2022.

Provisional Drug Overdose Deaths, crude rate per 100,000 population, National Vital Statistics System						
County	2020	2021	2022	2023	2024	2024 NYS County Rank (of 43)
NYS (excl. NYC)	25.3	27.9	29.9	30.0	20.4	
Capital Region	21.6	28.4	27.1	28.9	20.7	
Saratoga	17.7	16.9	16.5	13.9	8.0	1
Schenectady	21.3	32.6	30.7	30.1	21.3	21
Columbia		27.8	31.0	29.4	22.9	24
Albany	26.0	31.4	31.7	31.7	23.8	25
Rensselaer	24.3	28.7	28.7	44.3	28.7	34
Greene	31.5	52.6	27.3	29.4	31.5	37



Based on the latest available data from the National Vital Statistics System, drug overdose deaths in NYS, excluding NYC, increased by 89% from 1,802 in 2015 to 3,408 in 2023. Provisional 2024 data, which is still subject to change, for NYS, excluding NYC, shows about a 30% decrease from 2023 to 2,319 deaths in 2024. For the 2020-2024 period, drug overdose death rates for the Capital Region, overall, were similar to rates in NYS, excluding NYC. Of the 43 NYS counties with reportable 2024 data, Saratoga County had the lowest overdose mortality rate in the state, while Greene and Rensselaer counties had some of the highest overdose mortality rates in the state.

Patients who received at least one buprenorphine prescription for opioid use disorder, age-adjusted rate per 100,000 population						
County	2019	2020	2021	2022	2023	2023 County Rank
NYS (excl. NYC)	620.3	638.4	637.7	657.2	705.4	
Capital Region	589.8	608.1	599.5	635.0	666.3	
Greene	1101.8	1158.7	1111.6	1358.1	1795.9	7
Columbia	894.2	852.5	842.5	880.6	927.7	31
Schenectady	724.8	718.8	692.5	713.3	715.2	42
Rensselaer	579.7	580.6	577.0	592.5	611.4	43
Saratoga	475.1	505.9	503.6	541.2	560.0	49
Albany	492.2	526.5	525.8	546.9	550.0	50

Buprenorphine is used in medication-assisted treatment to help people reduce or quit their use of opiates. In combination with counseling and behavioral therapies, buprenorphine can provide an effective approach to the treatment of opioid dependency (SAMHSA). While all Capital Region counties were meeting the NYS *2025-2030 Prevention Agenda* objective for buprenorphine prescribing, the Capital Region's rate was lower than that of NYS, excluding NYC (NYS Prescription Monitoring Program Registry). Greene County had the 7<sup>th</sup> highest prescribing rate in NYS in 2023, while Albany, Saratoga, and Rensselaer counties had the lowest prescribing rates in the Capital Region in 2023. Buprenorphine prescribing increased by 63% in Greene County from 2019 to 2023. Other Capital Region counties' buprenorphine prescribing rates increased by 18% or less and Schenectady County's buprenorphine prescribing rate decreased slightly, from 2019 to 2023.

Naloxone is a medication that blocks the effects of opioid drugs and can rapidly reverse an overdose (DrugBank). New York State law allows anyone to administer naloxone to save the life of an individual experiencing an opioid overdose (NYSDOH). NYS has an Opioid Overdose Prevention Initiative which trains non-medical people how to recognize and respond to an opioid overdose. New York State also has a standing order for naloxone, which allows anyone to obtain naloxone at a pharmacy without needing their own prescription. Additionally, the New York State Naloxone Co-payment Assistance Program (N-CAP) covers up to \$40 of the out-of-pocket cost for most insured people at participating pharmacies (NYSDOH).



Naloxone Kits Distributed by OASAS to Individuals and Organizations, per 1,000 population		
County	2024	2024 NYS County Rank
NYS (excl. NYC)	11.9	
Capital Region	23.5	
Greene	56.6	2
Albany	34.0	3
Columbia	32.1	5
Schenectady	26.7	9
Rensselaer	13.8	24
Saratoga	5.4	50

The New York State Office of Addiction Services and Supports (OASAS) has a harm reduction supply delivery program which allows individuals and organizations to order naloxone, as well as fentanyl and xylazine test strips, at no cost. Greene has the second highest rate in New York State for naloxone kits distributed through the OASAS harm reduction supply program in 2024 (OASAS). Albany, Columbia, and Schenectady counties all have rates of naloxone kit distribution through the OASAS harm reduction supply program in 2024 that ranked in the top 10 New York State counties. Saratoga County ranked 50<sup>th</sup> out of 62 NYS counties.

Opioid analgesic prescription, age-adjusted rate per 1,000 population						
County	2019	2020	2021	2022	2023	2023 County Rank
NYS (excl. NYC)	377.2	342.4	321.2	300.2	283.8	
Capital Region	366.7	335.0	309.8	290.1	271.2	
Albany	318.4	289.0	266.7	249.2	233.1	9
Saratoga	335.8	308.4	285.6	271.7	256.8	13
Columbia	414.8	364.5	331.7	300.0	272.0	16
Rensselaer	419.0	376.8	349.6	322.7	306.4	24
Schenectady	397.2	376.1	351.5	333.6	311.5	29
Greene	493.1	443.7	413.1	389.2	348.2	37

Prescription opioid use can be a predictor of other opioid use. New York State has made steady progress over the last decade in reducing the rate of opioid analgesics prescriptions to reduce opioid addictions. In 2023, there were over 5.4 million opioid analgesic prescriptions in New York State, down from 9.8 in 2013, and about 332,000 opioid analgesic prescriptions in the Capital Region, down from about 596,000 in 2013 (NYS Prescription Monitoring Program Registry). In 2023, Greene County had the highest opioid analgesic prescription rate in the Capital Region, at about 390 prescriptions per 1,000 population, down from 542 per 1,000 in 2018. Albany and Saratoga counties had the lowest opioid analgesic prescribing rates in the Capital Region.



Emergency department visits (including outpatients and admitted patients) involving any opioid overdose, age-adjusted rate per 100,000 population						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	72.8	66.7	74.3	73.1	64.8	
Capital Region	59.1	58.5	70.1	66.2	63.3	
Saratoga	31.7	34.7	46.9	55.5	40.8	15
Columbia	88.6	89.3	84.3	63.4	51.7	22
Greene	101.8	106.2	95.4	82.8	65.6	33
Schenectady	51.4	67.3	97.6	92.6	69.2	38
Rensselaer	75.1	60.1	59.7	48.6	69.8	39
Albany	64.9	60.8	75.3	70.3	77.5	46

In 2022, Albany County had the highest rate in the Capital Region of emergency department visits involving any opioid overdose, while Saratoga County had the lowest rate of emergency department visits involving any opioid in the Capital Region (SPARCS).

Newborns with neonatal withdrawal symptoms and/or affected by maternal use of opioid or other substance (any diagnosis), crude rate per 1,000 newborn discharges					
County	2018	2019	2020	2021	2022
NYS (excl. NYC)	15.2	12.6	13.7	10.9	9.6
Capital Region	10.2	9.9	9.7	5.6	6.1
Albany	10.6	8.1	9.5	6.7	
Columbia					
Greene					
Rensselaer	8.7	11.4	9.7		
Saratoga	9.1		7.3	5.2	
Schenectady	7.7	13.1	9.4		10.8

Neonatal Abstinence Syndrome (NAS) is a group of conditions caused when a baby experiences withdrawal from certain drugs they were exposed to in the womb before birth. NAS is most often caused when the mother takes opiates during pregnancy. NAS symptoms can include: low birthweight, jaundice, body tremors, excessive crying, poor feeding, breathing problems, fever, trouble sleeping, diarrhea, and stuffy nose or sneezing (March of Dimes). The Capital Region's neonatal withdrawal syndrome rate of 6.1 per 1,000 newborn discharges in 2022 was almost 50% lower than it was in 2016, at 11.6 per 1,000 (SPARCS). Neonatal withdrawal syndrome rates have gone down significantly in Capital Region counties over the past seven (7) years, to the point where only Schenectady County had a reportable neonatal withdrawal syndrome rate in 2022.



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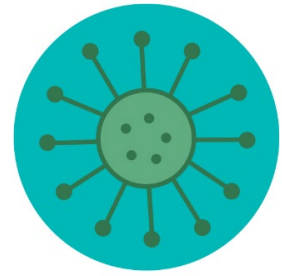
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# IX. Infectious Disease



## Vaccine-Preventable Disease

### Objective – New York State Prevention Agenda 2025-2030

- **36.0:** Increase the up to date seven-vaccine immunization rate for children aged 24-35 months from 59.3% to 62.3%.
- **37.0:** Increase the percentage of 13-year-old adolescents with a complete Human Papillomavirus (HPV) vaccine series from 25.7% to 28.7%.

### Highlights

- Greene County had the lowest rate in the Capital Region of children aged 24-35 months who had received the full seven-vaccine immunization series
- In 2022, about two-thirds of 13-year-olds in the Capital Region were not completely immunized for Human Papillomavirus (HPV)
- Columbia County had the lowest percentage in the Capital Region for 13-year-olds who were completely immunized for HPV
- Incidence rates of COVID-19 have dropped precipitously since the first few years of the pandemic
- Capital Region counties all had low rates of COVID-19 positive tests in the latest year of data

Vaccines are used worldwide to protect against disease by inducing immunity. Immunization is a proven tool for controlling and even eradicating disease. Thanks to vaccines, diseases such as smallpox have been eradicated and many other vaccines have saved millions of lives all over the world. Vaccines contain or produce the same antigens that are involved in disease. In the case of viral vaccines, a weakened, harmless virus is introduced to the body, while mRNA vaccines use our own cell's machinery to produce viral antigens (CDC). Both types of vaccines bolster our immunity to a disease, without causing it, by generating memory B and T cells with specific immunologic memory that can more quickly respond if an infection occurs with that virus Goel, et. al., 2021).



## Childhood Immunization

The Centers for Disease Control and Prevention (CDC) sets a standard child immunization schedule of recommended ages to be vaccinated. Receiving vaccines at a young age allows infants and children to become immune early in life, before they are exposed to any of the diseases. Delaying or skipping shots can put children at risk of developing diseases during the delay period (CDC). In New York State, school entry laws require children to receive their vaccinations prior to starting school, so children's immunization levels are high (NYSDOH).

Percentage of 24-35-month old children with the 4:3:1:3:3:1:4 immunization series						
County	2019	2020	2021	2022	2023	2023 County Rank
NYS (excl. NYC)	66.9	66.3	65.2	64.0	69.1	
Capital Region	77.1	74.5	74.6	69.5	72.7	
Saratoga	80.2	81.4	84.9	78.6	83.6	8
Schenectady	75.1	72.2	67.2	62.8	72.9	34
Albany	80.6	73.2	71.7	68.3	70.1	39
Columbia	77.5	61.0	71.2	65.6	68.3	42
Rensselaer	71.3	75.8	79.2	70.1	66.2	46
Greene	64.7	70.5	62.6	64.5	62.3	50

In 2023, almost 2,500 children, of about 9,000, aged 24-35 months in the Capital Region were not fully immunized (NYS Immunization Information System). Saratoga County had the highest rate of children who had received the full seven-vaccine immunization series, while Greene County had the lowest rate in 2023.



## Human Papillomavirus Immunization

Human Papillomavirus (HPV) is the most common sexually transmitted disease. HPV infection is very common, with about 13 million people becoming infected each year (CDC). HPV is easily spread by intimate skin-to-skin contact with an infected individual. Almost everyone will get HPV during their life. There are types of HPV that can cause cancers of the genital, anal, and throat areas of men and women. Other types of HPV can cause genital warts, which in many cases are not visible to the naked eyes. Most infected people do not develop symptoms and are unaware they have HPV, increasing the chances of unintended transmission (NYSDOH). Nearly all cases of cervical cancer cases are caused by HPV and 90% of HPV-caused cancer can be prevented by HPV vaccination (CDC). Cervical cancer takes years to develop and typically does not cause symptoms until it is at an advanced stage (CDC). It can be treated only when it is diagnosed at an early stage, through screening.

The CDC now recommends two doses of HPV vaccines for 11- to 12-year-olds, rather than three doses, as previously recommended, unless their first dose was on or after their 15<sup>th</sup> birthday (CDC). Young adults can receive the vaccine up to the age of 26 years (NYSDOH). Individuals over the age of 26 can still receive the HPV vaccine if their healthcare provider agrees it would be beneficial, but those over 45 years of age are not authorized to receive the vaccine. It is important that both doses of the vaccine be given before sexual activity begins for the vaccine to be most effective.

Percentage of 13-year-old adolescents with a complete HPV vaccine series						
County	2019	2020	2021	2022	2023	2023 County Rank
NYS (excl. NYC)	32.0	32.8	33.8	32.8	31.3	
Capital Region	34.8	35.6	35.1	33.9	33.5	
Albany	44.5	42.9	40.4	40.5	39.8	10
Schenectady	33.6	36.6	37.6	40.0	36.1	15
Saratoga	27.1	29.4	31.6	28.1	30.7	28
Greene	39.3	34.9	28.3	31.1	28.3	33
Rensselaer	29.9	34.5	32.6	29.4	27.9	35
Columbia	33.7	25.9	27.8	22.2	23.0	47

In 2022, about two-thirds of 13-year-olds in the Capital Region were not completely immunized for HPV (NYS Immunization Information System). Columbia County had the lowest percentage of 13-year-olds who were not completely immunized for HPV in the Capital Region, at 22.2%, and ranked 47<sup>th</sup> out of 62 NYS counties.



## COVID-19

Coronavirus disease (COVID-19) is an infectious disease caused by SARS-CoV-2 virus. While most people infected with the virus experience mild to moderate respiratory illness, similar to the flu, some will become severely ill and require medical attention. Older people, and those with underlying medical conditions, are more likely to develop serious illnesses (WHO).

The first case of COVID-19 was identified on December 31, 2019, in Wuhan, China, while the first confirmed U.S. case occurred on February 20, 2020 (American Journal of Managed Care). In March 2020, the WHO declared COVID-19 a worldwide pandemic, and the U.S. declared a State of Emergency due to COVID-19. By May 2020, the U.S. had over 100,000 deaths due to COVID-19, and mid-June 2020, the U.S. passed one million cases. In August 2020, COVID-19 became the 3<sup>rd</sup> leading cause of death in the U. S. COVID-19 was still the 3<sup>rd</sup> leading cause of death in the Capital Region, in 2022, and the 5<sup>th</sup> leading cause of premature death (NYSDOH). By the end of 2020, the U.S. Food and Drug Administration approved mRNA vaccines from Pfizer/BioNTech for those and Moderna (AJMC). COVID-19 vaccines were first approved for adults, then for all ages, 6 months and older, although parents were recommended to discuss vaccination with their children's health care provider (CDC). In August 2025, the Advisory Committee on Immunization Practices (ACIP) limited access to those under the age of 65 years, allowing vaccination only if they have a high-risk health condition (The New York Times). Then, in September 2025, New York Governor Kathy Hochul signed an executive order temporarily allowing pharmacists to prescribe and administer the COVID-19 vaccine to individuals aged 3 years or older (NYS Governor Kathy Hochul).

Rate of Positive COVID-19 tests, per 10,000 population						
County	Aug 2020 - Jul 2021	Aug 2021 - Jul 2022	Aug 2022 - Jul 2023	Aug 2023 - Jul 2024	Aug 2024 - Jul 2025	Aug 2024 - Jul 2025 NY County Rank
NYS (excl. NYC)	874.4	1830.1	585.0	364.2	184.0	
Capital Region	693.2	1601.8	446.4	186.8	94.5	
Rensselaer	670.4	1690.4	439.3	168.5	77.1	2
Albany	721.4	1488.4	433.6	165.0	82.0	3
Schenectady	780.6	1705.0	483.3	183.2	97.6	5
Columbia	596.9	1339.5	466.7	168.5	102.4	8
Greene	681.3	1409.1	409.0	202.5	106.8	11
Saratoga	639.4	1729.8	445.7	232.4	116.5	13

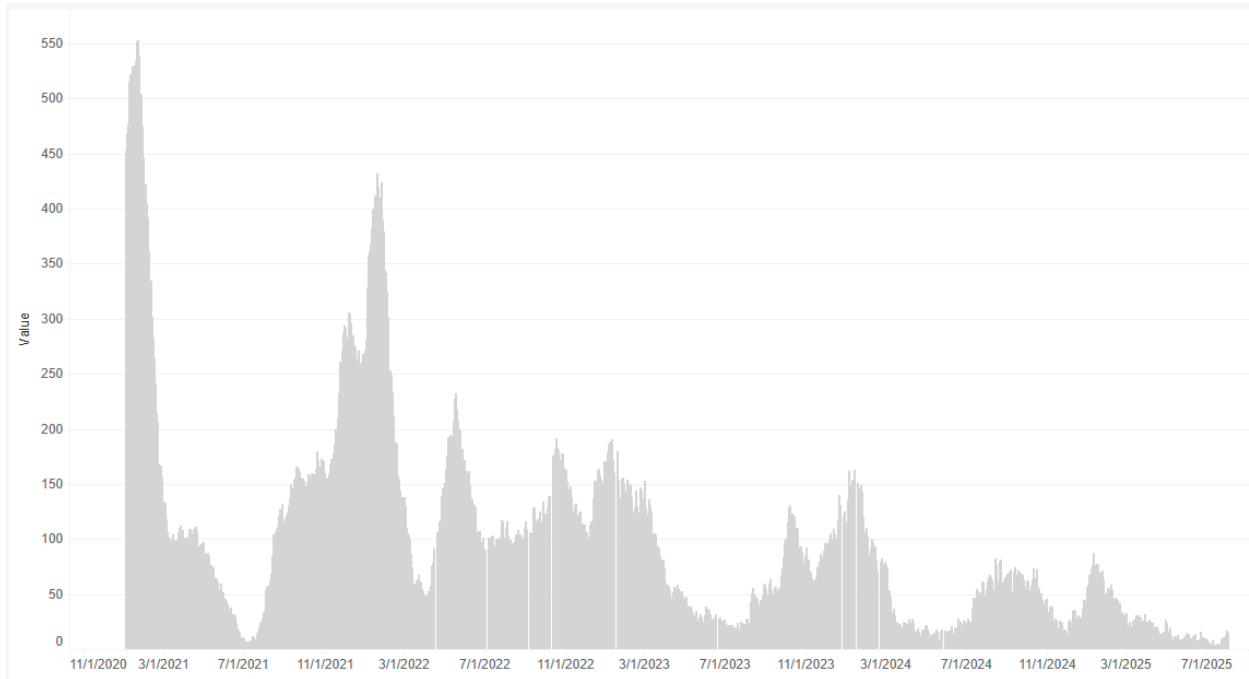
Capital Region counties were all in the top quarter of New York State counties for their rates of positive COVID-19 tests, from August 2024 to July 2025 (Health Data NY). Rensselaer and Albany counties had the second and third lowest rates of positive COVID-19 tests in NYS during the latest year of available data. COVID-19 positive test rates have dropped precipitously since the first couple of years of the pandemic.



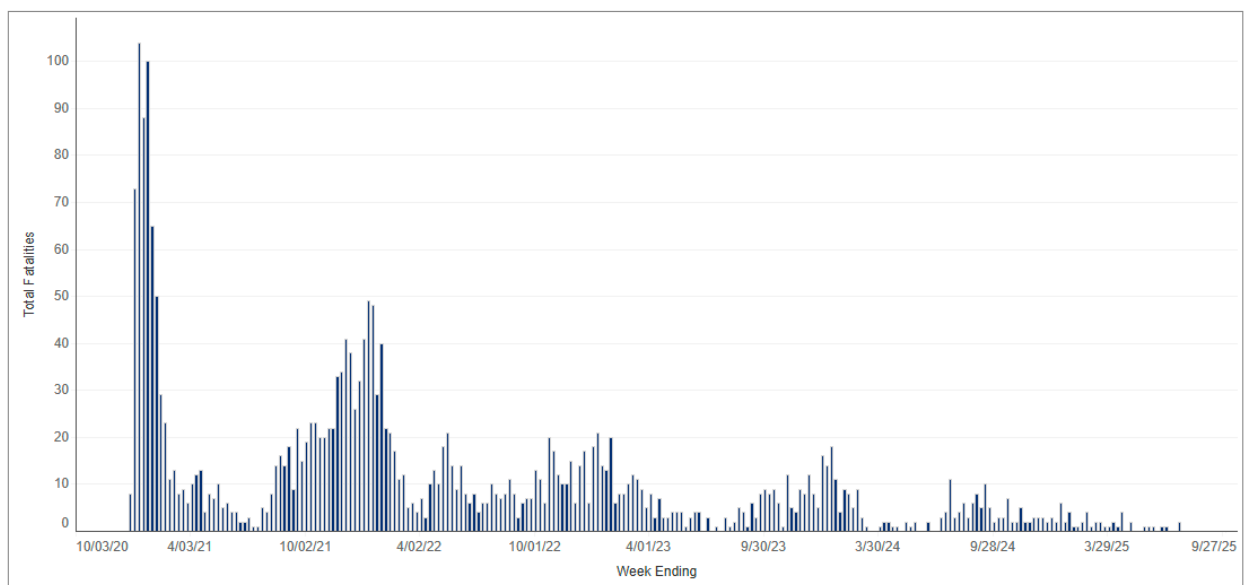
## Screenshots from the New York State Department of Health COVID-19 Data Website

The screenshots below demonstrate that hospitalizations and deaths due to COVID-19 have, overall, decreased significantly over the last 5 years since the pandemic began. Both charts show a roughly seasonal ‘wave’ pattern, with COVID-19 hospitalizations and deaths often reaching relative highs in January of each year, with some exceptions.

### Capital Region COVID-19 Hospitalizations, last 5 years of data, as of 8/3/2025



### Capital Region COVID-19 Fatalities, last 5 years of data, as of 8/3/2025



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## HIV/AIDS

### Highlights

- Albany and Schenectady counties had the highest newly diagnosed HIV case rates in the Capital Region

Human Immunodeficiency Virus (HIV) is the virus that can lead to acquired immunodeficiency syndrome (AIDS). The virus attacks the cells of the immune system, leaving the body more susceptible to life-threatening infections. When HIV progresses to AIDS, the body can no longer fight off infections (CDC).

HIV testing is the only way to know definitively if a person is infected with HIV. The virus is transmitted through contact with bodily fluids such as blood, semen, genital fluids, or breast milk. Unprotected sex and sharing needles or syringes with an infected person are the most common ways the virus is transmitted. Flu-like symptoms can occur within 2-4 weeks after exposure and last from a few days to several weeks (CDC).

Post-exposure prophylaxis, or PEP, is a method to prevent HIV infection following a recent unprotected sexual encounter, sharing needles, sexual assault or occupational exposure (CDC). It involves taking antiretroviral medicines within 72 hours of the exposure event. PEP should only be used in emergencies. Pre-exposure prophylaxis, or PrEP, is designed to prevent HIV-negative individuals in high-risk populations from contracting the virus, by taking daily antiretroviral medicines (CDC). High-risk populations may include HIV-negative individuals who are in an ongoing sexual relationship with an HIV-positive partner, or anyone who does not regularly use condoms during sex with partners of unknown HIV status who are at substantial risk of HIV infection.

There is no cure for HIV currently (CDC). Once infected, a person has HIV for life. Antiretroviral therapy (ART) is a treatment for people infected with HIV that consists of taking a combination of at least three medications that work to slow the growth of the virus. ART can extend and improve the quality of life for those infected with HIV. As more people are living longer due to ART, the prevalence of HIV has increased.

In 2023, there were over 100,000 people living with diagnosed HIV and about 2,500 newly diagnosed HIV cases in New York State (NYSDOH). Research has shown that most people who know they are infected take steps to prevent transmission to their partners. It is vital to identify new cases to control HIV and accurately measure prevention efforts and their effectiveness (CDC).



Newly diagnosed HIV cases, rate per 100,000 population				
County	2014-2016	2017-2019	2020-2022	2020-2022 County Rank
NYS (excl. NYC)	6.9	5.8	5.0	
Capital Region	5.9	5.7	5.0	
Saratoga	3.1	2.2	1.6	9
Greene	4.9	3.5	2.1	13
Columbia	8.7	4.4	4.9	36
Rensselaer	4.6	4.4	5.2	38
Schenectady	6.7	6.9	6.7	42
Albany	7.9	8.9	7.0	44

From 2020 to 2022, the Capital Region had an annual average of 50 newly diagnosed HIV cases (NYS HIV Surveillance System). The Capital Region's newly diagnosed HIV case rate was similar to NYS, excluding NYC (NYS HIV Surveillance System). Albany County had the highest newly diagnosed HIV case rate within the Capital Region, although the newly diagnosed HIV case rate had decreased compared to prior years. Saratoga and Greene counties had the lowest newly diagnosed HIV case rates in the Capital Region, at less than half the rate of the other counties in the Capital Region.

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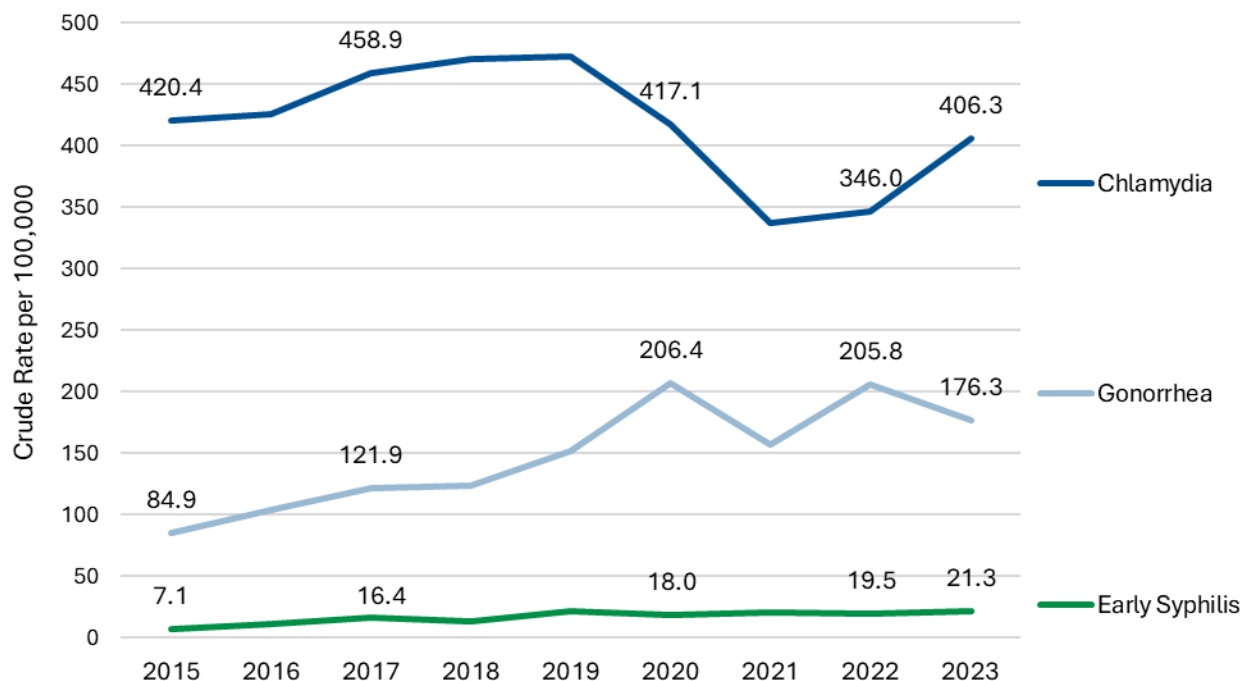
## Sexually Transmitted Infections

### Highlights

- In the Capital Region, gonorrhea and early syphilis diagnoses rates increased from 2015 to 2023, while chlamydia diagnoses rates fluctuated, with a relatively flat trend
- Schenectady, Albany, and Rensselaer counties had the highest rates in the Capital Region for gonorrhea diagnoses in 2022
- Schenectady and Albany counties had the highest rates in the Capital Region for chlamydia diagnoses in 2022
- Albany County had the highest rate in the Capital Region for early syphilis in 2022
  - Schenectady County had the highest rate in the Capital Region for early syphilis in 2021

Sexually transmitted infections (STIs) continue to have a significant impact on the health and wellbeing of New Yorkers. Based on the latest data from CDC, New York State had the 25<sup>th</sup> highest rate of syphilis cases, 7<sup>th</sup> highest rate of gonorrhea cases, and 10<sup>th</sup> highest rate of chlamydia cases in the United States. In its latest STI surveillance report, New York State Department of Health highlighted that, in 2023, the state’s gonorrhea diagnoses rate increased for the tenth consecutive year, syphilis diagnoses rate decreased for the first time since 2017, and chlamydia diagnoses rate increased once again after a decline in 2020.

**Capital Region STI Diagnoses, Crude Rates per 100,000**



## Gonorrhea

Gonorrhea is the second most reported sexually transmitted infection (STI) in New York State (NYSDOH). The bacteria are found in the mucous areas of the body and are spread from person to person through sexual contact. Early detection and appropriate treatment are important. If gonorrhea is left untreated, it can lead to complications such as infertility, pelvic inflammatory disease (PID), and ectopic pregnancy (CDC). PID is a painful condition that occurs when the infection spreads throughout the reproductive organs and can lead to sterility in women. Men may suffer some swelling of the reproductive organs. Both sexes may suffer from arthritis, skin problems, and other organ infections caused by the spread of gonorrhea within the body.

Gonorrhea diagnoses, age-adjusted rate per 100,000 population						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	107.0	115.0	163.3	140.4	134.3	
Capital Region	123.7	150.6	198.5	153.3	203.3	
Saratoga	35.0	43.1	49.7	47.3	59.5	19
Greene	35.2	39.3	63.1	75.1	83.8	34
Columbia	54.6	65.9	102.7	71.8	104.6	42
Rensselaer	152.9	179.7	231.3	158.2	205.1	52
Albany	163.0	224.5	266.9	200.4	275.1	56
Schenectady	182.1	170.5	289.6	247.5	315.7	58

In 2022, there were 1,907 cases of gonorrhea reported in the Capital Region, up from 1,145 in 2018 (NYS STI Surveillance System). Schenectady, Albany, and Rensselaer counties had higher rates than NYS, excluding NYC. Schenectady County had the highest gonorrhea diagnosis rate in 2022. All Capital Region counties' gonorrhea diagnosis rates increased from 2018 to 2022.

## Chlamydia

Chlamydia is the most reported sexually transmitted infection (STI) in New York State. Chlamydia is a sexually transmitted infection caused by the bacteria *Chlamydia trachomatis* (CDC). Chlamydia is easily treated, but asymptomatic infection is common, so screening tests can be important for diagnosis. Complications of the infection may lead to inflammation of the cervix in women and inflammation of the urethra in men. Additional complications include pelvic inflammatory disease (PID), which can lead to infertility. In fact, chlamydia is the leading cause of infertility in the United States. Pregnant women can pass chlamydia to their babies during childbirth. This may cause problems in newborns, like chlamydial pneumonia or conjunctivitis. Patients are also more susceptible to HIV infection and other STIs, if exposed.



Chlamydia diagnoses, age-adjusted rate per 100,000 population						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	443.9	457.8	378.9	365.8	372.5	
Capital Region	466.7	467.8	395.2	328.7	338.7	
Saratoga	270.5	248.1	216.4	188.8	172.0	8
Greene	356.2	338.6	249.7	229.6	217.4	17
Columbia	436.5	353.7	315.6	269.6	273.1	32
Rensselaer	516.0	473.0	444.9	304.8	348.8	45
Albany	545.2	578.5	443.2	386.4	418.6	50
Schenectady	564.4	598.6	574.6	475.0	439.0	53

In 2022, there were 3,262 chlamydia diagnoses in the Capital Region, down from 4,447 in 2018 (NYS STI Surveillance System). Schenectady and Albany counties had the highest chlamydia diagnoses rates in the Capital Region. Diagnoses rates decreased in each Capital Region county, from 2018 to 2022.

## Syphilis

Syphilis is a sexually transmitted infection caused by the bacteria *Treponema pallidum* (CDC). It progresses through various stages that can last months or years, depending on the individual. The primary stage is marked by a painless sore at the location where syphilis entered the body. Left untreated, the sore will go away in a few weeks, and the infection will progress to the secondary stage. This stage is represented by skin rashes or lesions in the mucous membranes, and can be accompanied by fever, weight and hair loss, muscle aches, and swollen lymph glands. The rashes may be too light to be noticed; however, untreated syphilis will pass into the late and latent stages when left untreated. At this point, all symptoms disappear, and the disease can lay latent for months or years. In 15% of untreated people, syphilis can lead to difficulty coordinating muscle movements, paralysis, numbness, dementia, and/or death. Pregnant women with untreated syphilis can pass the infection on to their babies, causing low birth weight, developmental delays, or death. People with genital sores are also at higher risk for transmitting or acquiring HIV. Curing syphilis can be done with an intramuscular injection of penicillin or an appropriate antibiotic, such as tetracycline.



Early syphilis diagnoses, age-adjusted rate per 100,000 population						
County	2018	2019	2020	2021	2022	2022 County Rank
NYS (excl. NYC)	11.6	15.3	14.0	21.5	23.6	
Capital Region	13.2	21.9	17.5	20.6	20.8	
Greene	6.6	12.9	9.9	20.8	2.0	5
Saratoga	3.3	4.2	4.6	9.6	9.2	23
Columbia	12.4	10.0	16.8	10.7	16.7	35
Schenectady	22.9	26.0	15.3	44.8	18.3	40
Rensselaer	13.5	27.5	26.4	24.2	18.9	41
Albany	16.8	32.5	24.5	16.4	34.0	57

In 2022, there were 197 cases of syphilis in the Capital Region, up from 127 in 2018 (NYS STI Surveillance System). Albany County had the highest syphilis diagnoses rate, by far, in 2022. Schenectady County's had the highest syphilis diagnoses rate in 2021. The Capital Region overall rate of syphilis diagnoses increased by 58%, from 2018 to 2022. Greene and Schenectady counties saw their syphilis diagnoses rates decrease, from 2018 to 2022, while other Capital Region counties' syphilis diagnoses rates increased.

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## Tick Borne Diseases

### Highlights

- Capital Region counties no longer have the highest Lyme Disease incidence rates in New York State
- Greene County had the highest Lyme Disease incidence rate in the Capital Region in 2023
- Columbia County had the highest Anaplasmosis and Babesiosis incidence rates in New York State in 2023
  - Greene County had the second highest Babesiosis incidence rate in New York State in 2023

### Lyme Disease

Lyme disease is the most reported tick-borne disease in the United States and is endemic in the Capital Region (John Hopkins). Lyme disease is a bacterial infection caused by *Borrelia burgdorferi* and transmitted to humans through the bite of infected blacklegged ticks (CDC). Typical symptoms include headache, fever, fatigue and *erythema migrans*, a characteristic bull's eye skin rash. If left untreated, the disease can progress, affecting the nervous system, heart and joints.

Early detection of the disease is important, as patients in the early stages of the infection usually recover rapidly and completely with treatment. According to guidance from the National Institutes of Health (NIH), studies have found most patients can be cured with a few weeks of antibiotics taken by mouth. Intravenous treatment with antibiotics may be necessary for more advanced patients with neurological or cardiac forms of Lyme (CDC).

Patients diagnosed with later stages of Lyme disease may have persistent or recurrent symptoms. Known as post-treatment Lyme disease, patients experience fatigue, persistent pain, impaired cognitive function, or unexplained numbness after treatment (CDC). Studies have shown that prolonged courses of antibiotics are not helpful among individuals with these symptoms and can cause serious complications.

Greene County had the highest rate of Lyme disease incidence in the Capital Region in 2021, 2022, and 2023 (NYS Communicable Disease Reports). Rensselaer and Columbia counties also had Lyme disease incidence rates in the bottom half of NYS counties. This was an improvement from 2016 to 2018, when Greene, Columbia, and Rensselaer counties had three of the four highest Lyme Disease incidence rates in NYS.

Lyme Disease Incidence per 100,000			
	2021	2022	2023
NYS (excl. NYC)	51.6	130.4	168.0
Schenectady	33.5	61.2	87.0
Saratoga	51.2	91.3	109.0
Albany	81.0	122.2	160.2
Columbia	391.4	231.7	276.6
Rensselaer	275.1	222.7	299.8
Greene	502.4	328.7	384.4



## Anaplasmosis

Anaplasmosis is a bacterial infection caused by *A. phagocytophilum* and spread through tick bites (CDC). Blacklegged ticks (*Ixodes scapularis*) are a primary carrier and transmitter of Anaplasmosis, and are commonly found in the Northeastern U.S., including the Capital Region. Signs of Anaplasmosis begin within a week or two of infection via tick bite. Early signs include chills, fever, severe headache and muscle aches, and gastrointestinal issues like nausea, vomiting, loss of appetite, and diarrhea. If treatment is not sought promptly, Anaplasmosis can progress to more serious symptoms, including bleeding problems, respiratory or organ failure, and potentially death. Individuals aged 65 years or older and those with a weakened immune system are at higher risk of experiencing the more severe late illness symptoms.

Columbia County had the highest Anaplasmosis incidence rate of in the Capital Region in 2021, 2022, and 2023, and the highest Anaplasmosis incidence in New York State in 2021 and 2023 (NYS Communicable Disease Reports). Greene and Rensselaer counties had the next highest rates in the Capital Region in 2023, although they were less than half as high as in Columbia County. All Capital Region counties had incidence rates of Anaplasmosis that were higher than in New York State, excluding NYC.

Anaplasmosis Incidence per 100,000			
	2021	2022	2023
NYS (excl. NYC)	16.9	10.0	17.1
Schenectady	18.7	15.6	23.8
Albany	38.9	19.3	26.9
Saratoga	71.2	49.4	55.4
Rensselaer	129.7	40.0	82.2
Greene	133.5	56.2	97.2
Columbia	347.7	114.2	227.5

## Babesiosis

Babesiosis is a microscopic parasitic infection caused by *Babesia* parasites, typically *Babesia microti* (CDC). Babesiosis is spread through Blacklegged (deer) ticks (*Ixodes scapularis*), which are commonly found in the Northeastern U.S., including the Capital Region. Babesiosis infection does not always result in symptoms. If Babesiosis symptoms do manifest, they may begin within a week or two of infection via tick bite or may take several months to develop. Symptoms can include flu-like chills, fever, sweats, headache, fatigue, body aches, nausea, and loss of appetite. *Babesia* parasites attack red blood cells, which can lead to hemolytic anemia if red blood cells are destroyed faster than they are regenerated by the body. Babesiosis can cause more serious symptoms and even lead to death in individuals aged 50 years or older, those with a weakened immune system, individuals without a spleen, and those with serious health issues like kidney or liver disease.



Columbia County had the highest Babesiosis incidence rate in New York State in 2021, 2022, and 2023 (NYS Communicable Disease Reports). Greene County had the second highest Babesiosis incidence rate in New York State in 2022 and 2023, and the third highest in 2021. Rensselaer County had the third highest rates in the Capital Region in 2021, 2022, and 2023. Albany County had Babesiosis incidence rates in 2021, 2022, and 2023 that were higher than in New York State, excluding NYC.

Babesiosis Incidence per 100,000			
	2021	2022	2023
NYS (excl. NYC)	6.2	4.6	9.3
Schenectady	1.9	2.5	5.6
Saratoga	8.7	4.6	8.0
Albany	10.9	10.1	12.7
Rensselaer	28.5	16.9	32.6
Greene	50.9	37.5	63.4
Columbia	94.1	47.3	88.4

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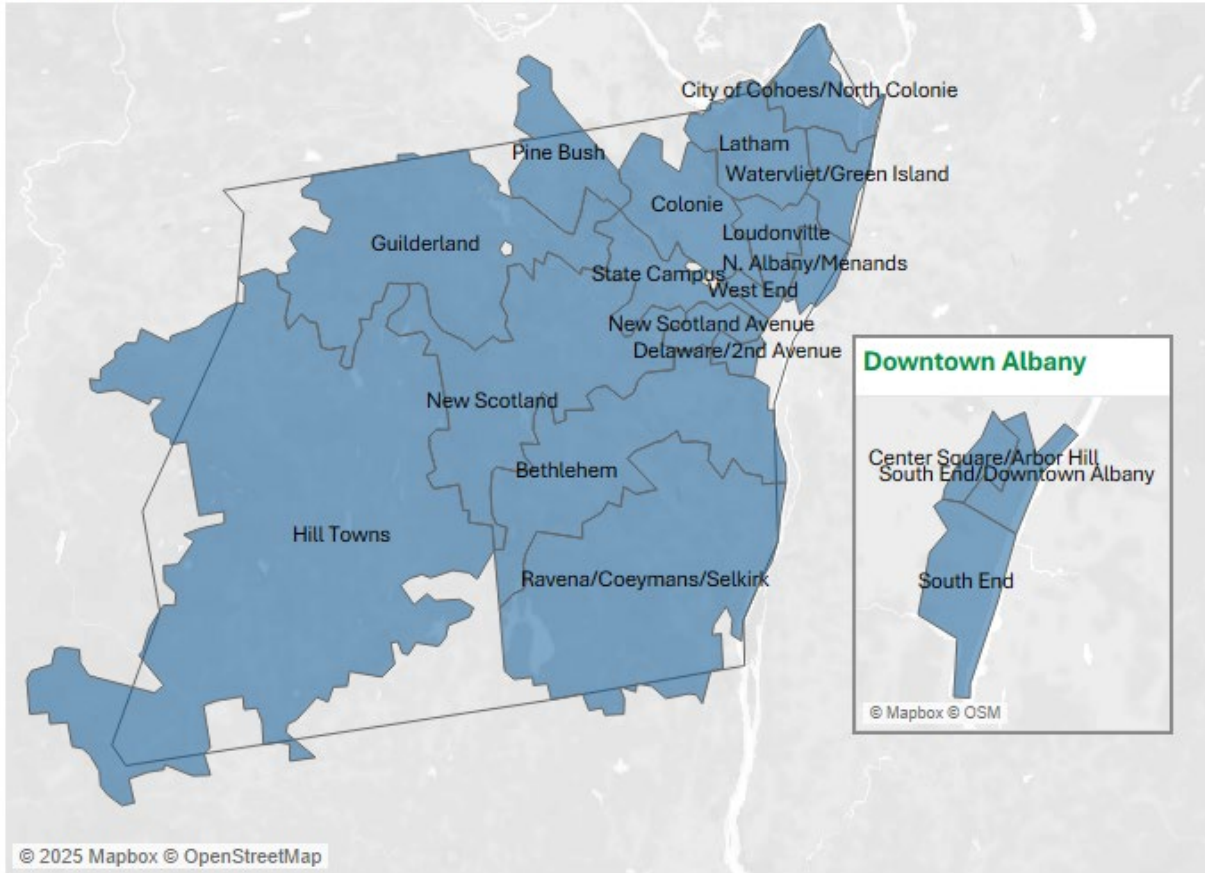
## A. Capital Region ZIP Code Groupings

### Albany County ZIP Groups

ZIP Code Group	Neighborhood/Region	
	Delmar	12054
Bethlehem	Fuera Bush	12067
	Glenmont	12077
Center Square/Arbor Hill	Center Square/Arbor Hill	12210
City of Cohoes/North Colonie	City of Cohoes/North Colonies/Bought Corners	12047
Colonie	Colonies Village/Maywood/Roessleville/Sand Creek Road	12205
Delaware/2nd Avenue	Delaware/2nd Avenue/Whitehall	12209
Guilderland	Altamont/Knox/Guilderland Center	12009
	Guilderland	12084
Hill Towns	Berne/Knox	12023
	East Berne/Knox	12059
	Medusa	12193
	Preston Hollow	12469
	Rensselaerville	12147
	Westerlo	12120
Latham	Latham	12110
Loudonville	Loudonville	12211
N. Albany/Menands	N. Albany/Menands	12204
New Scotland	Clarksville	12041
	Slingerlands	12159
	Voorheesville	12186
New Scotland Avenue	New Scotland/Normanskill/Buckingham	12208
Pine Bush	Carman/Lydius/Old State/Hungerkill/Fort Hunter	12303
Ravena/Coeymans/Selkirk	Alcove	12007
	Coeymans Hollow	12046
	Ravena	12143
	Selkirk	12158
South End	South End/Mansion/Second Avenue	12202
South End/Downtown Albany	Downtown Albany/Warehouse District	12207
State Campus	Westmere/Melrose/Pine Hills	12203
Watervliet/Green Island	Green Island	12183
	Watervliet/East Colonie/Haswell Road	12189
West End	West End/West Hill	12206



### Albany County ZIP Code Group Map

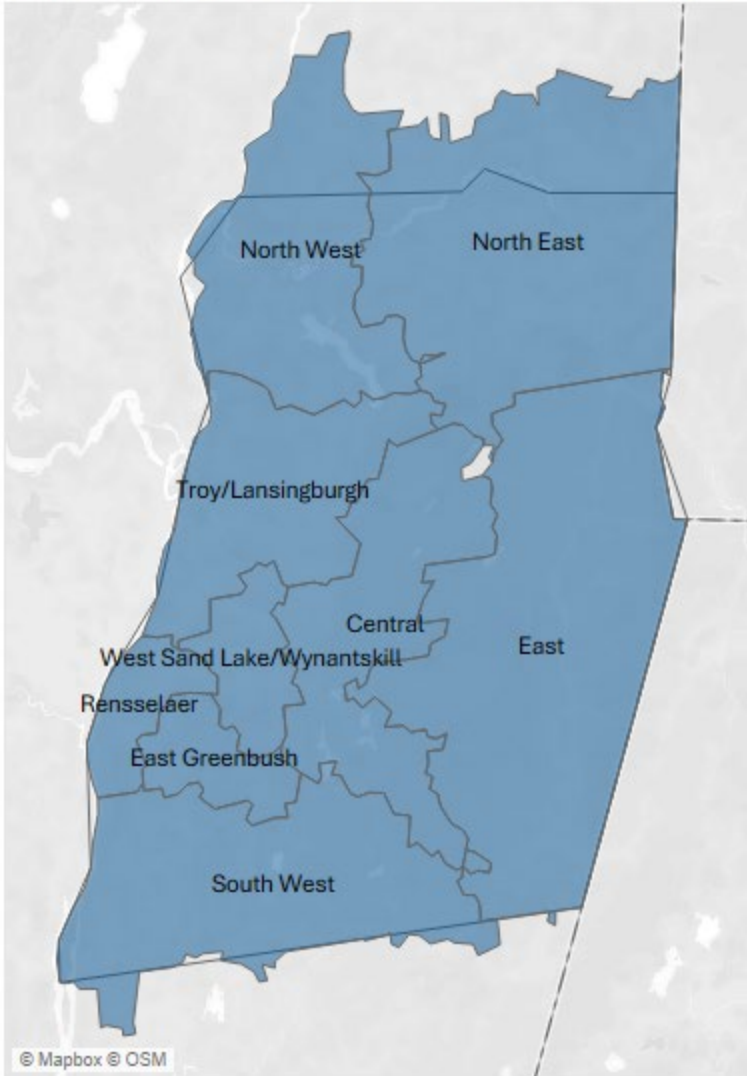


## Rensselaer County ZIP Code Groups

ZIP Code Group	Neighborhood/Region	
Central	Averill Park	12018
	Cropseyville	12052
	Poestenkill	12140
East	Berlin	12022
	Petersburg	12138
	Sand Lake	12153
	Stephentown	12168 12169
East Greenbush	East Greenbush	12061
North East	Buskirk	12028
	Eagle Bridge	12057
	Hoosick Falls	12090
	Johnsonville	12094
North West	Melrose	12121
	Schaghticoke	12154
	Valley Falls	12185
Rensselaer	Rensselaer	12144
South West	Castleton on Hudson	12033
	East Nassau	12062
	East Schodack	12063
	Nassau	12123
Troy/Lansingburgh	Schodack	12156
	Lansingburgh	12182
	Troy	12180
West Sand Lake/Wynantskill	West Sand Lake	12196
	Wynantskill	12198



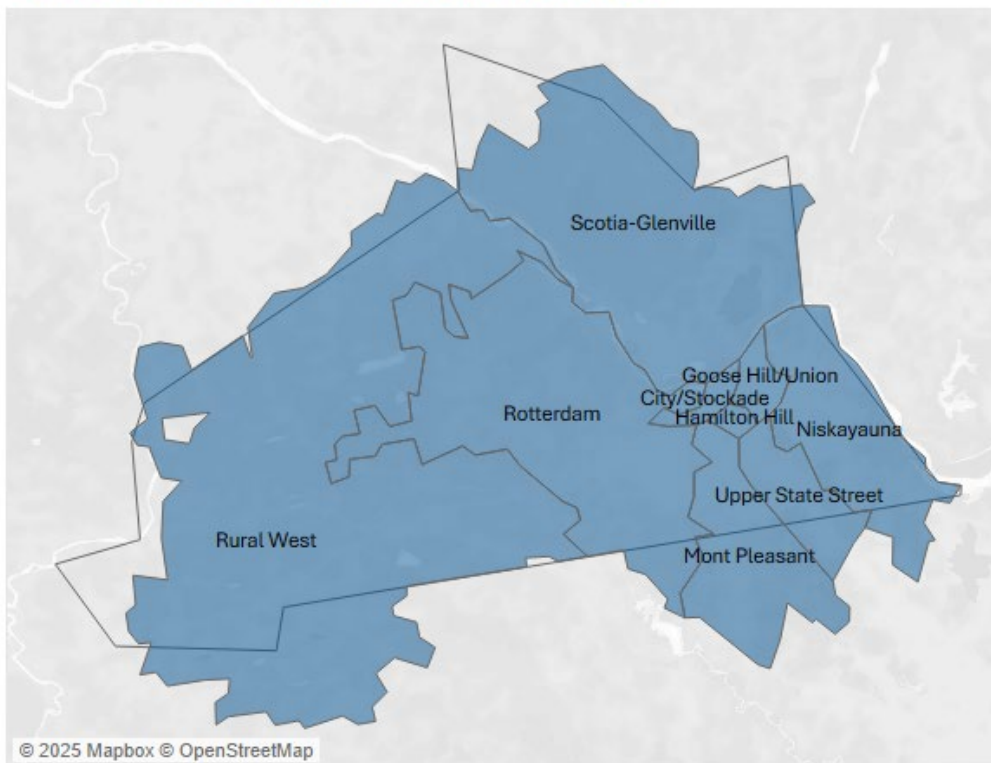
### Rensselaer County ZIP Code Group Map



## Schenectady County ZIP Code Groups

ZIP Code Group	Neighborhood/Region	
City/Stockade	City/Stockade	12305
Goose Hill/Union	Goose Hill/Union	12308
Hamilton Hill	Hamilton Hill	12307
Mont Pleasant	Mont Pleasant	12303
Niskayauna	Niskayauna	12309
Rotterdam	Rotterdam	12306
Rural West	Delanson	12053
	Duanesberg	12056
	Princetown	12137
	Rotterdam Junction	12150
Scotia-Glenville	Glenville	12008
	Scotia-Glenville	12302
Upper State Street	Upper State Street	12304

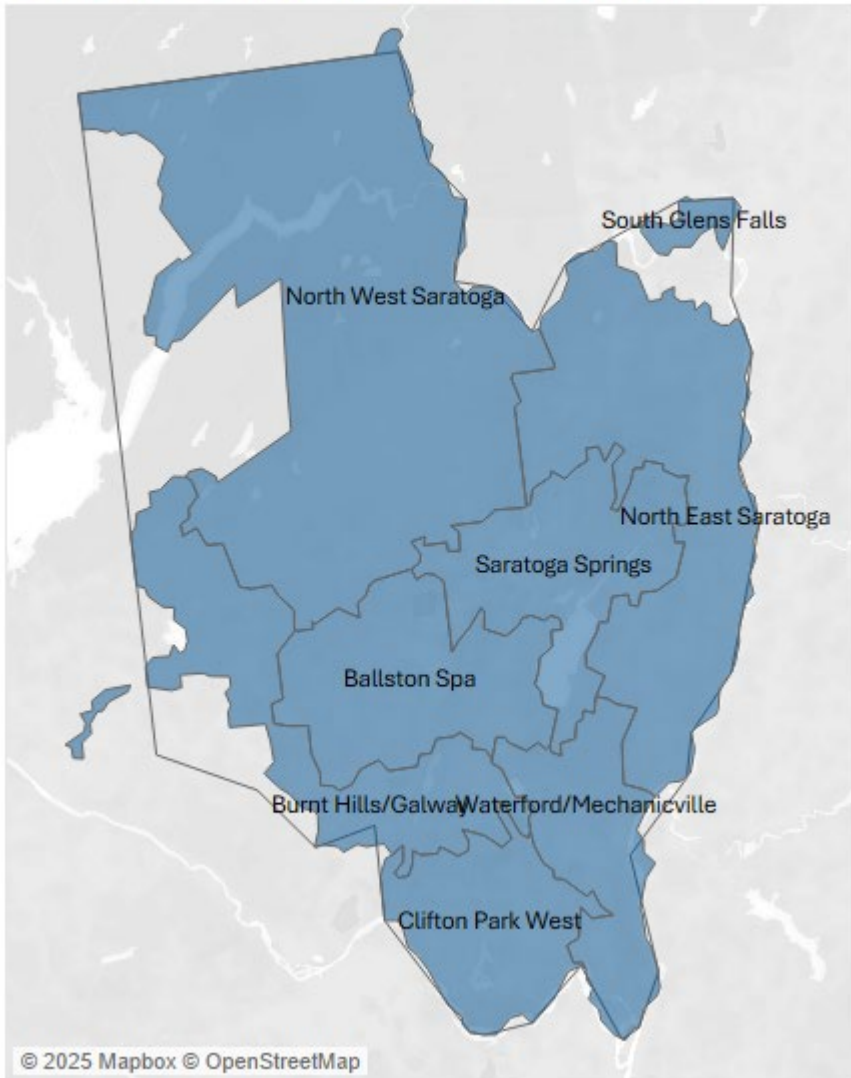
## Schenectady County ZIP Code Group Map



## Saratoga County ZIP Code Groups

ZIP Code Group	Neighborhood/Region	
Ballston Spa	Ballston Spa	12020
	Ballston Lake	12019
Burnt Hills/Galway	Burnt Hills	12027
	Galway	12074
	Hagaman	12086
	Round Lake	12151
Clifton Park West	Clifton Park West	12065
	Rexford/Vischer Ferry	12148
North East Saratoga	Gansevoort	12831
	Schuylerville	12871
	Stillwater	12170
North West Saratoga	Corinth	12822
	Greenfield Center	12833
	Hadley	12835
	Middle Grove	12850
	Porter Corners	12859
Saratoga Springs	Rock City Falls	12863
	Saratoga Springs	12866
South Glens Falls	South Glens Falls	12803
Waterford/ Mechanicville	Mechanicville	12188
	Waterford	12118

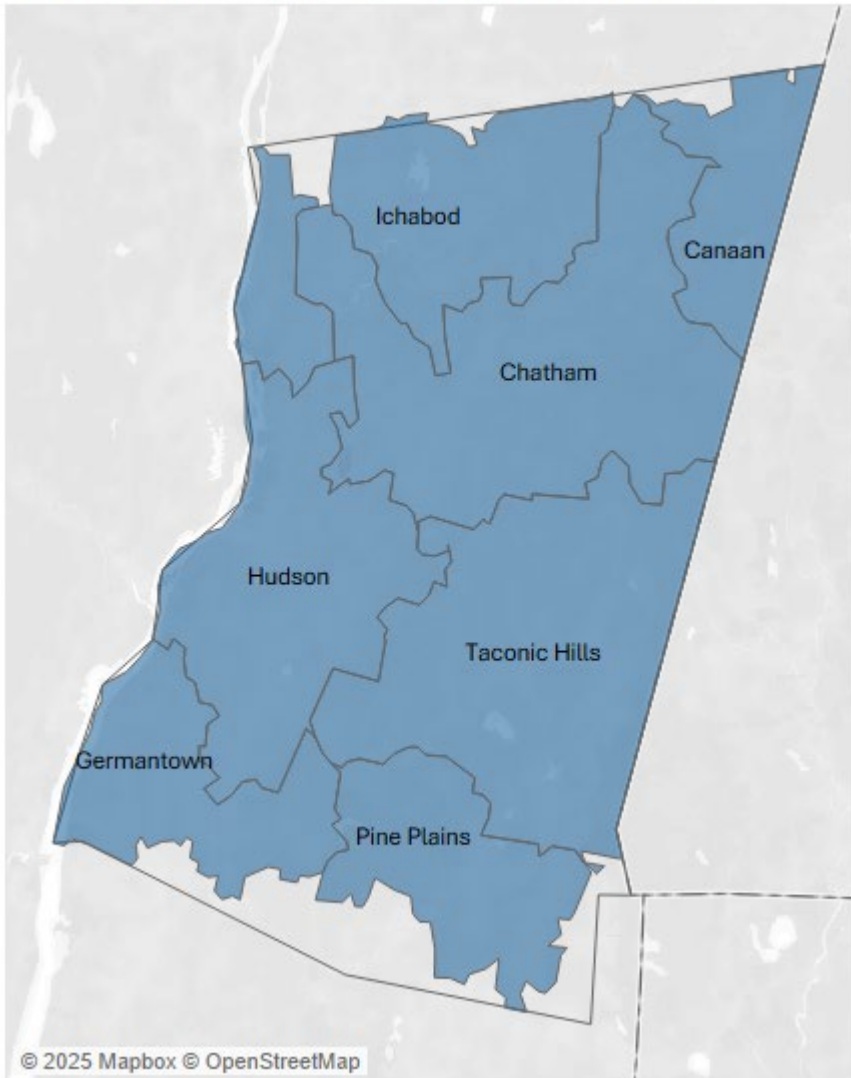
### Saratoga County ZIP Code Group Map



## Columbia County ZIP Code Groups

ZIP Code Group	Neighborhood/Region	
Canaan	Canaan	12029
	New Lebanon	12125
Chatham	Austerlitz	12017
	Chatham	12037
	East Chatham	12060
	Ghent	12075
	Kinderhook	12106
	Spencertown	12165
	West Lebanon	12195
Germantown	Elizaville	12523
	Germantown	12526
Hudson	Claverack	12513
	Hollowville	12530
	Hudson	12534
	Stottville	12172
Ichabod	Brainard	12024
	Malden Bridge	12115
	Niverville	12130
	North Chatham	12132
	Old Chatham	12136
	Stuyvesant	12173
	Stuyvesant Falls	12174
Pine Plains	Valatie	12184
	Ancram	12502
Taconic Hills	Ancramdale	12503
	Copake	12516
	Copake Falls	12517
	Craryville	12521
	Hillsdale	12529
	Philmont	12565

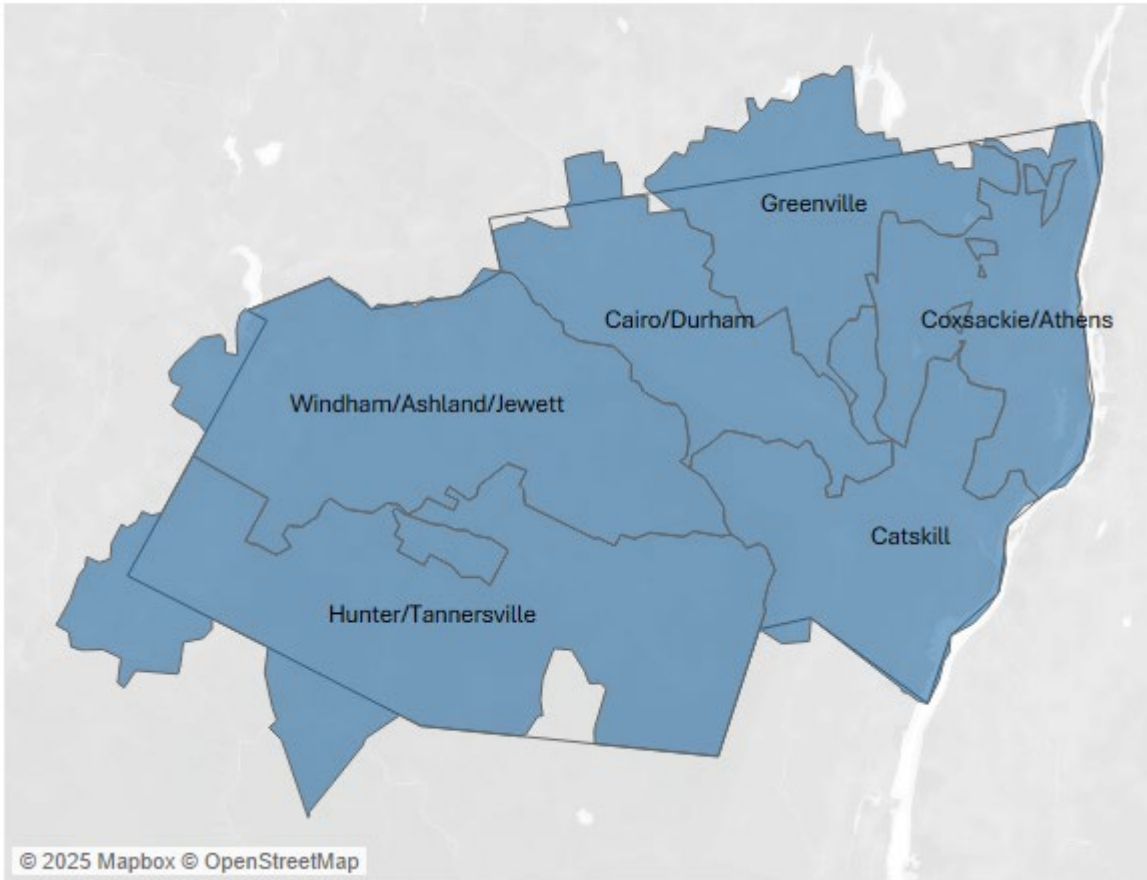
### Columbia County ZIP Code Group Map



## Greene County ZIP Codes Groups

ZIP Code Group	Neighborhood/Region	
Cairo/Durham	Acra	12405
	Cairo	12413
	Cornwallville	12418
	Durham	12422
	East Durham	12423
	Oak Hill	12460
	Purling	12470
	South Cairo	12482
Catskill	Catskill	12414
	Leeds	12451
	Palenville	12463
	Round Top	12473
Coxsackie/Athens	Athens	12015
	Coxsackie	12051
	Earlton	12058
	New Baltimore	12124
	West Coxsackie	12192
Greenville	Climax	12042
	Freehold	12431
	Greenville	12083
	Hannacroix	12087
	Surprise	12176
Hunter/Tannersville	Elka Park	12427
	Fleishman	12430
	Haines Falls	12436
	Hunter	12442
	Lanesville	12450
	Shandaken	12480
	Tannersville	12485
	West Kill	12492
Windham/Ashland/Jewett	Ashland	12407
	East Jewett	12424
	Hensonville	12439
	Jewett	12444
	Lexington	12452
	Maplecrest	12454
	Prattsville	12468
	Windham	12496

### Greene County ZIP Code Group Map



## B. Socio-Demographic Data Tables

The following section contains charts representing socio-demographic indicators; first, by county (below), then, by neighborhood. Age, race/ethnicity, and total population estimates are based on the latest American Community Survey 5-year data, covering 2019-2023. Economic and education status estimates are based on American Community Survey 1-year data from 2022. The American Community Survey is a product of the U.S. Census Bureau.

**Notes:**

- Please refer to the [Appendix A](#) for lists and maps of Capital Region ZIP Code Groupings, by county.
- County totals represent all county residents and are not a summary of listed ZIP code groups. Some ZIP codes cross county borders.

**Capital Region Sociodemographic Comparison, by County, with Conditional Formatting**

County	Total Pop.	Age (years)		Race/Ethnicity				
		0-14	65+	Asian	Black	Hispanic	Native	White
Albany	<b>315,374</b>	15.0%	17.8%	<b>8.4%</b>	<b>15.5%</b>	7.0%	0.9%	76.8%
Saratoga	237,075	15.8%	19.4%	3.9%	2.8%	3.8%	0.8%	<b>93.7%</b>
Rensselaer	160,341	15.7%	17.8%	3.8%	9.5%	5.9%	0.9%	87.3%
Schenectady	159,603	<b>17.8%</b>	17.6%	6.9%	14.9%	<b>8.1%</b>	<b>1.8%</b>	77.4%
Columbia	61,245	12.6%	<b>25.4%</b>	3.0%	5.8%	6.0%	1.4%	90.5%
Greene	47,554	13.4%	23.5%	1.7%	6.5%	6.6%	1.0%	91.7%

County	Total Pop.	Social		Economic			
		< High School	Speak English LTVW	Poverty	Unemployed	Pre-1940 Housing	Rent >35% of Income
Albany	<b>315,374</b>	7.4%	<b>4.8%</b>	<b>12.5%</b>	3.4%	27.5%	36.8%
Saratoga	237,075	6.0%	2.0%	6.6%	2.3%	16.0%	31.6%
Rensselaer	160,341	7.6%	2.4%	11.5%	3.6%	32.5%	37.8%
Schenectady	159,603	8.4%	2.8%	11.6%	<b>3.8%</b>	33.1%	41.0%
Columbia	61,245	8.0%	2.9%	10.3%	3.5%	<b>33.4%</b>	<b>43.7%</b>
Greene	47,554	<b>11.5%</b>	2.6%	10.4%	1.5%	26.2%	37.8%

**Source:** American Community Survey, U.S. Census Bureau.

**Conditional formatting key:** Darker cells contain larger values. The largest value in each column is bold and italicized.

County	ZIP Code Group	Total Pop.	Age (years)		Race/Ethnicity				
			0-14	65+	Asian	Black	Hispanic	Native	White
Albany	Bethlehem	24,971	18.1%	21.5%	3.7%	2.2%	3.5%	0.3%	93.6%
	Center Square/Arbor Hill	9,725	9.9%	15.1%	3.5%	47.9%	7.2%	2.2%	50.8%
	City of Cohoes/North Colonie	23,406	20.0%	17.4%	6.2%	17.4%	7.1%	0.9%	81.6%
	Colonie	25,912	15.6%	21.2%	9.5%	10.6%	5.1%	0.8%	81.9%
	Delaware/2nd Avenue	10,754	22.0%	11.2%	8.5%	30.2%	19.1%	0.0%	57.7%
	Guilderland	13,122	17.7%	16.8%	16.0%	6.0%	3.3%	0.5%	79.2%
	Hill Towns	7,670	14.6%	23.1%	0.7%	1.4%	0.8%	0.5%	98.1%
	Latham	19,969	15.3%	18.9%	14.5%	7.0%	2.6%	0.5%	81.7%
	Loudonville	13,800	16.0%	21.0%	13.5%	7.0%	6.7%	0.1%	82.7%
	N. Albany/Menands	8,423	19.1%	14.6%	8.8%	36.0%	4.7%	2.3%	56.8%
	New Scotland	15,755	13.0%	24.2%	5.7%	2.4%	4.2%	0.1%	92.5%
	New Scotland Avenue	23,936	10.8%	17.1%	10.4%	16.7%	7.1%	0.7%	74.7%
	Pine Bush	29,989	19.2%	18.4%	7.3%	16.9%	9.5%	1.6%	75.5%
	Ravena/Coeymans/Selkirk	12,609	16.0%	18.5%	1.2%	4.1%	6.4%	0.3%	94.4%
	South End	9,500	17.0%	11.1%	7.5%	52.3%	15.2%	3.8%	35.8%
	South End/Downtown Albany	2,097	11.6%	12.6%	3.9%	47.2%	7.1%	0.0%	47.0%
	State Campus	30,080	9.6%	17.4%	9.3%	12.9%	6.8%	0.7%	76.3%
	Watervliet/Green Island	21,171	16.6%	18.0%	8.2%	11.8%	7.7%	1.9%	81.2%
West End	14,592	15.2%	10.8%	10.9%	50.0%	14.7%	2.7%	36.8%	
Columbia	Canaan	2,164	9.1%	26.5%	1.3%	3.0%	4.2%	1.6%	94.3%
	Chatham	11,719	11.7%	27.3%	2.9%	5.5%	4.3%	0.8%	91.8%
	Germantown	5,559	12.1%	30.9%	1.5%	5.3%	6.0%	1.4%	96.2%
	Hudson	18,068	11.5%	22.1%	6.8%	10.2%	6.7%	2.3%	81.7%
	Ichabod	11,615	16.5%	25.9%	0.7%	2.0%	7.8%	1.3%	96.6%
	Pine Plains	1,769	15.6%	24.0%	0.9%	2.5%	4.5%	0.1%	90.4%
	Taconic Hills	7,812	11.3%	27.2%	0.7%	4.8%	5.3%	0.8%	92.4%
Greene	Cairo/Durham	7,091	13.3%	23.9%	0.3%	3.8%	4.7%	0.6%	96.7%
	Catskill	13,107	12.2%	24.1%	2.1%	7.3%	8.5%	0.3%	90.7%
	Coxsackie/Athens	12,456	11.5%	21.0%	1.1%	12.6%	6.2%	1.2%	86.5%
	Greenville	7,748	17.8%	19.2%	2.8%	2.3%	4.8%	2.3%	93.5%
	Hunter/Tannersville	5,147	21.0%	24.3%	1.8%	0.4%	8.6%	1.7%	93.4%
	Windham/Ashland/Jewett	4,393	10.2%	31.0%	3.4%	2.8%	8.2%	0.5%	95.7%
Rensselaer	Central	10,526	17.4%	18.2%	1.7%	0.2%	2.0%	1.0%	98.8%
	East	6,744	15.8%	20.9%	0.5%	1.6%	4.2%	0.8%	97.2%
	East Greenbush	9,778	18.4%	20.0%	5.5%	3.2%	7.7%	0.1%	89.7%
	North East	11,532	18.1%	17.1%	1.0%	1.4%	4.3%	0.5%	96.9%
	North West	6,899	15.0%	21.3%	0.8%	1.1%	1.8%	0.6%	98.5%
	Rensselaer	21,631	15.0%	16.9%	7.6%	9.5%	6.0%	1.1%	84.8%
	South West	16,032	15.7%	22.0%	0.6%	1.6%	6.4%	1.5%	97.5%
	Troy/Lansingburgh	68,344	14.7%	15.7%	4.9%	17.7%	7.8%	0.9%	78.4%
	West Sand Lake/Wynantskill	11,185	18.2%	18.5%	1.0%	2.8%	2.0%	0.6%	96.9%
Saratoga	Ballston Spa	34,140	16.0%	18.4%	2.6%	2.6%	4.0%	0.7%	95.1%
	Burnt Hills/Gatway	25,852	16.6%	20.6%	4.3%	1.7%	4.1%	0.5%	94.7%
	Clifton Park West	48,847	16.8%	18.3%	8.5%	4.2%	4.0%	0.5%	89.2%
	North East	27,056	18.1%	17.1%	1.0%	1.4%	4.3%	0.5%	96.9%
	North West	19,253	15.0%	21.3%	0.8%	1.1%	1.8%	0.6%	98.5%
	Saratoga Springs	39,657	12.4%	22.4%	4.0%	3.7%	4.2%	0.6%	92.8%
	South Glens Falls	8,915	17.8%	17.8%	0.3%	4.2%	2.5%	2.8%	95.3%
	Waterford/Mechanicville	28,470	15.1%	20.4%	3.1%	2.2%	4.3%	1.6%	93.7%
Schenectady	City/Stockade	7,764	4.8%	11.2%	4.9%	25.6%	10.0%	1.2%	70.3%
	Goose Hill/Union	13,985	12.7%	15.6%	4.4%	22.7%	13.1%	1.8%	66.0%
	Hamilton Hill	7,977	25.0%	9.7%	16.1%	37.5%	24.6%	6.7%	30.8%
	Mont Pleasant	29,989	19.2%	18.4%	7.3%	16.9%	9.5%	1.6%	75.5%
	Niskayauna	32,996	20.5%	19.4%	10.5%	7.8%	5.1%	1.1%	83.9%
	Rotterdam	27,569	16.8%	16.5%	3.5%	9.9%	6.8%	1.2%	86.9%
	Rural West	9,155	15.5%	16.3%	0.1%	5.7%	4.1%	0.9%	96.5%
	Scotia-Glenville	28,080	17.9%	22.1%	2.3%	2.8%	3.5%	1.0%	96.0%
	Upper State Street	22,027	17.3%	19.6%	14.8%	23.1%	8.8%	2.0%	61.1%

Conditional formatting key: Darker cells contain larger values. Largest value in each column is bold and italicized



County	ZIP Code Group	Total Pop.	Social		Economic			
			Less than High School	Speak English LTVW	Poverty	Unemployed	Pre-1940 Housing	Rent >35% of Income
Albany	Bethlehem	24,971	2.8%	1.8%	5.0%	2.0%	17.3%	36.1%
	Center Square/Arbor Hill	9,725	10.4%	3.5%	22.4%	4.7%	59.9%	41.5%
	City of Cohoes/North Colonie	23,406	8.3%	2.7%	15.8%	3.9%	37.6%	30.2%
	Colonie	25,912	7.5%	6.6%	6.8%	2.2%	10.5%	33.4%
	Delaware/2nd Avenue	10,754	11.4%	10.3%	9.8%	2.8%	52.0%	26.7%
	Guilderland	13,122	3.5%	5.8%	5.3%	2.3%	16.4%	19.4%
	Hill Towns	7,670	4.6%	0.2%	4.3%	4.6%	23.1%	36.8%
	Latham	19,969	6.2%	6.5%	6.3%	3.3%	5.3%	26.1%
	Loudonville	13,800	2.2%	2.5%	5.2%	1.2%	10.1%	43.6%
	N. Albany/Menands	8,423	10.0%	3.2%	13.9%	4.7%	20.1%	24.4%
	New Scotland	15,755	3.0%	2.0%	4.3%	2.4%	13.5%	28.4%
	New Scotland Avenue	23,936	6.7%	5.4%	18.0%	3.1%	35.8%	47.4%
	Pine Bush	29,989	8.5%	2.6%	12.5%	3.6%	24.4%	48.2%
	Ravena/Coeymans/Selkirk	12,609	8.7%	2.4%	9.0%	1.6%	17.7%	29.2%
	South End	9,500	18.5%	9.2%	27.0%	9.8%	58.2%	36.6%
	South End/Downtown Albany	2,097	12.2%	7.2%	41.3%	1.9%	29.5%	34.1%
	State Campus	30,080	6.2%	6.2%	14.4%	2.7%	24.1%	40.1%
Watervliet/Green Island	21,171	9.2%	5.5%	15.8%	3.1%	43.3%	33.3%	
West End	14,592	18.6%	9.5%	40.6%	9.4%	50.5%	56.0%	
Columbia	Canaan	2,164	3.8%	2.7%	11.8%	2.6%	44.8%	44.0%
	Chatham	11,719	6.1%	1.2%	7.6%	3.2%	35.9%	37.2%
	Germantown	5,559	6.3%	1.3%	10.2%	4.3%	31.7%	38.8%
	Hudson	18,068	12.1%	5.8%	14.8%	3.6%	34.0%	53.9%
	Ichabod	11,615	5.1%	2.4%	7.4%	4.0%	33.5%	31.1%
	Pine Plains	1,769	8.8%	4.0%	9.8%	6.1%	22.0%	21.8%
	Taconic Hills	7,812	7.9%	0.8%	9.2%	2.0%	31.7%	31.7%
Greene	Cairo/Durham	7,091	10.5%	1.0%	12.1%	1.4%	21.3%	40.7%
	Catskill	13,107	9.3%	3.4%	13.8%	1.9%	34.4%	40.8%
	Coxsackie/Athens	12,456	19.6%	2.1%	7.1%	1.9%	28.1%	32.9%
	Greenville	7,748	5.2%	1.3%	2.9%	0.2%	21.9%	24.0%
	Hunter/Tannersville	5,147	7.3%	5.5%	17.6%	1.0%	29.8%	41.0%
	Windham/Ashland/Jewett	4,393	9.9%	4.2%	9.3%	1.8%	17.3%	32.4%
Rensselaer	Central	10,526	3.7%	1.5%	4.8%	1.5%	28.3%	17.7%
	East	6,744	10.7%	1.2%	8.5%	6.3%	27.4%	26.3%
	East Greenbush	9,778	5.3%	4.1%	2.2%	1.7%	10.7%	29.2%
	North East	11,532	7.1%	0.7%	6.4%	2.7%	21.1%	34.1%
	North West	6,899	8.7%	0.0%	8.3%	2.8%	20.5%	33.9%
	Rensselaer	21,631	6.3%	2.9%	10.6%	2.2%	22.7%	31.6%
	South West	16,032	5.1%	1.5%	5.0%	3.9%	23.1%	41.9%
	Troy/Lansingburgh	68,344	10.2%	3.2%	18.5%	4.9%	43.8%	41.4%
Saratoga	West Sand Lake/Wynantskill	11,185	3.8%	1.1%	5.1%	2.6%	21.2%	35.5%
	Ballston Spa	34,140	5.9%	1.6%	6.2%	2.6%	15.0%	32.0%
	Burnt Hills/Galway	25,852	3.8%	0.9%	4.9%	0.9%	14.0%	23.6%
	Clifton Park West	48,847	4.6%	3.6%	3.0%	2.2%	3.1%	28.6%
	North East	27,056	7.1%	1.0%	6.4%	2.7%	21.1%	34.1%
	North West	19,253	8.7%	0.7%	8.3%	2.8%	20.5%	33.9%
	Saratoga Springs	39,657	5.7%	2.5%	8.5%	1.8%	21.0%	34.8%
	South Glens Falls	8,915	7.5%	0.7%	11.8%	3.7%	20.2%	27.9%
Waterford/Mechanicville	28,470	6.7%	1.4%	7.4%	2.8%	26.8%	30.9%	
Schenectady	City/Stockade	7,764	12.0%	2.9%	18.3%	4.4%	57.3%	39.0%
	Goose Hill/Union	13,985	11.4%	3.2%	17.8%	4.4%	56.8%	44.4%
	Hamilton Hill	7,977	24.4%	10.5%	33.5%	11.2%	44.6%	57.9%
	Mont Pleasant	29,989	8.5%	2.6%	12.5%	3.6%	24.4%	48.2%
	Niskayauna	32,996	3.2%	2.2%	3.6%	2.3%	21.8%	26.8%
	Rotterdam	27,569	6.2%	1.8%	7.8%	3.2%	26.5%	26.9%
	Rural West	9,155	5.3%	0.0%	9.0%	2.8%	19.8%	49.6%
	Scotia-Glenville	28,080	5.3%	1.6%	4.8%	2.7%	24.9%	35.5%
	Upper State Street	22,027	14.1%	5.1%	19.5%	4.2%	33.1%	48.8%

Conditional formatting key: Darker cells contain larger values. Largest value in each column is bold and italicized. Note: LTVW = Less than very well.



## i. Age Group: Population, by Area

Area		< 5 years	5-14 years	15-19 years	20-44 years	45-64 years	65-74 years	75+ years	
NYS (excluding NYC)		604,728	1,332,411	763,124	3,513,454	3,047,009	1,223,953	871,438	
Capital Region		47,572	105,066	63,842	320,247	258,928	110,354	75,183	
County	Albany	14,928	32,399	22,945	112,389	76,581	32,947	23,185	
	Columbia	2,400	5,346	3,168	16,696	18,067	9,251	6,317	
	Greene	2,030	4,340	2,139	14,125	13,771	6,542	4,607	
	Rensselaer	7,895	17,380	11,150	53,170	42,096	17,540	11,110	
	Saratoga	11,066	26,398	13,904	71,970	67,790	27,662	18,285	
	Schenectady	9,253	19,203	10,536	51,897	40,623	16,412	11,679	
	Bethlehem	1,317	1,478	6,556	7,054	3,199	3,021	2,346	
Albany	Center Square/Arbor Hill	320	378	4,685	2,242	638	872	590	
	City of Cohoes/North Colonie	1,157	1,412	8,201	5,044	3,524	2,239	1,829	
	Colonie	1,210	1,596	7,348	7,450	2,813	2,926	2,569	
	Delaware/2nd Avenue	900	279	4,369	2,540	1,463	834	369	
	Guilderland	731	806	4,615	3,174	1,590	1,290	916	
	Hill Towns	411	409	2,082	2,287	706	1,151	624	
	Latham	647	1,697	6,651	4,794	2,418	2,149	1,613	
	Loudonville	945	1,888	4,032	2,772	1,263	1,653	1,247	
	N. Albany/Menands	855	351	3,435	1,801	749	726	506	
	New Scotland	615	945	4,050	4,899	1,428	2,259	1,559	
	New Scotland Avenue	834	1,536	11,192	4,531	1,749	2,485	1,609	
	Pine Bush	1,449	2,087	9,311	7,333	4,304	3,443	2,062	
	Ravena/Coeymans/Selkirk	524	518	3,357	4,396	1,482	1,451	881	
	South End	708	511	4,247	2,076	899	618	441	
	South End/Downtown Albany	157	1	1,192	397	87	236	27	
	State Campus	1,055	2,244	13,393	6,327	1,847	2,882	2,332	
	Watervliet/Green Island	1,050	937	7,384	5,528	2,448	2,375	1,449	
	West End	462	1,057	6,353	3,392	1,749	982	597	
	Columbia	Canaan	90	161	646	588	107	287	285
		Chatham	377	627	3,007	3,512	991	1,946	1,259
Germantown		152	139	1,641	1,383	525	988	731	
Hudson		631	943	5,597	5,457	1,448	2,356	1,636	
Ichabod		606	694	2,856	3,140	1,314	1,962	1,043	
Pine Plains		117	102	429	536	160	281	144	
Taconic Hills		334	368	1,872	2,568	550	1,200	920	
Greene	Cairo/Durham	266	449	2,138	1,871	672	873	822	
	Catskill	617	582	4,196	3,586	977	1,766	1,383	
	Coxsackie/Athens	290	588	3,855	3,962	1,145	1,659	957	
	Greenville	381	359	2,179	2,345	996	913	575	
	Hunter/Tannersville	391	142	1,317	1,361	688	780	468	
	Windham/Ashland/Jewett	134	134	1,126	1,321	314	863	501	
	Central	552	578	2,610	3,586	1,279	1,443	478	
Rensselaer	East	236	340	1,766	2,168	827	862	545	
	East Greenbush	690	410	3,133	2,481	1,106	1,262	696	
	North East	2,314	2,279	11,568	11,145	4,688	3,846	2,748	
	North West	1,207	1,524	7,547	7,612	2,711	3,415	2,136	
	Rensselaer	1,222	1,092	7,601	6,015	2,028	2,213	1,460	
	South West	795	930	4,490	4,588	1,708	2,061	1,460	
	Troy/Lansingburgh	3,071	5,987	25,987	15,606	6,967	6,464	4,262	
Saratoga	West Sand Lake/Wynantskill	513	918	2,737	3,435	1,518	1,465	599	
	Ballston Spa	1,219	1,790	10,936	9,681	4,241	3,809	2,464	
	Burnt Hills/Galway	1,168	1,673	6,766	7,801	3,118	3,221	2,105	
	Clifton Park West	2,619	2,839	15,272	13,653	5,551	5,309	3,604	
	North East	2,314	2,279	11,568	11,145	4,688	3,846	2,748	
	North West	1,207	1,524	7,547	7,612	2,711	3,415	2,136	
	Saratoga Springs	1,511	2,862	12,175	10,779	3,420	4,893	4,017	
Schenectady	South Glens Falls	472	522	2,939	2,287	1,111	830	754	
	Waterford/Mechanicville	1,189	1,351	8,851	8,170	3,092	3,681	2,136	
	City/Stockade	231	533	4,167	1,824	137	598	274	
	Goose Hill/Union	622	1,465	5,326	3,220	1,165	1,219	968	
	Hamilton Hill	550	641	2,502	2,072	1,443	468	301	
	Mont Pleasant	1,449	2,087	9,311	7,333	4,304	3,443	2,062	
	Niskayauna	2,557	2,374	9,004	8,422	4,231	3,602	2,806	
Schenectady	Rotterdam	1,522	1,735	9,375	7,269	3,124	2,858	1,686	
	Rural West	448	402	2,873	2,970	971	923	568	
	Scotia-Glenville	1,562	1,686	8,224	6,953	3,460	3,388	2,807	
	Upper State Street	1,276	1,106	6,687	6,117	2,536	2,795	1,510	

Source: American Community Survey, 5-year estimates, 2019-2023. US Census Bureau.



## ii. Age Group: Percent of Population, by Area

Area		< 5 years	5-14 years	15-19 years	20-44 years	45-64 years	65-74 years	75+ years	
County	NYS (excluding NYC)	5.3%	11.7%	6.7%	30.9%	26.8%	10.8%	7.7%	
	Capital Region	4.8%	10.7%	6.5%	32.6%	26.4%	11.2%	7.7%	
	Albany	4.7%	10.3%	7.3%	35.6%	24.3%	10.4%	7.4%	
	Columbia	3.9%	8.7%	5.2%	27.3%	29.5%	15.1%	10.3%	
	Greene	4.3%	9.1%	4.5%	29.7%	29.0%	13.8%	9.7%	
	Rensselaer	4.9%	10.8%	7.0%	33.2%	26.3%	10.9%	6.9%	
	Saratoga	4.7%	11.1%	5.9%	30.4%	28.6%	11.7%	7.7%	
	Schenectady	5.8%	12.0%	6.6%	32.5%	25.5%	10.3%	7.3%	
	Bethlehem	5.3%	12.8%	5.9%	26.3%	28.2%	12.1%	9.4%	
Albany	Center Square/Arbor Hill	3.3%	6.6%	3.9%	48.2%	23.1%	9.0%	6.1%	
	City of Cohoes/North Colonie	4.9%	15.1%	6.0%	35.0%	21.6%	9.6%	7.8%	
	Colonie	4.7%	10.9%	6.2%	28.4%	28.8%	11.3%	9.9%	
	Delaware/2nd Avenue	8.4%	13.6%	2.6%	40.6%	23.6%	7.8%	3.4%	
	Guilderland	5.6%	12.1%	6.1%	35.2%	24.2%	9.8%	7.0%	
	Hill Towns	5.4%	9.2%	5.3%	27.1%	29.8%	15.0%	8.1%	
	Latham	3.2%	12.1%	8.5%	33.3%	24.0%	10.8%	8.1%	
	Loudonville	6.8%	9.2%	13.7%	29.2%	20.1%	12.0%	9.0%	
	N. Albany/Menands	10.2%	8.9%	4.2%	40.8%	21.4%	8.6%	6.0%	
	New Scotland	3.9%	9.1%	6.0%	25.7%	31.1%	14.3%	9.9%	
	New Scotland Avenue	3.5%	7.3%	6.4%	46.8%	18.9%	10.4%	6.7%	
	Pine Bush	4.8%	14.4%	7.0%	31.0%	24.5%	11.5%	6.9%	
	Ravena/Coeymans/Selkirk	4.2%	11.8%	4.1%	26.6%	34.9%	11.5%	7.0%	
	South End	7.5%	9.5%	5.4%	44.7%	21.9%	6.5%	4.6%	
	South End/Downtown Albany	7.5%	4.1%	0.0%	56.8%	18.9%	11.3%	1.3%	
	State Campus	3.5%	6.1%	7.5%	44.5%	21.0%	9.6%	7.8%	
	Watervliet/Green Island	5.0%	11.6%	4.4%	34.9%	26.1%	11.2%	6.8%	
	West End	3.2%	12.0%	7.2%	43.5%	23.2%	6.7%	4.1%	
	Columbia	Canaan	4.2%	4.9%	7.4%	29.9%	27.2%	13.3%	13.2%
		Chatham	3.2%	8.5%	5.4%	25.7%	30.0%	16.6%	10.7%
		Germantown	2.7%	9.4%	2.5%	29.5%	24.9%	17.8%	13.1%
Hudson		3.5%	8.0%	5.2%	31.0%	30.2%	13.0%	9.1%	
Ichabod		5.2%	11.3%	6.0%	24.6%	27.0%	16.9%	9.0%	
Pine Plains		6.6%	9.0%	5.8%	24.3%	30.3%	15.9%	8.1%	
Taconic Hills		4.3%	7.0%	4.7%	24.0%	32.9%	15.4%	11.8%	
Cairo/Durham		3.8%	9.5%	6.3%	30.2%	26.4%	12.3%	11.6%	
Catskill		4.7%	7.5%	4.4%	32.0%	27.4%	13.5%	10.6%	
Coxsackie/Athens		2.3%	9.2%	4.7%	30.9%	31.8%	13.3%	7.7%	
Greenville		4.9%	12.9%	4.6%	28.1%	30.3%	11.8%	7.4%	
Hunter/Tannersville	7.6%	13.4%	2.8%	25.6%	26.4%	15.2%	9.1%		
Greene	Windham/Ashland/Jewett	3.1%	7.1%	3.1%	25.6%	30.1%	19.6%	11.4%	
	Central	5.2%	12.2%	5.5%	24.8%	34.1%	13.7%	4.5%	
	East	3.5%	12.3%	5.0%	26.2%	32.1%	12.8%	8.1%	
	East Greenbush	7.1%	11.3%	4.2%	32.0%	25.4%	12.9%	7.1%	
	North East	6.0%	12.1%	5.9%	30.0%	28.9%	10.0%	7.1%	
	North West	4.6%	10.4%	5.8%	28.9%	29.1%	13.1%	8.2%	
	Rensselaer	5.6%	9.4%	5.0%	35.1%	27.8%	10.2%	6.7%	
	South West	5.0%	10.7%	5.8%	28.0%	28.6%	12.9%	9.1%	
	Troy/Lansingburgh	4.5%	10.2%	8.8%	38.0%	22.8%	9.5%	6.2%	
	West Sand Lake/Wynantskill	4.6%	13.6%	8.2%	24.5%	30.7%	13.1%	5.4%	
	Ballston Spa	3.6%	12.4%	5.2%	32.0%	28.4%	11.2%	7.2%	
Saratoga	Burnt Hills/Galway	4.5%	12.1%	6.5%	26.2%	30.2%	12.5%	8.1%	
	Clifton Park West	5.4%	11.4%	5.8%	31.3%	28.0%	10.9%	7.4%	
	North East	6.0%	12.1%	5.9%	30.0%	28.9%	10.0%	7.1%	
	North West	4.6%	10.4%	5.8%	28.9%	29.1%	13.1%	8.2%	
	Saratoga Springs	3.8%	8.6%	7.2%	30.7%	27.2%	12.3%	10.1%	
	South Glens Falls	5.3%	12.5%	5.9%	33.0%	25.7%	9.3%	8.5%	
	Waterford/Mechanicville	4.2%	10.9%	4.7%	31.1%	28.7%	12.9%	7.5%	
Schenectady	City/Stockade	3.0%	1.8%	6.9%	53.7%	23.5%	7.7%	3.5%	
	Goose Hill/Union	4.4%	8.3%	10.5%	38.1%	23.0%	8.7%	6.9%	
	Hamilton Hill	6.9%	18.1%	8.0%	31.4%	26.0%	5.9%	3.8%	
	Mont Pleasant	4.8%	14.4%	7.0%	31.0%	24.5%	11.5%	6.9%	
	Niskayauna	7.7%	12.8%	7.2%	27.3%	25.5%	10.9%	8.5%	
	Rotterdam	5.5%	11.3%	6.3%	34.0%	26.4%	10.4%	6.1%	
	Rural West	4.9%	10.6%	4.4%	31.4%	32.4%	10.1%	6.2%	
	Scotia-Glenville	5.6%	12.3%	6.0%	29.3%	24.8%	12.1%	10.0%	
	Upper State Street	5.8%	11.5%	5.0%	30.4%	27.8%	12.7%	6.9%	

Source: American Community Survey, 5-year estimates, 2019-2023. US Census Bureau.



### iii. Race & Ethnicity: Population, by Area

Area	Asian	Black or African American	Hispanic	Native American or Alaskan	Native Hawaiian or Pacific Islander	Other Race	White
<b>County</b>							
NYS (excluding NYC)	628,905	1,254,315	1,478,113	141,618	14,160	1,200,580	9,061,629
Capital Region	55,517	101,207	60,409	10,402	1,833	56,004	826,711
Albany	26,625	48,910	22,163	2,930	628	17,785	242,069
Columbia	1,832	3,536	3,658	873	157	3,790	55,442
Greene	811	3,095	3,135	479	10	2,850	43,608
Rensselaer	6,021	15,305	9,539	1,386	151	8,546	139,925
Saratoga	9,191	6,588	9,059	1,884	263	8,889	222,187
Schenectady	11,037	23,773	12,855	2,850	624	14,144	123,480
<b>Albany</b>							
Bethlehem	931	539	880	82	15	975	23,384
Center Square/Arbor Hill	343	4,663	700	211	28	416	4,938
City of Cohoes/North Colonie	1,446	4,073	1,662	220	29	1,107	19,109
Colonie	2,458	2,749	1,323	207	59	859	21,225
Delaware/2nd Avenue	911	3,243	2,051	3	0	1,299	6,200
Guilderland	2,096	786	430	61	0	471	10,391
Hill Towns	56	109	59	36	17	100	7,527
Latham	2,889	1,389	529	93	5	615	16,313
Loudonville	1,868	971	924	12	31	532	11,411
N. Albany/Menands	738	3,034	392	197	22	376	4,787
New Scotland	893	373	657	22	18	661	14,569
New Scotland Avenue	2,488	4,005	1,698	157	8	1,047	17,880
Pine Bush	2,188	5,059	2,843	472	19	3,224	22,655
Ravena/Coeymans/Selkirk	151	517	809	43	26	716	11,906
South End	709	4,972	1,441	358	0	1,422	3,403
South End/Downtown Albany	81	990	149	0	0	102	985
State Campus	2,795	3,885	2,037	210	69	2,260	22,953
Watervliet/Green Island	1,730	2,504	1,634	409	0	1,334	17,182
West End	1,584	7,301	2,145	400	286	1,596	5,367
<b>Columbia</b>							
Canaan	28	64	90	34	5	109	2,041
Chatham	335	640	508	90	40	777	10,753
Germantown	82	295	335	77	4	244	5,350
Hudson	1,224	1,851	1,215	411	50	1,044	14,759
Ichabod	78	235	908	148	58	698	11,220
Pine Plains	16	44	79	1	0	286	1,599
Taconic Hills	53	376	411	62	0	596	7,222
Cairo/Durham	20	268	331	41	0	524	6,860
<b>Greene</b>							
Catskill	280	962	1,116	39	0	911	11,889
Coxsackie/Athens	134	1,570	767	151	5	574	10,779
Greenville	216	176	372	178	0	434	7,247
Hunter/Tannersville	94	21	441	89	5	391	4,805
Windham/Ashland/Jewett	150	122	360	22	0	293	4,206
<b>Rensselaer</b>							
Central	174	26	210	109	8	281	10,404
East	34	109	280	57	12	264	6,552
East Greenbush	539	313	757	11	0	684	8,769
North East	42	113	422	57	0	386	11,259
North West	16	65	143	17	12	66	6,857
Rensselaer	1,651	2,051	1,288	248	0	993	18,350
South West	99	249	1,020	239	1	617	15,628
Troy/Lansingburgh	3,360	12,070	5,322	631	109	4,946	53,548
West Sand Lake/Wynantskill	109	315	220	67	9	338	10,839
<b>Saratoga</b>							
Ballston Spa	894	871	1,349	244	1	1,186	32,458
Burnt Hills/Galway	1,107	442	1,048	139	52	852	24,476
Clifton Park West	4,138	2,073	1,962	233	22	2,125	43,584
North East	338	412	1,234	143	18	1,080	26,140
North West	198	218	323	133	3	422	18,894
Saratoga Springs	1,605	1,466	1,649	224	118	1,707	36,797
South Glens Falls	31	377	224	248	0	117	8,500
Waterford/Mechanicville	883	639	1,228	460	101	1,107	26,687
<b>Schenectady</b>							
City/Stockade	378	1,988	777	97	9	1,011	5,460
Goose Hill/Union	620	3,181	1,829	247	75	1,752	9,233
Hamilton Hill	1,283	2,989	1,966	535	20	1,995	2,458
Mont Pleasant	2,188	5,059	2,843	472	19	3,224	22,655
Niskayauna	3,469	2,559	1,681	364	23	1,795	27,678
Rotterdam	971	2,717	1,870	342	90	1,723	23,954
Rural West	10	520	374	81	0	339	8,836
Scotia-Glenville	638	784	976	290	0	919	26,968
Upper State Street	3,250	5,080	1,931	432	343	2,526	13,448

Source: American Community Survey, 5-year estimates, 2019-2023. US Census Bureau. Note: The sum of individual race/ethnicity categories may add to more than the total population because people were tallied in each category they reported, whether alone, or in combination.



### iv. Race & Ethnicity: Percent of Population, by Area

		Asian	Black or African American	Hispanic	Native American or Alaskan	Native Hawaiian or Pacific Islander	Other Race	White
Geography	Area							
	County							
ZIP Code Group, by County	Albany							
	Columbia							
	Greene							
	Rensselaer							
	Saratoga							
	Schenectady							
	Albany							
	Columbia							
	Greene							
	Rensselaer							
	Saratoga							
	Schenectady							
	Albany							
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	Saratoga							
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Saratoga								
Schenectady								
Albany								
Columbia								
Greene								
Rensselaer								
Saratoga								

## v. Poverty: Population, by Area and Demographic Group

County	Total	Age				Ethnicity	Race				
		Under 18	18 to 34	35 to 64	65+		Hispanic or Latino	Asian	Black or African American	Some other race	Two or more races
Albany	37,608	8,844	13,398	10,923	4,443	3,905	3,737	9,646	1,468	4,274	18,355
Columbia	6,157	1,350	1,440	2,222	1,145	223	318	573	278	227	4,761
Greene	4,713	812	1,064	1,967	870	256	30	309	131	345	3,898
Rensselaer	17,789	4,984	5,482	5,412	1,911	1,707	611	2,934	382	1,968	11,891
Saratoga	15,248	3,175	3,996	5,294	2,783	1,116	158	444	300	1,042	13,215
Schenectady	18,013	5,156	4,955	5,417	2,485	3,156	655	4,373	1,920	2,254	8,597
<b>ZIP Code Group</b>											
Bethlehem	1,263	221	531	324	187	87	110	402	29	15	701
Center Square/Arbor Hill	2,179	351	743	863	222	176	44	1,296	55	84	700
City of Cohoes/North Colonia	3,554	1,455	1,133	755	211	256	23	449	22	1,130	1,912
Colonie	1,786	399	307	807	273	35	276	174	22	18	1,282
Delaware/2nd Avenue	1,010	243	447	221	99	245	123	106	0	79	702
Guilderland	696	162	164	301	69	44	154	63	0	22	457
Hill Towns	316	99	87	95	35	3	0	0	0	5	311
Latham	1,220	174	329	367	350	107	142	127	16	155	780
Loudonville	551	141	10	225	175	0	229	38	0	0	284
N. Albany/Menands	1,209	519	352	192	146	8	146	305	8	362	388
New Scotland	650	84	140	302	124	42	28	52	37	30	503
New Scotland Avenue	3,900	180	2,763	580	377	377	686	546	95	272	2,300
Ravena/Coeymans/Selkirk	1,107	282	331	388	106	28	28	16	0	37	1,026
South End	2,620	700	715	1,022	183	422	180	1,405	248	367	415
South End/Downtown Albany	955	232	221	395	107	38	8	591	6	13	337
State Campus	4,033	331	2,380	1,021	301	455	499	953	124	278	2,136
WaterViet/Green Island	3,379	1,211	782	919	467	391	288	415	240	368	2,068
West End	5,984	1,804	1,680	2,039	461	1,127	561	2,688	512	967	1,215
Canaan	234	57	42	99	36	1	4	6	0	6	218
Chatham	898	176	88	389	245	9	6	30	136	4	722
Germantown	561	91	98	247	125	14	0	72	2	18	469
Hudson	2,609	759	688	830	332	84	285	337	50	166	1,771
Ichabod	834	75	294	207	258	81	9	27	73	10	715
Pine Plains	183	29	46	87	21	4	0	3	4	21	155
Taconic Hills	690	137	163	308	82	14	14	98	2	0	576
Cairo/Durham	866	211	261	289	105	36	0	163	0	45	658
Catskill	1,767	228	498	746	295	104	30	92	44	121	1,480
Coxsackie/Athens	787	193	78	259	257	75	0	54	75	148	510
Greenville	213	17	46	128	22	10	0	1	0	0	212
Hunter/Tannersville	866	165	157	426	118	90	0	0	12	61	793
Windham/Ashland/Jewett	400	55	78	185	82	0	0	0	0	31	369
Central	518	65	89	295	69	4	18	0	0	40	460
East	572	147	61	277	87	25	4	0	9	5	554
East Greenbush	214	37	50	69	58	0	1	85	0	0	128
North East	2,517	541	486	1,076	414	251	16	19	154	83	2,245
North West	2,185	777	372	743	293	25	0	30	10	149	1,995
Rensselaer	2,295	783	584	668	260	124	139	146	5	361	1,644
South West	781	74	153	336	218	74	0	4	2	20	755
Troy/Lansingburgh	11,763	3,440	4,225	3,100	998	1,431	449	2,679	301	1,520	6,811
West Sand Lake/Wynantskill	564	152	85	209	118	3	0	15	3	0	546
Ballston Spa	2,095	496	469	828	302	153	29	89	17	83	1,877
Burnt Hills/Galway	1,217	213	266	431	307	70	6	0	0	54	1,157
Clifton Park West	1,469	286	388	375	420	240	12	206	19	227	990
North East	2,517	541	486	1,076	414	251	16	19	154	83	2,245
North West	2,185	777	372	743	293	25	0	30	10	149	1,995
Saratoga Springs	3,093	386	1,133	1,065	509	172	66	101	142	193	2,585
South Glens Falls	1,036	265	389	252	130	13	0	2	1	0	1,033
Waterford/Mechanicville	2,084	364	597	724	399	148	51	2	17	267	1,680
City/Stockade	1,060	15	289	653	103	129	7	323	21	83	616
Goose Hill/Union	2,270	585	616	804	265	101	54	373	305	109	1,294
Hamilton Hill	2,631	884	834	615	298	1,116	0	910	655	499	499
Mont Pleasant	3,684	1,014	1,058	1,064	548	704	76	1,038	430	573	1,567
Niskayauna	1,176	128	333	419	296	143	94	181	56	127	718
Pine Bush	3,684	1,014	1,058	1,064	548	704	76	1,038	430	573	1,567
Rotterdam	2,151	695	545	597	314	361	24	190	28	353	1,555
Rural West	800	174	255	288	83	27	0	52	2	93	653
Scotia-Glenville	1,330	368	335	395	232	148	2	27	12	201	1,088
Upper State Street	4,234	1,578	942	805	909	503	596	1,282	465	292	1,599

Source: American Community Survey, 1-year estimates, 2022. US Census Bureau.



## vi. Poverty: Percent of Population, by Demographic Group

County	Total	Age				Ethnicity	Race				
		Under 18	18 to 34	35 to 64	65+		Hispanic or Latino	Asian	Black or African American	Some other race	Two or more races
Albany	12.5%	15.8%	17.6%	9.5%	8.4%	21.2%	16.6%	27.2%	25.1%	23.2%	8.5%
Columbia	10.3%	14.0%	13.7%	8.9%	7.8%	7.1%	23.2%	33.1%	19.1%	6.5%	9.2%
Greene	10.4%	11.2%	12.2%	10.7%	7.9%	9.4%	5.7%	23.8%	14.7%	14.8%	9.7%
Rensselaer	11.5%	16.6%	15.6%	8.7%	6.9%	20.6%	15.7%	28.2%	16.2%	21.7%	9.2%
Saratoga	6.6%	7.0%	8.7%	5.4%	6.3%	13.8%	2.3%	12.6%	14.6%	11.2%	6.3%
Schenectady	11.6%	15.3%	14.6%	8.9%	9.3%	26.2%	8.5%	26.8%	31.8%	17.0%	7.7%
<b>ZIP Code Group</b>											
Bethlehem	5.0%	4.2%	11.8%	3.1%	3.8%	11.2%	13.9%	61.3%	11.3%	2.4%	3.1%
Center Square/Arbor Hill	22.4%	29.8%	20.3%	24.2%	17.0%	26.4%	23.4%	30.4%	51.9%	16.7%	15.0%
City of Cohoes/North Colonia	15.8%	27.9%	20.0%	9.3%	6.0%	19.5%	1.4%	27.5%	30.6%	47.4%	11.4%
Colonie	6.8%	7.4%	6.1%	7.7%	4.9%	2.3%	12.3%	11.4%	12.5%	1.3%	6.1%
Delaware/2nd Avenue	9.8%	11.1%	14.7%	5.7%	8.2%	12.2%	13.6%	4.9%	0.0%	17.3%	11.8%
Guilderland	5.3%	5.9%	5.2%	6.0%	3.1%	11.0%	8.1%	10.0%	0.0%	5.1%	4.5%
Hill Towns	4.3%	7.9%	6.7%	3.2%	2.0%	9.1%	0.0%	0.0%	0.0%	6.8%	4.4%
Latham	6.3%	4.9%	7.1%	5.0%	9.7%	18.2%	6.0%	27.7%	13.3%	13.8%	5.1%
Loudonville	5.2%	6.1%	0.5%	5.4%	7.6%	0.0%	16.4%	12.9%	0.0%	0.0%	3.3%
N. Albany/Menands	13.9%	26.1%	13.0%	6.6%	13.1%	1.7%	18.0%	11.8%	2.2%	47.2%	9.5%
New Scotland	4.3%	3.2%	5.2%	4.8%	3.4%	7.3%	4.1%	25.9%	38.5%	4.2%	3.7%
New Scotland Avenue	18.0%	6.6%	34.1%	8.2%	9.9%	31.7%	34.0%	19.4%	44.0%	17.8%	15.3%
Ravena/Coeymans/Selkirk	9.0%	13.5%	13.9%	7.1%	4.5%	4.5%	14.6%	5.8%	0.0%	8.1%	9.3%
South End	27.0%	36.4%	24.0%	27.7%	16.6%	32.1%	29.1%	29.5%	57.5%	34.1%	15.0%
South End/Downtown Albany	41.3%	75.8%	24.5%	49.7%	34.6%	26.2%	44.4%	55.0%	11.1%	23.6%	30.4%
State Campus	14.4%	9.5%	24.1%	10.2%	6.6%	31.5%	20.7%	35.4%	16.9%	16.7%	10.4%
Watervliet/Green Island	15.8%	28.0%	14.9%	11.1%	13.0%	21.9%	17.5%	22.8%	28.5%	22.4%	13.4%
West End	40.6%	53.2%	41.4%	36.4%	27.3%	60.6%	47.0%	38.4%	78.9%	50.6%	30.7%
Canaan	11.8%	26.4%	11.9%	11.5%	6.5%	1.3%	28.6%	100.0%	0.0%	7.3%	11.8%
Chatham	7.6%	9.4%	4.4%	8.1%	7.7%	2.2%	11.8%	26.8%	40.0%	0.6%	6.7%
Germantown	10.2%	12.2%	9.6%	10.9%	8.5%	5.7%	0.0%	57.1%	7.4%	9.5%	9.2%
Hudson	14.8%	27.7%	19.7%	10.9%	8.7%	7.8%	24.9%	29.0%	11.9%	12.3%	13.1%
Ichabod	7.4%	3.1%	15.9%	4.9%	9.6%	11.5%	15.3%	65.9%	22.9%	1.8%	7.0%
Pine Plains	9.8%	9.5%	14.2%	11.2%	4.6%	5.1%	0.0%	16.7%	2.9%	11.7%	10.3%
Taconic Hills	9.2%	14.3%	14.4%	9.1%	4.0%	3.2%	50.0%	37.8%	1.3%	0.0%	8.7%
Cairo/Durham	12.1%	16.3%	16.2%	11.1%	6.3%	10.5%	0.0%	79.9%	0.0%	7.3%	10.4%
Catskill	13.8%	12.7%	15.5%	15.3%	10.0%	10.3%	29.4%	11.0%	10.3%	24.9%	13.5%
Coxsackie/Athens	7.1%	10.2%	4.9%	5.5%	9.1%	10.8%	0.0%	31.2%	45.2%	30.8%	5.1%
Greenville	2.9%	1.2%	3.3%	4.0%	1.6%	3.3%	0.0%	33.3%	0.0%	0.0%	3.1%
Hunter/Tannersville	17.6%	18.2%	27.9%	19.8%	9.1%	34.1%	0.0%	0.0%	8.3%	28.0%	17.8%
Windham/Ashland/Jewett	9.3%	10.6%	10.2%	10.6%	6.4%	0.0%	0.0%	0.0%	0.0%	7.1%	10.0%
Central	4.8%	3.1%	4.6%	6.4%	3.3%	3.3%	42.9%	0.0%		16.9%	4.4%
East	8.5%	11.0%	5.4%	9.6%	6.4%	9.5%	7.0%	0.0%	28.1%	1.8%	8.8%
East Greenbush	2.2%	1.7%	2.5%	1.7%	3.6%	0.0%	0.2%	32.0%	0.0%	0.0%	1.6%
North East	6.4%	6.3%	6.5%	6.4%	6.6%	13.9%	5.3%	6.3%	24.9%	8.3%	6.1%
North West	8.3%	15.8%	8.4%	6.5%	5.3%	5.4%	0.0%	16.3%	5.4%	26.8%	7.9%
Rensselaer	10.6%	20.4%	11.6%	7.5%	6.8%	11.0%	13.1%	11.6%	3.1%	24.0%	9.3%
South West	5.0%	2.7%	5.2%	5.1%	6.6%	8.1%	0.0%	4.1%	1.5%	4.1%	5.2%
Troy/Lansingburgh	18.5%	29.2%	23.8%	12.9%	10.0%	32.1%	23.0%	31.2%	19.5%	29.3%	14.7%
West Sand Lake/Wynantskill	5.1%	5.6%	5.5%	4.5%	5.4%	1.0%	0.0%	29.4%	2.6%	0.0%	5.2%
Ballston Spa	6.2%	7.7%	6.6%	5.7%	5.0%	12.1%	3.6%	17.7%	5.8%	7.1%	6.0%
Burnt Hills/Galway	4.9%	4.2%	6.5%	4.1%	5.7%	9.1%	0.7%	0.0%	0.0%	6.6%	5.1%
Clifton Park West	3.0%	2.7%	3.8%	1.9%	5.1%	12.4%	0.4%	15.3%	7.1%	7.8%	2.4%
North East	6.4%	6.3%	6.5%	6.4%	6.6%	13.9%	5.3%	6.3%	24.9%	8.3%	6.1%
North West	8.3%	15.8%	8.4%	6.5%	5.3%	5.4%	0.0%	16.3%	5.4%	26.8%	7.9%
Saratoga Springs	8.5%	7.1%	15.5%	7.0%	6.1%	13.9%	8.8%	11.2%	32.1%	12.9%	7.9%
South Glens Falls	11.8%	15.5%	21.2%	7.0%	7.8%	6.5%	0.0%	4.1%	2.6%	0.0%	12.4%
Waterford/Mechanicville	7.4%	6.9%	10.5%	6.2%	7.1%	15.6%	6.4%	1.9%	7.7%	25.4%	6.5%
City/Stockade	18.3%	3.1%	14.5%	25.4%	14.0%	21.0%	5.3%	22.6%	13.5%	14.1%	17.7%
Goose Hill/Union	17.8%	25.7%	19.2%	15.9%	12.1%	6.3%	8.3%	15.2%	29.1%	14.6%	17.0%
Hamilton Hill	33.5%	46.7%	32.0%	23.7%	38.7%	69.1%	0.0%	34.9%	53.4%	40.2%	26.9%
Mont Pleasant	12.5%	16.3%	16.2%	9.4%	10.2%	24.2%	5.5%	34.4%	25.7%	22.3%	7.6%
Niskayauna	3.6%	1.6%	6.8%	3.0%	4.9%	9.8%	3.5%	19.9%	14.4%	4.5%	2.7%
Pine Bush	12.5%	16.3%	16.2%	9.4%	10.2%	24.2%	5.5%	34.4%	25.7%	22.3%	7.6%
Rotterdam	7.8%	12.0%	8.1%	5.7%	6.6%	19.1%	3.0%	9.0%	5.7%	17.0%	7.0%
Rural West	9.0%	10.3%	13.8%	7.2%	6.0%	5.4%	0.0%	42.3%	2.6%	19.1%	7.9%
Scotia-Glenville	4.8%	5.9%	6.1%	3.8%	4.0%	15.3%	0.5%	10.8%	11.3%	16.2%	4.2%
Upper State Street	19.5%	33.3%	19.7%	9.5%	24.3%	27.8%	26.9%	32.2%	35.8%	11.5%	13.8%

Source: American Community Survey, 1-year estimates, 2022. US Census Bureau.



## C. Leading Causes of Death, 2022

Area	Rank	Cause	Count	Rate	Percent of Total Deaths
NYS (excluding NYC)	1	Heart Disease	26,138	165.9	23.0%
	2	Cancer	21,715	137.0	19.1%
	3	COVID-19	6,607	42.3	5.8%
	4	Unintentional Injury	6,596	54.1	5.8%
	5	Chronic Lower Respiratory Diseases	4,595	28.7	4.0%
	6	Cerebrovascular Disease	4,347	27.7	3.8%
	7	Diabetes	2,967	19.2	2.6%
Albany County	1	Heart Disease	732	173.8	23.7%
	2	Cancer	587	137.8	19.0%
	3	COVID-19	121	28.9	3.9%
	4	Diabetes	112	27.8	3.6%
	5	Chronic Lower Respiratory Diseases	111	25.1	3.6%
	6	Unintentional Injury	106	34.4	3.4%
	7	Alzheimer's Disease	100	23.4	3.2%
Columbia County	1	Heart Disease	163	146.7	22.1%
	2	Cancer	157	143.1	21.3%
	3	COVID-19	38	35.0	5.2%
	4	Chronic Lower Respiratory Diseases	33	29.0	4.5%
	5	Unintentional Injury	30	45.1	4.1%
	6	Cerebrovascular Disease	29	25.5	3.9%
	7	Diabetes	26	25.8	3.5%
Greene County	1	Heart Disease	147	183.8	22.7%
	2	Cancer	138	175.0	21.3%
	3	COVID-19	42	52.7	6.5%
	4	Unintentional Injury	35	75.6	5.4%
	5	Chronic Lower Respiratory Diseases	26	31.3	4.0%
	6	Diabetes	23	28.3	3.5%
	7	Cerebrovascular Disease	21	25.6	3.2%
Rensselaer County	1	Heart Disease	343	166.9	19.9%
	2	Cancer	343	159.3	19.9%
	3	Chronic Lower Respiratory Diseases	108	50.0	6.3%
	4	COVID-19	79	40.4	4.6%
	5	Unintentional Injury	72	42.4	4.2%
	6	Cerebrovascular Disease	57	28.2	3.3%
	7	Diabetes	49	23.5	2.8%
Saratoga County	1	Heart Disease	501	156.5	21.9%
	2	Cancer	495	143.6	21.7%
	3	COVID-19	126	38.4	5.5%
	4	Chronic Lower Respiratory Diseases	110	31.6	4.8%
	5	Cerebrovascular Disease	96	29.3	4.2%
	6	Unintentional Injury	72	26.2	3.1%
	7	Alzheimer's Disease	67	22.1	2.9%
Schenectady County	1	Heart Disease	407	190.8	23.9%
	2	Cancer	299	142.6	17.5%
	3	COVID-19	92	42.3	5.4%
	4	Chronic Lower Respiratory Diseases	69	32.0	4.0%
	5	Alzheimer's Disease	64	28.7	3.8%
	6	Cerebrovascular Disease	57	27.3	3.3%
	7	Unintentional Injury	52	29.9	3.0%

Source: NYS Vital Statistics, 2022. \*Rates based on fewer than 10 cases in the numerator are unstable.



## D. Leading Causes of Premature Death (<75 years), 2022

Area	Rank	Cause	Count	Rate	Percent of Total Deaths
NYS (excluding NYC)	1	Cancer	11,411	73.1	24.6%
	2	Heart Disease	8,497	55.2	18.3%
	3	Unintentional Injury	5,043	46.9	10.9%
	4	COVID-19	2,414	16.0	5.2%
	5	Chronic Lower Respiratory Diseases	1,743	10.6	3.8%
	6	Diabetes	1,474	9.9	3.2%
	7	Cerebrovascular Disease	1,266	8.2	2.7%
Albany County	1	Cancer	307	73.7	23.8%
	2	Heart Disease	248	62.6	19.2%
	3	Unintentional Injury	92	33.1	7.1%
	4	Diabetes	69	18.2	5.3%
	5	COVID-19	56	14.2	4.3%
	6	Chronic Lower Respiratory Diseases	49	10.9	3.8%
	7	Cerebrovascular Disease	32	8.6	2.5%
Columbia County	1	Cancer	79	78.3	25.6%
	2	Heart Disease	47	44.8	15.2%
	3	Unintentional Injury	25	43.2	8.1%
	4	Diabetes	17	18.9	5.5%
	5	Cerebrovascular Disease	14	12.8	4.5%
	6	COVID-19	11	11.5	3.6%
	7	Chronic Lower Respiratory Diseases	10	9.0	3.2%
Greene County	1	Cancer	75	103.3	26.9%
	2	Heart Disease	53	70.4	19.0%
	3	Unintentional Injury	26	68.6	9.3%
	4	COVID-19	14	18.9	5.0%
	5	Chronic Lower Respiratory Diseases	11	13.4	3.9%
	6	Diabetes	8	10.3*	2.9%
	7	Cerebrovascular Disease	8	10.0*	2.9%
Rensselaer County	1	Cancer	184	81.7	25.2%
	2	Heart Disease	133	63.5	18.2%
	3	Unintentional Injury	55	35.8	7.5%
	4	Chronic Lower Respiratory Diseases	49	20.6	6.7%
	5	COVID-19	26	13.9	3.6%
	6	Diabetes	20	9.1	2.7%
	7	Suicide	18	11.3	2.5%
Saratoga County	1	Cancer	268	75.8	29.1%
	2	Heart Disease	171	51.6	18.6%
	3	Unintentional Injury	51	20.7	5.5%
	4	Chronic Lower Respiratory Diseases	49	13.0	5.3%
	5	COVID-19	37	10.2	4.0%
	6	Cerebrovascular Disease	33	9.4	3.6%
	7	Liver Disease	31	11.3	3.4%
Schenectady County	1	Cancer	162	80.1	23.1%
	2	Heart Disease	155	79.2	22.1%
	3	Unintentional Injury	39	25.1	5.6%
	4	COVID-19	35	16.8	5.0%
	5	Diabetes	28	13.4	4.0%
	6	Chronic Lower Respiratory Diseases	20	9.3	2.9%
	7	Liver Disease	18	9.6	2.6%

Source: NYS Vital Statistics, 2022. \*Rates based on fewer than 10 cases in the numerator are unstable.



## E. Hospitalization Rates by Gender & Race/Ethnicity

### Asthma Hospitalization Rate per 100,000

	All	Gender		Race/Ethnicity		
		Female	Male	Black NH	Hispanic	White NH
NYS (excl. NYC)	49.8	50.9	48.7	141.6	62.3	29.3
Capital Region	41.5	44.1	38.8	132.2	54.5	25.6
County						
Albany	54.1	51.5	56.9	155.3	64.3	28.4
Columbia	33.4	42.8	23.6			25.4
Greene	39.4	30.9	48.3	209.1		23.1
Rensselaer	37.2	40.1	34.1	130.8	32.9	23.5
Saratoga	26.0	30.9	20.9	74.7		23.1
Schenectady	49.3	58.4	39.9	97.5	72.0	29.6

### Cerebrovascular Disease (Stroke) Hospitalization Rate per 100,000

	All	Gender		Race/Ethnicity		
		Female	Male	Black NH	Hispanic	White NH
NYS (excl. NYC)	153.3	161.2	145.0	275.2	129.4	132.1
Capital Region	138.4	143.8	132.7	257.9	129.2	117.9
County						
Albany	148.6	160.6	136.0	279.3	129.8	114.0
Columbia	127.9	133.3	122.3	234.3	146.8	116.5
Greene	124.8	128.3	121.2			121.2
Rensselaer	144.2	143.4	145.0	320.0	174.5	125.4
Saratoga	116.0	121.6	110.1	171.4		112.1
Schenectady	163.4	158.7	168.3	225.4	199.4	133.0

### Chronic Obstructive Pulmonary Disease Hospitalization Rate per 100,000

	All	Gender		Race/Ethnicity		
		Female	Male	Black NH	Hispanic	White NH
NYS (excl. NYC)	73.1	86.8	58.7	113.8	41.3	71.6
Capital Region	61.2	72.3	49.5	110.1	39.7	58.9
County						
Albany	56.5	65.6	47.0	123.9	35.3	50.1
Columbia	90.5	108.4	71.7	134.1		89.6
Greene	65.2	73.7	56.4			62.2
Rensselaer	60.8	73.6	47.4	106.7		56.8
Saratoga	61.2	72.5	49.4			63.7
Schenectady	53.7	66.3	40.5	93.6	39.9	52.4

**Source:** NYS SPARCS, 2021-2023. Age-Adjusted Rate per 100,000. **Notes:** Blank cells are suppressed due to small numbers. A light red cell indicates the rate is at least 50% higher than the NYS (excl. NYC) rate; a dark red cell indicates the rate is at least 100% higher.



### Diabetes Hospitalization Rate per 100,000

	All	Gender		Race/Ethnicity			
		Female	Male	Black NH	Hispanic	White NH	
NYS (excl. NYC)	205.8	228.8	181.6	425.3	220.8	163.6	
Capital Region	177.9	201.4	153.2	371.8	174.0	144.1	
County	Albany	188.8	221.1	155.1	399.3	205.7	135.9
	Columbia	226.7	242.8	209.9	627.5	139.6	192.2
	Greene	161.7	171.5	151.5	220.5	118.9	157.7
	Rensselaer	188.9	207.3	169.7	419.8	274.0	158.0
	Saratoga	139.4	160.2	117.6	235.5	58.4	137.3
	Schenectady	194.6	216.5	171.7	323.5	180.0	137.1

### Heart Disease Hospitalization Rate per 100,000

	All	Gender		Race/Ethnicity			
		Female	Male	Black NH	Hispanic	White NH	
NYS (excl. NYC)	710.4	653.0	770.5	993.2	499.5	659.3	
Capital Region	663.0	621.0	706.9	995.8	453.2	615.0	
County	Albany	684.5	634.7	736.6	1,064.6	417.3	609.2
	Columbia	657.7	626.5	690.4	749.0	441.3	622.6
	Greene	595.2	513.9	680.3	861.0	409.2	552.5
	Rensselaer	749.3	733.0	766.3	1,415.6	818.3	678.7
	Saratoga	604.1	574.3	635.2	529.3	185.3	602.6
	Schenectady	671.1	608.3	736.8	853.7	528.2	618.0

### Assault Hospitalization Rate per 100,000

	All	Gender		Race/Ethnicity			
		Female	Male	Black NH	Hispanic	White NH	
NYS (excl. NYC)	26.4	16.1	37.1	84.5	21.9	16.2	
Capital Region	33.0	21.5	45.1	118.6	27.2	20.2	
County	Albany	45.7	25.7	66.6	148.5	39.6	24.3
	Columbia	21.8	14.9	28.9			18.6
	Greene	45.9	27.1	65.5	116.6		30.2
	Rensselaer	31.5	23.5	40.0	91.3	35.3	20.0
	Saratoga	16.9	16.9	16.9			16.3
	Schenectady	34.3	19.7	49.6	104.9		17.7

Source: NYS SPARCS, 2021-2023. Age-Adjusted Rate per 100,000. Blank cells are suppressed due to small numbers. Note: A light red cell indicates the rate is at least 50% higher than the NYS (excl. NYC) rate; a dark red cell indicates the rate is at least 100% higher.

### Falls Hospitalization Rate per 100,000

	All	Gender		Race/Ethnicity		
		Female	Male	Black NH	Hispanic	White NH
NYS (excl. NYC)	956.7	483.8	336.2	316.1	249.9	410.5
Capital Region	1,028.0	511.2	368.3	364.6	260.0	432.1
Albany	1,107.2	552.0	413.9	392.7	345.3	473.7
Columbia	1,522.1	543.6	363.0	423.1	315.4	443.5
Greene	1,018.7	341.1	316.7	255.3	129.9	309.4
Rensselaer	1,102.6	564.4	390.6	486.3	341.5	458.2
Saratoga	969.2	473.2	321.5	200.1	93.6	404.4
Schenectady	1,013.1	487.1	365.6	313.0	234.1	425.8

### Intentional Self-Harm Hospitalization Rate per 100,000

	All	Gender		Race/Ethnicity		
		Female	Male	Black NH	Hispanic	White NH
NYS (excl. NYC)	263.3	270.1	256.2	318.2	142.9	268.3
Capital Region	302.4	297.6	307.4	495.9	208.9	281.7
Albany	311.4	290.2	333.6	539.7	249.3	276.2
Columbia	408.8	408.7	409.0	581.3	248.9	393.2
Greene	176.0	168.5	183.9	199.8	131.5	168.4
Rensselaer	363.8	374.6	352.5	536.8	280.8	333.1
Saratoga	269.0	276.8	260.9	441.5	86.4	272.7
Schenectady	294.1	284.5	304.1	450.3	195.8	266.9

### Motor Vehicle Accident Hospitalization Rate per 100,000

	All	Gender		Race/Ethnicity		
		Female	Male	Black NH	Hispanic	White NH
NYS (excl. NYC)	53.9	40.2	68.2	82.3	51.7	44.5
Capital Region	53.6	38.4	69.5	82.0	47.7	44.9
Albany	59.3	39.3	80.2	98.0	59.8	43.4
Columbia	57.4	35.3	80.5			52.2
Greene	73.0	40.2	107.3			81.0
Rensselaer	50.9	34.4	68.2	90.3	36.6	43.0
Saratoga	47.6	43.6	51.9		29.4	44.5
Schenectady	48.7	33.8	64.3	69.3	54.9	38.7

**Source:** NYS SPARCS, 2021-2023. Age-Adjusted Rate per 100,000. Blank cells are suppressed due to small numbers. **Note:** A light red cell indicates the rate is at least 50% higher than the NYS (excl. NYC) rate; a dark red cell indicates the rate is at least 100% higher.



### Opioid Overdose Hospitalization Rate per 100,000

	All	Gender		Race/Ethnicity		
		Female	Male	Black NH	Hispanic	White NH
NYS (excl. NYC)	59.8	63.0	56.4	94.0	37.2	56.6
Capital Region	56.9	58.3	55.6	117.8	40.9	50.7
Albany	59.7	57.1	62.4	130.8	56.2	47.5
Columbia	73.5	86.6	59.7	144.3		65.7
Greene	46.8	37.3	56.6	136.8		42.2
Rensselaer	60.0	64.2	55.6	83.4		56.7
Saratoga	50.0	55.6	44.2	89.1		50.1
Schenectady	54.4	54.0	54.9	108.6	36.1	46.8

### Substance Use Disorders Hospitalization Rate per 100,000

	All	Gender		Race/Ethnicity		
		Female	Male	Black NH	Hispanic	White NH
NYS (excl. NYC)	1,047.5	780.9	1,326.5	1,776.4	702.3	996.1
Capital Region	1,070.6	803.0	1,350.8	2,097.5	781.5	973.7
Albany	1,254.3	878.1	1,648.0	2,550.2	1,031.2	1,075.7
Columbia	1,272.1	1,020.7	1,535.2	2,103.3	835.4	1,205.1
Greene	894.2	741.1	1,054.6	846.9	458.2	895.8
Rensselaer	1,116.0	876.3	1,366.9	2,081.2	943.5	1,012.3
Saratoga	822.2	654.3	998.1	979.8	269.6	835.1
Schenectady	1,081.7	787.4	1,389.8	1,737.2	849.9	974.7

### All Behavioral Health Hospitalization Rate per 100,000

	All	Gender		Race/Ethnicity		
		Female	Male	Black NH	Hispanic	White NH
NYS (excl. NYC)	789.7	678.5	906.1	1,157.4	516.9	768.2
Capital Region	795.7	675.4	921.6	1,325.5	543.2	739.1
Albany	892.9	689.7	1,105.6	1,570.9	682.1	790.9
Columbia	980.6	875.7	1,090.4	1,258.8	640.0	931.4
Greene	529.1	485.5	574.7	434.8	294.8	551.0
Rensselaer	855.8	808.1	905.8	1,342.4	718.8	776.7
Saratoga	695.7	642.1	751.8	895.5	230.7	702.0
Schenectady	758.8	591.7	933.7	1,147.8	501.5	701.1

Source: NYS SPARCS, 2021-2023. Age-Adjusted Rate per 100,000. Blank cells are suppressed due to small numbers. Note: A light red cell indicates the rate is at least 50% higher than the NYS (excl. NYC) rate; a dark red cell indicates the rate is at least 100% higher.

## F. Emergency Department (ED) Visits by Gender & Race/Ethnicity

### Asthma ED Visit Rate per 100,000

	All	Gender		Race/Ethnicity		
		Female	Male	Black NH	Hispanic	White NH
NYS (excl. NYC)	276.9	279.5	274.1	868.3	330.9	160.6
Capital Region	266.3	260.6	272.2	1,149.2	435.0	125.7
County						
Albany	360.1	341.3	379.8	1,376.4	603.2	111.3
Columbia	307.0	307.0	306.9	1,098.4	344.9	235.7
Greene	123.7	106.4	141.9	413.3		99.9
Rensselaer	259.2	253.5	265.1	1,126.8	469.8	134.0
Saratoga	106.9	114.6	98.7	449.1	74.5	95.8
Schenectady	346.6	347.3	345.8	967.2	518.8	169.9

### Cerebrovascular Disease (Stroke) ED Visit Rate per 100,000

	All	Gender		Race/Ethnicity		
		Female	Male	Black NH	Hispanic	White NH
NYS (excl. NYC)	62.6	67.6	57.3	62.0	37.4	61.6
Capital Region	65.3	72.4	57.9	84.6	50.6	61.2
County						
Albany	61.9	71.3	52.1	99.0	51.1	52.9
Columbia	80.1	86.8	73.1			77.8
Greene	42.5	45.1	39.7			41.2
Rensselaer	71.4	78.8	63.8	105.9	91.8	67.1
Saratoga	68.5	76.5	60.0			68.7
Schenectady	62.5	65.1	59.7	55.0	51.4	57.3

### Chronic Obstructive Pulmonary Disease ED Visit Rate per 100,000

	All	Gender		Race/Ethnicity		
		Female	Male	Black NH	Hispanic	White NH
NYS (excl. NYC)	103.2	113.9	91.9	167.4	50.4	102.1
Capital Region	100.4	108.9	91.5	277.8	129.2	88.5
County						
Albany	96.7	99.2	94.1	316.1	79.0	73.4
Columbia	183.2	220.6	144.0	569.2	154.7	167.1
Greene	67.8	71.3	64.1			69.9
Rensselaer	112.0	137.3	85.5	263.0	358.5	98.2
Saratoga	73.9	76.7	71.0			75.1
Schenectady	112.1	114.7	109.5	239.4	179.9	99.6

**Source:** NYS SPARCS, 2021-2023. Age-Adjusted Rate per 100,000. Blank cells are suppressed due to small numbers. **Note:** A light red cell indicates the rate is at least 50% higher than the NYS (excl. NYC) rate; a dark red cell indicates the rate is at least 100% higher.



### Diabetes ED Visit Rate per 100,000

	All	Gender		Race/Ethnicity		
		Female	Male	Black NH	Hispanic	White NH
NYS (excl. NYC)	162.7	152.7	173.1	425.8	184.0	123.0
Capital Region	159.5	149.3	170.1	565.9	222.8	111.4
Albany	176.3	160.0	193.3	602.0	232.4	98.1
Columbia	230.4	243.6	216.6	561.3	295.3	199.8
Greene	94.9	95.8	93.9			81.9
Rensselaer	176.8	167.3	186.7	731.2	336.0	129.3
Saratoga	101.8	92.5	111.4	389.9	89.1	99.0
Schenectady	198.0	182.4	214.4	551.4	262.3	116.0

### Heart Disease ED Visit Rate per 100,000

	All	Gender		Race/Ethnicity		
		Female	Male	Black NH	Hispanic	White NH
NYS (excl. NYC)	287.1	264.0	311.1	367.5	151.1	282.2
Capital Region	241.6	234.4	249.2	462.4	179.7	219.4
Albany	222.8	215.0	231.0	486.2	169.6	179.1
Columbia	405.3	399.9	410.9	507.0	315.1	385.2
Greene	160.8	140.9	181.7	236.0		154.8
Rensselaer	233.8	236.1	231.4	610.6	211.5	199.5
Saratoga	243.1	235.1	251.4	360.0	96.1	246.2
Schenectady	241.5	233.7	249.7	398.1	229.3	216.2

### Assault ED Visit Rate per 100,000

	All	Gender		Race/Ethnicity		
		Female	Male	Black NH	Hispanic	White NH
NYS (excl. NYC)	320.6	281.8	361.2	934.5	289.8	215.1
Capital Region	363.2	329.7	398.2	1,284.2	388.1	218.4
Albany	457.2	421.3	494.7	1,402.9	495.1	232.5
Columbia	361.0	308.5	415.9	1,175.0	548.0	263.2
Greene	344.8	88.1	613.6	1,374.6	380.1	148.6
Rensselaer	375.2	371.2	379.5	1,279.3	335.7	251.2
Saratoga	156.7	138.2	176.1	479.4	95.2	148.3
Schenectady	479.2	449.4	510.3	1,216.8	426.9	303.7

Source: NYS SPARCS, 2021-2023. Age-Adjusted Rate per 100,000. Blank cells are suppressed due to small numbers. Note: A light red cell indicates the rate is at least 50% higher than the NYS (excl. NYC) rate; a dark red cell indicates the rate is at least 100% higher.

### Falls ED Visit Rate per 100,000

	All	Gender		Race/Ethnicity			
		Female	Male	Black NH	Hispanic	White NH	
NYS (excl. NYC)	3,402.1	2,215.5	1,827.8	2,231.2	1,532.8	1,957.0	
Capital Region	2,843.8	1,815.0	1,476.4	2,510.4	1,400.1	1,484.9	
County	Albany	3,058.6	1,906.6	1,611.3	2,706.7	1,639.3	1,478.2
	Columbia	3,944.1	2,738.4	2,332.2	3,141.9	2,286.5	2,411.7
	Greene	1,820.6	1,220.1	1,060.8	1,086.3	601.9	1,138.4
	Rensselaer	3,017.7	1,977.3	1,567.0	2,900.6	1,695.5	1,607.6
	Saratoga	2,328.7	1,391.9	1,041.2	1,119.7	355.1	1,243.2
	Schenectady	2,979.6	2,000.8	1,651.1	2,361.6	1,617.1	1,612.0

### Intentional Self-Harm ED Visit Rate per 100,000

	All	Gender		Race/Ethnicity			
		Female	Male	Black NH	Hispanic	White NH	
NYS (excl. NYC)	337.1	358.3	314.9	526.8	223.9	321.1	
Capital Region	550.9	546.8	555.1	1,194.2	425.9	470.9	
County	Albany	709.3	687.8	731.8	1,363.7	527.0	600.2
	Columbia	317.5	363.8	269.1	589.1	154.0	302.8
	Greene	217.6	227.8	206.8	312.4	122.8	196.5
	Rensselaer	872.4	863.3	882.1	1,607.2	786.4	759.5
	Saratoga	249.0	276.6	220.0	736.3	115.7	238.8
	Schenectady	549.0	506.1	593.9	939.4	369.6	506.1

### Motor Vehicle Accident ED Visit Rate per 100,000

	All	Gender		Race/Ethnicity			
		Female	Male	Black NH	Hispanic	White NH	
NYS (excl. NYC)	655.6	664.1	646.7	1,507.3	812.4	444.7	
Capital Region	449.7	452.9	446.3	1,268.4	419.7	316.6	
County	Albany	475.9	457.4	495.2	1,352.5	472.3	261.0
	Columbia	579.9	566.9	593.6	1,276.1	549.3	505.3
	Greene	354.8	384.4	323.8	661.5	229.3	354.4
	Rensselaer	473.1	491.9	453.4	1,463.5	472.2	336.2
	Saratoga	307.3	318.6	295.5	642.0	183.4	299.6
	Schenectady	584.8	596.6	572.5	1,270.1	486.5	373.7

**Source:** NYS SPARCS, 2021-2023. Age-Adjusted Rate per 100,000. Blank cells are suppressed due to small numbers. **Note:** A light red cell indicates the rate is at least 50% higher than the NYS (excl. NYC) rate; a dark red cell indicates the rate is at least 100% higher.



### Opioid Overdose ED Visit Rate per 100,000

	All	Gender		Race/Ethnicity		
		Female	Male	Black NH	Hispanic	White NH
NYS (excl. NYC)	65.9	44.8	88.0	95.3	41.2	67.7
Capital Region	66.1	44.8	88.5	127.2	82.4	61.1
Albany	72.5	41.9	104.4	128.5	108.9	61.2
Columbia	87.1	69.1	106.0	162.4		82.5
Greene	37.9	24.6	51.9			33.8
Rensselaer	63.9	43.6	85.1	98.5	80.1	61.6
Saratoga	50.1	37.1	63.7	109.8		52.8
Schenectady	85.5	61.7	110.5	159.7	119.6	79.9

### Substance Use Disorders ED Visit Rate per 100,000

	All	Gender		Race/Ethnicity		
		Female	Male	Black NH	Hispanic	White NH
NYS (excl. NYC)	1,534.3	1,077.9	2,012.0	3,097.8	1,226.1	1,342.3
Capital Region	1,576.6	1,109.9	2,065.1	3,386.0	1,400.1	1,378.3
Albany	1,719.5	1,096.8	2,371.4	3,946.2	1,587.3	1,328.9
Columbia	3,644.2	2,996.4	4,322.2	6,963.1	3,450.4	3,368.3
Greene	836.2	758.0	918.1	1,119.2	396.8	844.0
Rensselaer	1,572.4	1,168.3	1,995.4	3,140.2	1,735.8	1,368.5
Saratoga	1,086.6	865.4	1,318.2	1,658.3	367.5	1,111.6
Schenectady	1,657.9	981.9	2,365.5	2,894.3	1,443.7	1,457.4

### All Behavioral Health ED Visit Rate per 100,000

	All	Gender		Race/Ethnicity		
		Female	Male	Black NH	Hispanic	White NH
NYS (excl. NYC)	1,683.6	1,431.3	1,947.8	2,925.1	1,329.1	1,507.2
Capital Region	1,875.7	1,575.3	2,190.2	3,717.2	1,539.4	1,661.7
Albany	1,929.2	1,534.0	2,342.8	4,004.7	1,700.5	1,535.8
Columbia	2,674.8	2,328.2	3,037.5	3,682.9	1,893.7	2,618.1
Greene	849.5	803.7	897.5	919.5	514.8	816.0
Rensselaer	2,020.1	1,795.5	2,255.2	3,632.1	2,142.4	1,750.3
Saratoga	1,565.8	1,449.0	1,688.1	3,095.0	567.1	1,582.6
Schenectady	2,238.8	1,683.0	2,820.5	3,972.5	1,814.9	1,969.1

Source: NYS SPARCS, 2021-2023. Age-Adjusted Rate per 100,000. Blank cells are suppressed due to small numbers. Note: A light red cell indicates the rate is at least 50% higher than the NYS (excl. NYC) rate; a dark red cell indicates the rate is at least 100% higher.

## G.Hospitalization Rates, by Condition

		Asthma	Cerebrovascular Disease (Stroke)	COPD	Diabetes	Heart Disease	Assault	Intentional Self-Harm	Motor Vehicle Accident	Opioid Overdose	Substance Use Disorders	All Behavioral Health	
NYS (excl. NYC)		48.2	153.9	87.6	204.8	725.1	26.3	275.3	52.0	63.7	1,081.8	831.8	
Capital Region		42.5	140.2	77.6	184.9	679.1	32.5	336.0	52.6	60.9	1,129.1	876.2	
County	Albany	57.4	152.1	72.9	197.0	708.5	43.9	337.6	57.3	65.5	1,319.2	977.2	
	Columbia	35.2	120.8	129.9	217.4	673.3	26.6	425.2	61.2	69.3	1,287.7	1,061.9	
	Greene	45.6	135.5	98.7	191.5	662.2	40.4	290.0	70.4	62.6	1,093.9	794.9	
	Rensselaer	37.5	139.7	71.1	198.0	751.6	30.4	403.2	51.8	61.5	1,194.1	949.6	
	Saratoga	26.6	122.1	77.8	142.6	621.1	15.9	275.9	44.3	52.5	829.1	710.1	
	Schenectady	46.3	161.4	63.5	203.0	671.3	36.7	368.9	49.5	59.9	1,166.4	877.0	
	Bethlehem	24.6	126.8	34.6	117.5	634.8		178.5	25.9	48.1	617.9	474.2	
	Center Square/Arbor Hill	103.1	234.8	115.2	347.4	818.5	121.2	661.4	91.7	120.5	2,571.6	1,910.4	
	City of Cohoes/North Colonie	36.1	155.1	92.3	173.8	800.8	30.3	434.9	66.6	64.1	1,517.6	1,164.4	
Colonie	38.8	144.8	57.7	186.6	708.9	32.4	338.7	55.5	74.0	1,238.6	958.8		
Delaware/2nd Avenue	115.2	164.8	80.9	243.7	722.4	69.7	280.0	75.3	63.8	1,207.4	805.7		
Guilfordland	16.5	130.8	45.2	212.4	521.1	13.8	254.7	36.2	48.5	822.4	701.1		
Hill Towns		160.9	58.5	103.7	664.6		295.4	107.0	50.8	879.8	653.8		
Latham	30.0	133.1	36.0	139.2	619.7	11.4	217.2	48.5	48.4	622.8	529.8		
Loudonville		114.9	28.0	162.9	635.2	21.7	172.1	26.5	48.9	924.2	575.6		
N. Albany/Menands	106.4	132.9	90.4	231.8	757.4	51.3	276.6	71.5	76.9	1,421.3	890.3		
New Scotland	37.0	109.3	35.2	105.5	641.8		191.6	46.8	37.9	580.8	488.0		
New Scotland Avenue	79.3	199.1	106.2	240.0	706.9	103.9	713.8	87.6	83.5	2,070.0	1,845.3		
Pine Bush	37.5	136.9	58.3	209.6	672.4	35.0	224.0	46.9	55.0	937.5	629.2		
Ravena/Coeymans/Selkirk	54.8	132.6	100.5	204.2	730.9	16.7	240.6	47.0	74.2	929.4	685.3		
South End	179.4	263.3	216.2	538.3	1,110.6	161.5	889.6	129.7	168.4	4,279.4	2,826.4		
South End/Downtown Albany	136.0	263.7	217.8	429.3	952.1	212.3	741.0	93.4	158.8	4,355.2	2,603.5		
State Campus	57.3	141.8	58.3	192.8	649.1	34.5	225.0	47.7	47.6	1,057.4	736.5		
Watervliet/Green Island	51.2	166.6	84.9	188.2	811.7	20.2	335.5	51.1	54.0	1,265.7	900.2		
West End	136.5	275.0	204.0	394.1	1,041.1	139.6	637.1	97.8	130.8	2,977.6	1,963.0		
ZIP Code Group	Columbia	Canaan	64.6		149.6	439.3		233.8			629.7	594.4	
		Chatham		105.9	72.8	138.4	641.9	38.0	271.9	56.2	52.3	890.8	681.9
		Germantown		123.3	89.3	158.0	656.8		247.1	52.9	63.4	859.3	696.0
	Hudson	59.9	141.2	219.3	333.0	789.3	33.3	531.2	77.3	90.5	1,698.7	1,350.2	
	Ichabod	31.5	115.6	71.9	152.5	615.4	21.7	337.8	50.2	42.1	911.0	774.9	
	Pine Plains		122.2	152.8	148.9	803.2		247.4			1,038.6	728.6	
	Taconic Hills		61.9	47.0	60.9	352.2		184.3	51.9	34.2	673.2	611.5	
	Cairo/Durham	40.4	171.2	164.9	284.4	763.7	32.6	482.2	134.2	78.6	1,709.8	1,251.8	
	Catskill	45.2	150.4	154.2	275.0	758.9	34.2	546.5	71.2	93.9	1,645.1	1,335.0	
	Coxsackie/Athens	53.9	162.4	92.5	217.8	822.8	76.7	311.7	34.8	75.2	980.5	705.8	
	Greenville	32.9	152.2	99.5	137.8	600.4		218.5	60.4	79.1	1,032.5	684.8	
	Hunter/Tannersville	73.8	146.7	87.0	160.0	645.7		353.9	82.4	67.2	1,458.4	1,086.5	
	Windham/Ashland/Jewett		110.9	65.1	73.7	523.0		297.0	103.6	36.4	1,012.5	857.4	
	Central		117.8	41.0	139.9	672.6		213.6	56.6	53.5	655.5	488.0	
	Rensselaer	East		93.1	31.9	68.2	459.8		219.0	65.9	40.5	610.8	475.4
		East Greenbush	40.3	159.3	43.5	157.4	671.3		231.4	36.1	58.5	760.5	528.5
		North East	23.8	104.0	53.2	138.8	604.7	18.9	291.2	51.8	48.1	795.9	650.1
		North West	28.5	157.4	90.0	186.8	806.9	29.8	275.6	65.0	70.2	925.2	721.7
		Rensselaer	42.5	167.6	90.9	207.9	813.2	28.8	313.0	46.3	56.4	1,123.6	797.4
South West		31.4	126.4	63.1	174.8	691.1	16.9	330.8	60.6	61.1	966.2	714.9	
Troy/Lansingburgh	49.2	151.0	88.9	247.1	848.4	46.5	579.2	55.4	74.5	1,678.0	1,375.6		
West Sand Lake/Wynantskill		132.7	76.0	130.7	758.8		210.9	39.1	32.5	682.1	603.6		
Saratoga	Ballston Spa	25.1	116.1	101.6	145.4	660.7	18.3	295.0	45.5	62.8	873.6	791.1	
	Burnt Hills/Galway	26.0	123.9	52.3	128.5	580.4		223.9	33.4	42.8	561.9	520.0	
	Clifton Park West	22.6	119.7	37.4	116.4	568.1	10.8	226.6	36.3	33.9	584.5	560.8	
	North East	23.8	104.0	53.2	138.8	604.7	18.9	291.2	51.8	48.1	795.9	650.1	
	North West	28.5	157.4	90.0	186.8	806.9	29.8	275.6	65.0	70.2	925.2	721.7	
	Saratoga Springs	21.0	127.8	82.8	126.8	584.1	16.6	310.2	34.8	53.7	1,025.5	908.0	
	South Glens Falls	51.8	133.3	141.5	223.9	709.4		454.0	58.9	70.3	1,404.7	1,096.4	
	Waterford/Mechanicville	39.3	118.7	78.5	154.3	689.7	19.5	271.3	43.8	46.3	921.0	679.2	
Schenectady	City/Stockade	53.0	198.6	230.4	337.1	904.4	89.5	976.1	54.6	106.1	2,871.2	2,353.9	
	Goose Hill/Union	91.9	235.8	121.5	305.1	820.7	45.2	682.3	70.9	90.6	1,946.2	1,510.4	
	Hamilton Hill	105.2	320.1	132.5	497.0	1,172.5	183.7	827.9	89.7	124.2	3,063.1	2,015.6	
	Mont Pleasant	37.5	136.9	58.3	209.6	672.4	35.0	224.0	46.9	55.0	937.5	629.2	
	Niskayuna	25.6	120.4	33.8	148.1	510.9	12.6	215.0	31.6	35.9	543.2	501.8	
	Rotterdam	45.9	157.4	67.1	184.7	660.7	25.9	296.0	47.7	45.1	989.4	770.2	
	Rural West		112.7	33.8	113.6	582.3		234.9	53.3	39.6	791.2	643.6	
	Scotia-Glenville	22.1	137.1	32.8	89.7	551.7	10.3	200.4	33.9	53.4	743.6	516.8	
Upper State Street	59.7	171.8	50.5	202.4	728.9	40.2	405.5	45.8	63.8	1,336.2	967.1		

Source: NYS SPARCS, 2019-2023. Age-Adjusted Rate per 100,000. Blank cells are suppressed due to small numbers.

Note: Light red cells indicate the rate is at least 50% higher than the NYS (excl. NYC) rate; dark red indicates the rate is at least 100% higher.



## H. Emergency Department Visit Rates, by Condition

	Asthma	Cerebrovascular Disease (Stroke)	COPD	Diabetes	Heart Disease	Assault	Motor Vehicle Accident	Opioid Overdose	Substance Use Disorders	All Behavioral Health
NYS (excl. NYC)	278.2	62.0	111.8	165.1	286.0	324.2	650.0	67.2	1,473.8	1,687.9
Capital Region	271.2	60.3	112.9	166.4	242.5	363.4	438.8	65.7	1,524.0	1,858.4
County										
Albany										
Albany	381.1	55.5	112.1	181.7	226.1	450.0	460.5	68.9	1,725.0	1,929.8
Columbia	281.5	69.3	194.0	210.5	356.5	332.2	554.4	91.9	2,710.7	2,330.1
Greene	157.0	45.1	98.9	123.6	199.6	355.5	390.9	58.2	1,011.4	1,219.5
Rensselaer	260.2	63.0	128.0	187.6	237.4	383.7	449.1	60.7	1,530.8	1,894.9
Saratoga	108.1	68.1	76.2	108.5	246.7	146.9	303.6	49.3	1,038.0	1,547.7
Schenectady	342.5	56.7	127.0	208.5	240.5	509.4	578.4	86.3	1,701.4	2,308.2
Bethlehem	87.5	50.6	30.8	77.7	154.7	115.7	232.0	20.6	637.6	845.7
Center Square/Arbor Hill	1,192.6	65.3	294.9	377.9	344.2	1,156.6	819.1	111.5	3,673.6	3,559.7
City of Cohoes/North Colonie	281.2	65.8	168.8	187.2	242.2	466.8	467.1	74.5	1,764.8	2,141.6
Colonie	270.1	53.7	76.7	153.8	235.2	344.7	447.8	66.2	1,465.2	1,645.3
Delaware/2nd Avenue	784.7	48.5	128.9	319.7	261.3	655.1	721.9	71.1	1,711.6	1,759.6
Guilderland	126.6	54.2	48.6	81.6	169.5	104.2	269.5	27.6	649.6	937.6
Hill Towns	140.2	51.7	51.7	31.0	170.5	179.7	323.6	33.7	794.3	995.6
Latham	143.4	50.4	57.8	82.4	224.3	136.7	303.3	48.2	820.6	1,058.7
Loudonville	113.0	41.7	24.4	89.2	182.4	293.0	240.6	29.3	975.7	1,025.2
N. Albany/Menands	649.5	47.6	163.1	254.3	342.6	557.3	721.7	37.2	1,714.7	1,876.6
New Scotland	90.0	44.6	27.2	44.7	145.2	103.6	225.3	28.5	565.3	751.1
New Scotland Avenue	525.9	57.5	143.4	219.4	238.2	769.1	613.2	117.2	3,439.6	4,273.4
Pine Bush	306.4	43.9	96.6	183.7	211.3	450.5	565.1	79.2	1,226.8	1,594.7
Ravena/Coeymans/Selkirk	140.2	48.2	72.7	86.8	172.0	159.9	322.2	47.4	885.7	1,144.2
South End	1,273.4	79.8	344.0	716.6	365.6	1,507.8	1,150.4	302.6	6,184.8	5,771.1
South End/Downtown Albany	1,224.2	59.0	357.9	518.0	365.7	1,423.0	873.6	91.7	11,038.8	9,517.4
State Campus	272.4	50.7	64.7	131.0	206.4	304.4	399.5	46.7	1,168.2	1,377.3
Watervliet/Green Island	299.3	77.3	195.7	223.6	275.5	372.5	459.8	76.7	1,401.4	1,794.9
West End	1,241.6	76.8	407.4	550.8	413.3	1,592.1	1,130.0	187.9	4,388.3	4,457.1
ZIP Code Group										
Columbia										
Canaan	220.7			81.5	138.2	208.2	425.0		1,004.4	1,638.2
Chatham	98.7	63.0	72.4	94.9	247.5	122.6	341.8	63.0	1,380.2	1,234.9
Germantown	219.3	84.5	160.9	152.9	360.8	208.4	549.7	45.5	1,259.8	1,404.2
Hudson	494.2	81.5	328.4	359.3	501.7	576.5	699.3	130.6	3,596.6	3,047.1
Ichabod	126.6	35.8	80.1	88.2	196.5	128.8	330.5	48.1	1,636.5	1,780.9
Pine Plains		67.1	122.9	104.7	401.3	136.5	540.5		1,258.4	1,377.6
Taconic Hills	135.9	39.0	94.7	76.5	151.1	153.7	299.2	47.9	1,174.9	1,084.1
Cairo/Durham	276.1	66.5	190.3	289.4	322.7	292.1	622.6	98.4	2,673.5	2,114.5
Greene										
Catskill	231.1	73.4	170.6	232.1	306.1	324.7	548.1	109.9	2,686.4	2,534.1
Coxsackie/Athens	108.1	44.6	130.0	135.6	239.4	612.9	379.9	54.4	1,099.2	1,279.1
Greenville	198.0	56.3	86.1	118.1	164.3	137.7	418.1	56.4	1,158.8	1,205.3
Hunter/Tannersville	204.9	64.0	107.8	83.5	247.3	163.0	323.6	54.7	1,016.4	1,832.4
Windham/Ashland/Jewett	67.8	21.7	122.2	50.0	201.1	136.9	489.2		1,320.8	1,144.3
Rensselaer										
Central	97.0	56.0	86.9	72.0	170.9	147.6	296.3	46.2	825.9	1,005.2
East	83.6	31.4	61.4	33.8	92.7	145.0	287.5	37.7	573.8	733.5
East Greenbush	152.4	40.4	64.7	93.3	183.4	150.8	329.1	38.5	821.5	1,088.1
North East	77.6	59.4	58.3	100.9	224.5	119.8	280.3	45.7	732.6	1,208.5
North West	102.8	69.3	109.9	105.8	309.1	151.4	408.3	46.3	1,029.2	1,368.0
Rensselaer	236.7	61.7	100.9	167.1	237.0	311.2	414.0	64.7	1,219.0	1,420.2
South West	112.0	52.4	59.8	83.4	172.6	189.1	325.2	58.2	987.3	1,177.5
Troy/Lansingburgh	417.1	80.7	218.3	311.8	305.4	619.7	609.5	81.1	2,281.2	2,803.3
West Sand Lake/Wynantskill	133.1	63.6	66.6	65.5	243.2	252.2	335.2	51.8	950.1	1,270.9
Saratoga										
Ballston Spa	95.2	75.2	89.6	139.6	274.8	176.5	295.7	47.9	1,216.1	1,799.5
Burnt Hills/Galway	51.1	62.3	44.1	57.5	226.7	86.9	234.0	32.0	607.1	1,199.1
Clifton Park West	83.1	44.1	36.1	54.6	142.5	100.3	231.9	35.8	683.9	1,117.0
North East	77.6	59.4	58.3	100.9	224.5	119.8	280.3	45.7	732.6	1,208.5
North West	102.8	69.3	109.9	105.8	309.1	151.4	408.3	46.3	1,029.2	1,368.0
Saratoga Springs	135.3	85.9	80.9	143.8	312.0	182.9	259.9	60.6	1,548.2	2,071.7
South Glens Falls	232.0	114.4	131.8	231.5	370.9	216.7	573.5	73.4	1,219.0	2,175.0
Waterford/Mechanicville	111.3	49.4	78.0	113.5	198.2	152.5	319.4	67.5	1,057.1	1,450.5
Schenectady										
City/Stockade	553.1	79.2	429.6	382.3	372.9	1,150.0	730.0	210.4	4,214.7	5,783.0
Goose Hill/Union	715.4	76.3	245.4	368.9	341.1	921.2	895.4	181.5	3,596.8	4,511.2
Hamilton Hill	955.9	73.3	330.5	859.8	360.8	1,645.4	1,225.5	223.4	5,275.1	5,804.3
Mont Pleasant	306.4	43.9	96.6	183.7	211.3	450.5	565.1	79.2	1,226.8	1,594.7
Niskayauna	124.1	53.1	54.6	77.8	180.3	168.8	325.2	33.2	751.6	1,282.4
Rotterdam	292.6	60.7	112.6	170.9	233.1	386.7	526.6	69.7	1,212.5	1,713.6
Rural West	130.9	42.3	73.8	83.9	257.3	111.8	385.3	40.2	665.5	1,037.1
Scotia-Glenville	110.2	54.2	74.4	88.6	198.8	148.1	323.2	51.7	855.1	1,236.6
Upper State Street	361.8	48.4	125.6	232.7	227.9	637.7	694.6	74.6	1,834.4	2,397.1

Source: NYS SPARCS, 2019-2023. Average ZIP Code-level Age-Adjusted Rate per 100,000. Blank cells are suppressed due to small numbers.

Note: Light red cells indicate the rate is at least 50% higher than the NYS (excl. NYC) rate; dark red indicates the rate is at least 100% higher.



## I. Prevention Quality Indicator Rates, by Condition

		PQI Composite Condition					
		Acute	Circulatory	Diabetes	Overall	Respiratory	
County	NYS (excl. NYC)	196.3	314.7	183.6	827.0	132.5	
	Capital Region	149.8	282.4	150.7	698.6	115.8	
	Albany	142.3	313.9	157.2	726.6	113.2	
	Columbia	195.2	289.9	193.3	855.6	177.2	
	Greene	167.2	251.8	162.0	722.6	141.7	
	Rensselaer	148.5	299.2	161.3	707.4	98.4	
	Saratoga	148.0	228.9	113.7	601.5	111.0	
	Schenectady	145.5	305.5	170.4	731.4	110.2	
	Bethlehem	152.6	277.8	76.2	507.8	50.8	
	Center Square/Arbor Hill	132.7	360.8	329.6	1,006.2	183.0	
Albany	City of Cohoes/North Colonie	182.1	329.9	130.2	757.6	115.5	
	Colonia	151.0	310.4	140.0	696.7	95.2	
	Delaware/2nd Avenue	130.0	371.6	169.9	836.1	164.6	
	Guilderland	115.0	196.4	151.1	524.3	61.8	
	Hill Towns	173.7	233.7		535.0	121.9	
	Latham	104.4	252.0	79.3	486.1	50.3	
	Loudonville	110.7	238.5	76.3	450.7	25.2	
	N. Albany/Menands	133.3	350.3	190.7	839.6	165.3	
	New Scotland	107.3	205.9	56.7	457.1	69.2	
	New Scotland Avenue	157.4	340.0	221.5	872.5	154.4	
	Ravena/Coeymans/Selkirk	124.1	407.2	167.1	912.8	178.6	
	South End	279.6	728.7	567.7	1,938.4	362.4	
	South End/Downtown Albany	218.1	625.2	457.0	1,594.8	294.4	
	State Campus	157.6	302.1	137.3	698.8	101.9	
	Water/vliet/Green Island	143.1	348.3	178.6	774.7	104.7	
	West End	198.4	600.4	352.3	1,473.3	322.3	
	Columbia	Canaan		141.2		278.7	
		Chatham	131.5	318.6	115.7	605.0	112.3
		Germantown	201.2	217.0	109.1	643.0	115.8
		Hudson	232.7	403.4	405.8	1,321.2	324.2
Ichabod		152.1	295.4	250.4	685.0	115.4	
Pine Plains		425.1	309.0	183.7	873.1	289.3	
Taconic Hills		74.7	108.3	129.6	311.1	95.1	
Cairo/Durham		295.1	336.3	390.7	1,040.8	268.8	
Catskill		197.4	293.6	174.5	805.3	187.8	
Coxsackie/Athens		179.1	396.2	165.5	871.9	140.5	
Greene	Greenville	170.2	200.2	107.1	642.7	133.0	
	Hunter/Tannersville	255.7	398.5	1,008.7	1,248.7	827.5	
	Windham/Ashland/Jewett	154.3	250.8	84.3	490.3	325.8	
	Rensselaer	161.8	328.1	162.7	768.2	115.6	
	Central	131.2	222.4	107.5	499.2	57.4	
	Rensselaer	East		144.8		300.6	
		East Greenbush	155.4	289.8	95.6	615.2	74.5
		North East	163.4	256.2	136.0	586.0	147.9
		North West	178.3	349.5	280.5	736.0	92.5
		South West	199.1	247.5	145.3	619.4	138.1
Troy/Lansingburgh		173.1	382.4	234.6	920.2	130.1	
West Sand Lake/Wynantskill		147.1	249.2	91.5	573.3	85.5	
Ballston Spa		166.0	231.1	137.9	677.8	143.2	
Burnt Hills/Galway		117.9	215.5	113.4	558.5	82.6	
Clifton Park West		127.4	261.7	62.0	502.4	51.3	
Saratoga	North East	173.3	293.7	122.6	720.1	130.5	
	North West	173.2	327.2	165.5	825.8	198.9	
	Saratoga Springs	171.2	209.1	101.3	602.1	120.4	
	South Glens Falls	246.7	296.3	192.4	949.9	214.6	
	Waterford/Mechanicville	135.8	239.8	122.3	607.8	109.9	
	City/Stockade	208.2	490.2	380.0	1,425.6	347.3	
Schenectady	Goose Hill/Union	170.1	355.3	247.2	1,015.0	242.5	
	Hamilton Hill	269.4	763.1	458.5	1,736.9	245.9	
	Mont Pleasant	123.8	326.4	178.4	716.0	88.2	
	Niskayauna	113.0	197.5	99.1	471.0	61.4	
	Rotterdam	136.9	295.3	157.7	693.6	103.8	
	Rural West	144.5	255.5	120.8	560.0		
	Scotia-Glenville	125.5	193.6	71.4	444.5	54.0	
	Upper State Street	179.3	376.7	157.2	818.5	105.3	

Source: NYS SPARCS, 2019-2023. Average ZIP Code-level Age-Adjusted Rate per 100,000. Blank cells are suppressed due to small numbers.

Note: Light red cells indicate the rate is at least 50% higher than the NYS (excl. NYC) rate; dark red indicates the rate is at least 100% higher.



## J. Mortality Rates, by Cause

		Cancer	Chronic Liver	COPD	Diabetes	Flu & Pneumonia	Heart	Stroke	Substance Use Disorders	Suicide	Unintentional Injury	
County	Capital Region	144.4	9.1	34.1	20.9	16.1	163.3	26.4	3.2	10.0	18.7	
	Albany	142.0	9.9	27.8	20.7	16.0	165.6	24.8	3.5	9.2	16.8	
	Columbia	138.6	7.8	31.7	24.1	12.5	158.3	23.0	2.8	12.4	20.5	
	Greene	165.0	9.0	32.0	19.3	14.4	189.4	22.7	4.2	11.6	26.9	
	Rensselaer	152.6	7.2	44.6	20.5	14.3	171.0	26.2	3.0	11.0	20.9	
	Saratoga	140.1	8.6	36.3	16.9	14.2	142.8	28.5	1.9	9.9	18.4	
	Schenectady	143.9	10.7	34.8	27.5	23.8	178.3	30.3	4.5	9.4	18.2	
	Bethlehem	131.9	7.4	26.9	16.1	20.8	131.2	16.6		7.8	11.4	
	Center Square/Arbor Hill	137.1			47.3		201.5	30.7				
	City of Cohoes/North Colonia	169.2	12.5	38.3	21.2	19.8	177.8	34.6	8.2	17.9	14.1	
	Colonie	160.9	5.7	26.6	19.0	13.1	165.0	24.9		10.9	15.0	
	Delaware/2nd Avenue	144.7		25.5		18.7	190.3	29.9			25.1	
	Guilfordland	107.7		19.1	8.5	14.9	110.0	15.0			15.1	
	Hill Towns	167.2		24.7		23.0	127.1	28.0		24.0	31.7	
	Latham	120.3		23.8	17.7	19.0	135.3	28.0			15.0	
	Loudonville	124.2		21.4	10.2	13.3	165.5	27.2			17.2	
	N. Albany/Menands	138.5		38.7	39.7	23.2	254.5	24.7			40.0	
New Scotland	134.0		12.5	9.8	15.7	124.7	20.8			10.8		
New Scotland Avenue	139.4	14.3	26.4	25.9	15.8	185.8	22.7		11.6	11.8		
Pine Bush	152.0	9.7	25.4	27.1	17.1	185.4	20.7		11.4	16.6		
Ravena/Coeymans/Selkirk	168.1		33.9	23.0	11.8	174.9	18.0			17.7		
South End	175.2		43.8	34.9		255.7	30.8			32.4		
South End/Downtown Albany	157.6		62.5			248.7						
State Campus	115.6	11.1	27.3	19.5	15.9	167.6	26.3		8.5	14.5		
Watervliet/Green Island	172.8	11.6	39.0	30.7	12.1	201.7	29.2			13.8		
West End	165.7	20.9	38.4	30.5	14.1	198.0	34.1			22.5		
ZIP Code Group	Columbia	Canaan	110.9				84.3					
		Chatham	136.6		32.0	26.4	9.2	143.5	23.2		17.5	15.3
		Germantown	126.1					113.7	24.0			
	Greene	Hudson	167.9	10.6	42.5	30.4	16.1	199.8	29.9		12.1	22.5
		Ichabod	146.9		27.9	35.6	16.0	164.8	28.4		16.7	12.2
		Pine Plains	181.4		62.9			195.7				
		Taconic Hills	83.2		21.4			110.5				30.1
		Cairo/Durham	183.9		29.6	19.7		180.2	27.6			36.8
		Catskill	150.5	11.6	39.7	29.0	17.3	225.1	20.3			22.5
		Coxsackie/Athens	176.6		21.7	17.2	12.8	175.2	22.2			26.8
Rensselaer	Greenville	149.6		24.5			127.5	23.7				
	Hunter/Tannersville	181.1		37.1			194.6	22.1				
	Windham/Ashland/Jewett	150.3		33.3			163.0	25.8				
	Central	162.5		45.8	18.7	16.1	142.7	18.8		17.5	22.1	
	East	145.1		19.1	18.6		119.1	27.8			17.6	
	East Greenbush	135.1		36.1	15.3	18.6	159.2	30.5			14.0	
	North East	142.7	6.4	34.2	21.1	11.2	131.3	23.9		12.8	17.9	
	North West	152.3	8.2	52.6	17.2	21.9	169.0	39.0		17.3	32.1	
	Rensselaer	150.0	8.4	43.7	30.1		181.2	18.5		13.4	18.9	
	South West	169.8		33.6	18.3	9.0	173.5	24.6		11.7	24.2	
Saratoga	Troy/Lansingburgh	161.9	8.3	49.0	21.3	17.0	183.3	28.2	3.9	8.1	19.2	
	West Sand Lake/Wynantskill	130.6		52.0		16.3	136.3	25.9			21.1	
	Ballston Spa	126.0	13.2	44.9	19.8	13.7	158.3	21.2		8.6	17.9	
	Burnt Hills/Galway	124.1	6.3	26.6	10.2	14.3	122.8	21.4			14.8	
	Clifton Park West	130.2	5.7	26.7	13.5	11.1	129.5	25.4		8.3	12.1	
	North East	142.7	6.4	34.2	21.1	11.2	131.3	23.9		12.8	17.9	
	North West	152.3	8.2	52.6	17.2	21.9	169.0	39.0		17.3	32.1	
	Saratoga Springs	139.3	8.5	32.5	12.1	11.4	139.1	39.4		7.4	21.2	
	South Glens Falls	152.2		51.6	31.5	24.5	178.8	44.9		22.4	18.4	
	Waterford/Mechanicville	161.5	8.2	43.5	20.9	15.8	165.3	23.3		12.2	20.9	
Schenectady	City/Stockade	188.2		80.2	63.1		241.0				32.4	
	Goose Hill/Union	169.1	18.1	36.7	30.6	29.8	200.2	37.8			14.0	
	Hamilton Hill	159.6		60.8	62.4	34.5	285.7	50.4			27.3	
	Mont Pleasant	152.0	9.7	25.4	27.1	17.1	185.4	20.7		11.4	16.6	
	Niskayauna	121.3	5.5	13.3	17.4	22.4	121.4	23.0		6.7	11.1	
	Rotterdam	148.8	11.0	33.4	19.8	23.5	188.7	29.2		14.2	17.9	
	Rural West	148.5		38.5	25.3	22.3	154.5				24.2	
	Scotia-Glenville	129.3	5.0	44.2	18.0	16.6	154.7	32.2		8.1	14.1	
	Upper State Street	149.6	19.6	41.0	38.6	29.2	182.0	39.4			20.4	

Source: New York State Vital Statistics, 2018-2022. Age-Adjusted Rate per 100,000. Blank cells are suppressed due to small numbers.

Note: Light red cells indicate the rate is at least 50% higher than the Capital Region rate; dark red indicates the rate is at least 100% higher.

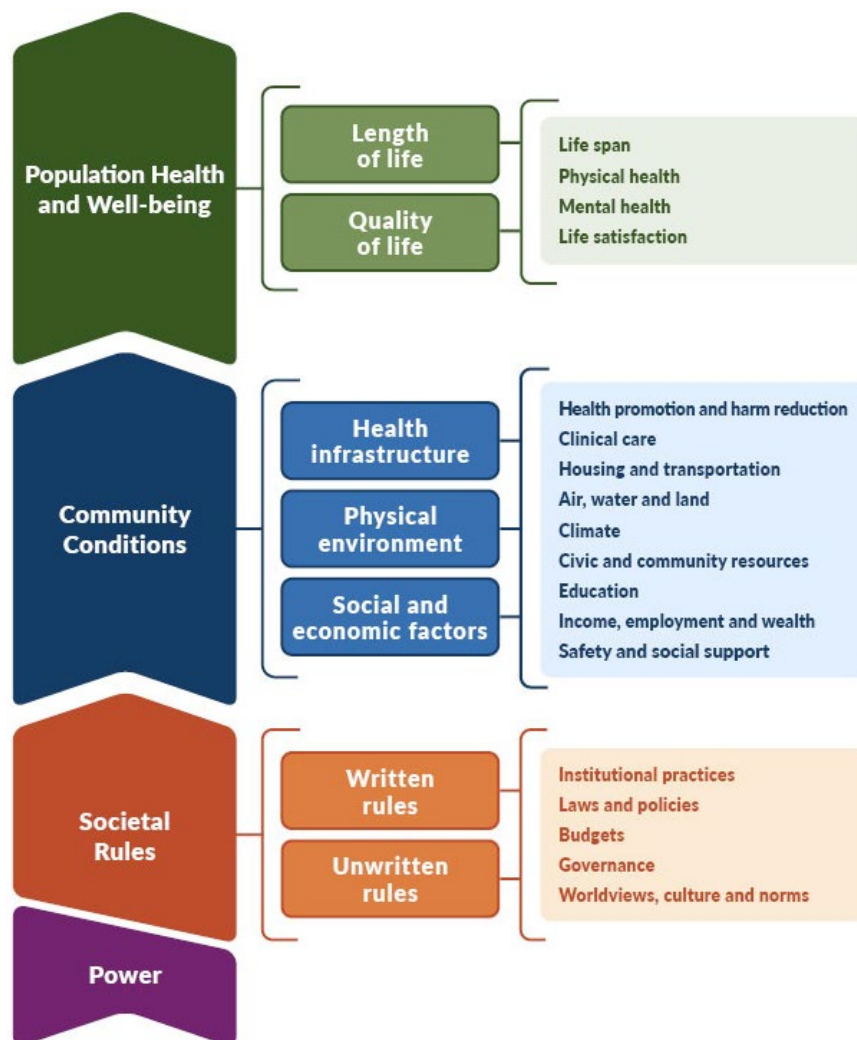


## K. County Health Rankings, 2025

The following section contains charts with county-level measures of health factors that research has found to contribute to health outcomes. County health measures are weighted and ranked based on the County Health Rankings Model (see photo below), developed by the University of Wisconsin Population Health Institute. County rankings are based on data sourced from a multitude of federal organizations. The measures presented here are from the 2025 County Health Rankings, the latest and final release from the University of Wisconsin and the Robert Wood Johnson Foundation.

In the “heat map” table below, the six Capital Region counties are collectively compared to New York State (NYS) and U.S. counties. The cell color provides context about a county’s rank on each measure, relative to other NYS counties. The table that follows provides additional details about the measures, along with the data sources and years. The tables further below provide additional data details for each county.

### County Health Rankings Model

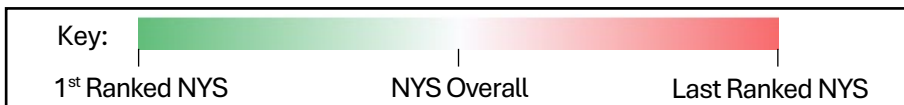


University of Wisconsin Population Health Institute © 2025. <https://www.countyhealthrankings.org/findings-and-insights/2025-report>.



## County Health Rankings, 2025: Capital Region Heat Map

Measure	Albany County	Columbia County	Greene County	Rensselaer County	Saratoga County	Schenectady County	New York State	Min. NY County	Max. NY County	Top Performers	US Overall
<b>POPULATION HEALTH AND WELL-BEING</b>											
LENGTH OF LIFE											
Premature Death	7,276	7,810	8,286	7,122	5,526	8,452	6,637	4,624	10,681	6,200	8,400
QUALITY OF LIFE											
Poor Physical Health Days	3.7	3.8	4.1	4.0	3.4	3.7	3.9	3.3	5.1	3.6	3.9
Low Birth Weight	8.5%	7.2%	7.1%	8.5%	6.5%	9.2%	8.3%	3.9%	10.3%	6.0%	8.0%
Poor Mental Health Days	5.2	5.6	5.6	5.4	5.0	5.3	4.9	4.5	6.1	4.9	5.1
Poor or Fair Health	12.4%	14.2%	15.0%	13.5%	10.3%	13.3%	16.1%	10.3%	28.2%	14.0%	17.0%
<b>COMMUNITY CONDITIONS</b>											
HEALTH INFRASTRUCTURE											
Flu Vaccinations	58%	54%	45%	54%	57%	54%	51%	38%	58%	54%	48%
Access to Exercise Opportunities	93.9%	61.5%	81.3%	78.4%	85.7%	88.6%	93.1%	35.0%	100.0%	91.0%	84.0%
Food Environment Index	8.4	8.4	8.8	8.5	9.1	8.7	8.7	6.4	9.9	8.8	7.4
Primary Care Physicians (pop. ratio)	1,039	2,471	3,464	2,081	1,439	1,255	1245	727	13,397	1,030	1,330
Mental Health Providers (pop. ratio)	222	403	960	478	417	351	265	90	1,694	220	300
Dentists (pop. ratio)	1,124	2,786	2,827	2,422	1,465	1,251	1205	534	5,972	1,180	1,360
Preventable Hospital Stays	2,369	2,082	2,367	2,247	2,389	2,217	2,595	1,600	4,187	1,596	2,666
Mammography Screening	49%	46%	39%	47%	52%	45%	44%	35%	56%	53%	44%
Uninsured	5%	6%	5%	4%	4%	5%	6%	4%	10%	6%	10%
PHYSICAL ENVIRONMENT											
Severe Housing Problems	14%	15%	14%	13%	11%	15%	23%	9%	39%	8%	17%
Driving Alone to Work	68%	68%	73%	73%	75%	72%	50%	6%	82%	69%	70%
Long Commute - Driving Alone	21%	37%	45%	31%	37%	31%	39%	15%	68%	17%	37%
Air Pollution: Particulate Matter	8.7	7.8	7.4	8.1	8.2	8.0	6.9	3.2	8.8	5.6	7.3
Drinking Water Violations	Yes	Yes	Yes	Yes	Yes	No					
Broadband Access	89%	88%	85%	90%	92%	88%	90%	78%	95%	92%	90%
Library Visits per Person per Year	3	4	2	2	3	3	3	1	13	5	2
SOCIAL AND ECONOMIC FACTORS											
Some College	78%	63%	57%	73%	78%	71%	71%	42%	86%	74%	68%
High School Completion	93%	92%	89%	93%	94%	92%	88%	75%	96%	95%	89%
Unemployment	3.3%	3.0%	3.8%	3.3%	2.9%	3.5%	4.2%	2.9%	6.8%	2.3%	3.6%
Income Inequality	4.6	4.9	5.1	4.6	4.2	4.4	5.8	3.9	7.3	3.7	4.9
Children in Poverty	15%	18%	19%	16%	8%	19%	19%	6%	36%	10%	16%
Injury Deaths	61	68	83	62	47	60	60	43	110	67	84
Social Associations	14.6	9.5	8.9	8.3	7.3	7.7	7.9	2.9	16.6	18.0	9.1
Child Care Cost Burden	37%	41%	35%	36%	32%	40%	38%	24%	65%	20%	28%



## County Health Rankings, 2025: Measure Descriptions, Sources, and Years

Measure	Description	Source	Year(s)
<b>POPULATION HEALTH AND WELL-BEING</b>			
<b>LENGTH OF LIFE</b>			
Premature Death*	Years of potential life lost before age 75 per 100,000 population (age-adjusted).	National Center for Health Statistics - Natality and Mortality Files; Census Population Estimates Program	2020-2022
<b>QUALITY OF LIFE</b>			
Poor Physical Health Days	Average number of physically unhealthy days reported in past 30 days (age-adjusted).	Behavioral Risk Factor Surveillance System	2022
Low Birth Weight*	Percentage of live births with low birth weight (< 2,500 grams).	National Center for Health Statistics - Natality Files	2017-2023
Poor Mental Health Days	Average number of mentally unhealthy days reported in past 30 days (age-adjusted).	Behavioral Risk Factor Surveillance System	2022
Poor or Fair Health	Percentage of adults reporting fair or poor health (age-adjusted).	Behavioral Risk Factor Surveillance System	2022
<b>COMMUNITY CONDITIONS</b>			
<b>HEALTH INFRASTRUCTURE</b>			
Flu Vaccinations*	Percentage of fee-for-service (FFS) Medicare enrollees who had an annual flu vaccination.	Mapping Medicare Disparities Tool	2022
Access to Exercise Opportunities	Percentage of population with adequate access to locations for physical activity.	ArcGIS Business Analyst and ArcGIS Online; YMCA; US Census TIGER/Line Shapefiles	2024, 2022 & 2020
Food Environment Index+	Index of factors that contribute to a healthy food environment, from 0 (worst) to 10 (best).	USDA Food Environment Atlas; Map the Meal Gap from Feeding America	2019 & 2022
Primary Care Physicians	Ratio of population to primary care physicians.	Area Health Resource File/American Medical Association	2021
Mental Health Providers	Ratio of population to mental health providers.	CMS, National Provider Identification	2024
Dentists	Ratio of population to dentists.	Area Health Resource File/National Provider Identifier Downloadable File	2022
Preventable Hospital Stays*	Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees.	Mapping Medicare Disparities Tool	2022
Mammography Screening*	Percentage of female Medicare enrollees ages 65-74 who received an annual mammography screening.	Mapping Medicare Disparities Tool	2022
Uninsured	Percentage of population under age 65 without health insurance.	Small Area Health Insurance Estimates	2022
<b>PHYSICAL ENVIRONMENT</b>			
Severe Housing Problems	Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities.	Comprehensive Housing Affordability Strategy (CHAS) data	2017-2021
Driving Alone to Work*	Percentage of the workforce that drives alone to work.	American Community Survey, five-year estimates	2019-2023
Long Commute - Driving Alone	Among workers who commute in their car alone, the percentage that commute more than 30 minutes.	American Community Survey, five-year estimates	2019-2023
Air Pollution: Particulate Matter	Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5).	Environmental Public Health Tracking Network	2020
Drinking Water Violations+	Indicator of the presence of health-related drinking water violations. 'Yes' indicates the presence of a violation, 'No' indicates no violation.	Safe Drinking Water Information System	2023
Broadband Access	Percentage of households with broadband internet connection.	American Community Survey, five-year estimates	2019-2023
Library Visits per Person per Year	Library visits per person living within the library service area per year.	Institute of Museum and Library Services	2022
<b>SOCIAL AND ECONOMIC FACTORS</b>			
Some College	Percentage of adults ages 25-44 with some post-secondary education.	American Community Survey, five-year estimates	2019-2023
High School Completion	Percentage of adults ages 25 and over with a high school diploma or equivalent.	American Community Survey, five-year estimates	2019-2023
Unemployment	Percentage of population ages 16 and older unemployed but seeking work.	Bureau of Labor Statistics	2023
Income Inequality	Ratio of household income at the 80th percentile to income at the 20th percentile.	American Community Survey, five-year estimates	2019-2023
Children in Poverty*	Percentage of people under age 18 in poverty.	Small Area Income and Poverty Estimates; American Community Survey, five-year estimates	2023 & 2019-2023
Injury Deaths*	Number of deaths due to injury per 100,000 population.	National Center for Health Statistics - Mortality Files; Census Population Estimates Program	2018-2022
Social Associations	Number of membership associations per 10,000 population.	County Business Patterns	2022
Child Care Cost Burden	Child care costs for a household with two children as a percent of median household income.	The Living Wage Institute; Small Area Income and Poverty Estimates	2024 & 2023



## County Health Rankings, 2025: Albany & Rensselaer Counties

Measure	Albany County			Rensselaer County			New York State		US Overall
	Rank	Value	95% CI*	Rank	Value	95% CI*	Value	95% CI*	Value
<b>POPULATION HEALTH AND WELL-BEING</b>									
LENGTH OF LIFE									
Premature Death	25	7,276	6,923 - 7,629	22	7,122	6,655 - 7,589	6,637	6,597 - 6,678	8,400
QUALITY OF LIFE									
Poor Physical Health Days	6	3.7	3.0 - 4.3	24	4.0	3.3 - 4.8	3.9	3.7 - 4.1	3.9
Low Birth Weight	55	8.5%	8.1 - 8.9	53	8.5%	7.9 - 9.0	8.3%	8.2 - 8.3	8%
Poor Mental Health Days	11	5.2	4.4 - 6.0	18	5.4	4.5 - 6.3	4.9	4.7 - 5.1	5.1
Poor or Fair Health	4	12.4%	11.1 - 13.8	11	13.5%	12.0 - 15.1	16.1%	15.3 - 16.9	17%
<b>COMMUNITY CONDITIONS</b>									
HEALTH INFRASTRUCTURE									
Flu Vaccinations	1	58%		9	54%		51%		48%
Access to Exercise Opportunities	16	93.9%		35	78.4%		93.1%		84%
Food Environment Index	25	8.4		21	8.5		8.7		7.4
Primary Care Physicians	7	1,039:1		39	2,081:1		1,245:1		1,330
Mental Health Providers	5	222:1		43	478:1		265:1		300
Dentists	6	1,124:1		41	2,422:1		1,205:1		1,360
Preventable Hospital Stays	19	2,369		12	2,247		2,595		2,666
Mammography Screening	22	49%		29	47%		44%		44%
Uninsured	15	4.5%	3.9 - 5.1	8	4.4%	3.7 - 5.1	5.7%	5.6 - 5.9	10.0%
PHYSICAL ENVIRONMENT									
Severe Housing Problems	37	14.2%	13.2 - 15.2	27	12.8%	11.6 - 14.0	22.5%	22.4 - 22.7	17%
Driving Alone to Work	10	67.6%	66.4 - 68.8	19	72.6%	70.9 - 74.4	49.7%	49.5 - 49.8	70%
Long Commute - Driving Alone	8	21.2%	19.8 - 22.6	18	30.6%	28.6 - 32.6	39.3%	39.1 - 39.5	37%
Air Pollution: Particulate Matter	60	8.7		51	8.1		6.9		7.3
Drinking Water Violations		Yes			Yes				
Broadband Access	19	89.4%	88.5 - 90.2	11	90.2%	89.1 - 91.3	89.6%	89.3 - 89.8	90%
Library Access	24	3.1		50	1.8		2.5		2
SOCIAL AND ECONOMIC FACTORS									
Some College	4	78.0%	75.3 - 80.8	11	72.6%	69.0 - 76.2	71.0%	70.7 - 71.4	68%
High School Completion	6	93.2%	92.6 - 93.8	7	92.7%	92.0 - 93.5	87.9%	87.7 - 88.0	89%
Unemployment	10	3.3%		12	3.3%		4.2%		3.6%
Income Inequality	34	4.6		33	4.6		5.8		4.9
Children in Poverty	16	14.6%	11.0 - 18.2	22	16.3%	12.0 - 20.6	18.6%	18.0 - 19.2	16%
Injury Deaths	14	60.8	56.9 - 64.7	18	62.3	56.8 - 67.8	60.0	59.5 - 60.5	84
Social Associations	6	14.6		46	8.3		7.9		9.1
Child Care Cost Burden	27	37.1%		24	36.5%		37.7%		28%

\*95% CI = 95% Confidence Interval (where available).

## County Health Rankings, 2025: Columbia & Greene Counties

Measure	Columbia County			Greene County			New York State		US Overall
	Rank	Value	95% CI*	Rank	Value	95% CI*	Value	95% CI*	Value
<b>POPULATION HEALTH AND WELL-BEING</b>									
LENGTH OF LIFE									
Premature Death	35	7,810	6,884 - 8,735	44	8,286	7,308 - 9,264	6,637	6,597 - 6,678	8,400
QUALITY OF LIFE									
Poor Physical Health Days	13	3.8	3.1 - 4.8	30	4.1	3.2 - 4.9	3.9	3.7 - 4.1	3.9
Low Birth Weight	23	7.2%	6.3 - 8.1	21	7.1%	6.2 - 8.1	8.3%	8.2 - 8.3	8%
Poor Mental Health Days	33	5.6	4.5 - 6.6	37	5.6	4.6 - 6.7	4.9	4.7 - 5.1	5.1
Poor or Fair Health	16	14.2%	12.5 - 15.9	24	15.0%	13.3 - 16.7	16.1%	15.3 - 16.9	17%
<b>COMMUNITY CONDITIONS</b>									
HEALTH INFRASTRUCTURE									
Flu Vaccinations	9	54%		52	45%		51%		48%
Access to Exercise Opportunities	47	61.5%		26	81.3%		93.1%		84%
Food Environment Index	25	8.4		8	8.8		8.7		7.4
Primary Care Physicians	42	2,471:1		57	3,464:1		1,245:1		1,330
Mental Health Providers	31	403:1		58	960:1		265:1		300
Dentists	45	2,786:1		48	2,827:1		1,205:1		1,360
Preventable Hospital Stays	7	2,082		17	2,367		2,595		2,666
Mammography Screening	35	46%		58	39%		44%		44%
Uninsured	44	5.5%	4.7 - 6.3	31	5.0%	4.2 - 5.9	5.7%	5.6 - 5.9	10.0%
PHYSICAL ENVIRONMENT									
Severe Housing Problems	45	15.4%	13.7 - 17.2	36	14.2%	12.0 - 16.3	22.5%	22.4 - 22.7	17%
Driving Alone to Work	11	67.6%	65.2 - 70.0	22	73.0%	70.4 - 75.5	49.7%	49.5 - 49.8	70%
Long Commute - Driving Alone	38	37.2%	33.5 - 40.9	52	44.5%	40.1 - 48.9	39.3%	39.1 - 39.5	37%
Air Pollution: Particulate Matter	47	7.8		43	7.4		6.9		7.3
Drinking Water Violations		Yes			Yes				
Broadband Access	28	88.3%	87.3 - 89.2	59	84.6%	82.5 - 86.6	89.6%	89.3 - 89.8	90%
Library Access	4	4.2		53	1.8		2.5		2
SOCIAL AND ECONOMIC FACTORS									
Some College	39	62.5%	57.2 - 67.8	53	56.7%	51.2 - 62.2	71.0%	70.7 - 71.4	68%
High School Completion	25	91.5%	90.3 - 92.8	47	88.8%	87.5 - 90.1	87.9%	87.7 - 88.0	89%
Unemployment	2	3.0%		35	3.8%		4.2%		3.6%
Income Inequality	46	4.9		52	5.1		5.8		4.9
Children in Poverty	28	17.5%	12.4 - 22.6	40	18.8%	13.0 - 24.6	18.6%	18.0 - 19.2	16%
Injury Deaths	32	67.9	58.6 - 77.2	54	83.0	71.5 - 94.6	60.0	59.5 - 60.5	84
Social Associations	37	9.5		42	8.9		7.9		9.1
Child Care Cost Burden	52	41.3%		16	34.6%		37.7%		28%

\*95% CI = 95% Confidence Interval (where available).



## County Health Rankings, 2025: Saratoga & Schenectady Counties

Measure	Saratoga County			Schenectady County			New York State		US Overall
	Rank	Value	95% CI*	Rank	Value	95% CI*	Value	95% CI*	Value
<b>POPULATION HEALTH AND WELL-BEING</b>									
LENGTH OF LIFE									
Premature Death	6	5,526	5,175 - 5,877	46	8,452	7,931 - 8,973	6,637	6,597 - 6,678	8,400
QUALITY OF LIFE									
Poor Physical Health Days	3	3.4	2.7 - 4.2	8	3.7	3.1 - 4.5	3.9	3.7 - 4.1	3.9
Low Birth Weight	9	6.5%	6.1 - 6.9	60	9.2%	8.7 - 9.7	8.3%	8.2 - 8.3	8%
Poor Mental Health Days	5	5.0	4.2 - 5.9	17	5.3	4.4 - 6.3	4.9	4.7 - 5.1	5.1
Poor or Fair Health	1	10.3%	9.2 - 11.6	9	13.3%	11.9 - 15.0	16.1%	15.3 - 16.9	17%
<b>COMMUNITY CONDITIONS</b>									
HEALTH INFRASTRUCTURE									
Flu Vaccinations	3	57%		9	54%		51%		48%
Access to Exercise Opportunities	22	85.7%		20	88.6%		93.1%		84%
Food Environment Index	4	9.1		14	8.7		8.7		7.4
Primary Care Physicians	22	1,439: 1		14	1,255: 1		1,245: 1		1,330
Mental Health Providers	35	417:1		21	351:1		265:1		300
Dentists	16	1,465: 1		11	1,251: 1		1,205: 1		1,360
Preventable Hospital Stays	20	2,389		11	2,217		2,595		2,666
Mammography Screening	7	52%		39	45%		44%		44%
Uninsured	1	3.7%	3.2 - 4.3	16	4.5%	3.8 - 5.3	5.7%	5.6 - 5.9	10.0%
PHYSICAL ENVIRONMENT									
Severe Housing Problems	6	10.9%	9.9 - 11.9	42	15.0%	13.7 - 16.3	22.5%	22.4 - 22.7	17%
Driving Alone to Work	35	75.2%	73.6 - 76.8	17	72.2%	70.3 - 74.1	49.7%	49.5 - 49.8	70%
Long Commute - Driving Alone	37	36.7%	34.8 - 38.6	21	31.1%	28.9 - 33.3	39.3%	39.1 - 39.5	37%
Air Pollution: Particulate Matter	53	8.2		49	8.0		6.9		7.3
Drinking Water Violations		Yes			No				
Broadband Access	6	92.0%	91.1 - 92.8	27	88.3%	87.0 - 89.6	89.6%	89.3 - 89.8	90%
Library Access	27	3.0		18	3.3		2.5		2
SOCIAL AND ECONOMIC FACTORS									
Some College	5	77.8%	74.7 - 81.0	14	71.4%	67.7 - 75.1	71.0%	70.7 - 71.4	68%
High School Completion	2	94.2%	93.6 - 94.8	17	91.8%	91.0 - 92.7	87.9%	87.7 - 88.0	89%
Unemployment	1	2.9%		24	3.5%		4.2%		3.6%
Income Inequality	11	4.2		22	4.4		5.8		4.9
Children in Poverty	3	8.3%	5.9 - 10.7	38	18.7%	13.9 - 23.5	18.6%	18.0 - 19.2	16%
Injury Deaths	5	47.3	43.4 - 51.3	12	60.4	55.0 - 65.9	60.0	59.5 - 60.5	84
Social Associations	51	7.3		49	7.7		7.9		9.1
Child Care Cost Burden	8	32.0%		47	40.4%		37.7%		28%

\*95% CI = 95% Confidence Interval (where available).

## L. Public Health Issue Prioritization Process Results

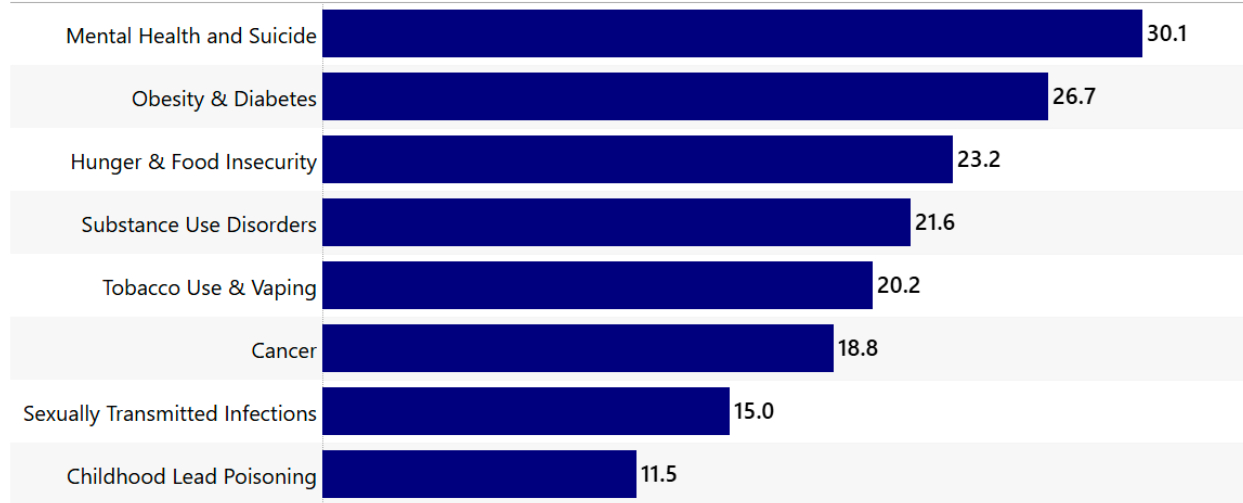
A summary of the Prevention Agenda Prioritization Workgroup’s health issue prioritization methodology and each local Work Groups’ process and health issue selections can be found in [Section II](#).

The charts below summarize how the top health issues scored, in each county or combined county area, in total, and based on data, organizational, community survey, and community partner considerations, as well as according to total need and opportunity considerations.

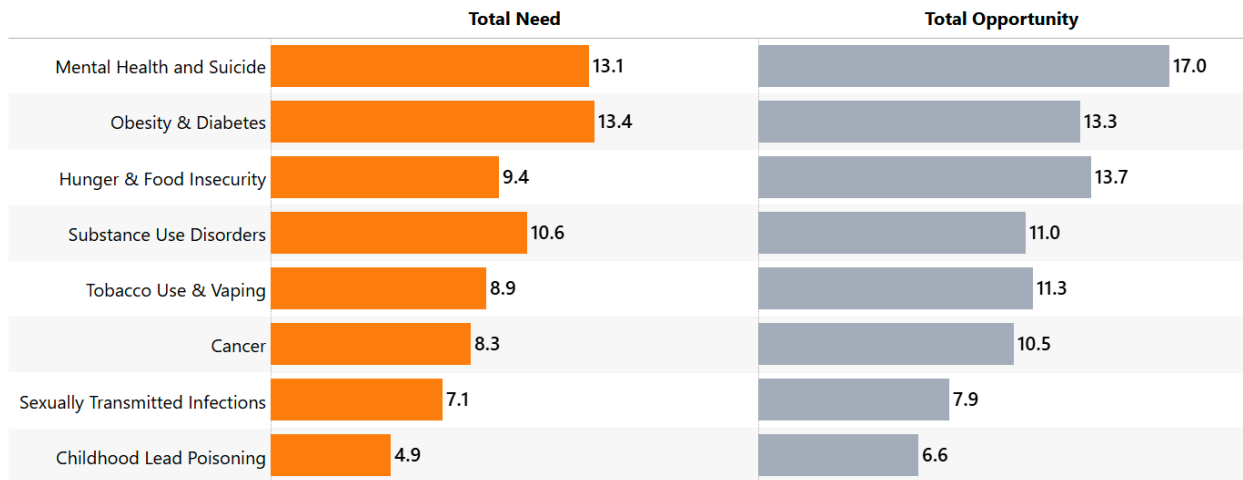


## Schenectady Health Issue Rankings

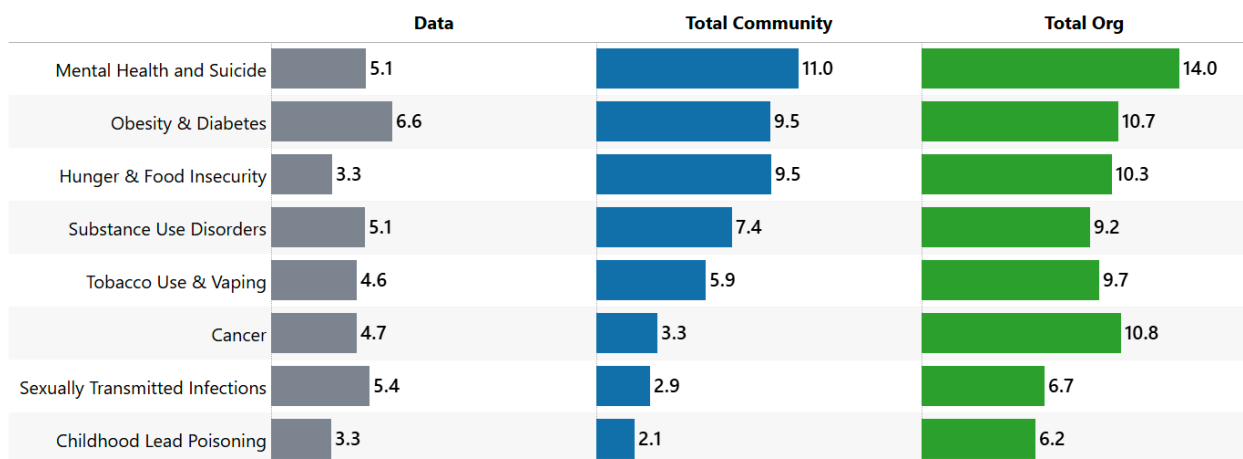
**Mental Health & Suicide had the highest total score,** followed by Obesity & Diabetes and Hunger & Food Insecurity.



**Mental Health & Suicide had the highest total score.** Obesity & Diabetes had the highest Need score. Hunger & Food Insecurity had the second highest opportunity score, after Mental Health & Suicide.

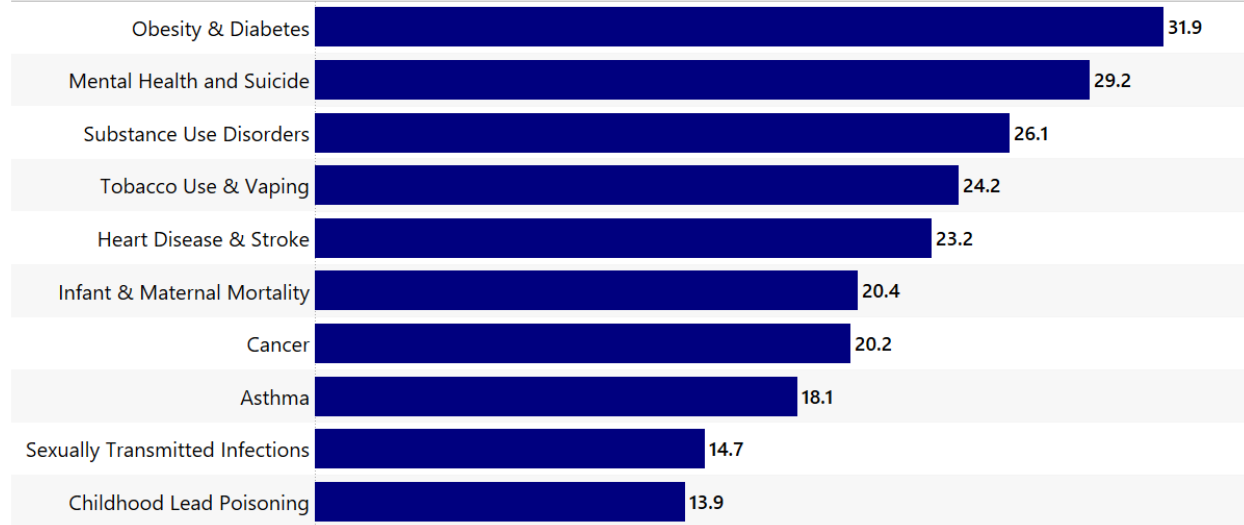


**Mental Health & Suicide had the highest Community and Organization scores.** Obesity & Diabetes had the highest Data score.

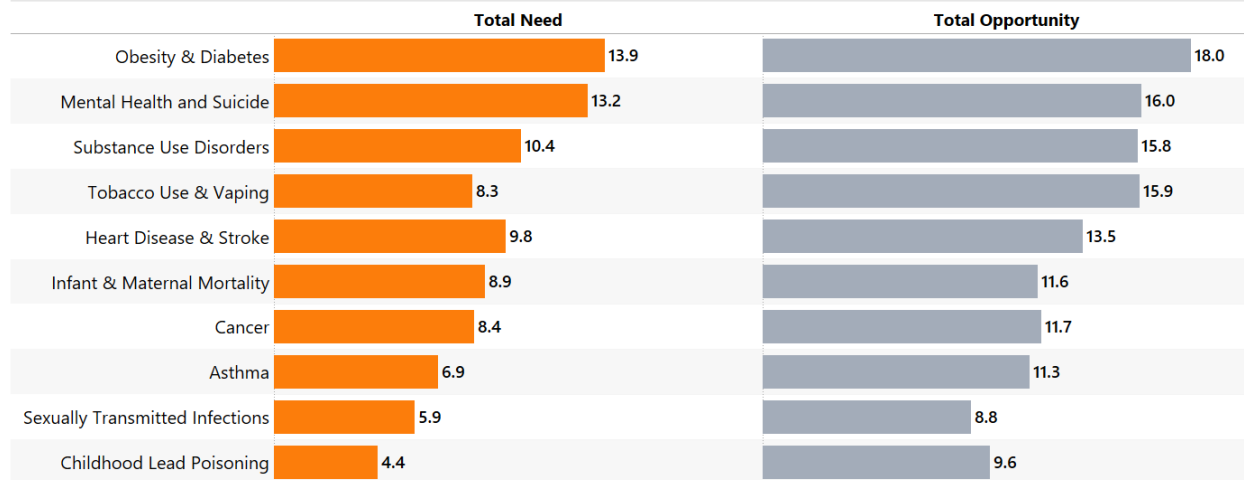


## Albany-Rensselaer Health Issue Rankings

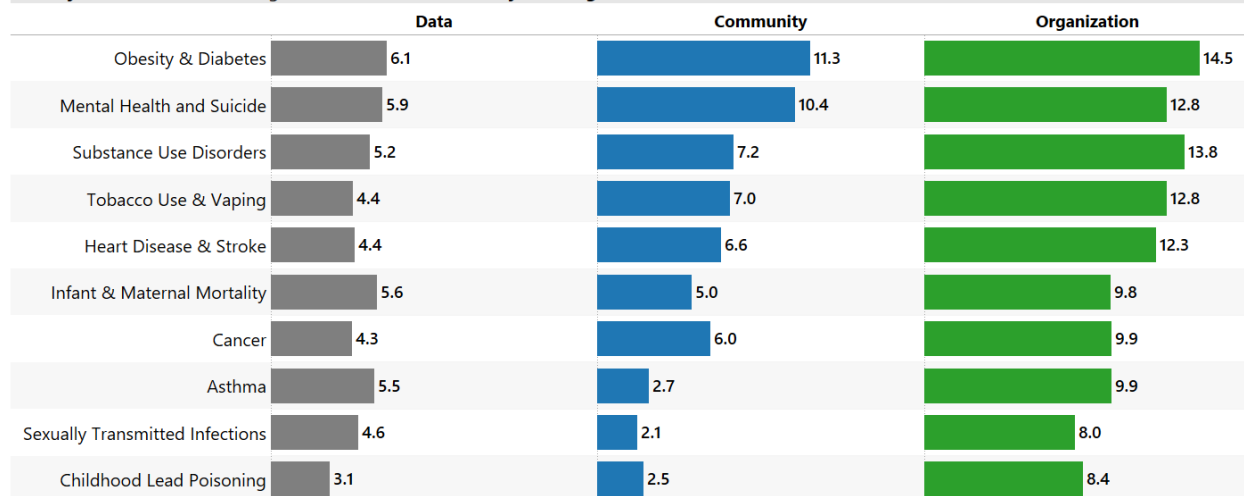
**Obesity & Diabetes, Mental Health & Suicide, and Substance Use Disorders** had the highest **Total Scores**.



**Obesity & Diabetes** had the highest **Total Need** and **Opportunity** Scores.

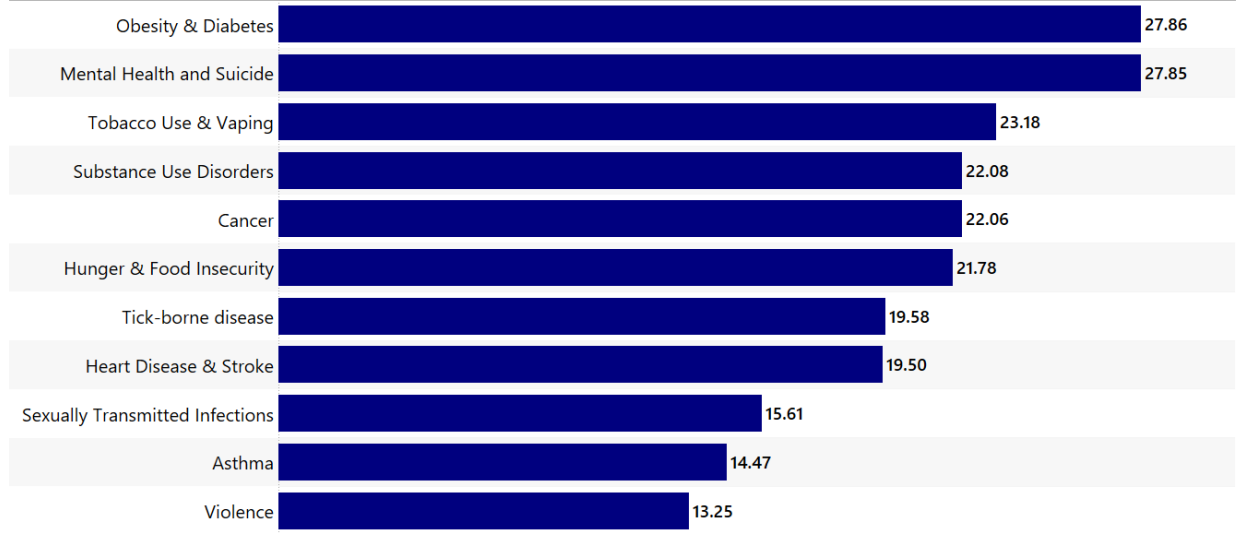


**Obesity & Diabetes** had the highest **Total Data, Community, and Organization** Scores.

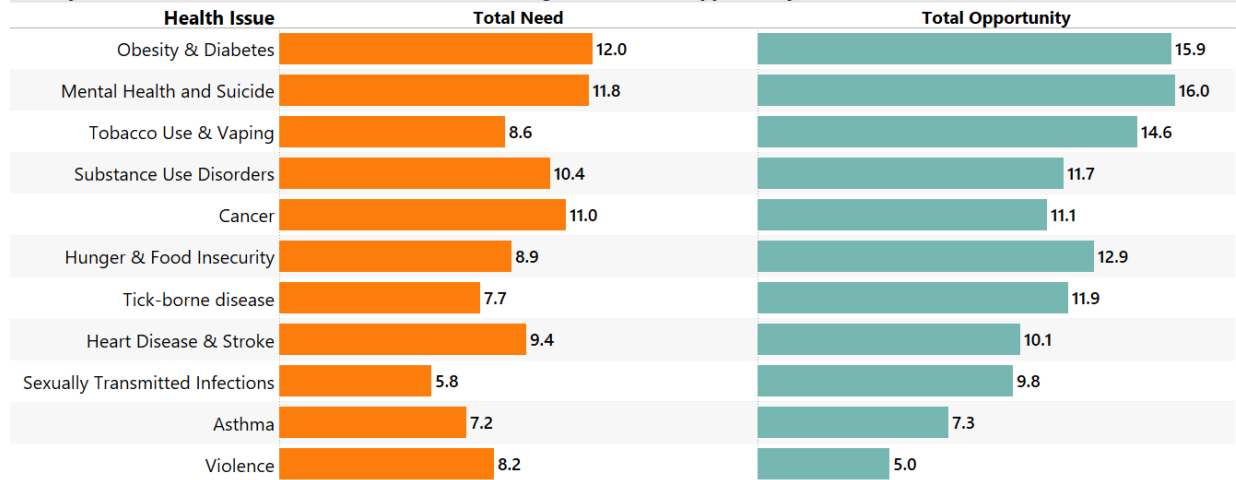


## Columbia-Greene Health Issue Scores

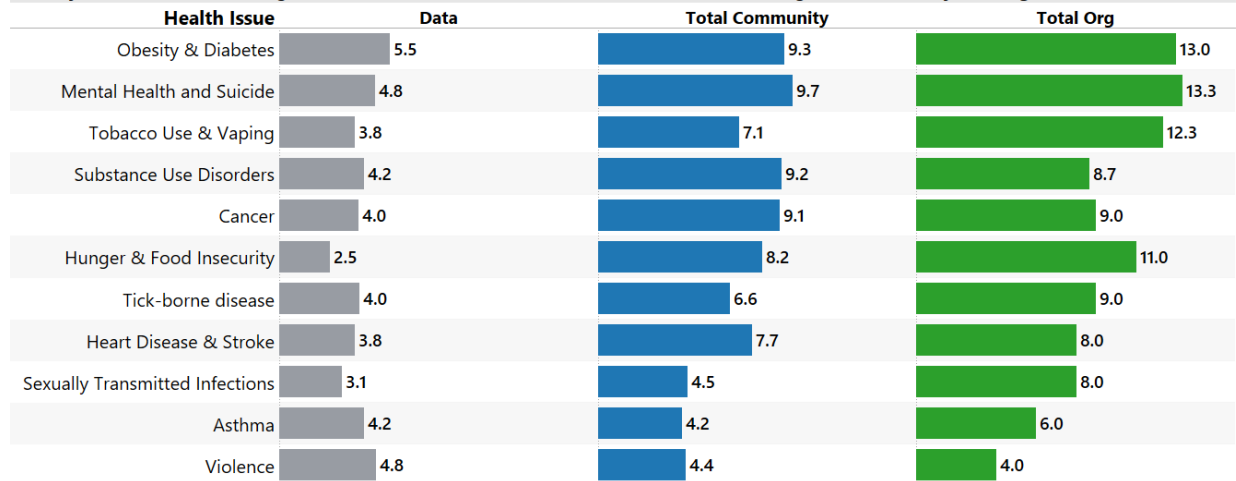
**Obesity & Diabetes** and **Mental Health & Suicide** had the highest **Total** scores. **Tobacco Use & Vaping** had the third highest **Total** score.



**Obesity & Diabetes** and **Mental Health & Suicide** had the highest **Need** and **Opportunity** scores.



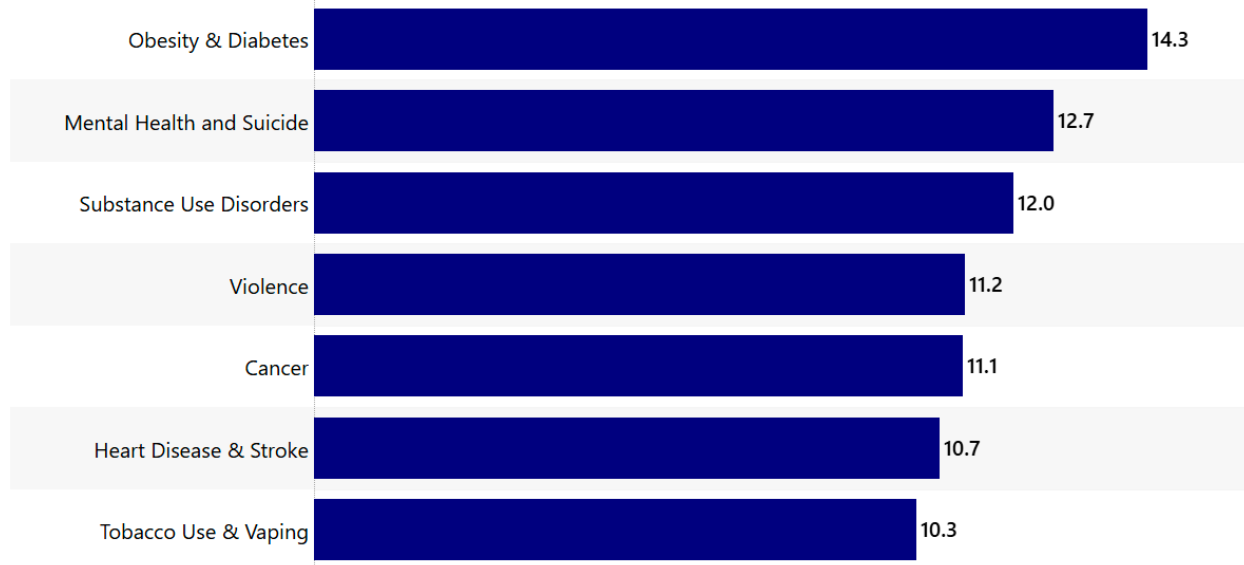
**Obesity & Diabetes** had the highest **Data** score, while **Mental Health & Suicide** had the highest **Community** and **Organization** scores.



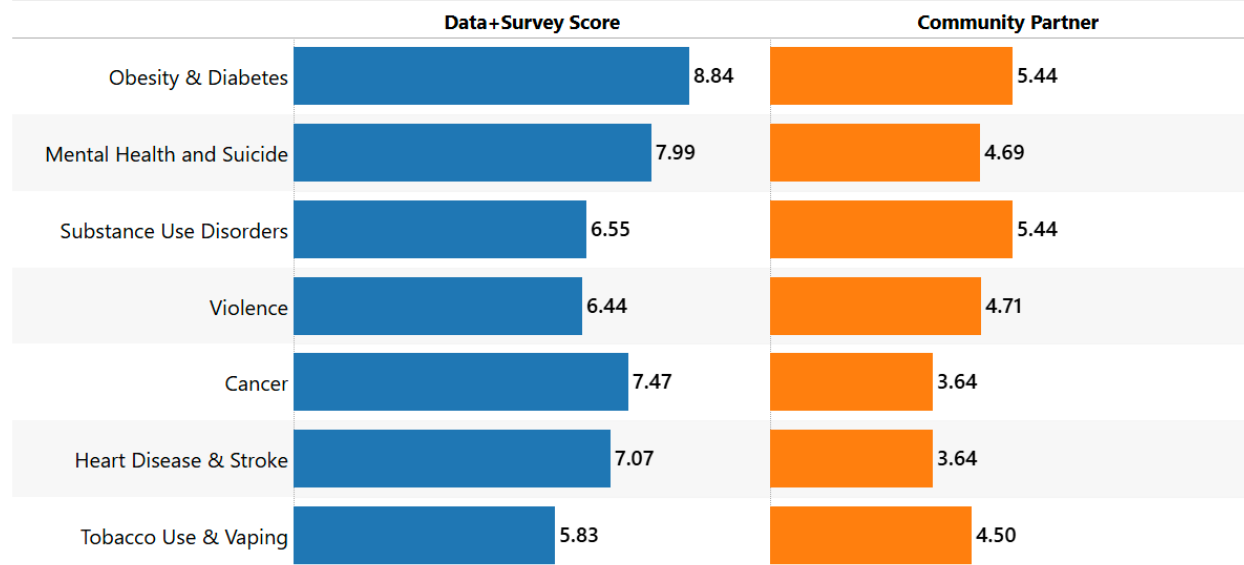
## Saratoga County Health Issue Scores

Total data, survey, and community partner scores:

**Obesity & Diabetes** has the highest total score, as of 7/15/2025



**Substance Use Disorders rose** in rank, after adding in Community Partner scores.



Violence fell in rank, while **Cancer** and **Heart Disease & Stroke** rose in rank, after adding in survey scores.

Health Issue	Data	Survey
Obesity & Diabetes	6.17	2.67
Mental Health and Suicide	5.82	2.17
Cancer	4.47	3.00
Heart Disease & Stroke	4.57	2.51
Substance Use Disorders	4.58	1.97
Violence	5.07	1.37
Tobacco Use & Vaping	4.68	1.15

### Organizational Opportunity Ratings



## M. Assets and Resources

### Albany and Rensselaer Counties

#### Chronic Disease Prevention and Control

Chronic Disease Prevention and Control		
Organization	Albany County Assets	Rensselaer County Assets
<b>A Healthy Future Diabetes Prevention Group</b>	<ul style="list-style-type: none"> <li>National Diabetes Prevention Program</li> </ul>	
<b>Albany County Department of Health</b>	<ul style="list-style-type: none"> <li>National Diabetes Prevention Program</li> </ul>	
<b>Albany County Department of Mental Health</b>	<ul style="list-style-type: none"> <li>Tobacco Cessation Services</li> </ul>	
<b>Albany Medical Center</b>	<ul style="list-style-type: none"> <li>Division of Community Endocrinology - Diabetes Self-Management training and education,</li> <li>Medical Nutrition Therapy</li> </ul>	<ul style="list-style-type: none"> <li>Division of Community Endocrinology - Diabetes Self-Management training and education,</li> <li>Medical Nutrition Therapy</li> </ul>
<b>American Cancer Society</b>		
<b>American Diabetes Association</b>	<ul style="list-style-type: none"> <li>Diabetes Self-Management Training and Education</li> </ul>	<ul style="list-style-type: none"> <li>Diabetes Self-Management Training and Education</li> </ul>
<b>American Heart Association</b>	<ul style="list-style-type: none"> <li>Community Education</li> <li>Heart Walk</li> </ul>	<ul style="list-style-type: none"> <li>Community Education</li> <li>Heart Walk</li> </ul>
<b>American Lung Association</b>		
<b>Community Care Physicians</b>	<ul style="list-style-type: none"> <li>Diabetes Self-Management Training and Education</li> <li>Medical Nutrition Therapy</li> </ul>	<ul style="list-style-type: none"> <li>Diabetes Self-Management Training and Education</li> <li>Medical Nutrition Therapy</li> </ul>




<b>Chronic Disease Prevention and Control</b>		
<b>Organization</b>	<b>Albany County Assets</b>	<b>Rensselaer County Assets</b>
<b>Cornell Cooperative Extension</b>	<ul style="list-style-type: none"> <li>• Dining with Diabetes - Weight Management Classes</li> <li>• Healthy Homes Program</li> </ul>	<ul style="list-style-type: none"> <li>• Nutritional Education Sessions</li> </ul>
<b>Diabetes Sisters of Albany/Schenectady</b>	<ul style="list-style-type: none"> <li>• Diabetes Support Group</li> </ul>	
<b>New York State Smokers' Quitline</b>	<ul style="list-style-type: none"> <li>• Tobacco Cessation Services</li> </ul>	<ul style="list-style-type: none"> <li>• Tobacco Cessation Services</li> </ul>
<b>Breakthrough T1D</b>	<ul style="list-style-type: none"> <li>• Diabetes Support Groups and Education</li> </ul>	<ul style="list-style-type: none"> <li>• Diabetes Support Groups and Education</li> </ul>
<b>Rensselaer County Department of Health</b>		<ul style="list-style-type: none"> <li>• Pre-Diabetes Education &amp; Public Health Detailing</li> </ul>
<b>St. Peter's Health Partners (Diabetes and Endocrine Care)</b>	<ul style="list-style-type: none"> <li>• Diabetes Self-Management Training and Education</li> <li>• Medical Nutrition Therapy</li> <li>• Diabetes Support Groups</li> <li>• National Diabetes Prevention Program</li> </ul>	<ul style="list-style-type: none"> <li>• Diabetes Self-Management Training and Education</li> <li>• Medical Nutrition Therapy</li> <li>• Diabetes Support Groups</li> <li>• National Diabetes Prevention Program</li> </ul>
<b>Stratton Veterans Administration Medical Center</b>	<ul style="list-style-type: none"> <li>• Diabetes Self-Management Training and Education</li> </ul>	<ul style="list-style-type: none"> <li>• Diabetes Self-Management Training and Education</li> </ul>
<b>TOPS Grocery Stores</b>		<ul style="list-style-type: none"> <li>• Weight Management through Nutritional education</li> </ul>
<b>Weight Watchers Studio</b>	<ul style="list-style-type: none"> <li>• Diabetes Self-Management Training and Education</li> </ul>	<ul style="list-style-type: none"> <li>• Diabetes Self-Management Training and Education</li> </ul>
<b>Whitney M. Young Jr. Health Services</b>	<ul style="list-style-type: none"> <li>• Diabetes Self-Management Training and Education</li> <li>• Medical Nutrition Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Diabetes Self-Management Training and Education</li> <li>• Medical Nutrition Therapy</li> </ul>

Chronic Disease Prevention and Control		
Organization	Albany County Assets	Rensselaer County Assets
<b>Supermarkets</b>	<ul style="list-style-type: none"> <li>• Nutrition Education with Dietitian Support:</li> <li>• Market 32/Price Chopper:               <ul style="list-style-type: none"> <li>○ <a href="https://www.pricechopper.com/health-wellness/">https://www.pricechopper.com/health-wellness/</a></li> </ul> </li> <li>• Hannaford:               <ul style="list-style-type: none"> <li>○ <a href="https://www.hannaford.com/health-wellness/dietitians/free-classes-demos-ny">https://www.hannaford.com/health-wellness/dietitians/free-classes-demos-ny</a></li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Nutrition Education with Dietitian Support:</li> <li>• Market 32/Price Chopper:               <ul style="list-style-type: none"> <li>○ <a href="https://www.pricechopper.com/health-wellness/">https://www.pricechopper.com/health-wellness/</a></li> </ul> </li> <li>• Hannaford:               <ul style="list-style-type: none"> <li>○ <a href="https://www.hannaford.com/health-wellness/dietitians/free-classes-demos-ny">https://www.hannaford.com/health-wellness/dietitians/free-classes-demos-ny</a></li> </ul> </li> </ul>



**Physical Activity**

Physical Activity		
Organization	Albany County Assets	Rensselaer County Assets
<b>Fitness</b>	<ul style="list-style-type: none"> <li>• Albany CrossFit</li> <li>• Albany Jewish Community Center</li> <li>• Black Sheep Athletics</li> <li>• Capital District YMCA</li> <li>• Metabolic</li> <li>• Planet Fitness</li> <li>• Rudy A. Ciccotti Family Recreation Center</li> <li>• Silver Sneakers</li> <li>• CDPHP Fitness Connect</li> <li>• Vent Fitness</li> <li>• Retro Fitness Albany State Concourse</li> <li>• Orange Theory Fitness</li> <li>• Best Fitness</li> <li>• Freestyle Fitness Center</li> <li>• CrossFit Beyond</li> <li>• Albany Boxing</li> </ul>	<ul style="list-style-type: none"> <li>• Collar City Athletics</li> <li>• Planet Fitness</li> <li>• Silver Sneakers</li> <li>• CDPHP Fitness Connect</li> <li>• Capital District YMCA</li> <li>• Fitnessforfun, LLC</li> <li>• Jazzercise Fitness Center</li> <li>• Mueller Center RPI Gymnasium</li> <li>• All Troy Athletic Club</li> <li>• Focusmaster Fitness</li> <li>• Lion’s Den Martial Arts &amp; Fitness</li> <li>• Fitness Coach</li> <li>• Fly Yoga Studio</li> <li>• Anatomie</li> <li>• Emerald Athletic Club</li> <li>• The Hot Yoga Spot</li> <li>• Rensselaer County Senior Centers                             <ul style="list-style-type: none"> <li>○ Rensselaer, Troy, Schodack, Hoosick Falls, Grafton</li> </ul> </li> <li>• School Athletic Fields &amp; Playgrounds</li> <li>• Local Pickleball, Tennis, and Basketball Courts</li> <li>• MVP Fitness Courts</li> </ul>

Physical Activity		
Organization	Albany County Assets	Rensselaer County Assets
<b>Parks and Recreation</b>	<ul style="list-style-type: none"> <li>• Albany County Department of Recreation               <ul style="list-style-type: none"> <li>○ <a href="https://www.albanycounty.com/departments/recreation/youth-sports">https://www.albanycounty.com/departments/recreation/youth-sports</a></li> </ul> </li> <li>• Albany County Helderberg-Hudson Rail Trail</li> <li>• Ann Lee Pond Nature &amp; Historic Preserve</li> <li>• E.N. Huyck Preserve</li> <li>• Lawson Lake County Park</li> <li>• Mohawk Hudson Land Conservancy Preserves               <ul style="list-style-type: none"> <li>○ <a href="https://mohawkhudson.org/our-preserves/">https://mohawkhudson.org/our-preserves/</a></li> </ul> </li> <li>• Municipal parks and recreational resources</li> <li>• New York State Parks, Preserves, and Wildlife Management Areas               <ul style="list-style-type: none"> <li>○ <a href="https://www.dec.ny.gov/outdoor/7801.html">https://www.dec.ny.gov/outdoor/7801.html</a></li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Rensselaer County Tourism &amp; Attractions:               <ul style="list-style-type: none"> <li>○ <a href="https://ny-rensselaercounty.civicplus.com/BusinessDirectory/ll.aspx?lngBusinessCategoryID=238">https://ny-rensselaercounty.civicplus.com/BusinessDirectory/ll.aspx?lngBusinessCategoryID=238</a></li> </ul> </li> </ul> <div style="text-align: center;">  </div> <ul style="list-style-type: none"> <li>• Albany-Hudson Electric Trail</li> </ul>



## Nutrition Security

Nutrition Security		
Organization	Albany County Assets	Rensselaer County Assets
<b>Regional Food Bank of Northeastern New York</b>	<ul style="list-style-type: none"> <li>• Backpack Program</li> <li>• Just Say Yes to Fruits and Vegetables</li> <li>• Mass Distribution/Mobile Pantry</li> <li>• School Pantry Program</li> </ul>	<ul style="list-style-type: none"> <li>• Backpack Program</li> <li>• Just Say Yes to Fruits and Vegetables</li> <li>• Mass Distribution/Mobile Pantry</li> <li>• School Pantry Program</li> </ul>
<b>Albany County Department for Aging</b>	<ul style="list-style-type: none"> <li>• Congregate Meals</li> <li>• Home Delivered Meals</li> <li>• Nutritional Counseling</li> </ul>	
<b>Albany County Department for Children, Youth and Families</b>	<ul style="list-style-type: none"> <li>• Free Meals               <ul style="list-style-type: none"> <li>◦ <a href="https://www.albanycountyny.gov/departments/children-youth-and-families/free-meals-food-pantry">https://www.albanycountyny.gov/departments/children-youth-and-families/free-meals-food-pantry</a></li> </ul> </li> </ul>	
<b>Albany County Department of Health</b>	<ul style="list-style-type: none"> <li>• Nutritional Education</li> <li>• Breastfeeding supports</li> </ul>	
<b>Albany Medical Center</b>	<ul style="list-style-type: none"> <li>• Special Supplemental Nutrition Program for Women, Infants and Children</li> <li>• Nutritional Education</li> <li>• Breastfeeding support and education</li> </ul>	<ul style="list-style-type: none"> <li>• Special Supplemental Nutrition Program for Women, Infants and Children</li> <li>• Nutritional Education</li> <li>• Breastfeeding support and education</li> </ul>

<b>Nutrition Security</b>		
<b>Organization</b>	<b>Albany County Assets</b>	<b>Rensselaer County Assets</b>
<b>Grocery Stores</b>	<ul style="list-style-type: none"> <li>• ALDI's</li> <li>• Whole Foods</li> <li>• Hannaford</li> <li>• Honest Weight Food Cooperative</li> <li>• Market 32 Price Chopper</li> <li>• Save A Lot</li> <li>• Trader Joe's</li> <li>• Walmart</li> </ul>	<ul style="list-style-type: none"> <li>• ALDI's</li> <li>• Hannaford</li> <li>• Honest Weight Food Cooperative</li> <li>• Market 32 Price Chopper</li> <li>• Save A Lot</li> <li>• Target</li> <li>• Walmart</li> <li>• Bargain Grocery Store</li> <li>• Corner Stores</li> <li>• Family Dollar</li> <li>• Dollar General</li> <li>• The Dollar Tree</li> <li>• Stewarts</li> <li>• Cumberland Farms</li> </ul>
<b>Brightside Up</b>	<ul style="list-style-type: none"> <li>• Child and Adult Care Food Program (CACFP)</li> <li>• Farm to Preschool – nutrition education, local produce</li> <li>• Child Care Health Consultant Services</li> </ul>	<ul style="list-style-type: none"> <li>• Child and Adult Care Food Program (CACFP)</li> <li>• Farm to Preschool – nutrition education, local produce</li> <li>• Child Care Health Consultant Services</li> </ul>



Nutrition Security		
Organization	Albany County Assets	Rensselaer County Assets
<b>Capital Roots</b>	<ul style="list-style-type: none"> <li>• Community Gardens</li> <li>• Veggie Mobile</li> <li>• Produce Project – students run a farm for credit and produce</li> <li>• Taste Good Series – nutrition education</li> <li>• Squash Hunger – produce transportation</li> <li>• Urban Greening Projects</li> <li>• Healthy Streets Projects</li> <li>• Healthy Stores Projects</li> </ul>	<ul style="list-style-type: none"> <li>• Community Gardens</li> <li>• Veggie Mobile</li> <li>• Produce Project – students run a farm for credit and produce</li> <li>• Taste Good Series – nutrition education</li> <li>• Squash Hunger – produce transportation</li> <li>• Urban Greening Projects</li> <li>• Healthy Streets Projects</li> <li>• Healthy Stores Projects</li> </ul>

Nutrition Security		
Organization	Albany County Assets	Rensselaer County Assets
<p><b>Farmers Markets –</b> <b>*Accepts SNAP</b></p>	<ul style="list-style-type: none"> <li>• CDPHP Farmers Market - June 7-October 4, Thursday 11am-1:30pm</li> <li>• *Empire State Plaza Friday Farmers Market - March 1-October 1, Friday 10am-2pm</li> <li>• *Empire State Plaza Wed Farmers Market - Year-round, Wednesday 10am-2pm</li> <li>• Harriman State Campus Farmers Market - May 1-October 10, Thursday 10am-2pm</li> <li>• New Covenant Farmers Market - May 21-October 1, Tuesday 3pm-6pm</li> <li>• Farmers Market at the Crossings - May 18-September 28, Saturday 9am-1pm</li> <li>• *Delaware Community Farmers Market – July 2-September 24, Tuesdays 4pm-7pm</li> <li>• *Delmar Saturday Farmers Market - May 28-October 29, Saturday 9am-1pm</li> <li>• Delmar Tuesday Farmers Market - May 6-November 25, Tuesday 2:30pm-6pm</li> <li>• Guilderland Farmers Market – June 30-Oct 13, Sunday 10-2pm</li> <li>• Washington Park Farmers Market</li> <li>• Saturdays 10am August-September</li> <li>• Voorheesville Farmer Market June 16<sup>th</sup>-September 29 Wednesday 330-630pm</li> </ul>	<ul style="list-style-type: none"> <li>• *Troy Waterfront Farmers Market - May 4-October 26, Saturday 9am-2pm</li> <li>• Poestenkill Farmers Market and Craft Fair</li> <li>• *Capital Roots Produce Market - Year-round, Mon-Fri 9am-4:30pm</li> <li>• *Capital Roots Produce Project Farm Stand - May 7-October 29, Tuesday 4pm-6pm</li> <li>• East Greenbush Farmers Market - June 12-September 25, Wednesday 4pm-7pm</li> <li>• Schodack Farmer’s Market – June to October, Wednesday 3:00 PM to 7:00 PM</li> <li>• Hoosick Falls Farmer’s Market – Friday, 3:00 PM to 6:00 PM</li> <li>• Rensselaer City Farmer’s Market – July 17<sup>th</sup> to October 16<sup>th</sup>, Thursday, 4:00 PM to 7:00 PM</li> </ul>



Nutrition Security		
Organization	Albany County Assets	Rensselaer County Assets
<b>Commission on Economic Opportunity</b>		<ul style="list-style-type: none"> <li>• Baby Café</li> <li>• Special Supplemental Nutrition Program for Women, Infants and Children</li> <li>• Food Pantry</li> </ul>
<b>Cornell Cooperative Extension</b>	<ul style="list-style-type: none"> <li>• Nutrition Education Program</li> <li>• Agriculture and Horticulture program – education</li> <li>• Central NY Dairy and Livestock Team</li> <li>• 4-H Vegetable Marketing Program – youth grow their own vegetables</li> </ul>	<ul style="list-style-type: none"> <li>• Nutrition Education Program</li> <li>• Agriculture and Horticulture program – education</li> <li>• Central NY Dairy and Livestock Team</li> <li>• 4-H Vegetable Marketing Program – youth grow their own vegetables</li> </ul>
<b>Hope 7</b>		<ul style="list-style-type: none"> <li>• Food pantry</li> </ul>
<b>Radix Center</b>	<ul style="list-style-type: none"> <li>• Community Gardens</li> <li>• Nutritional Education</li> </ul>	
<b>Rensselaer County Department of Health</b>		<ul style="list-style-type: none"> <li>• Department of Aging – Nutrition Program, home delivered meals, congregate meals</li> <li>• Nutritional Education</li> </ul>
<b>Rensselaer County Department of Youth</b>		<ul style="list-style-type: none"> <li>• Youth Summer Food program</li> </ul>
<b>Rensselaer County Department of Aging</b>		<ul style="list-style-type: none"> <li>• Department of Aging – Nutrition Program, home delivered meals, congregate meals</li> </ul>
<b>Sheridan Hollow Drop-In Center</b>	<ul style="list-style-type: none"> <li>• SNAP Registration Assistance</li> </ul>	

Nutrition Security		
Organization	Albany County Assets	Rensselaer County Assets
<b>St. Peter's Health Partners</b>	<ul style="list-style-type: none"> <li>Breastfeeding Promotion, Protection, and Support</li> <li>Creating Healthy Schools and Communities</li> <li>Food Farmacy Programs</li> <li>Emergency Food Assistance</li> </ul>	<ul style="list-style-type: none"> <li>Breastfeeding Promotion, Protection, and Support</li> <li>Creating Healthy Schools and Communities</li> <li>Food Farmacy Programs</li> <li>Emergency Food Assistance</li> </ul>
<b>South End Children's Cafe</b>	<ul style="list-style-type: none"> <li>Free Meals</li> </ul>	
<b>The Food Pantries for the Capital District</b>	<ul style="list-style-type: none"> <li>Emergency Food Assistance – Food Pantries <ul style="list-style-type: none"> <li><a href="https://thefoodpantries.org/about-us/our-member-food-pantries/">https://thefoodpantries.org/about-us/our-member-food-pantries/</a></li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Emergency Food Assistance – Food Pantries <ul style="list-style-type: none"> <li><a href="https://thefoodpantries.org/about-us/our-member-food-pantries/">https://thefoodpantries.org/about-us/our-member-food-pantries/</a></li> </ul> </li> </ul>
<b>Legal Aid Society of NY</b>	<ul style="list-style-type: none"> <li>Nutrition Outreach and Education Program (NOEP)</li> </ul>	<ul style="list-style-type: none"> <li>Nutrition Outreach and Education Program (NOEP)</li> </ul>
<b>Oakwood Community Center</b>		<ul style="list-style-type: none"> <li>Food Pantry, Saturday 9:00 AM to 11:00 AM</li> </ul>
<b>Troy Area United Ministries (TAUM)</b>		<ul style="list-style-type: none"> <li>Food Pantry</li> </ul>
<b>The Salvation Army of Troy</b>		<ul style="list-style-type: none"> <li>Food Pantry</li> </ul>
<b>Town of Guilderland Community Gardens</b>	<ul style="list-style-type: none"> <li>Community Gardens</li> </ul>	
<b>Trinity Alliance of the Capital Region</b>	<ul style="list-style-type: none"> <li>Emergency Food Assistance – Food Pantries</li> <li>Community garden</li> </ul>	<ul style="list-style-type: none"> <li>Emergency Food Assistance – Food Pantries</li> <li>Community garden</li> </ul>



Nutrition Security		
Organization	Albany County Assets	Rensselaer County Assets
Unity House of Troy		<ul style="list-style-type: none"> <li>• Community Meals</li> <li>• Emergency Assistance</li> <li>• SNAP Registration Assistance</li> <li>• Childcare services</li> <li>• Nutrition Outreach and Education Program</li> </ul>
Whitney M. Young Health Center	<ul style="list-style-type: none"> <li>• Special Supplemental Nutrition Program for Women, Infants and Children</li> </ul>	<ul style="list-style-type: none"> <li>• Special Supplemental Nutrition Program for Women, Infants and Children</li> </ul>
YWCA - Troy		<ul style="list-style-type: none"> <li>• Community meals</li> <li>• Food pantry</li> </ul>

## Substance Use and Mental Health

Substance Use and Mental Health		
Organization	Albany County Assets	Rensselaer County Assets
<b>Alcoholics Anonymous</b>	<ul style="list-style-type: none"> <li>Alcoholism Treatment Program <a href="http://aaalbany.org/meetings/">http://aaalbany.org/meetings/</a></li> </ul>	<ul style="list-style-type: none"> <li>Alcoholism Treatment Program <a href="http://aaalbany.org/meetings/">http://aaalbany.org/meetings/</a></li> </ul>
<b>Addiction Care Center of Albany (ACCA) - Prevention and Community Education Services</b>	<ul style="list-style-type: none"> <li>Prevention School and community-based education to thousands of Capital Region children each year to help support healthy communities and prevent underage drinking, drug abuse and other risky behaviors. such as early sexual activity, school delinquency and teen violence.</li> <li>Community Outpatient services include clinic, peer support, community outreach, and jail-based programs. Education program delivers the following: interactive workshops and presentations to schools, community organizations and corporations upon request.</li> </ul>	<ul style="list-style-type: none"> <li>Outpatient services offered including day rehab, medically supervised outpatient program, and an evening program. Community residences offered for men and women who are in early to late states of recovery. Family Navigators available to assist.</li> <li><a href="https://www.theacca.net/">https://www.theacca.net/</a></li> </ul>



Substance Use and Mental Health		
Organization	Albany County Assets	Rensselaer County Assets
<b>Albany Medical Center</b>	<ul style="list-style-type: none"> <li>• Integration of behavioral health services with several primary and specialty care sites</li> <li>• Suicide and depression screenings in Emergency Department and physician practice sites to identify and support at-risk patients</li> <li>• Suboxone Clinics</li> <li>• ERAS Initiative – Enhanced Recovery After Surgery (opioid-free surgeries for numerous procedures)</li> <li>• Project Safe Point: Albany Med Emergency Department physicians collaborate with Catholic Charities to ensure patients are seen the day after an opioid-related ED visit</li> <li>• Various opioid-related research efforts through Albany Medical College</li> <li>• Lead role in community-based opioid use disorder education, working with law enforcement and government agencies</li> </ul>	<ul style="list-style-type: none"> <li>• Integration of behavioral health services with several primary and specialty care sites</li> <li>• Suicide and depression screenings in Emergency Department and physician practice sites to identify and support at-risk patients</li> <li>• Suboxone Clinics</li> <li>• ERAS Initiative – Enhanced Recovery After Surgery (opioid-free surgeries for numerous procedures)</li> <li>• Project Safe Point: Albany Med Emergency Department physicians collaborate with Catholic Charities to ensure patients are seen the day after an opioid-related ED visit</li> <li>• Various opioid-related research efforts through Albany Medical College</li> <li>• Lead role in community-based opioid use disorder education, working with law enforcement and government agencies</li> </ul>
<b>Albany County Department of Children, Youth and Families</b>	<ul style="list-style-type: none"> <li>• Children’s Mental Health Clinic</li> <li>• Case management</li> <li>• Single Point of Access (SPOA)</li> <li>• Child Forensic Services</li> <li>• Parent Partners</li> </ul>	

<b>Substance Use and Mental Health</b>		
<b>Organization</b>	<b>Albany County Assets</b>	<b>Rensselaer County Assets</b>
<b>Albany County Department of Health</b>	<ul style="list-style-type: none"> <li>• Opioid Use Disorder (OUD) surveillance</li> <li>• Community based education</li> <li>• Naloxone Housing Units – units placed throughout county</li> <li>• Naloxone Kits</li> </ul>	
<b>Albany County Department of Mental Health</b>	<ul style="list-style-type: none"> <li>• Assertive Community Treatment (ACT) Program</li> <li>• Health Home Care Management Services</li> <li>• Adult Forensic Services</li> <li>• Community Services Board</li> <li>• Substance Abuse Services</li> <li>• Adult Treatment Clinic</li> <li>• Opioid Prevention Training</li> <li>• Single Point of Access (SPOA)</li> <li>• Case Management Services</li> <li>• Mobile Outreach Treatment Overdose Response (M.O.T.O.R)</li> </ul>	
<b>Albany County Sheriff's Office</b>	<ul style="list-style-type: none"> <li>• Sheriff's Heroin Addictions Recovery Program (SHARP)</li> <li>• STOP-DWI</li> </ul>	
<b>American Foundation for Suicide Prevention</b>	<ul style="list-style-type: none"> <li>• Grief Support Groups</li> </ul>	<ul style="list-style-type: none"> <li>• Grief Support Groups</li> </ul>



Substance Use and Mental Health		
Organization	Albany County Assets	Rensselaer County Assets
<b>Capital Area Peer Services</b>	<ul style="list-style-type: none"> <li>• Peer-run agency serving adults recovering from mental illness</li> <li>• Self-help and peer support groups</li> <li>• Benefits counseling</li> <li>• CARELine: 518-427-5056 x115 – confidential non-crisis peer-run “warmline”</li> </ul>	
<b>Capital Counseling</b>	<ul style="list-style-type: none"> <li>• Inpatient and Outpatient counseling services</li> <li>• Phone-based clinical office support and case management</li> <li>• Referral Services</li> </ul>	<ul style="list-style-type: none"> <li>• Inpatient and Outpatient counseling services</li> <li>• Phone-based clinical office support and case management</li> <li>• Referral Services</li> </ul>
<b>Capital District Behavioral Health</b>	<ul style="list-style-type: none"> <li>• Counseling for all ages</li> <li>• Family, couples, and individual counseling</li> </ul>	<ul style="list-style-type: none"> <li>• Counseling for all ages</li> <li>• Family, couples, and individual counseling</li> </ul>
<b>Capital District Psychiatric Center</b>	<ul style="list-style-type: none"> <li>• Child and Adolescent Outpatient Program Adult outpatient clinics</li> <li>• Adult community residences</li> <li>• Inpatient treatment programs</li> </ul>	<ul style="list-style-type: none"> <li>• Crisis Center – Intervention</li> <li>• Inpatient Treatment Programs (18 years old and older)</li> <li>• Adult Community Residences (18 years old and older)</li> <li>• Child &amp; Adolescent Outpatient Program (Up to the age of 18)</li> </ul>

<b>Substance Use and Mental Health</b>		
<b>Organization</b>	<b>Albany County Assets</b>	<b>Rensselaer County Assets</b>
<b>Capital District Physicians Health Plan</b>	<ul style="list-style-type: none"> <li>• Access and Triage: 24-hour telephonic behavioral health assessment, triage and referral services for CDPHP members. Services including inpatient mental health, inpatient detox and substance abuse rehab, ambulatory opioid detox, partial hospital and intensive outpatient, outpatient mental health and substance abuse. Effective 7/1/2016, administration of NYS Medicaid HARP services.</li> <li>• Behavioral health and medical case management, providing coordination of care across the continuum of treatment.</li> <li>• Utilization Management: Application of medical necessity criteria to assure members receive the appropriate levels of treatment.</li> </ul>	<ul style="list-style-type: none"> <li>• Access and Triage: 24-hour telephonic behavioral health assessment, triage and referral services for CDPHP members. Services including inpatient mental health, inpatient detox and substance abuse rehab, ambulatory opioid detox, partial hospital and intensive outpatient, outpatient mental health and substance abuse. Effective 7/1/2016, administration of NYS Medicaid HARP services.</li> <li>• Behavioral health and medical case management, providing coordination of care across the continuum of treatment.</li> <li>• Utilization Management: Application of medical necessity criteria to assure members receive the appropriate levels of treatment.</li> </ul>



Substance Use and Mental Health		
Organization	Albany County Assets	Rensselaer County Assets
<b>Capital District Tobacco-Free Coalition</b>	<ul style="list-style-type: none"> <li>• Comprehensive assistance to BH agencies in Albany County to support tobacco-free living by making their property tobacco-free. Assistance includes:               <ul style="list-style-type: none"> <li>○ Telephone, email and in-person technical assistance</li> <li>○ Presentations and information sessions</li> <li>○ Supportive materials and resources for both staff and consumers</li> <li>○ Sample policies, employee/consumer outreach materials, and FAQs</li> <li>○ Timeline development and implementation</li> <li>○ No-cost tobacco-free signage</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Comprehensive assistance to BH agencies in Albany County to support tobacco-free living by making their property tobacco-free. Assistance includes:               <ul style="list-style-type: none"> <li>○ Telephone, email and in-person technical assistance</li> <li>○ Presentations and information sessions</li> <li>○ Supportive materials and resources for both staff and consumers</li> <li>○ Sample policies, employee/consumer outreach materials, and FAQs</li> <li>○ Timeline development and implementation</li> <li>○ No-cost tobacco-free signage</li> </ul> </li> </ul>
<b>Capital Region BOCES</b>	<ul style="list-style-type: none"> <li>• Substance Abuse Education &amp; Prevention Services</li> </ul>	
<b>Catholic Charities Care Coordination Services</b>	<ul style="list-style-type: none"> <li>• Harm Reduction Services through drop in and by appointment in the community including: Syringe Exchange, Risk Reduction Education, Overdose Training w/Naloxone, HIV/HCV Screening and testing, Substance Use Treatment Referrals, Wound Care, and Drug Testing.</li> </ul>	<ul style="list-style-type: none"> <li>• Harm Reduction Services through drop in and by appointment in the community including: Syringe Exchange, Risk Reduction Education, Overdose Training w/Naloxone, HIV/HCV Screening and testing, Substance Use Treatment Referrals, Wound Care, and Drug Testing.</li> </ul>
<b>Center for Disability Services</b>	<ul style="list-style-type: none"> <li>• Counseling</li> <li>• Family Services</li> </ul>	<ul style="list-style-type: none"> <li>• Counseling</li> <li>• Family Services</li> </ul>

<b>Substance Use and Mental Health</b>		
<b>Organization</b>	<b>Albany County Assets</b>	<b>Rensselaer County Assets</b>
<b>The Community Hospice</b>	<ul style="list-style-type: none"> <li>• Counseling – Individual or family grief counseling</li> <li>• Support Groups – for adults</li> <li>• Wave Riders – weekly support group for grieving families with children</li> <li>• Camp Erin – free weekend overnight camp for grieving children 6-17yo</li> </ul>	<ul style="list-style-type: none"> <li>• Counseling – Individual or family grief counseling</li> <li>• Support Groups – for adults</li> <li>• Wave Riders – weekly support group for grieving families with children</li> <li>• Camp Erin – free weekend overnight camp for grieving children 6-17yo</li> </ul>
<b>Conifer Park Inc.</b>		<ul style="list-style-type: none"> <li>• Inpatient Rehabilitation Program (regional) - Treatment addresses the individual's drug and/or alcohol use and any associated medical, psychological, social, vocational or legal problems.</li> <li>• Medically supervised detoxification and crisis counseling services (regional) to patients on our withdrawal and stabilization unit.</li> <li>• Troy - Outpatient Clinic services, Methadone maintenance; Buprenorphine induction and maintenance; Professionals group – substance use treatment for professionals having credential that is in jeopardy.</li> </ul>



Substance Use and Mental Health		
Organization	Albany County Assets	Rensselaer County Assets
<b>Ellis Hospital</b>	<ul style="list-style-type: none"> <li>• Crisis Intervention</li> <li>• Outpatient Child and Adolescent Psychiatry Department – Counseling, initial psychiatric assessments with diagnosis, medication management, psychotherapy, consultation/collateral services for schools and other professional agencies, wellness planning, community education</li> <li>• Inpatient Care</li> <li>• Comfort Room</li> <li>• Personalized recovery-oriented services for adults</li> <li>• Peer advocacy Program</li> <li>• Case Management and Family Support</li> </ul>	
<b>Equinox</b>	<ul style="list-style-type: none"> <li>• Residential mental health services</li> <li>• Outpatient Clinic</li> </ul>	
<b>Hope House: Addiction Treatment Center</b>		
<b>Hospitality House</b>	<ul style="list-style-type: none"> <li>• Residential treatment program for substance use disorders</li> </ul>	

<b>Substance Use and Mental Health</b>		
<b>Organization</b>	<b>Albany County Assets</b>	<b>Rensselaer County Assets</b>
<b>Hudson Mohawk Recovery Center/Hope House Inc.</b>		<ul style="list-style-type: none"> <li>• Outpatient Services               <ul style="list-style-type: none"> <li>○ Troy</li> <li>○ East Greenbush</li> <li>○ Hoosick Falls</li> </ul> </li> <li>• Day Treatment               <ul style="list-style-type: none"> <li>○ Troy</li> </ul> </li> <li>• Adolescent Services               <ul style="list-style-type: none"> <li>○ Troy</li> <li>○ East Greenbush</li> </ul> </li> <li>• Specialized Services: PAT Program, Evening Intensive Program, Adolescent Program, Women’s Group, Vocational Services</li> <li>• Gambling Services</li> <li>• Education Programs: Drinking Driving Program/Project Save, Batterers’ Intervention Program, Educate Youth Program</li> </ul>
<b>In Our Own Voices</b>	<ul style="list-style-type: none"> <li>• TransCare – Voices of Unity (support group), individual advocacy, testing referrals, connection to care, legal services and other needs related to health and well-being</li> <li>• National LGBT POC Health Summit – Education</li> <li>• Support Groups</li> </ul>	<ul style="list-style-type: none"> <li>• TransCare – Voices of Unity (support group), individual advocacy, testing referrals, connection to care, legal services and other needs related to health and well-being</li> <li>• National LGBT POC Health Summit – Education</li> <li>• Support Groups</li> </ul>
<b>Joseph House Shelter Inc.</b>	<ul style="list-style-type: none"> <li>• Outreach Services Program</li> </ul>	<ul style="list-style-type: none"> <li>• Outreach Services Program</li> <li>• Homeless Services</li> <li>• Permanent Supportive Housing: The Lansing Inn, the Hill Street Inn, Kendal House, the Bethune Program</li> </ul>



Substance Use and Mental Health		
Organization	Albany County Assets	Rensselaer County Assets
<b>Karner Psychological Associates</b>	<ul style="list-style-type: none"> <li>• Psycho-educational group therapy</li> <li>• Specialty groups for mental health education</li> <li>• Life coaching</li> <li>• Educational Services</li> <li>• Counseling</li> </ul>	<ul style="list-style-type: none"> <li>• Psycho-educational group therapy</li> <li>• Specialty groups for mental health education</li> <li>• Life coaching</li> <li>• Educational Services</li> <li>• Counseling</li> </ul>
<b>LaSalle School for Boys</b>	<ul style="list-style-type: none"> <li>• OASAS licensed Chemical Dependency Treatment Clinic</li> <li>• Transitional Independent Living Program</li> <li>• Supervised Independent Living Program</li> <li>• Day educational and clinical services</li> </ul>	<ul style="list-style-type: none"> <li>• OASAS licensed Chemical Dependency Treatment Clinic</li> <li>• Transitional Independent Living Program</li> <li>• Supervised Independent Living Program</li> <li>• Day educational and clinical services</li> </ul>
<b>Mental Health Empowerment Exchange</b>		<ul style="list-style-type: none"> <li>• One-on-One Peer Support</li> <li>• Advocacy Services</li> <li>• Holistic Paths to Wellness</li> <li>• Peer Specialist Training</li> <li>• Peer Support Warmline</li> <li>• Creative Community Connections</li> <li>• Volunteer Opportunities</li> </ul>
<b>Mental Health Empowerment Project</b>	<ul style="list-style-type: none"> <li>• State-wide Skill Building Workshops for people who use mental health services</li> <li>• Direct Peer Support Services</li> </ul>	
<b>Narcotics Anonymous</b>	<ul style="list-style-type: none"> <li>• Addiction recovery services</li> </ul>	<ul style="list-style-type: none"> <li>• Addiction recovery services</li> </ul>

Substance Use and Mental Health		
Organization	Albany County Assets	Rensselaer County Assets
<b>National Alliance on Mental Illness (NAMI) in NYS - Capital Region</b>	<ul style="list-style-type: none"> <li>• Mental Health Education               <ul style="list-style-type: none"> <li>○ Education Classes: NAMI Basics OnDemand, NAMI Family-to-Family, NAMI Homefront, NAMI Peer-to-Peer, NAMI Provider</li> </ul> </li> <li>• Presentations               <ul style="list-style-type: none"> <li>○ NAMI Ending the Silence, NAMI Family &amp; Friends, NAMI In Our Own Voice, NAMI Sharing Hope, NAMI Compartiendo Esperanza, NAMI Sharing Your Story with Law Enforcement</li> </ul> </li> <li>• Outreach, Advocacy &amp; Wellness               <ul style="list-style-type: none"> <li>○ NAMI Hearts + Mind, NAMI Smarts for Advocacy, NAMI FaithNet</li> </ul> </li> <li>• Support Groups:               <ul style="list-style-type: none"> <li>○ Los Grupos De Apoyo, NAMI Connection, NAMI Family Support Group, Together We Care. Together We Share</li> </ul> </li> <li>• NAMI Helpline               <ul style="list-style-type: none"> <li>○ Available Monday through Friday, 10:00 AM to 10:00 PM ET</li> </ul> </li> <li>• PROS - Personal Recovery Oriented Services serving multiple counties</li> <li>• The OASAS program at Northeast Career Planning provides services to individuals with Substance Use Disorders who are actively engaged in recovery</li> </ul>	<ul style="list-style-type: none"> <li>• Mental Health Education               <ul style="list-style-type: none"> <li>○ Education Classes: NAMI Basics OnDemand, NAMI Family-to-Family, NAMI Homefront, NAMI Peer-to-Peer, NAMI Provider</li> </ul> </li> <li>• Presentations               <ul style="list-style-type: none"> <li>○ NAMI Ending the Silence, NAMI Family &amp; Friends, NAMI In Our Own Voice, NAMI Sharing Hope, NAMI Compartiendo Esperanza, NAMI Sharing Your Story with Law Enforcement</li> </ul> </li> <li>• Outreach, Advocacy &amp; Wellness               <ul style="list-style-type: none"> <li>○ NAMI Hearts + Mind, NAMI Smarts for Advocacy, NAMI FaithNet</li> </ul> </li> <li>• Support Groups:               <ul style="list-style-type: none"> <li>○ Los Grupos De Apoyo, NAMI Connection, NAMI Family Support Group, Together We Care. Together We Share</li> </ul> </li> <li>• NAMI Helpline               <ul style="list-style-type: none"> <li>○ Available Monday through Friday, 10:00 AM to 10:00 PM ET</li> </ul> </li> <li>• PROS - Personal Recovery Oriented Services serving multiple counties</li> <li>• The OASAS program at Northeast Career Planning provides services to individuals with Substance Use Disorders who are actively engaged in recovery</li> </ul>



Substance Use and Mental Health		
Organization	Albany County Assets	Rensselaer County Assets
<p><b>National Alliance on Mental Illness (NAMI) in NYS - Capital Region (continued)</b></p>	<ul style="list-style-type: none"> <li>• Work with 6 treatment providers at 11 different treatment and residential settings in Rensselaer, Schenectady and Albany Counties</li> <li>• Promoting recovery through employment and range from employment preparation and skill development to job placement, job saves and job retention</li> </ul>	<ul style="list-style-type: none"> <li>• Work with 6 treatment providers at 11 different treatment and residential settings in Rensselaer, Schenectady and Albany Counties</li> <li>• Promoting recovery through employment and range from employment preparation and skill development to job placement, job saves and job retention</li> </ul>
<p><b>Northern Rivers Family Services</b></p>	<ul style="list-style-type: none"> <li>• Albany County - serving children and Youth only</li> <li>• Services provide emotional, psychiatric and behavioral crisis interventions in a range of community settings</li> <li>• Coordinated Care and Community Solutions</li> <li>• Behavioral Health Services – Assertive community treatment, crisis stabilization services, home based crisis intervention, school based behavioral health</li> <li>• Residential and Foster Care Services</li> <li>• Education</li> <li>• SATRI Training and Research</li> <li>• Parsons – Outpatient mental health services</li> </ul>	<ul style="list-style-type: none"> <li>• Rensselaer, Schenectady, Saratoga, Warren and Washington counties - serving children, youth and adults</li> <li>• Services provide emotional, psychiatric and behavioral crisis interventions in a range of community settings</li> <li>• Coordinated Care and Community Solutions</li> <li>• Behavioral Health Services – Assertive community treatment, crisis stabilization services, home based crisis intervention, school based behavioral health</li> <li>• Residential and Foster Care Services</li> <li>• Education</li> <li>• SATRI Training and Research</li> <li>• Parsons – Outpatient mental health services</li> </ul>
<p><b>Pearl Counseling Center, Inc.</b></p>	<ul style="list-style-type: none"> <li>• Individual, couple, group and family counseling services of people impacted by substance abuse</li> </ul>	<ul style="list-style-type: none"> <li>• Individual, couple, group and family counseling services of people impacted by substance abuse</li> </ul>

<b>Substance Use and Mental Health</b>		
<b>Organization</b>	<b>Albany County Assets</b>	<b>Rensselaer County Assets</b>
<b>Pinnacle Place Behavioral Health</b>	<ul style="list-style-type: none"> <li>• Medication Management Psychiatric services</li> <li>• Therapy – Individual, couples, group and family counseling</li> <li>• Ancillary Services – Tai chi, Yoga</li> <li>• Anxiety class weekly</li> <li>• Hypnosis</li> </ul>	<ul style="list-style-type: none"> <li>• Medication Management Psychiatric services</li> <li>• Therapy – Individual, couples, group and family counseling</li> <li>• Ancillary Services – Tai chi, Yoga</li> <li>• Anxiety class weekly</li> <li>• Hypnosis</li> </ul>
<b>The Pride Center of the Capital Region</b>	<ul style="list-style-type: none"> <li>• LGBTG+ Crisis Counseling</li> <li>• Training and educational services on mental health</li> <li>• Referral Services</li> <li>• Pride events</li> </ul>	<ul style="list-style-type: none"> <li>• LGBTG+ Crisis Counseling</li> <li>• Training and educational services on mental health</li> <li>• Referral Services</li> <li>• Pride events</li> </ul>
<b>PROMESA- Camino Nuevo (New Path)</b>	<ul style="list-style-type: none"> <li>• Bilingual Outpatient Clinic - offering MOUD – methadone, naltrexone and buprenorphine</li> </ul>	
<b>Rehabilitation Support Services (RSS)</b>	<ul style="list-style-type: none"> <li>• Residential group homes</li> <li>• Licensed and supported apartment living</li> <li>• Care coordination</li> <li>• Personalized recovery-oriented services (PROS)</li> <li>• Treatment</li> <li>• Crisis services/respice services</li> </ul>	<ul style="list-style-type: none"> <li>• Care Coordination: Health, Behavioral Health, Social Educational, other Services &amp; Supports</li> <li>• Personal Recovery Oriented Services (PROS)</li> <li>• Outpatient Mental Health Clinics</li> <li>• Transition Support Teams</li> <li>• Crisis Services: Temporary, But Active and Supportive.</li> </ul>



Substance Use and Mental Health		
Organization	Albany County Assets	Rensselaer County Assets
Rensselaer County Department of Health (RCDOH)		<ul style="list-style-type: none"> <li>• Naloxone Now for curbside delivery of Narcan to your home Monday-Friday, 9:00 AM to 5:00 PM. Requests are delivered within 24 hours. Text “Narcan” to 21000 to make a request. (can deliver to other counties or offer the individual to pick up the Narcan from RCDOH)</li> <li>• Public Health Detailing for the Naloxone Co-Payment Assistance Program (N-CAP) at pharmacies located in Rensselaer County.</li> <li>• Recovery Helpline: 1-833-HOPE-123 or 1-833-467-3123 to receive information, resources or referrals for yourself or anyone needing help with substance abuse and recovery. Open 7 days a week between 9:00 AM to 9:00 PM, operated by volunteers.</li> <li>• Community Narcan Trainings via Zoom or in-person</li> <li>• Recovery Support Services Guide:             <ul style="list-style-type: none"> <li>○ <a href="https://www.canva.com/design/DAGv-malUMA/bcrD47unknFRDgpbst47Fg/view?utm_content=DAGv-malUMA&amp;utm_campaign=designshare&amp;utm_medium=link&amp;utm_source=viewer">https://www.canva.com/design/DAGv-malUMA/bcrD47unknFRDgpbst47Fg/view?utm_content=DAGv-malUMA&amp;utm_campaign=designshare&amp;utm_medium=link&amp;utm_source=viewer</a></li> </ul> </li> <li>• Naloxbox Locations:             <ul style="list-style-type: none"> <li>○ <a href="https://www.canva.com/design/DAG1lpdj1cl/2XZZzm1ubbdSVruAPWAakQ/view?utm_content=DAG1lpdj1cl&amp;utm_campaign=designshare&amp;utm_medium=link&amp;utm_source=viewer">https://www.canva.com/design/DAG1lpdj1cl/2XZZzm1ubbdSVruAPWAakQ/view?utm_content=DAG1lpdj1cl&amp;utm_campaign=designshare&amp;utm_medium=link&amp;utm_source=viewer</a></li> </ul> </li> </ul>



Substance Use and Mental Health		
Organization	Albany County Assets	Rensselaer County Assets
Rensselaer County Department of Mental Health		<ul style="list-style-type: none"> <li>• <b>Children &amp; Adolescents Outpatient Clinic</b> – serving children &amp; youth up to age 21 years old and their families - (several school satellite clinics) &amp; a satellite at Community Care Pediatrics – Troy. Offering comprehensive assessment, diagnostic evaluation, individualized treatment planning, medication monitoring, psychological evaluation, and individual, family, and group therapy, telehealth and psychological testing.</li> <li>• <b>Care Coordination for Children and Youth with Severe Emotional Disturbance</b> – serving the highest acuity children and youth. The goal of the program is to coordinate care in order to decrease the need for emergency dept visits, inpatient hospitalization and out of home placement. Support and linkage to community resources offered.</li> <li>• <b>Adult Outpatient Treatment in City of Rensselaer/Village of Hoosick Falls</b> – serving adults with mental illness in rural Rensselaer County. Services available include Crisis intervention, diagnostic assessment, Individual, family and group therapy, medication management, nursing services, psychological testing, and telehealth options.</li> </ul>



Substance Use and Mental Health		
Organization	Albany County Assets	Rensselaer County Assets
Rensselaer County Mental Health (Continued)		<ul style="list-style-type: none"> <li>• <b>Care Coordination services for Adults</b> – serving the highest acuity adults. Care Coordinators work to access services based upon the individual’s needs for: mental health, physical health, vocational, financial, housing, and social services. This program strives to coordinate the total care of each person resulting in a decreased need to access emergency dept visits and/or inpatient care.</li> <li>• <b>Court Consultation</b> – evaluations for Rensselaer County Family Court, ordered by the Court.</li> <li>• <b>Forensic Services</b> – satellite clinic at Rensselaer County Correctional Facility – providing mental health assessment, treatment, psychiatric evaluation, medication management &amp; discharge planning; assessments for Vivitrol</li> <li>• <b>60+ outreach and support</b> – A team of Social Worker Aides and Care Coordinators offers support to persons age 60+ years old residing in the communities of the county and experiencing mental illness or emotional distress</li> <li>• <b>Outreach Social Worker</b> – ensures adults with co-occurring psychiatric and substance abuse disorders, disconnected from care, have access to the array of services to meet their needs. Offering outreach, assessment, and linkages to community resources.</li> </ul>

Substance Use and Mental Health		
Organization	Albany County Assets	Rensselaer County Assets
Rensselaer County Mental Health (Continued)		<ul style="list-style-type: none"> <li>• <b>Substance Abuse Prevention Services</b> – school and community-based education includes evidence-based curriculums, prevention counseling, community coalition support, and linkage to treatment services</li> <li>• <b>Single Point of Access</b> – SPOA assists with access to adult residential programs funded by NYS Office of Mental Health and access to care management services (children and youth care coordination)</li> <li>• <b>Certified Recovery Peer Advocate</b> – offers recovery coaching, support, linkages to substance abuse services/self-help while leveraging lived experience with addiction</li> <li>• <b>Mental Health Probation Officer</b> – funded to be at Rensselaer County Probation Department</li> <li>• <b>CASAC at RCDSS</b> – contract provider for Rensselaer County Department of Social Services, to perform substance abuse evals, treatment linkages, and monitoring</li> </ul>
St. Catherine's Center for Children	<ul style="list-style-type: none"> <li>• Child Services: residential, educational, foster care, kinship care</li> <li>• Family Services: child and family treatment support, home and community based, <i>Stronger Together</i> services</li> </ul>	<ul style="list-style-type: none"> <li>• Child Services</li> <li>• Family Services</li> <li>• Homeless &amp; Housing Services</li> <li>• Community Outreach</li> <li>• Health &amp; Nutrition Services</li> </ul>



Substance Use and Mental Health		
Organization	Albany County Assets	Rensselaer County Assets
<p><b>St. Peter’s Health Partners – Troy Acute Department</b></p>	<ul style="list-style-type: none"> <li>• 63 inpatient psychiatric beds across three units at Samaritan Hospital with specialty units for dual diagnosis and geriatric psychiatry</li> <li>• Emergency psychiatric evaluation through a dedicated crisis service at the Samaritan hospital Emergency Room</li> <li>• Health Home services across Albany, Schenectady and Rensselaer Counties to provide care coordination across medical, behavioral and social services</li> <li>• 20 Inpatient Substance Abuse Rehab beds at St. Mary's Hospital</li> </ul>	<ul style="list-style-type: none"> <li>• 63 inpatient psychiatric beds across three units at Samaritan Hospital with specialty units for dual diagnosis and geriatric psychiatry</li> <li>• Emergency psychiatric evaluation through a dedicated crisis service at the Samaritan hospital Emergency Room</li> <li>• Outpatient Clinic serving approximately 2,300 individuals in need of psychiatry, counseling, groups, nursing</li> <li>• Health Home services across Albany, Schenectady and Rensselaer Counties to provide care coordination across medical, behavioral and social services</li> <li>• Samaritan PROS located at 1801 Sixth Avenue providing Personalized Recovery Oriented Services for individuals with mental illness</li> <li>• 20 Inpatient Substance Abuse Rehab beds at St. Mary's Hospital</li> <li>• Ambulatory Detox located at the former St Mary’s Hospital</li> <li>• Consult Liaison Psychiatry services at Samaritan, and Albany Memorial Hospitals.</li> </ul>
<p><b>St. Peter’s SPARC</b></p>	<ul style="list-style-type: none"> <li>• Inpatient psychiatric consultation services</li> <li>• Ambulatory Detox</li> <li>• 4 Outpatient addiction clinic services and 1 outpatient psych clinic</li> <li>• Emergency Shelter services</li> </ul>	

<b>Substance Use and Mental Health</b>		
<b>Organization</b>	<b>Albany County Assets</b>	<b>Rensselaer County Assets</b>
<b>Second Chance Opportunities, Inc.</b>	<ul style="list-style-type: none"> <li>• Supportive services to people in recovery from substance use disorder</li> </ul>	
<b>Trinity Alliance of the Capital Region</b>	<p>Trinity Prevention Program</p> <ul style="list-style-type: none"> <li>• Grief counseling</li> <li>• Crisis intervention</li> <li>• Couple's counseling</li> <li>• Anger management for children</li> </ul>	
<b>Unity House Inc.</b>		<ul style="list-style-type: none"> <li>• Transitional Housing &amp; Support <ul style="list-style-type: none"> <li>○ Community Residences and Transitional Apartment Services (TAS)</li> </ul> </li> <li>• Permanent Housing &amp; Support <ul style="list-style-type: none"> <li>○ Community Housing, Supportive housing for people living with serious mental illness, housing and support for people living with HIV/AIDS, young adult/MICA case management services, Health Home Care Coordination</li> </ul> </li> <li>• Assertive Community Treatment Team (ACT)</li> <li>• Residential Crisis Support Space <ul style="list-style-type: none"> <li>○ 6 private bedrooms</li> <li>○ Rensselaer, Albany, Schenectady, and Saratoga Counties</li> <li>○ Maximum stay is 28 days, staff on-site 24/7</li> <li>○ It is a place for a reset for individuals that are experiencing mental health symptoms impacting their daily life at risk of hospitalization</li> </ul> </li> </ul>



Substance Use and Mental Health		
Organization	Albany County Assets	Rensselaer County Assets
<b>Whitney Young Health Center</b>	<ul style="list-style-type: none"> <li>• Addictions Care</li> <li>• Integrated Primary Health and Behavioral Health Care</li> <li>• Mental Health Services</li> <li>• Methadone Maintenance Program</li> <li>• Opioid Treatment Program (OTP)</li> <li>• Outpatient Clinic (Formerly FACTS)</li> </ul>	<ul style="list-style-type: none"> <li>• Addictions Care</li> <li>• Integrated Primary Health and Behavioral Health Care</li> <li>• Mental Health Services</li> <li>• Methadone Maintenance Program</li> <li>• Opioid Treatment Program (OTP)</li> <li>• Outpatient Clinic (Formerly FACTS)</li> </ul>
<b>YWCA of the Greater Capital Region - Troy</b>		<ul style="list-style-type: none"> <li>• The objective of this program is to assist women with mental health issues to maintain permanent housing and to decrease hospitalizations through housing, case management and supports.</li> <li>• Single Room Occupancy (SRO) Residence: 76 single room occupancy units for homeless single women</li> <li>• Women in Transition (WIT): 14 units for transitional housing for homeless sing women and women with children. Residents receive 360-degree support.</li> <li>• Family Apartments: 4 one-bedroom on-site apartments for homeless women with children. Must have a disability to meet the criteria. Residents receive 360-degree support.</li> </ul>

## Schenectady County

### Nutrition Security, Adverse Childhood Experiences, and Preventive Services for Chronic Disease Prevention and Control

Assets and Resources for Nutrition Security, Adverse Childhood Experiences, and Preventive Services for Chronic Disease Prevention and Control	
<b>Alcoholics Anonymous</b>	<p><b>24 Hour Line</b> 518-463-0906</p> <p><b>Website:</b> <a href="http://namischenectady.org/directory.html">http://namischenectady.org/directory.html</a></p> <p><b>Description:</b> AA hotline offered by Schenectady National Alliance on Mental Illness. AA group listings</p>
<b>The American Foundation for Suicide Prevention</b>	<p><b>Phone:</b> 518-791-1544</p> <p><b>Website:</b> <a href="https://afsp.org/chapter/afsp-capital-region-new-york/">https://afsp.org/chapter/afsp-capital-region-new-york/</a></p> <p><b>Description:</b> Addresses the public health issue of suicide by educating about suicide and suicide prevention. Hosts a support group for suicide loss.</p>
<b>Bethesda House of Schenectady</b>	<p><b>Phone:</b> 518-374-7873</p> <p><b>Website:</b> <a href="https://www.bethesdaohs.org">https://www.bethesdaohs.org</a></p> <p><b>Description:</b> Services include an adult clothing room (one visit per month), free laundry services, showers, housing assistance (help finding apartments, assistance with security deposit and eviction prevention), National Grid Assistance, nutrition education, HIV/AIDS testing, veteran's resource center, free community meals, food pantry, and support groups.</p>
<b>Boys &amp; Girls Club of Schenectady</b>	<p><b>Phone:</b> MLK Elementary Program 518-898-5703</p> <p>Mont Pleasant Clubhouse      518-372-7040</p> <p>Rotterdam Clubhouse      518-355-7440</p> <p>Steinmetz Clubhouse      518-372-3620</p> <p>Yates Clubhouse      518-372-3583</p> <p><b>Website:</b> <a href="http://www.bgcschenectady.org/our-clubs">http://www.bgcschenectady.org/our-clubs</a></p> <p><b>Description:</b> Partners with youth, parents, schools and other community stakeholders to implement at least one of three approaches: academic enrichment and school engagement; targeted dropout prevention; and intensive intervention and case management.</p>



Assets and Resources for Nutrition Security, Adverse Childhood Experiences, and Preventive Services for Chronic Disease Prevention and Control	
<b>Capital Counseling</b>	<p><b>Phone:</b> 518-462-6531</p> <p><b>Website:</b> <a href="http://capitalcounseling.org/">http://capitalcounseling.org/</a></p> <p><b>Description:</b> Covers a wide variety of counseling topics; accepts Medicaid/Medicare/Fidelis.</p>
<b>Capital District Tobacco Free Communities</b>	<p><b>Phone:</b> 518-459-2388</p> <p><b>Website:</b> <a href="https://smokefreecapital.org/contact-us/">https://smokefreecapital.org/contact-us/</a></p> <p><b>Description:</b> Provides assistance to BH agencies in Albany, Rensselaer and Schenectady counties to support tobacco-free living by making their property tobacco-free.</p>
<b>Capital Roots</b>	<p><b>Phone:</b> 518-274-8685.</p> <p><b>Address:</b> 594 River Street, Troy</p> <p><b>Website:</b> <a href="https://www.capitalroots.org/whatwedo/">https://www.capitalroots.org/whatwedo/</a></p> <p><b>Description:</b> Capital Roots works to reduce the impact of poor nutrition on public health in New York’s Capital Region by organizing community gardens, providing healthy food access, offering nutritional and horticultural education for all ages and coordinating urban greening programs in Albany, Rensselaer, Schenectady and southern Saratoga Counties.</p>
<b>Catholic Charities Project Safe Point</b>	<p><b>Phone:</b> 1-866-930-4999</p> <p><b>Website:</b> <a href="http://www.projectsafepointcc.org/">http://www.projectsafepointcc.org/</a></p> <p><b>Description:</b> Serving individuals from a Harm Reduction Perspective. Providing non-judgmental person-centered care. Long standing community case management provider. Access to syringe exchange and rehabilitation readiness through Project Safepoint</p>
<b>CDPHP Health Plan</b>	<p><b>Phone:</b> 518-641-3000</p> <p><b>Website:</b> <a href="https://www.cdphp.com/">https://www.cdphp.com/</a></p> <p><b>Description:</b> Access and Triage: 24-hour telephonic behavioral health assessment, triage and referral services for CDPHP members. Services include inpatient mental health, inpatient detox and substance abuse rehab, ambulatory opioid detox, partial hospital and intensive outpatient, outpatient mental health and substance abuse.</p>

Assets and Resources for Nutrition Security, Adverse Childhood Experiences, and Preventive Services for Chronic Disease Prevention and Control															
<b>Center for Solutions</b>	<p><b>Phone:</b> 518-982-1274</p> <p><b>Website:</b> <a href="http://www.center4solutions.org/">http://www.center4solutions.org/</a></p> <p><b>Description:</b> Provides mental health services to the community, including psychotherapy, medication evaluation/management, anger management counseling, mental health assessments, and substance abuse evaluations.</p>														
<b>City Mission of Schenectady</b>	<p><b>Phone:</b> 518-346-2275</p> <p><b>Website:</b> <a href="http://citymission.com/">http://citymission.com/</a></p> <p><b>Description:</b> Bridges to Freedom is City Mission's one year discipleship and recovery program. Programs also exist for individuals attempting to reenter society after time in jail or prison.</p>														
<b>Conifer Park Inpatient and Outpatient Services</b>	<p><b>Phone:</b> 1-800-989-6446</p> <p><b>Website:</b> <a href="http://www.coniferpark.com/">http://www.coniferpark.com/</a></p> <p><b>Description:</b> In-patient and outpatient services for individuals seeking addiction recovery</p>														
<b>CVS Pharmacy</b>	<p><b>Locations:</b></p> <table> <tbody> <tr> <td>1204 Eastern Ave, Schenectady, NY 12308</td> <td>(518) 372-0250</td> </tr> <tr> <td>2037 State Street, Schenectady, NY 12304</td> <td>(518) 346-4546</td> </tr> <tr> <td>428 Balltown Rd, Schenectady, NY 12304</td> <td>(518) 346-8670</td> </tr> <tr> <td>204 Saratoga Rd, Schenectady, NY 12302</td> <td>(518) 387-3312</td> </tr> <tr> <td>1630 Chrysler Avenue, Schenectady, NY 12303</td> <td>(518) 382-5391</td> </tr> <tr> <td>3916 Carman Rd, Schenectady, NY 12303</td> <td>(518) 357-0061</td> </tr> <tr> <td>806 Saratoga Rd, Schenectady, NY 12302</td> <td>(518) 399-5135</td> </tr> </tbody> </table>	1204 Eastern Ave, Schenectady, NY 12308	(518) 372-0250	2037 State Street, Schenectady, NY 12304	(518) 346-4546	428 Balltown Rd, Schenectady, NY 12304	(518) 346-8670	204 Saratoga Rd, Schenectady, NY 12302	(518) 387-3312	1630 Chrysler Avenue, Schenectady, NY 12303	(518) 382-5391	3916 Carman Rd, Schenectady, NY 12303	(518) 357-0061	806 Saratoga Rd, Schenectady, NY 12302	(518) 399-5135
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<b>Drug and Abuse Helpline</b>	<p><b>Phone:</b> 1-800-662-4357</p> <p><b>Website:</b> <a href="https://www.samhsa.gov/find-help/national-helpline">https://www.samhsa.gov/find-help/national-helpline</a></p> <p><b>Description:</b> A free, confidential treatment referral and information service for individuals and families struggling with substance disorders.</p>														



Assets and Resources for Nutrition Security, Adverse Childhood Experiences, and Preventive Services for Chronic Disease Prevention and Control	
<p><b>Ellis Medicine</b></p>	<p><b>Main Number:</b> 518-243-4000</p> <p><b>Patient Information:</b> 518-243-4366</p> <p><b>Website:</b> <a href="http://www.ellismedicine.org/">http://www.ellismedicine.org/</a></p> <p><b>Description:</b> Emergency, inpatient, and psychiatric care. Crisis Information and Referral Hotline open 24/7. Inpatient Adult and Adolescent Mental Health facilities, outpatient Adult and Child/Adolescent (ages 4-18) Mental Health Services</p>
<p><b>Ellis Medicine Outpatient Mental Health - The Living Room - Crisis Diversion Services.</b></p>	<p><b>Phone:</b> 518-243-1523</p> <p><b>Website:</b> <a href="http://www.ellismedicine.org/services/mental-health.aspx">http://www.ellismedicine.org/services/mental-health.aspx</a></p> <p><b>Description:</b> The Living Room program is a partnership between Ellis Medicine and Rehabilitation Support Services (RSS), offering adults, 18+, walk-in services, Monday-Friday, 10am-6pm, located within the Ellis State Street Health Center at 1023 State Street. The Living Room is a safe place for guests facing mental health crises to seek help as an alternative to the Emergency Department. It is staffed by a Licensed Clinical Social Worker, Care Manager and Peer Specialist.</p>
<p><b>Family and Child Service of Schenectady</b></p>	<p><b>Phone:</b> 518-393-1369</p> <p><b>Website:</b> <a href="http://www.familyandchildservice.com/">http://www.familyandchildservice.com/</a></p> <p><b>Description:</b> Offers Medicaid service coordination, family/caregiver support services, family therapy, a yearlong employment program, the homemaker program (long term care assistance – house cleaning, medication management, etc.), and counseling services.</p>
<p><b>Fidelis Care</b></p>	<p><b>Phone:</b> 1-888-FIDELIS</p> <p><b>Website:</b> <a href="https://www.fideliscare.org/Member/Helpful-Tools/Health-Resources/Behavioral-Health">https://www.fideliscare.org/Member/Helpful-Tools/Health-Resources/Behavioral-Health</a></p> <p><b>Description:</b> Fidelis Care offers the Children's Health and Behavioral Health Program for Medicaid Managed Care members under the age of 21. This enhanced Medicaid Managed Care benefit package offers a wide range of children and family treatment support services and children's home and community-based services for qualifying members and their caregivers.</p>
<p><b>Hannaford Pharmacy</b></p>	

Assets and Resources for Nutrition Security, Adverse Childhood Experiences, and Preventive Services for Chronic Disease Prevention and Control	
<b>Hometown Health Centers</b>	<p><b>Phone:</b> 518-370-1441</p> <p><b>Website:</b> <a href="http://hometownhealthcenters.org/">http://hometownhealthcenters.org/</a></p> <p><b>Description:</b> Since 2012, Hometown Health Centers has offered a comprehensive Behavioral Health program, providing counseling, support services, substance abuse and HIV counseling to established patients. Our staff Psychiatrist and Licensed Social Worker (LMSW) offer behavioral health services to children (over the age of five) and adults.</p>
<b>HOPENY Alcoholism, Drug Abuse, and Gambling Hotline</b>	<p><b>Phone:</b> 1-877-846-7369</p> <p><b>Website:</b> <a href="https://oasas.ny.gov/treatment">https://oasas.ny.gov/treatment</a></p> <p><b>Description:</b> Provides well trained professionals to talk to, crisis intervention and motivation, information, and referrals.</p>
<b>Lange's pharmacy</b>	
<b>MVP Healthcare</b>	<p><b>Phone:</b> 800-825-5687</p> <p><b>Website:</b> <a href="https://www.mvphealthcare.com/members/health-and-wellness/behavioral-health/">https://www.mvphealthcare.com/members/health-and-wellness/behavioral-health/</a></p> <p><b>Description:</b> Information for patients on behavioral health</p>
<b>Narcotics Anonymous</b>	<p><b>Website:</b> <a href="http://na.org">http://na.org</a></p> <p><b>Description:</b> Information on how to find an NA meeting</p>
<b>National Suicide Prevention Lifeline</b>	<p><b>Phone:</b> 800-273-8255</p> <p><b>Website:</b> <a href="https://suicidepreventionlifeline.org/">https://suicidepreventionlifeline.org/</a></p>
<b>New Choices Recovery Center</b>	<p><b>Phone:</b> 518-346-4436</p> <p><b>Website:</b> <a href="http://www.newchoicesrecovery.org/">http://www.newchoicesrecovery.org/</a></p> <p><b>Description:</b> Clinical and residential services available for adults struggling with addiction. New Choices Recovery Center also has a prevention program that serves youth.</p>



Assets and Resources for Nutrition Security, Adverse Childhood Experiences, and Preventive Services for Chronic Disease Prevention and Control	
<p><b>New York State Prevention of Heroin and Prescription Drug Abuse</b></p>	<p><b>Phone:</b> 1-800-846-7369</p> <p><b>Website:</b> <a href="https://combatheroin.ny.gov/prevention">https://combatheroin.ny.gov/prevention</a></p> <p><b>Description:</b> Call or text to get help with drug addiction including heroin and opioid help. Learn the prevention services, steps to get help, and support needed to get you or a loved one back on track.</p>
<p><b>Northern Rivers Behavioral Health Services</b></p>	<p><b>Phone:</b> 518-292-5499</p> <p><b>Website:</b> <a href="https://www.northernrivers.org/our-services/behavioral-health">https://www.northernrivers.org/our-services/behavioral-health</a></p> <p><b>Description:</b> A community-based system of social work and psychiatric services designed to support the diverse range of behavioral health needs for children, adults, and families while providing opportunities for awareness, growth, empowerment, and healing. Services include behavioral health centers, mobile crisis and school-based behavioral health.</p>
<p><b>Northern Rivers Mobile Crisis Services</b></p>	<p><b>Phone:</b> 518-292-5499</p> <p><b>Description:</b> Services include- consultation and information, clinical assessment, crisis intervention and stabilization, referrals and linkages to ongoing community resources, follow-up case management, family or peer advocacy and support</p>
<p><b>Peter Young Support Program</b></p>	<p><b>Phone:</b> 518-377-2448</p> <p><b>Website:</b> <a href="http://pyhit.com/programs/">http://pyhit.com/programs/</a></p> <p><b>Description:</b> Provides case management, employment, and housing, substance abuse and counseling to establish a “glidepath to recovery.”</p>
<p><b>Planned Parenthood</b></p>	<p><b>Phone:</b> 518-374-5353</p> <p><b>Website:</b> <a href="https://www.plannedparenthood.org/health-center/new-york/schenectady/12307/schenectady-center-4192-91180">https://www.plannedparenthood.org/health-center/new-york/schenectady/12307/schenectady-center-4192-91180</a></p> <p><b>Description:</b> Depression and Anxiety Screening; Referrals to therapy; Medication treatment for people 18 years and older. Community Education programs that include linkages between victimization and substance abuse. Crisis counseling for victims of sexual assault and intimate partner violence</p>

Assets and Resources for Nutrition Security, Adverse Childhood Experiences, and Preventive Services for Chronic Disease Prevention and Control	
<b>SAFE Inc. of Schenectady</b>	<p><b>Phone:</b> 518-374-0166</p> <p><b>Website:</b> <a href="https://www.safeincfcschenectady.org/">https://www.safeincfcschenectady.org/</a></p> <p><b>Description:</b> Works with youth 16-20 providing the following: Crisis Intervention, emergency shelter, individual and/or family counseling, peer support groups, medical services, drug/alcohol counseling, GED Classes/school enrollment, vocational training, job placement, housing assistance</p>
<b>Samaritan Counseling Center</b>	<p><b>Phone:</b> 518-374-3514</p> <p><b>Website:</b> <a href="http://samaritancounselingcenter.org/">http://samaritancounselingcenter.org/</a></p> <p><b>Description:</b> Offers individual, couples, and family counseling</p>
<b>Schenectady Community Action Program</b>	<p><b>Phone:</b> 518-374-918</p> <p>913 Albany Street Schenectady, NY 12307</p> <p><b>Website:</b> <a href="http://scapny.org/">http://scapny.org/</a></p> <p><b>Description:</b> Organization that can assist with multiple challenges. Offers homelessness intervention by assisting individuals in finding permanent housing and preventing evictions. Offers housing at the Sojourn House for women with children or who are pregnant. Participates in Rapid Rehousing program (involves case management and rent assistance. Also runs the Shelter Plus Care program for homeless individuals with a mental health diagnosis, HIV/AIDS, or a substance abuse issue (assists with housing). Gives clothing vouchers for the City Mission Clothing Room. Free income tax preparation available. Also assists with multiple kinds of applications (SNAP, HEAP, etc.)</p>
<b>Sycamore Collaborative</b>	<p><b>Address:</b> 839 Albany St., Schenectady</p> <p>Mon.-Wed.-Thur.-Fri., 9-11:30 a.m. Monday, Wednesday, Friday ID's req. for every family member</p>
<b>Schenectady County ARC</b>	<p><b>Phone:</b> 518-372-8178</p> <p><b>Website:</b> <a href="http://www.arcschenectady.org/index.html">http://www.arcschenectady.org/index.html</a></p> <p><b>Description:</b> Schenectady ARC offers Article 28 Clinic and Article 16 clinical services, day services, employment services, and residential services for individuals with an intellectual or developmental disability.</p>



Assets and Resources for Nutrition Security, Adverse Childhood Experiences, and Preventive Services for Chronic Disease Prevention and Control	
<p><b>Schenectady Mental Health Associates</b></p>	<p><b>Phone:</b> 518- 374-0295</p> <p><b>Website:</b> <a href="https://smha-crown.com/schenectady-mental-health-associates-smha/">https://smha-crown.com/schenectady-mental-health-associates-smha/</a></p> <p><b>Description:</b> Offers individual, couples, marital, and family counseling. Accepts most insurance.</p>
<p><b>Schenectady County Public Health Services and Office of Community Services</b></p>	<p><b>Phone:</b> 518-386-2824</p> <p><b>Website:</b> <a href="http://www.schenectadycounty.com/publichealth">http://www.schenectadycounty.com/publichealth</a></p> <p><b>Description:</b> Schenectady County Public Health Services offers several health services, including maternal and child health services, a prevention program for lead poisoning, and programs for children with special needs. Healthy Schenectady Families is a home-visiting education program about parenting for pregnant or newly parenting individuals (must be a Schenectady resident; no income eligibility requirements). The Office of community Services contracts with a network of community providers who offer comprehensive services across disability groups which include mental health, substance use, and intellectual and developmental disabilities for the citizens of Schenectady County. The office operates the County’s adult and children’s SPOA (Single Point of Access) and AOT (Assisted Outpatient Treatment) programs.</p>
<p><b>Schenectady County Public Library System</b></p>	<p><b>Phone:</b> 518-388-4500</p> <p><b>Website:</b> <a href="http://www.scpl.org">http://www.scpl.org</a></p> <p><b>Description:</b> Provides free access to books, DVDs, and periodicals on a wide variety of health-related topics. There are nine locations in the county, which have access to a database. The database provides health related information and assistance to patrons who are trying to look up health information or looking for connections to community-based organizations.</p>
<p><b>Schenectady County Substance Use and Overdose Coalition</b></p>	<p><b>Phone:</b> 518-386-2218</p> <p><b>Description:</b> Goals of this coalition include; increasing peer and community stakeholder membership, as well as obtaining guest speakers to promote awareness of subject matters pertaining to substance use and overdose.</p>

Assets and Resources for Nutrition Security, Adverse Childhood Experiences, and Preventive Services for Chronic Disease Prevention and Control	
<b>Social Enterprise and Training Center</b>	<p><b>Phone:</b> 518-372-4100</p> <p><b>Website:</b> <a href="https://www.seatcenter.org/">https://www.seatcenter.org/</a></p> <p><b>Description:</b> SEAT exists to work alongside underrepresented young people to create a SEAT at the table in their community. Students are trained for in demand careers and careers of the future.</p>
<b>Soldier On</b>	<p><b>Phone:</b> 1-866-406-8449</p> <p><b>Website:</b> <a href="http://www.wesoldieron.org/">http://www.wesoldieron.org/</a></p> <p><b>Description:</b> Provides veterans who are homeless with emergency and transitional housing, case management, medical and mental health services, substance abuse treatment, and peer support.</p>
<b>SPARC Rotterdam</b>	<p><b>Phone:</b> 518-357-2909</p> <p><b>Website:</b> <a href="http://www.sphcs.org/AddictionRecovery/SPARC">http://www.sphcs.org/AddictionRecovery/SPARC</a></p> <p><b>Description:</b> Outpatient clinical substance use services</p>
<b>Sunnyview Rehabilitation Hospital</b>	<p><b>Phone:</b> 518-382-4500</p> <p><b>Website:</b> <a href="http://www.sphp.com/svh">http://www.sphp.com/svh</a></p> <p><b>Description:</b> 115 -bed rehabilitation hospital specializing in acute rehabilitation serving patients from across the Northeast and beyond. Comprehensive inpatient and outpatient physical therapy and rehabilitation programs, including services for people recovering from strokes and traumatic brain injuries.</p>
<b>Union Counseling Behavioral Health Center</b>	<p><b>Phone:</b> 518-374-6263</p> <p><b>Website:</b> <a href="http://unionstreetcounseling.com/">http://unionstreetcounseling.com/</a></p> <p><b>Description:</b> Outpatient mental health agency providing a wide range of services.</p>
<b>Walgreens Pharmacy</b>	<p><b>Locations:</b></p> <p>203 Eastern Ave, Schenectady, NY 12308(518) 393-4549</p> <p>1044 State St, Schenectady, NY 12307 (518) 344-7039</p> <p>1344 Gerling St, Schenectady, NY 12308 (518) 930-7357</p> <p>1320 Altamont Ave, Schenectady, NY 12303</p> <p>200 Dutch Meadows Ln, Schenectady, NY 12302 518-3447035</p>



Assets and Resources for Nutrition Security, Adverse Childhood Experiences, and Preventive Services for Chronic Disease Prevention and Control	
Walmart Pharmacy	
Young Parents United	<p><b>Phone:</b> 518-657-1311</p> <p><b>Website:</b> <a href="https://www.youngparentsunited.org/">https://www.youngparentsunited.org/</a></p> <p><b>Description:</b> The program promotes positive change among adolescent parents through empowerment, education and practical tools in order to break destructive cycles enhancing success for teen parents and their children.</p>
YWCA	<p><b>Phone:</b> 518-374-3394</p> <p><b>Website:</b> <a href="https://www.ywca-neny.org/">https://www.ywca-neny.org/</a></p> <p><b>Description:</b> Provides domestic violence shelter, advocacy, housing programs, and early learning centers.</p>

## N. 2024 Capital Region Community Health Survey Results

### Introduction

The *2024 Capital Region Community Health Survey* (survey) was collaboratively designed and distributed by Healthy Capital District and its hospital and health department partners. The aim of the survey was to identify the major needs, barriers, and concerns facing Capital Region residents. The survey was conducted online and promoted from November 6<sup>th</sup> to December 11<sup>th</sup>, 2024. The survey was also offered as a paper version in English and Spanish at a few community settings, including two hospitals and a family health center. The online version of the survey was offered as a translated page in twenty-five (25) other languages. Participants who completed the survey were given the option to enter a drawing for cash prizes if they provided their email or phone number so they could be contacted if they were randomly selected.

### Methods

Survey questions and response options were based on prior editions of this survey from 2021, 2018, 2016, and 2013. Updates to the survey were made based on resources and recommendations from the American Academy of Family Physicians, the White House, and the CDC Behavioral Risk Factor Surveillance System (BRFSS). Sociodemographic questions were included to gauge the representativeness of the surveyed sample of residents and to compare results by county, age, race, ethnicity, income level, and health insurance type, as well as by sexual orientation and gender identity. The demographic distribution of the survey sample was compared to regional population estimates from the U.S. Census Bureau and the New York State BRFSS.

Survey results are presented here as unweighted percentages of Capital Region respondents. Estimates are displayed within a 95% confidence interval, the width of which represents the uncertainty in the estimate and depends on the proportion of respondents, the population size, the sample size, and the confidence level. At the 95% confidence level, for any number of survey samples that could be drawn of Capital Region residents, it is expected that 95% of the resultant confidence intervals would contain the true proportion of residents. Results for demographic groups of interest within the Capital Region were included in this report if they were significantly different from the results for other Capital Region respondents. Differences between demographic groups were considered significant if the lower 95% confidence limit of the estimate for the demographic group of interest was greater than the upper 95% confidence limit of the estimate for other respondents.

### Results

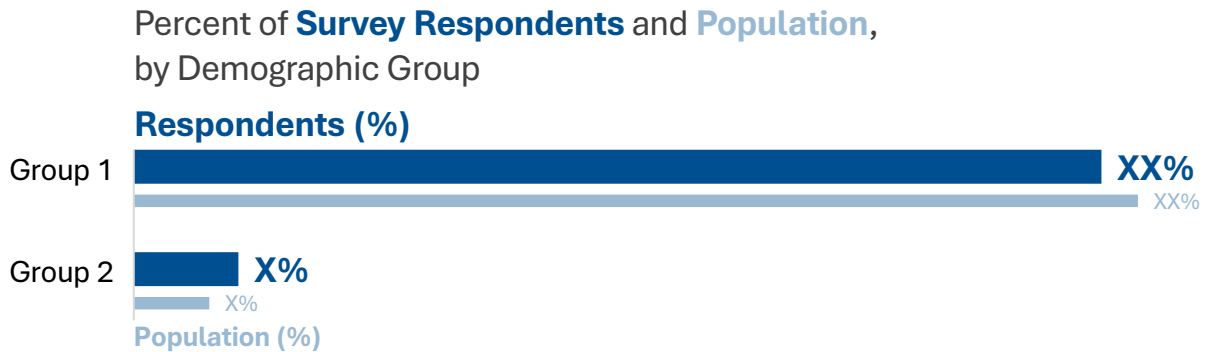
The *2024 Capital Region Community Health Survey* received 5,415 responses from individuals who indicated they live in the county of Albany (n=1,530), Columbia (n=867), Greene (n=698), Rensselaer (n=969), Saratoga (n=559), or Schenectady (n=792). An additional 405 responses were received from individuals who did not indicate their county of residence or who indicated they live in a county other than the six Capital Region counties listed above and were not counted towards the following results. The median time to complete the survey was 7 minutes and 13 seconds. 72% of those who opened the online version of the survey completed it. 4,777 respondents participated in the cash drawing. Winners were selected in a random drawing and were contacted by Healthy Capital District on December 13<sup>th</sup>, 2024. Reports with results tailored to each Capital Region county can be found [on the HCD website](#).



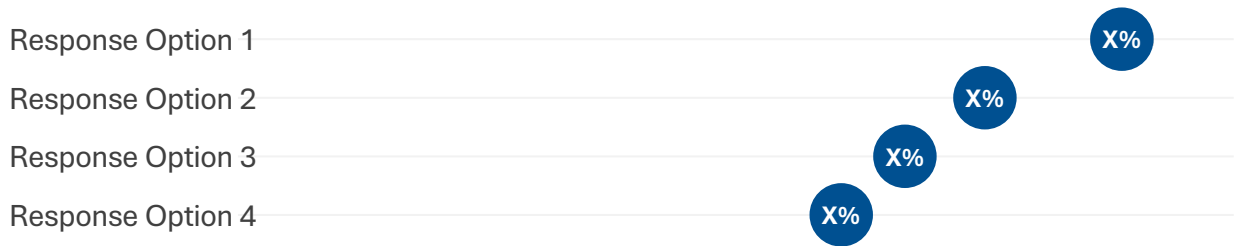
## Data Visualization Key

### Demographic Group

Percentages of Capital Region respondents, in blue, are compared to population estimates, in light blue.



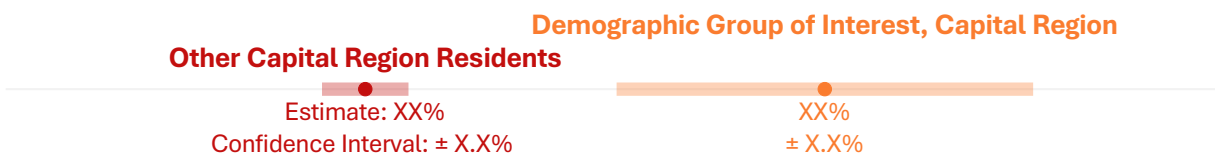
### #) Survey Question



Percentages of Capital Region respondents, in blue, are presented with 95% confidence intervals, in light grey. Confidence intervals may not be visible behind each data point.

### Significant Differences, by Region Sub-Population

#### Demographic Group of Interest

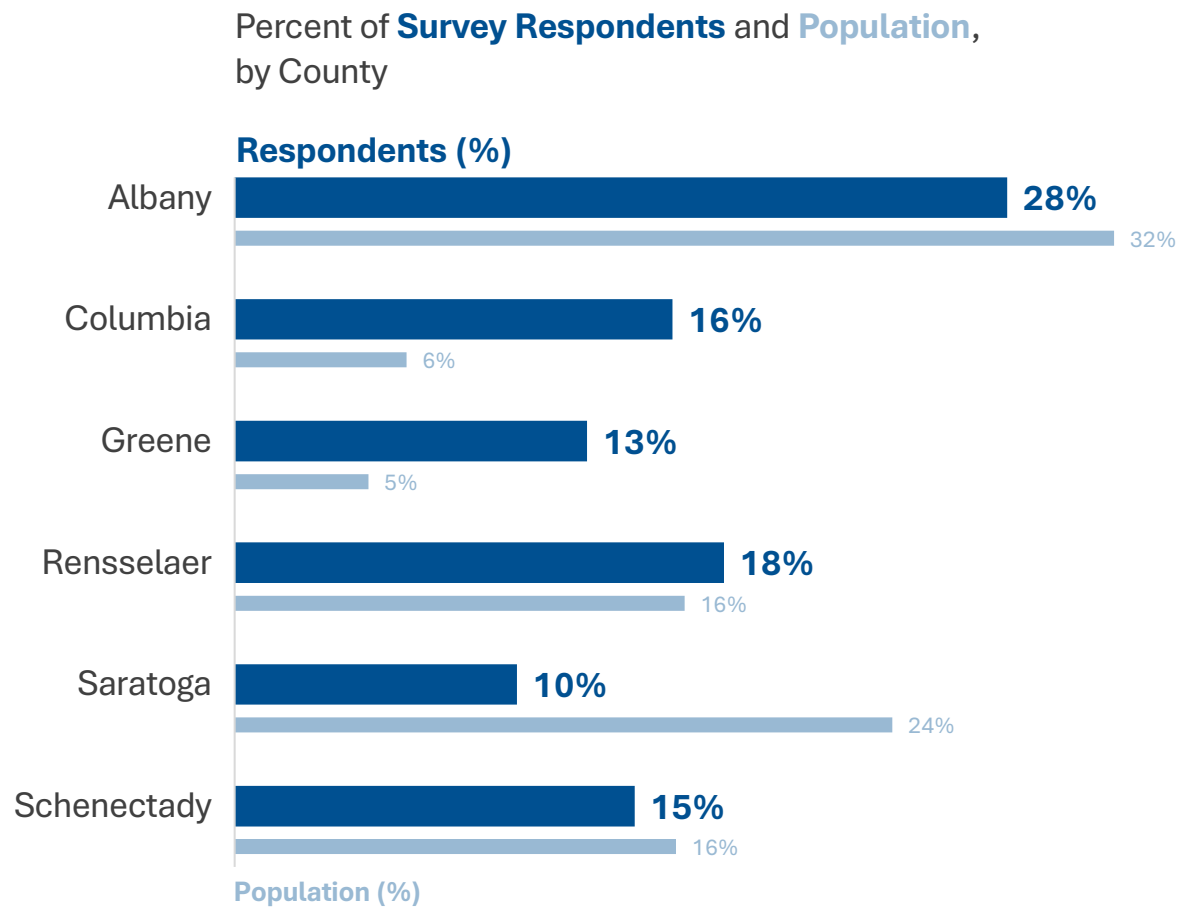


For select survey questions, percentages of Capital Region respondents within a demographic group of interest are displayed, in orange, next to percentages of other Capital Region respondents, in red. Each percentage is presented with a 95% confidence interval, in a lighter shade of the same color. Percentages are considered statistically significantly different when their confidence intervals do not overlap.

## i. Demographics

### County

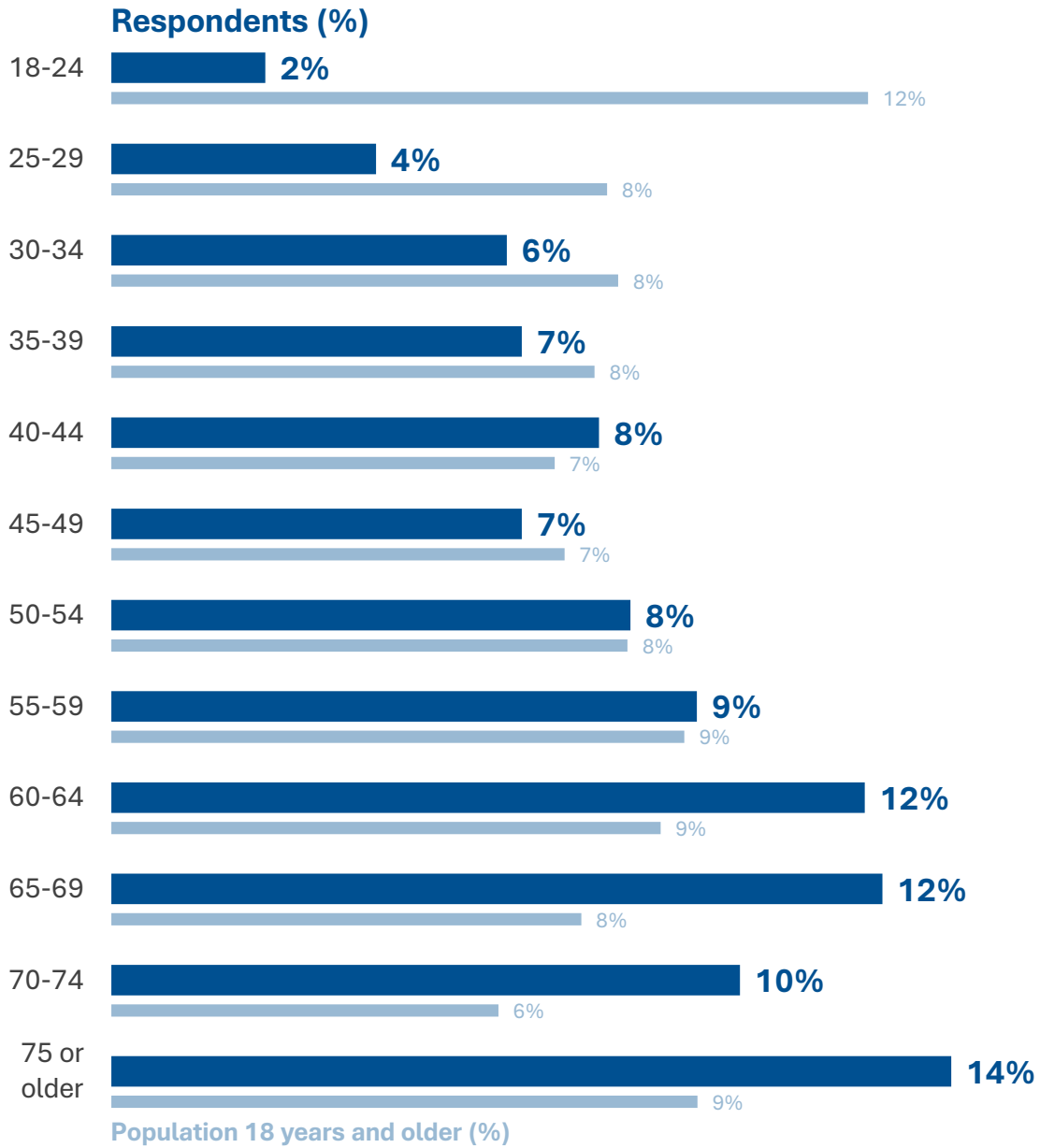
Response rates were highest among residents of Greene and Columbia counties and lowest among residents of Saratoga County. Population percentages are based on Census 2020 estimates.



**Age**

Response rates were highest among Capital Region residents over the age of 60 and lowest among residents under the age of 40. Population percentages are based on Census 2020 estimates.

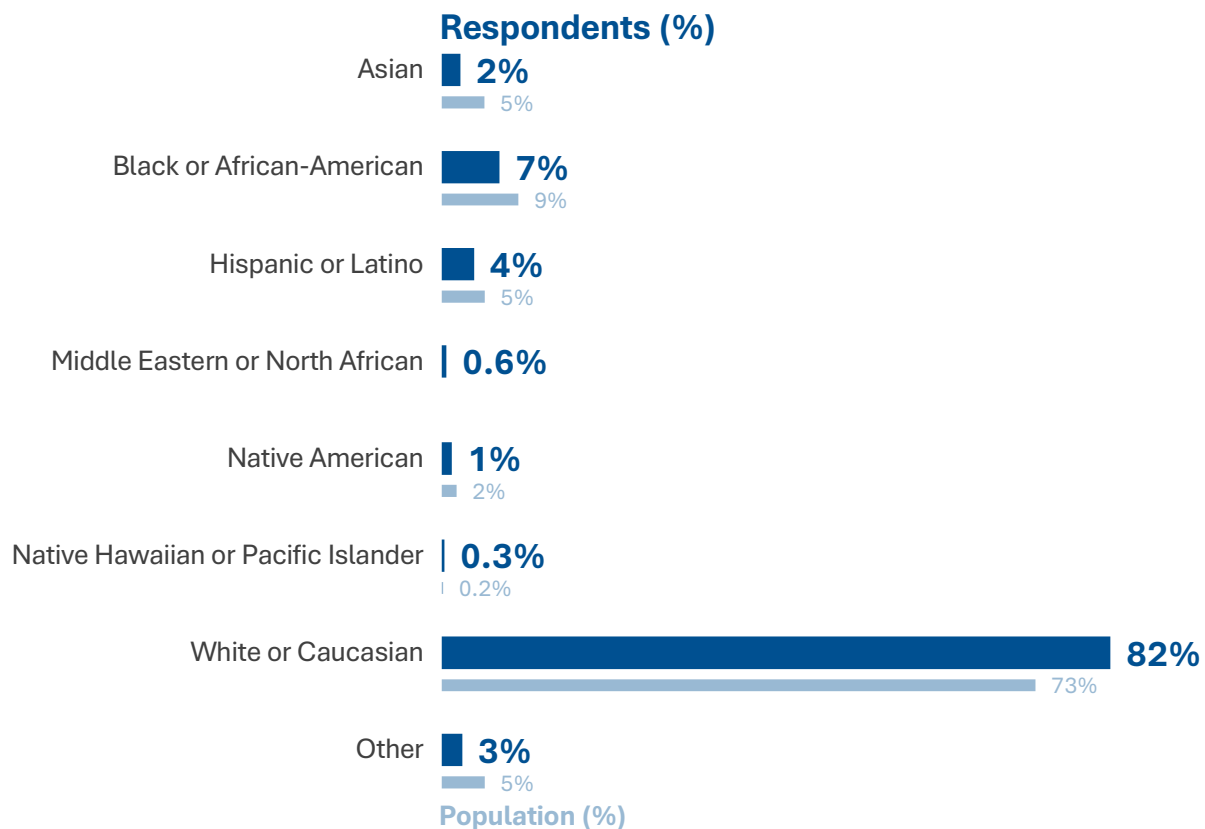
Percent of **Survey Respondents** and **Adult Population**, by Age



## Race and Ethnicity

Capital Region residents who self-identified as White/Caucasian were overrepresented, while those who identified as Asian, Black, Hispanic or Latino, or Native American were underrepresented. Capital Region residents who self-identified as Native Hawaiian or other Pacific Islander were well represented. Population percentages are based on Census 2020 estimates. Note: "Middle Eastern or North African" race was not included in the 2020 Census.

### Percent of **Survey Respondents** and **Population**, by Race/Ethnicity

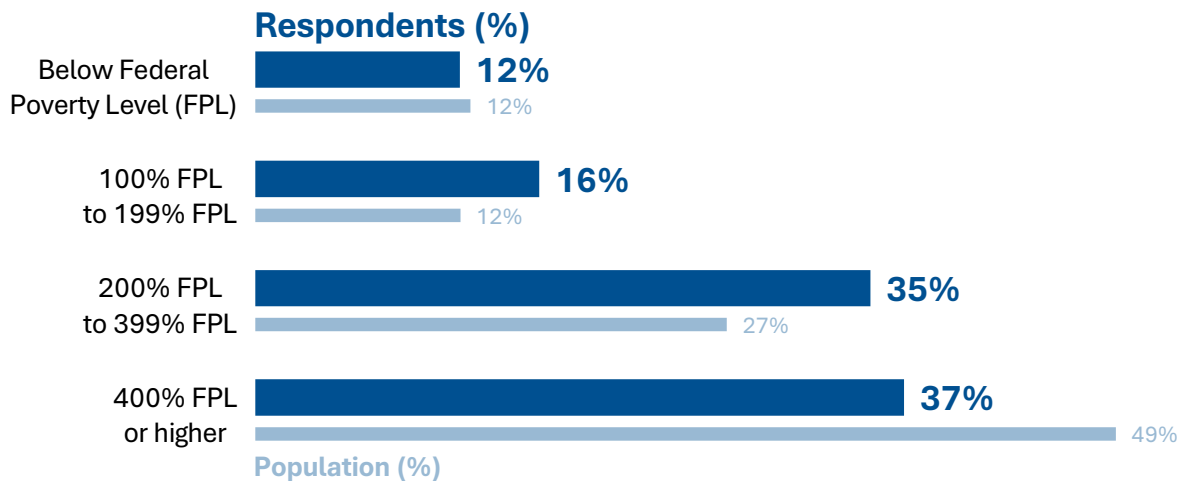


### Household Income

Capital Region residents with a yearly household income of at least 400% of the Federal Poverty Level (FPL) were underrepresented, while those who reported having a household income between 100% and 399% of the FPL were overrepresented. Capital Region residents who said their yearly household income was below the FPL were well represented, making up 12% of the survey sample. Population percentages are based on 2023 American Community Survey estimates for the Capital Region.

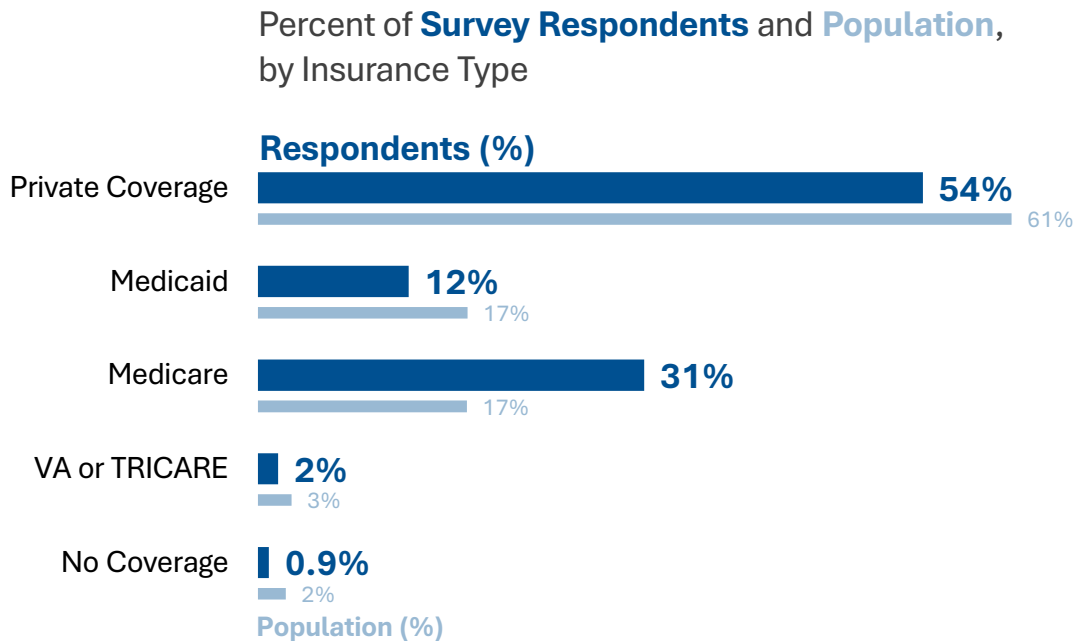
Note: FPL thresholds used in the survey were based on data released by the U.S. Census Bureau in 2024 (link: [www.census.gov/data/tables/time-series/demo/income-poverty/historical-poverty-thresholds.html](http://www.census.gov/data/tables/time-series/demo/income-poverty/historical-poverty-thresholds.html)). Poverty thresholds were rounded up to the nearest \$5,000 to account for inflation and to simplify interpretation for survey respondents. For example, the weighted average poverty threshold for a family of three in 2023 was \$24,230, which was rounded up to \$25,000 for the survey.

Percent of **Survey Respondents** and **Population**, by Income Level



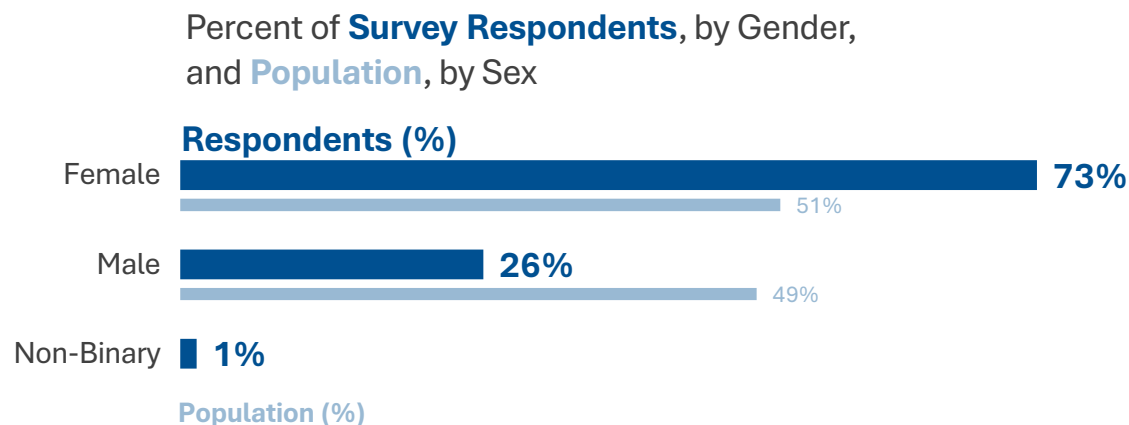
## Health Insurance

Capital Region residents who reported having Medicare insurance coverage were overrepresented in the survey, while those with private, Medicaid, VA or TRICARE, or no coverage were underrepresented. Population percentages are based on 2023 American Community Survey estimates for the Capital Region.



## Gender

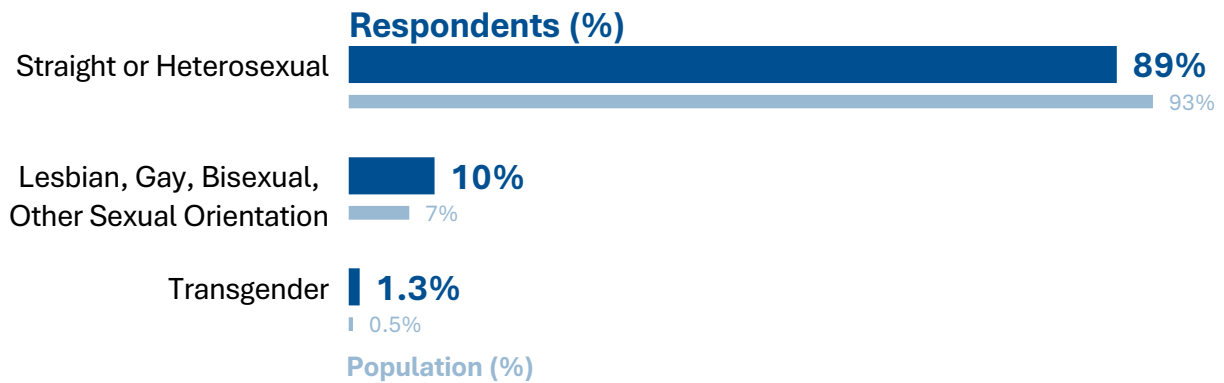
Capital Region females were overrepresented, while males were underrepresented. Population percentages are based on 2023 American Community Survey estimates of sex. The U.S. Census Bureau has not yet released gender data.



### Sexual Orientation and Gender Identity

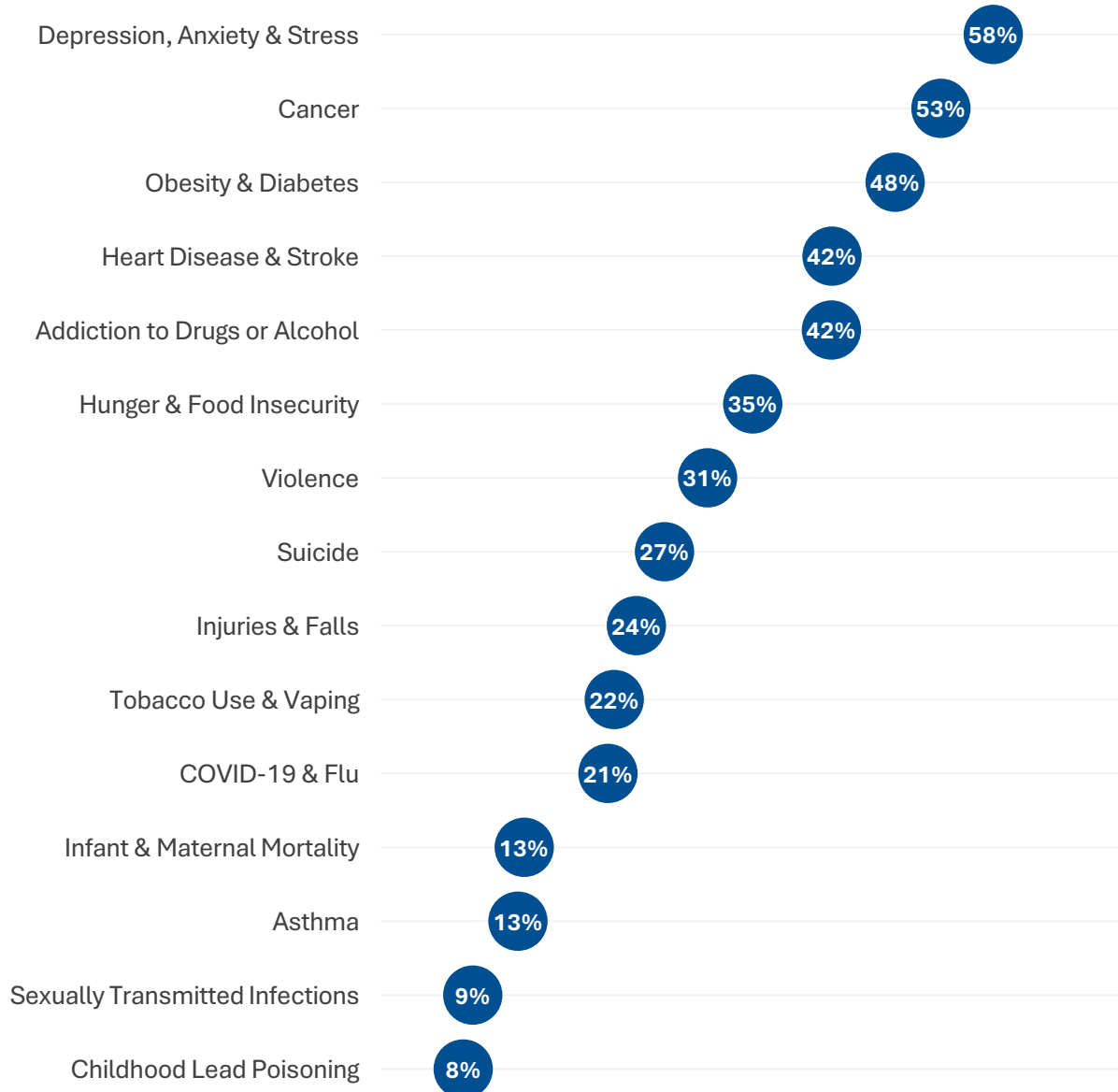
Capital Region residents who reported having a lesbian, gay, bisexual, or other sexual orientation were well represented in the survey, as were residents who identified as transgender. Population percentages represent New York State (NYS), excluding New York City, and are from the NYS Behavioral Risk Factor Surveillance System (link: [www.health.ny.gov/statistics/brfss/reports/docs/2022-16\\_brfss\\_sogi.pdf](http://www.health.ny.gov/statistics/brfss/reports/docs/2022-16_brfss_sogi.pdf)).

Percent of **Survey Respondents** and **Population**, by Sexual Orientation and Gender Identity



## ii. Health Priorities

### 1) In your community, which health issues are you most concerned about?

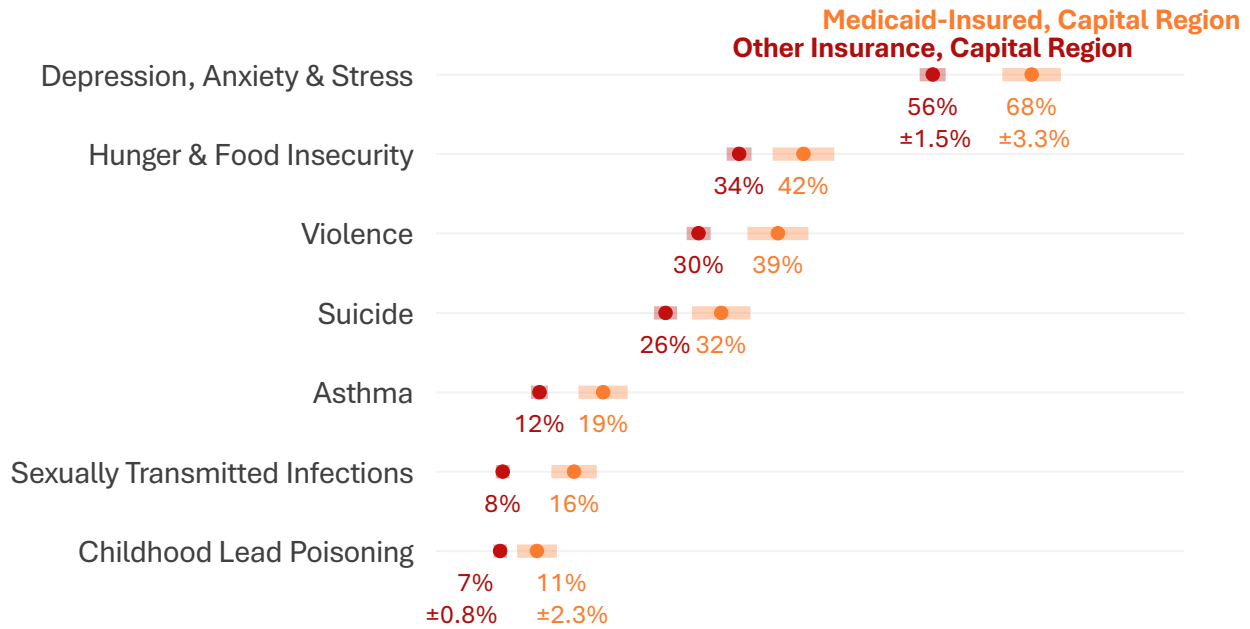


Depression, anxiety & stress, cancer, obesity & diabetes, heart disease & stroke, and addiction to drugs or alcohol were the top five issues in the Capital Region, followed by hunger & food insecurity, violence, suicide, injuries & falls, tobacco use & vaping, and COVID-19 & flu. The health issues that Capital Region respondents least often said they were most concerned about were infant & maternal mortality, asthma, sexually transmitted infections, and childhood lead poisoning.



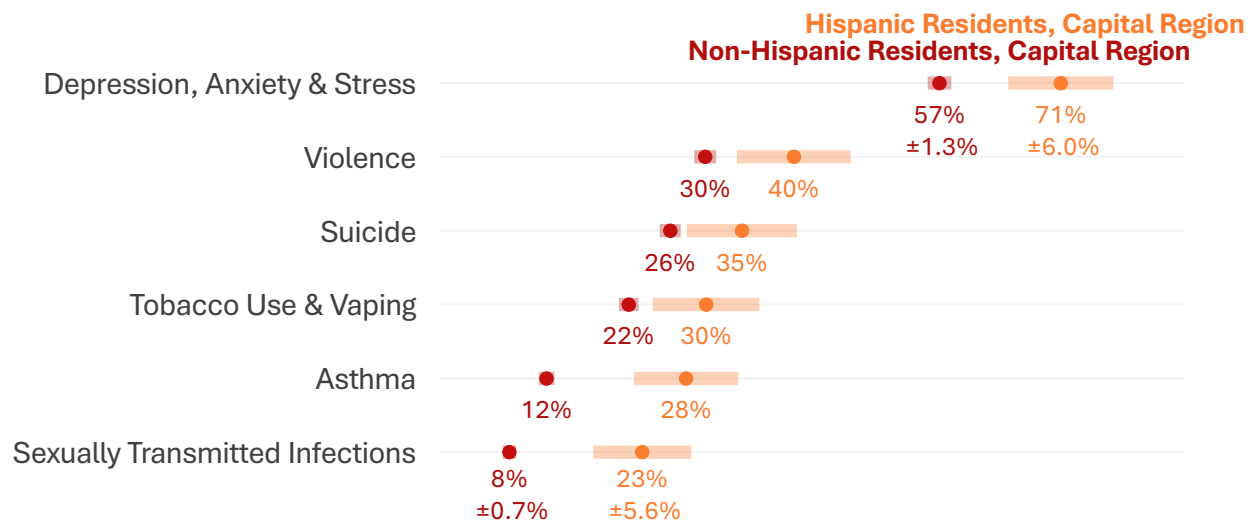
## Significant Differences, by Region Sub-Population

### Medicaid-Insured Residents



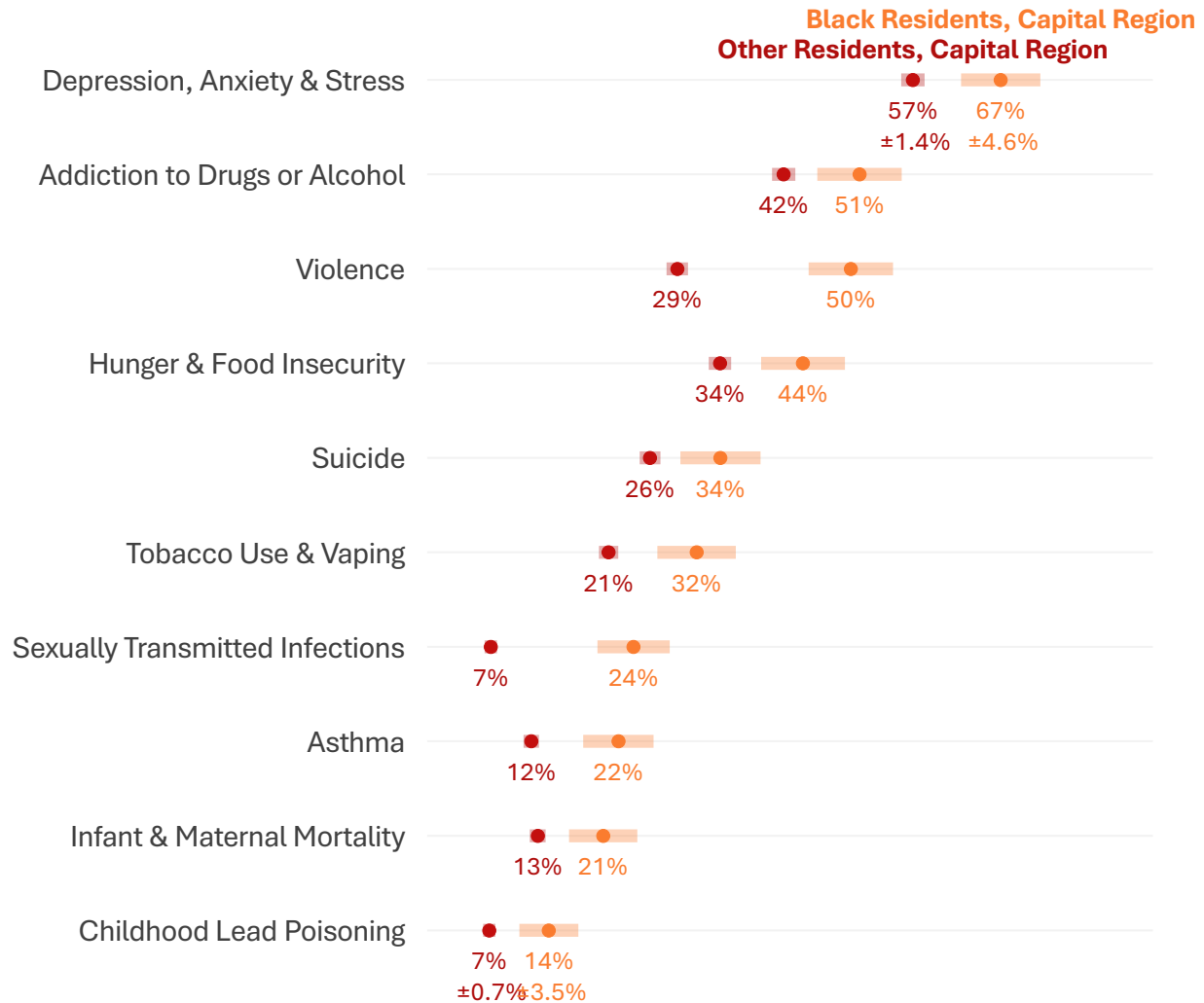
Compared to Capital Region residents with other insurance types, Capital Region residents with Medicaid insurance more often said they were most concerned about depression, anxiety & stress, hunger & insecurity, violence, suicide, asthma, sexually transmitted infections, and childhood lead poisoning.

### Hispanic Residents



Hispanic Capital Region residents more often said they were most concerned about depression, anxiety & stress, violence, suicide, tobacco use & vaping, asthma, and sexually transmitted infections.

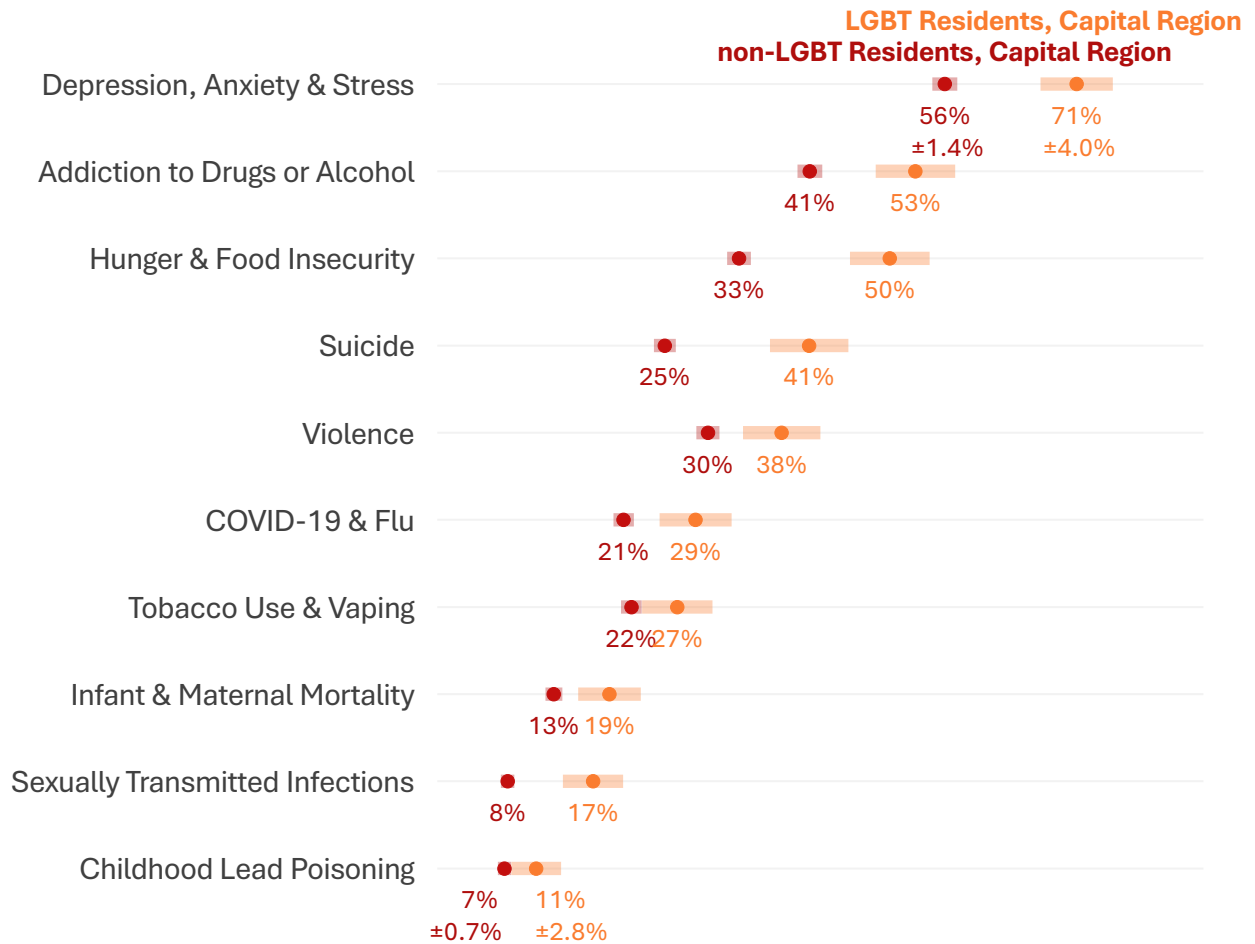
## Black Residents



Black Capital Region residents more often said they were most concerned about depression, anxiety & stress, addiction to drugs or alcohol, violence, hunger & food insecurity, suicide, tobacco use & vaping, sexually transmitted infections, asthma, infant & maternal mortality, and childhood lead poisoning.



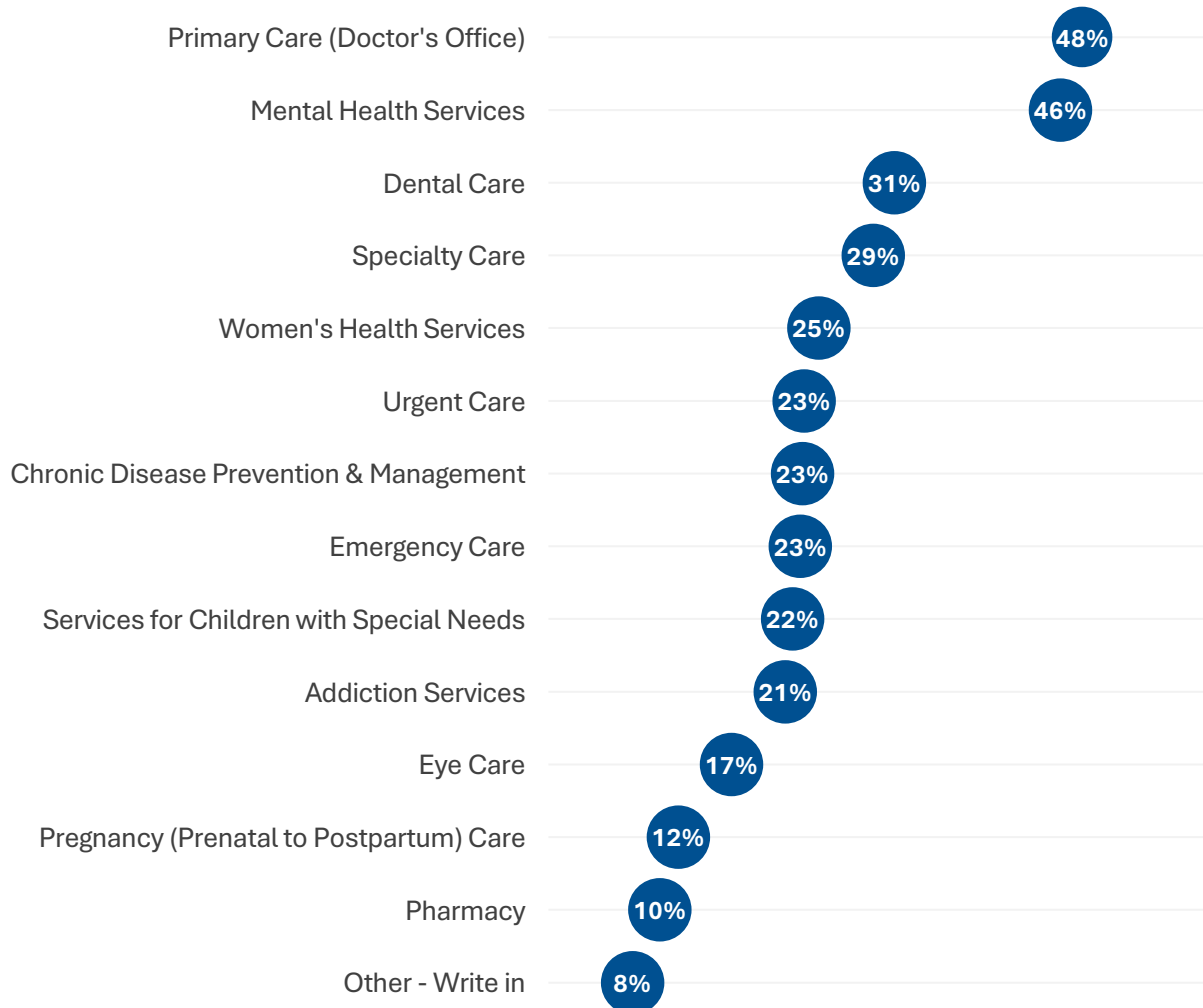
## LGBT Residents



Lesbian, gay, bisexual, or transgender (LGBT) residents more often said they were most concerned with depression, anxiety & stress, addiction to drugs or alcohol, hunger & food insecurity, suicide, violence, COVID-19 & flu, tobacco use & vaping, infant & maternal mortality, sexually transmitted infections, and childhood lead poisoning.

### iii. Health Care Needs

#### 2) In your community, which health services do you wish were more available?



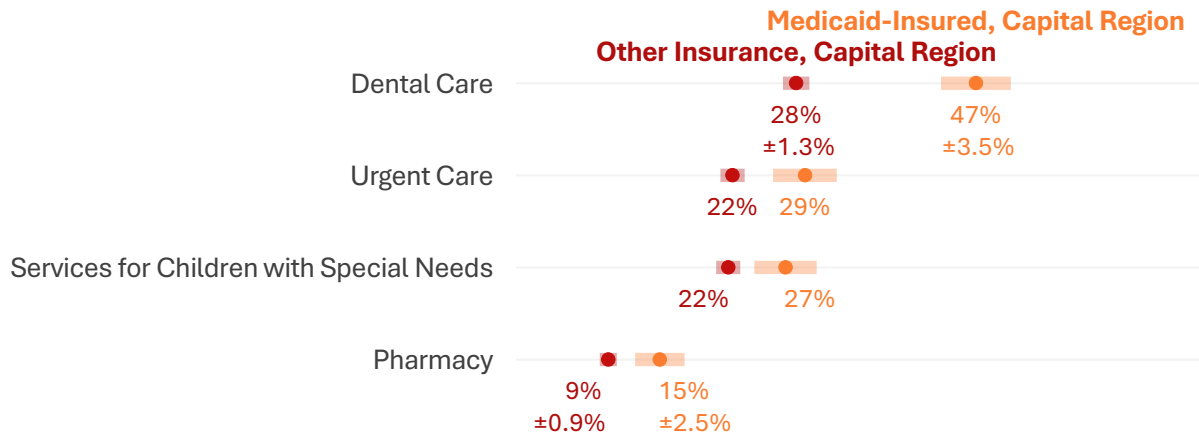
Primary care and mental health services were the top two services that Capital Region residents wished were more available. Around 30% of Capital Region respondents wish dental care and specialty care were more available. Between one in four to one in five respondents said they wish that women's health services, urgent care, chronic disease prevention & management, emergency care, services for children with special needs, and addiction services. The least chosen health services were eye care, pregnancy care, and pharmacy care.

62% of respondents under the age of 45 said they wish mental health services were more available. Among female respondents under the age of 45, 40% said they wish women's health services were more available.



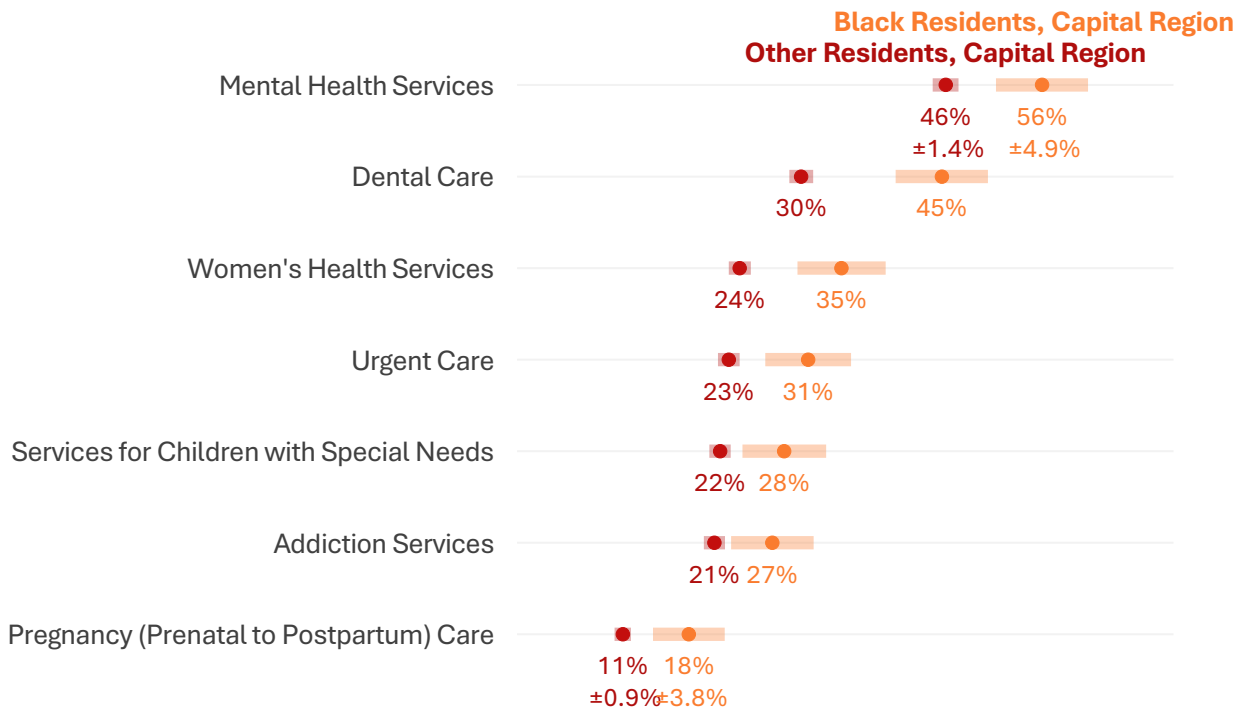
## Significant Differences, by Region Sub-Population

### Medicaid-Insured Residents



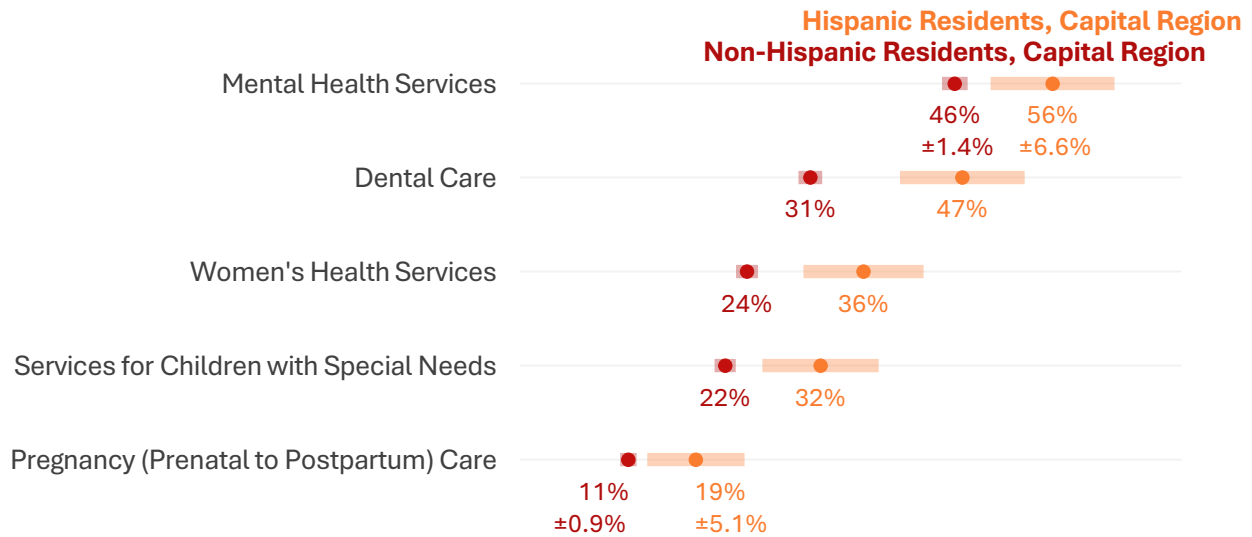
Medicaid-insured Capital Region residents more often said they wish that dental care, urgent care, services for children with special needs, and pharmacy services were more available.

### Black Residents



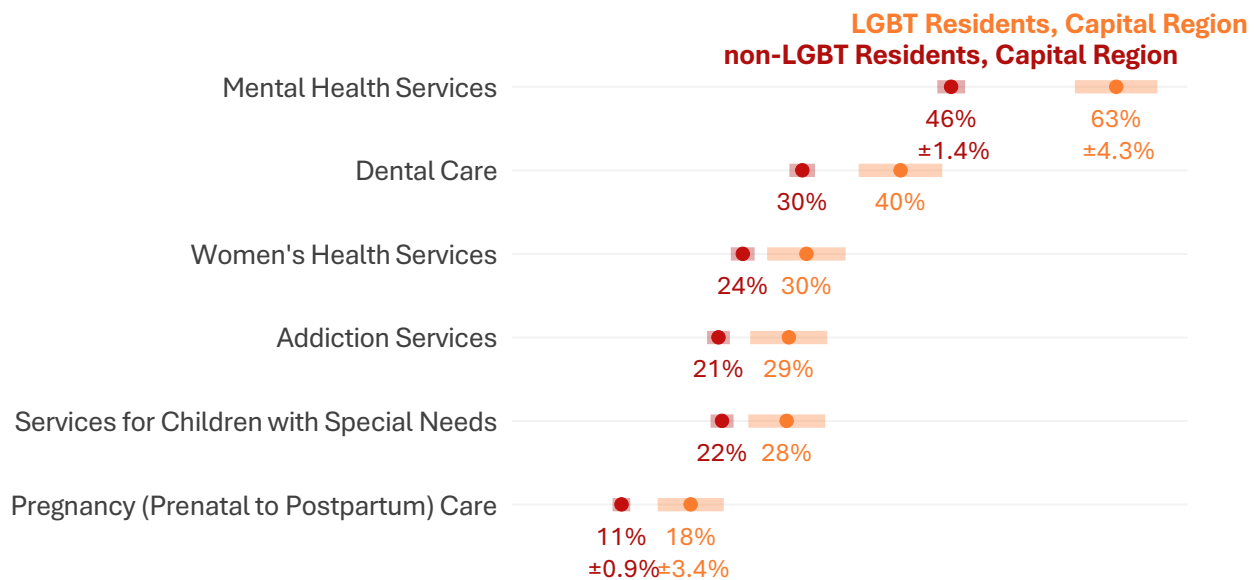
Black Capital Region residents more often said they wish mental health services, dental care, women’s health services, urgent care, services for children with special needs, addiction services, and pregnancy care services were more available.

## Hispanic Residents



Hispanic Capital Region residents more often said they wish mental health services, dental care, women’s health services, services for children with special needs, and pregnancy care services were more available.

## LGBT Residents



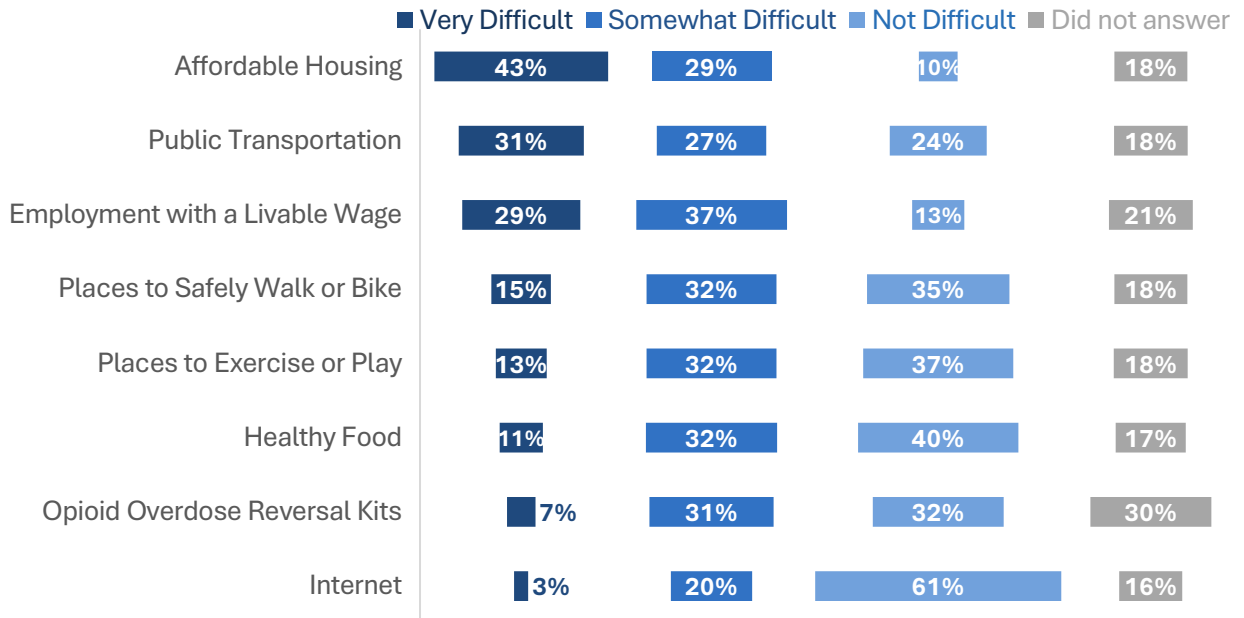
Lesbian, gay, bisexual, or transgender (LGBT) residents more often wished that mental health services, dental care, women’s health services, addiction services, services for children with special needs, and pregnancy care services were more available.



iv. Social Needs

3) In your community, how difficult is it to access the following?

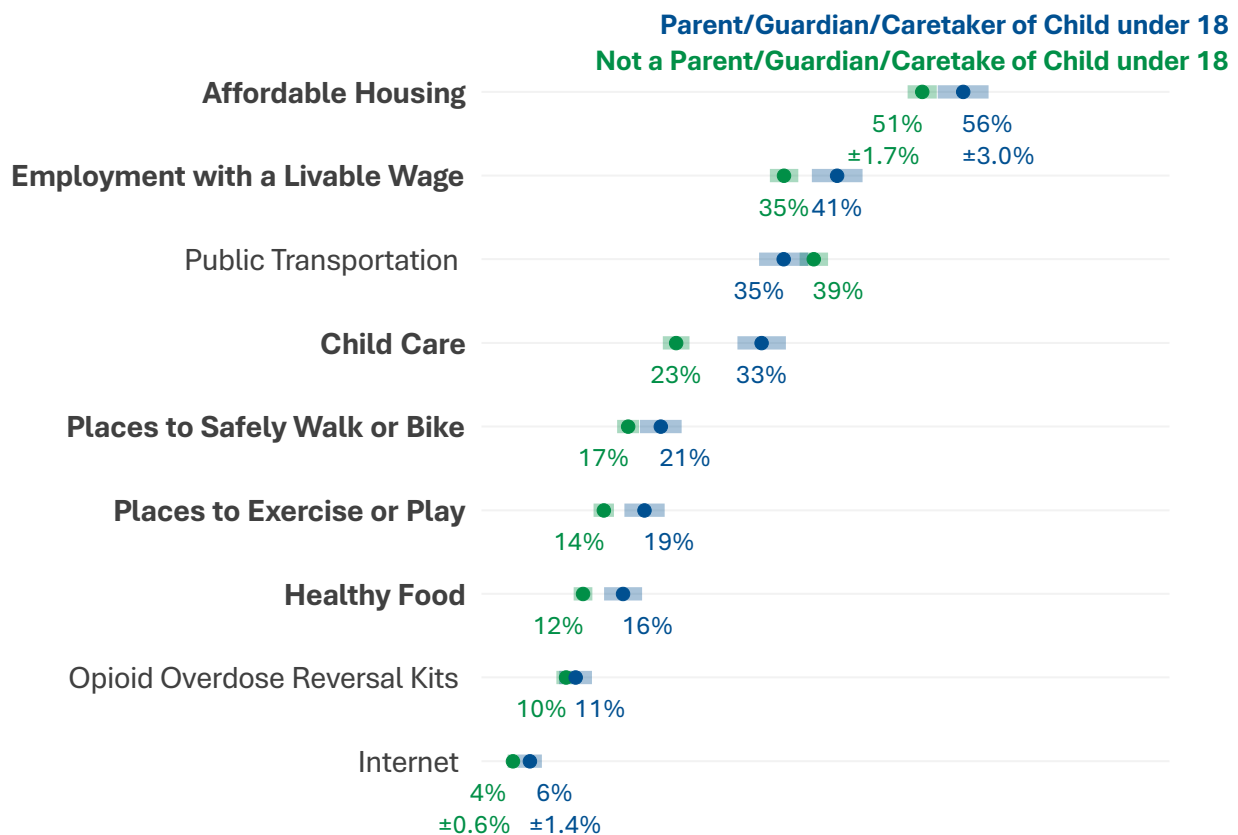
Respondents most often rated **Affordable Housing** as "Very Difficult" to access in their community.



Capital Region respondents most often rated affordable housing as very difficult to access in their community. More than half of respondents said affordable housing, public transportation, and employment with a livable wage were very or somewhat difficult to access in their community.

## Parents, Guardians, or Caretakers

Percent of respondents who said the following were **very difficult to access** in their community:

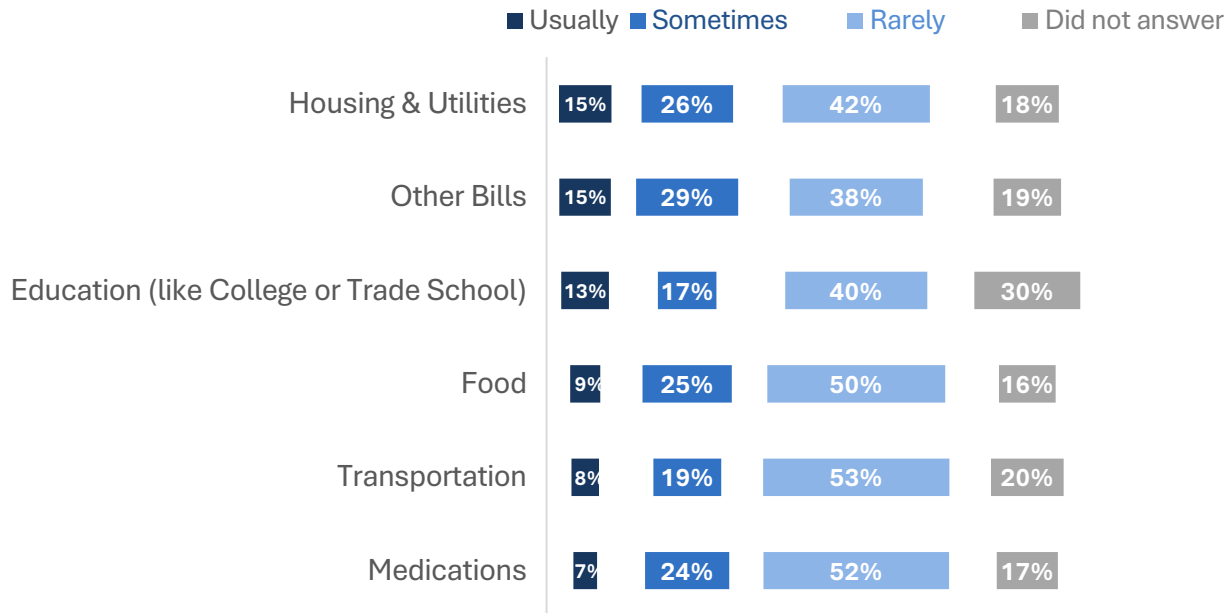


Parents, guardians, or caretakers of children under the age of 18, more often than other Capital Region residents, said it is very difficult to access the following in their community: affordable housing, employment with a livable wage, childcare, places to safely walk or bike, places to exercise or play, and healthy food.



### 4) How often do you have trouble paying for the following?

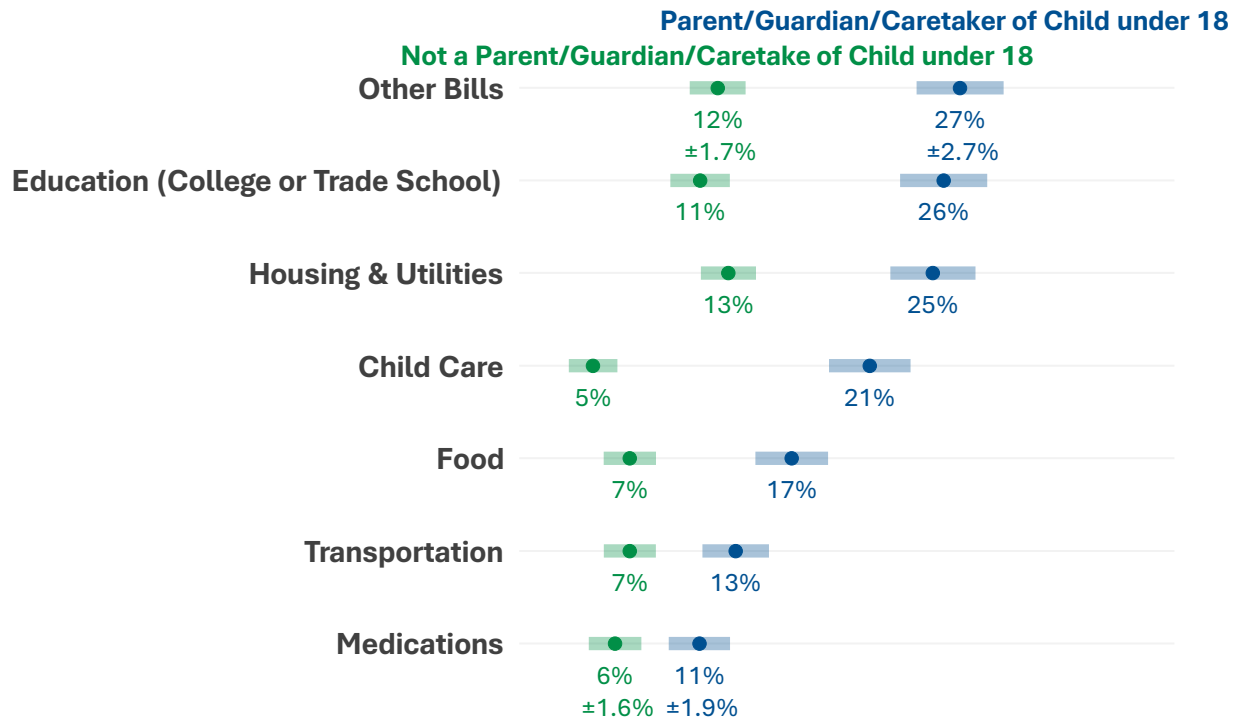
**15%** of respondents **usually** have **trouble paying** for **housing & utilities**, or **other bills**.



At least two of five respondents said they sometimes or usually have trouble paying for housing, utilities, or other bills. Between 30% to 34% of respondents said they have trouble paying for education (like college or trade school), food, or medications. Respondents least often said they have trouble paying for transportation.

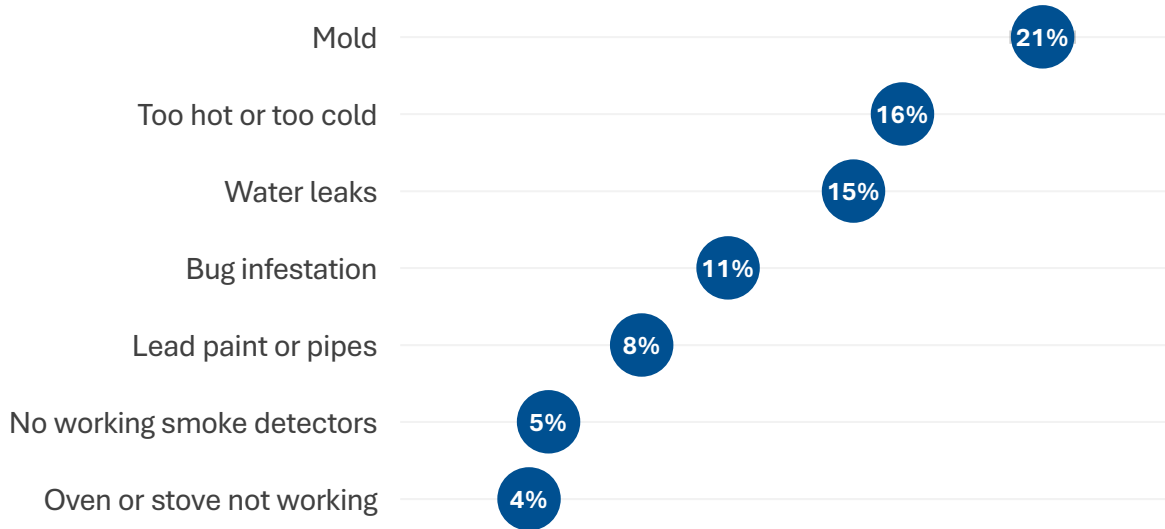
## Parents, Guardians, or Caretakers

Percent of respondents who said they **usually** have **trouble paying** for the following:



Capital Region parents, guardians, or caretakers of children under the age of 18 most often said they usually have trouble paying for education (like college or trade school), housing & utilities, or other bills. Capital Region parents, guardians, or caretakers of children under 18, more often than other residents, said they usually have trouble paying for each expense included in this survey, namely: childcare, housing & utilities, other bills, education (like college or trade school), food, transportation, and medications.

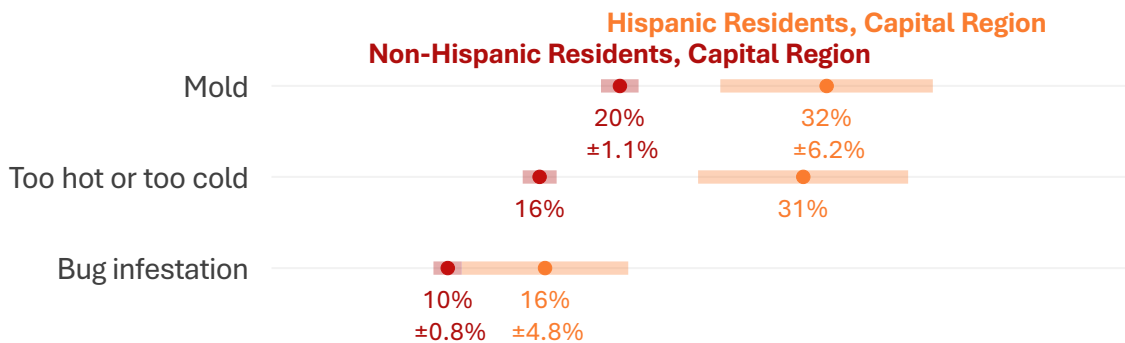
### 5) In the place where you live, do you have problems with any of the following?



Among the housing issues included in this survey, Capital Region respondents most often said they have a problem with mold where they live. 16% of respondents said the place where they live is too hot or too cold; 15% said they have water leaks. 11% of respondents said they have a bug infestation where they live and less than 10% said they have lead paint or pipes, no working smoke detectors, or a non-working stove where they live.

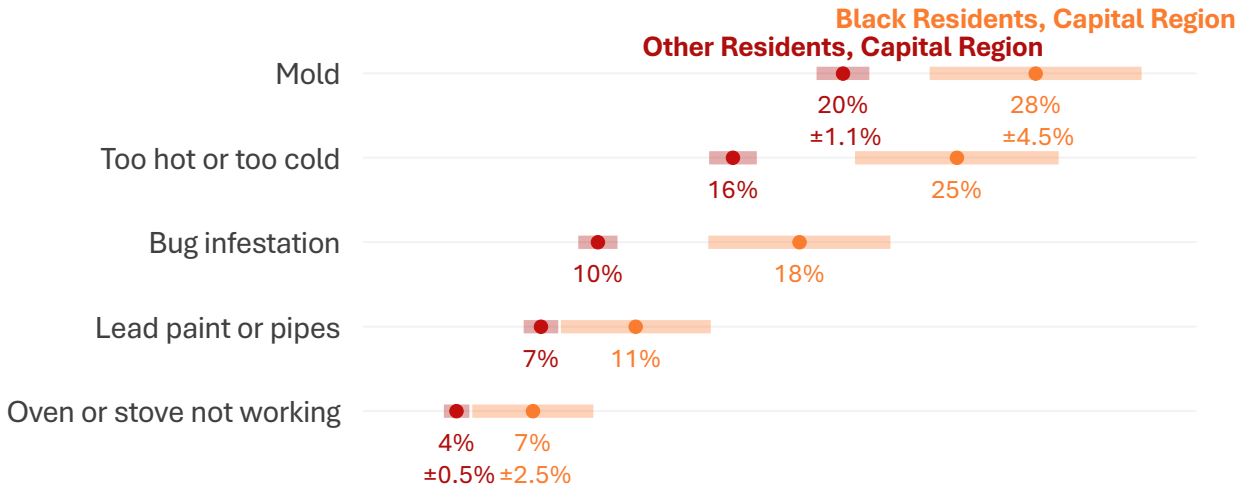
### Significant Differences, by Region Sub-Population

#### Hispanic Residents



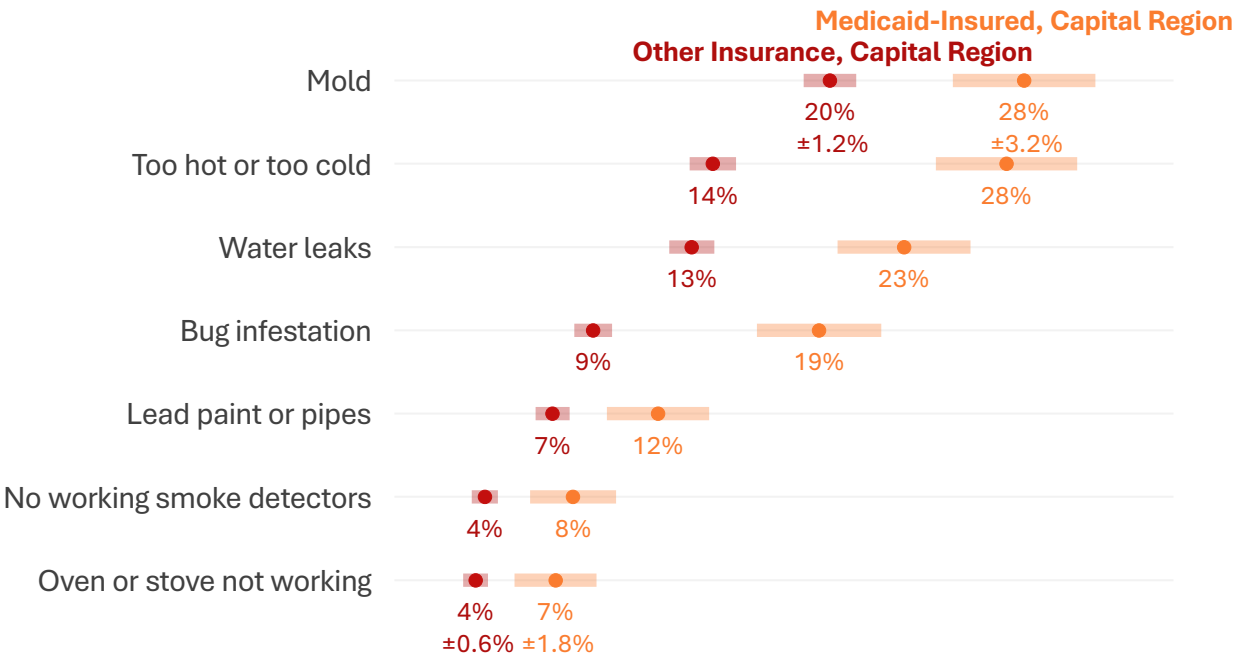
Hispanic Capital Region residents more often said the place they live has mold, is too hot or too cold, or has a bug infestation, when compared with other Capital Region residents.

### Black Residents



Black Capital Region residents more often said they have a problem with mold, temperature control, bug infestation, lead paint or pipes, or a non-working stove where they live, compared to other Capital Region residents.

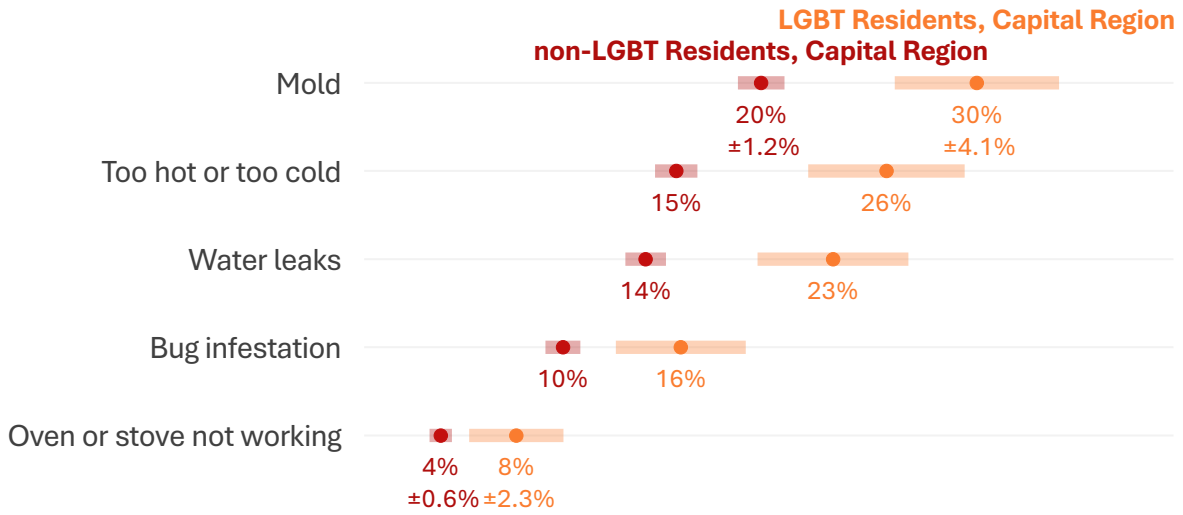
### Medicaid-Insured Residents



Medicaid-insured residents of the Capital Region more often said they have problems with mold, temperature control, water leaks, bug infestation, lead paint or pipes, no working smoke detectors, or a non-working stove where they live, when compared with Capital Region residents with other types of insurance.



## LGBT Residents



Lesbian, gay, bisexual, or transgender (LGBT) residents of the Capital Region more often said they have a problem with mold, temperature control, water leaks, bug infestation, or a non-working stove at their home, when compared with non-LGBT residents of the Capital Region.

## 6) How often do you feel socially isolated from others?

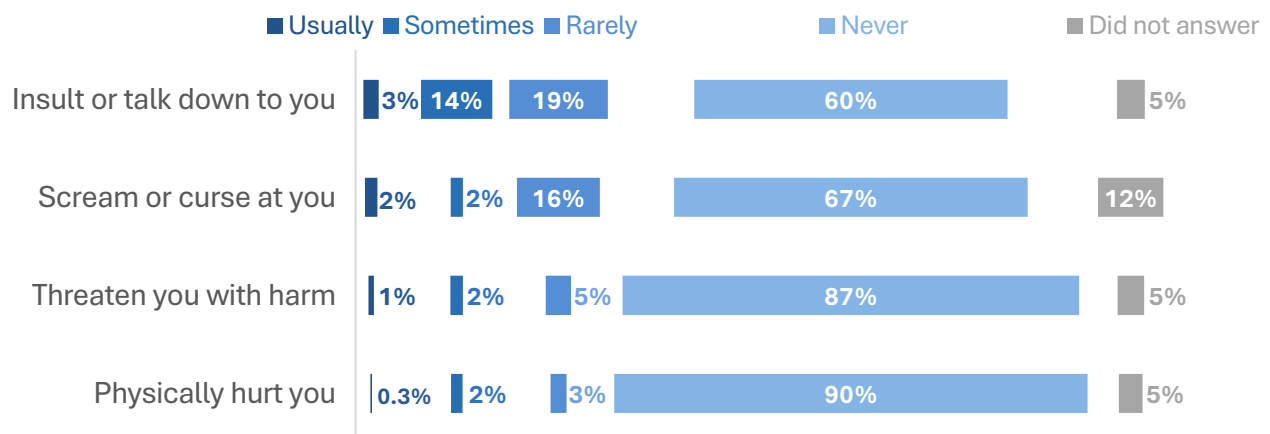
**12%** of respondents said they **always** or **usually** felt **socially isolated**



More than half of respondents said they rarely or never feel socially isolated. Almost one-third of respondents said they sometimes feel socially isolated.

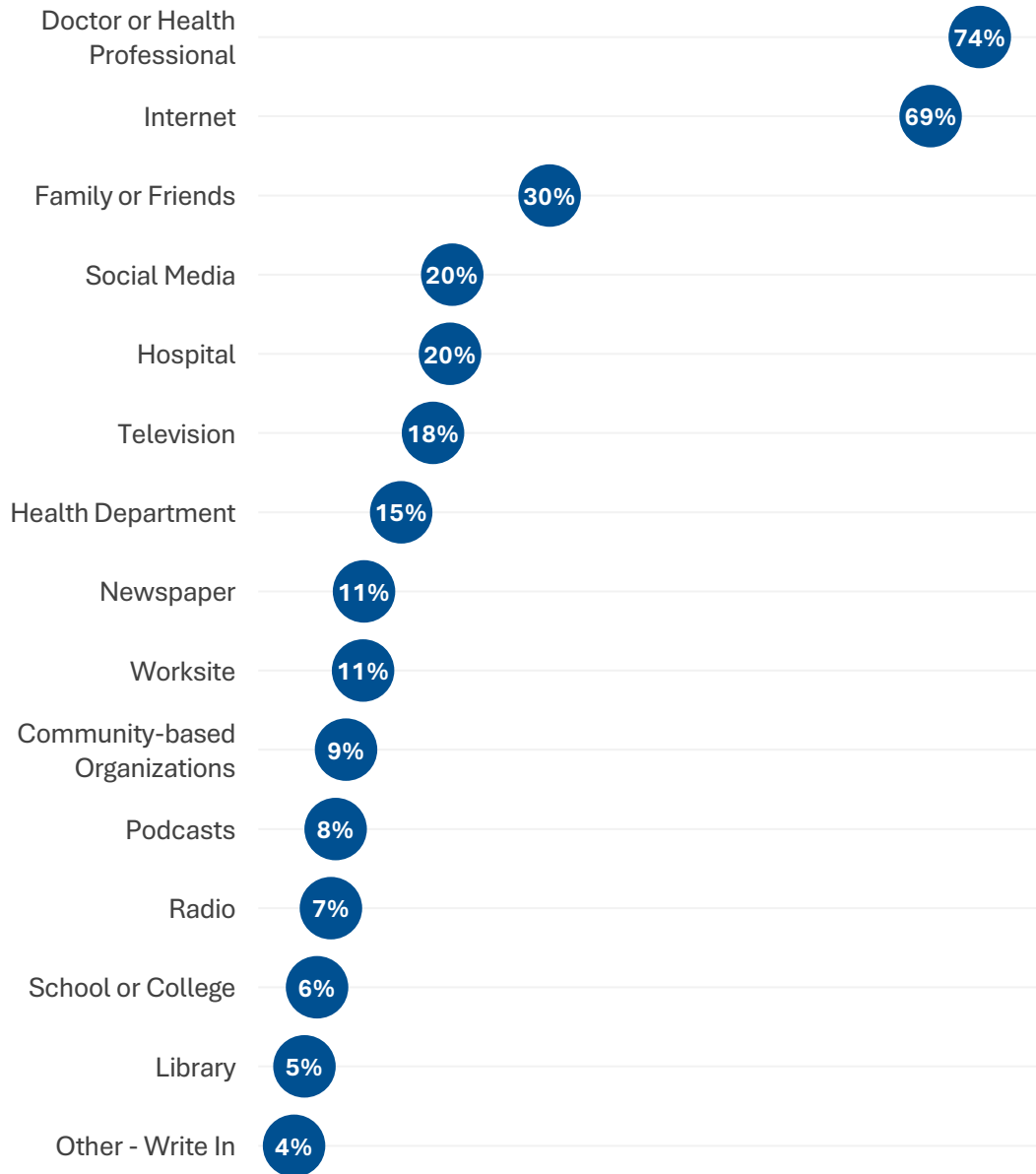
## 7) How often does anyone, including your family, do the following to you?

**5.5%** of respondents were ever **physically hurt** by someone and **8%** reported ever being **threatened with harm**.



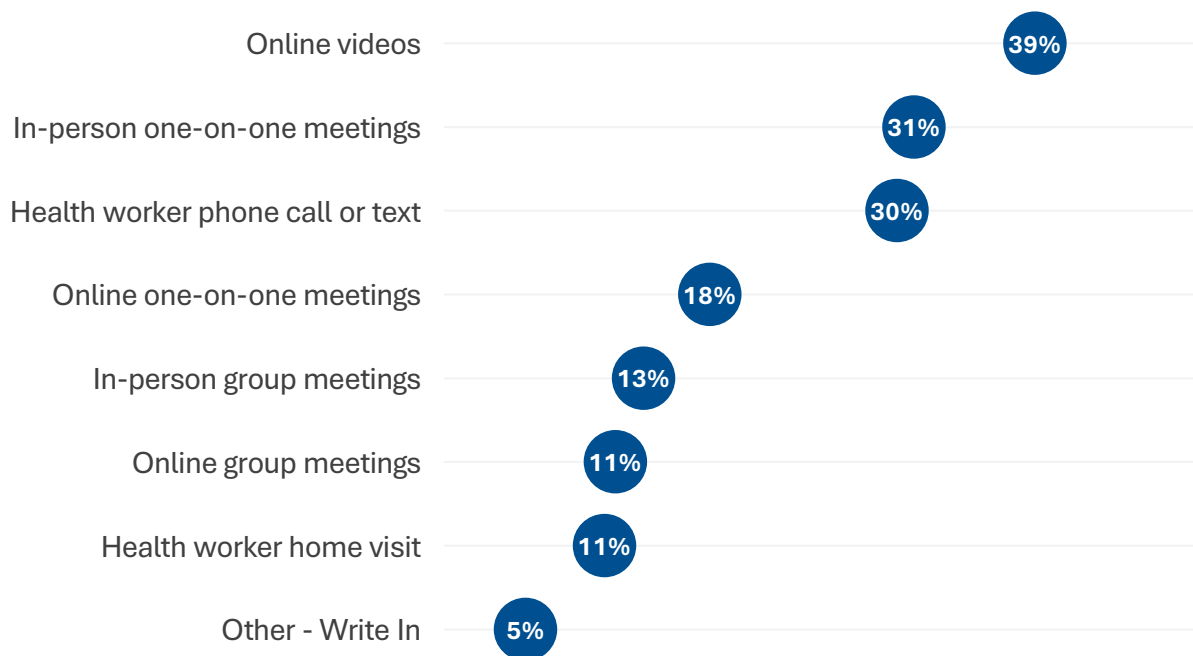
## v. Health Information & Communication

### 8) Where do you get most of the information about your health?



Most Capital Region residents get most of their health information from a doctor or other health professional, or from the internet. The next top source of health information was family and friends. Around one in five respondents said they get their health information from social media or a hospital; 18%, the television; 15% a health department. 11% of respondents said they get most of the information about their health from a newspaper or their worksite. Less than 10% said they get most of their health information from a community-based organization, podcasts, radio, a school or college, the library, or another source.

## 9) In what ways would you like to receive information about how to take care of your health?



When asked how they would like to receive information about taking care of their health, respondents most often said they would prefer online videos, followed by in person one-on-one meetings or a health worker phone call or text. 18% said they would prefer online one-on-one meetings, while 11 to 13% preferred in person group meetings, online group meetings, or a health worker home visit.

## 10) How often do you need help reading instructions, pamphlets, or other written material from your doctor or pharmacy?

**8%** of respondents reported having **limited health literacy**\*.

\*sometimes or usually need help reading written material from a health care provider.



Close to 8% of respondents reported having limited health literacy, based on the Single Item Literacy Screener (SILS) question; they said they sometimes or usually need help reading written material from a health care provider.



## Significant Differences, by Region Sub-Population

### Medicaid-Insured Residents

Percent of respondents who reported having **limited health literacy**\*:

\*based on the Single Item Literacy Screener (SILS).

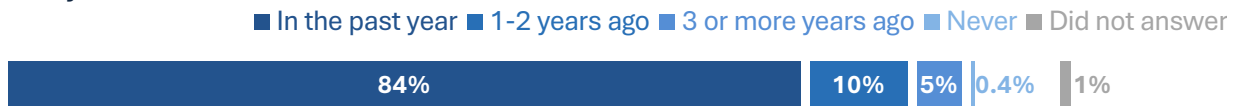


Medicaid-insured Capital Region residents more often indicated they have limited health literacy, when compared with residents from the Capital Region with other types of insurance.

## vi. Health Care Access

### 11) When was the last time you had your annual physical exam?

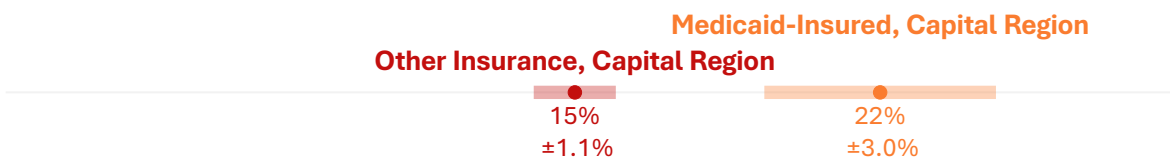
15.4% of respondents had not **received a physical exam** in the past year.



## Significant Differences, by Region Sub-Population

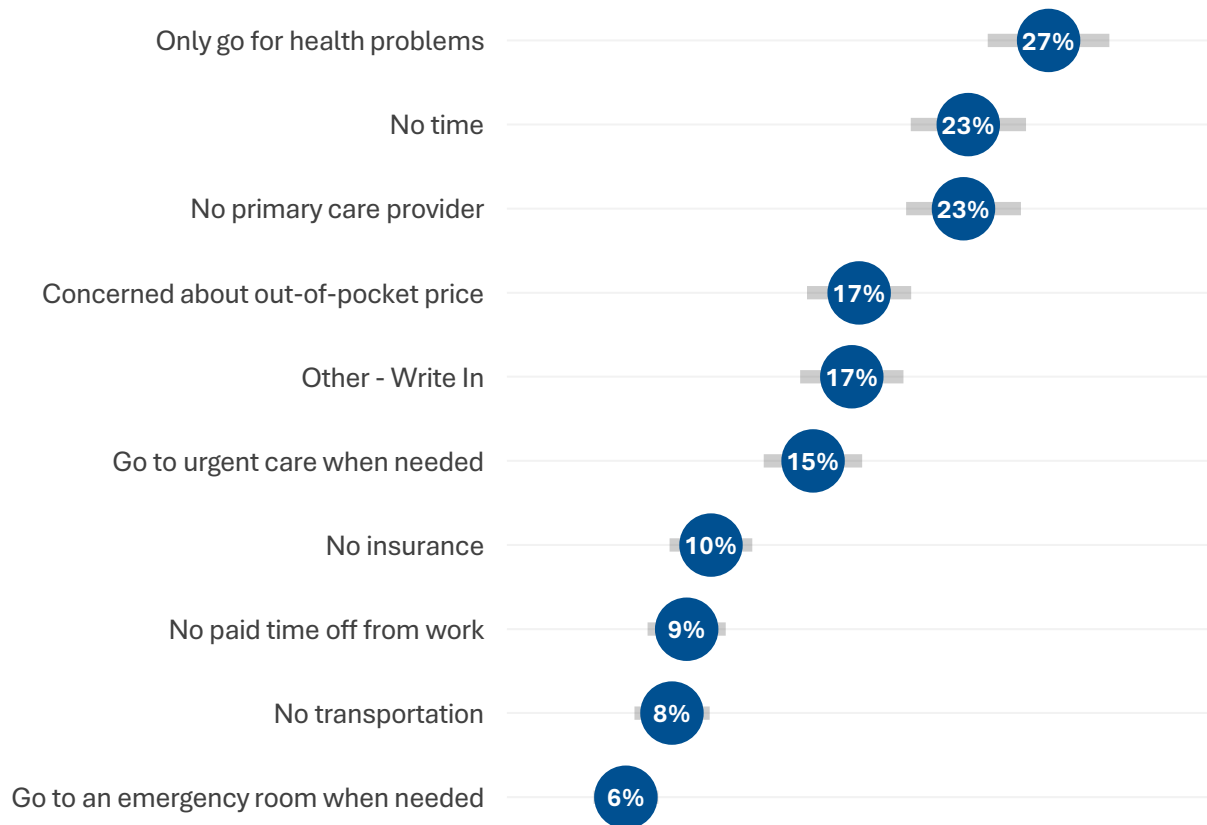
### Medicaid-Insured Residents

Percent of respondents who did **not receive a physical exam** in the past year:



Medicaid-insured Capital Region residents more often indicated they had not received a physical examination in the past year, when compared with residents from the Capital Region with other types of insurance.

## 12) Why did you not receive a physical exam in the past year?



Capital Region residents who did not receive a physical exam in the past year most often said it was because they only go to their primary care provider for health problems, they did not have time to go, or they did not have a primary care provider. About 17% of respondents said they were concerned about the out-of-pocket price.



### 13) In the past 12 months, did you receive care in an emergency room?

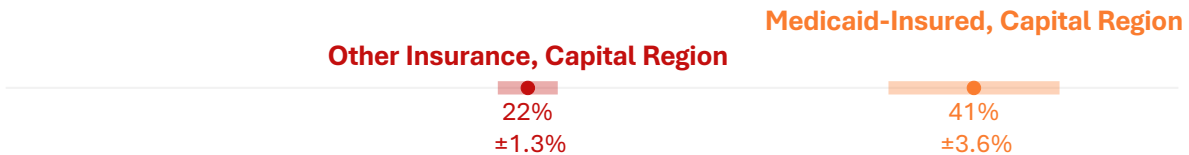
23% of respondents received care in an emergency room in the past year.



### Significant Differences, by Region Sub-Population

#### Medicaid-Insured Residents

Medicaid-Insured Capital Region residents more often said they had received care in an emergency room in the past year.



Medicaid-insured Capital Region residents more often received care in an emergency room, when compared with residents from the Capital Region with other types of insurance.

### 14) What was the main reason for your emergency room visit?

79% of respondents that visited an emergency room in the past year went due to the pain or severity of their health need.



While the majority of respondents who visited an emergency room (ER) in the past year did so due to the pain or severity of their health need, 11% said they went because the ER is more convenient than primary care, and 7% said a primary care appointment was not available.

## 15) When was the last time you visited a dentist for a routine cleaning or checkup?

29% of respondents did **not** have a **routine dentist visit** in the past year.

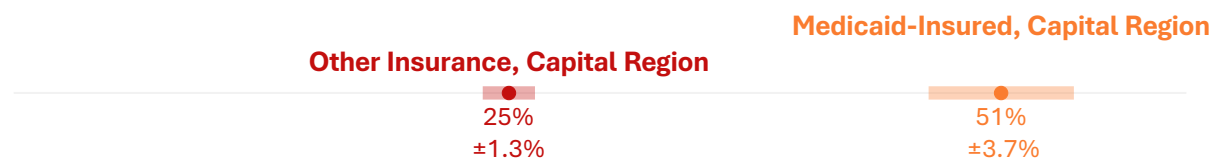


17% of respondents said they had not visited a dentist for a routine cleaning or checkup in at least 3 years, including 1.5% who said they had never been to the dentist for a routine cleaning or checkup.

### Significant Differences, by Region Sub-Population

#### Medicaid-Insured Residents

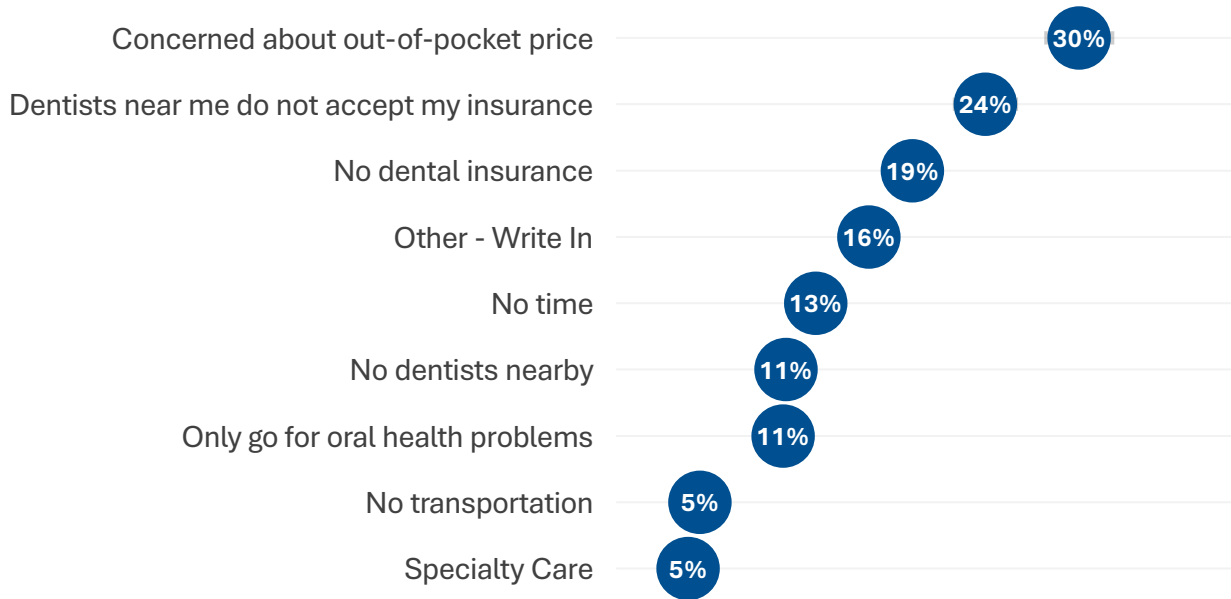
Percent of respondents who did **not visit a dentist** for a **routine cleaning or checkup** in the past year:



Medicaid-insured residents of the Capital Region more often said they had not visited a dentist for a routine cleaning or checkup in the past year, compared to Capital Region residents with other types of insurance.



### 16) Why did you not visit a dentist in the past year?

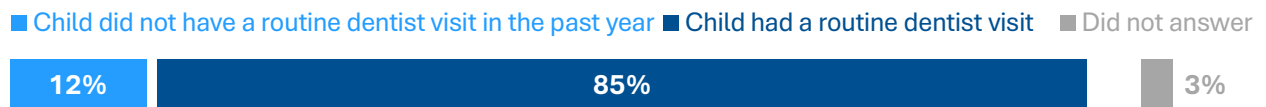


Capital Region residents most often said their concerns about the out-of-pocket price kept them from visiting a dentist for a routine cleaning or checkup, followed by a lack of nearby dentists who accept their insurance, or a lack of dental insurance. Other reasons include having no teeth or having dentures, scheduling delays, or a fear of dentists.

### vii. Child Oral Health

#### 18) [Parents] In the past 12 months, did the children in your care go to the dentist for a routine cleaning or checkup?

12% of parents, guardians, or caretakers said that their children did not have a routine dentist visit in the past year.



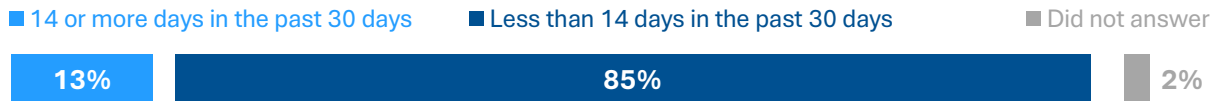
The top reasons why parents, guardians, or caretakers did not bring their child to the dentist for a routine visit in the past year were that the child was too young, dentists don't accept their insurance, they were concerned about the out-of-pocket price, or because they had no dentists nearby, no transportation, or no dental insurance.

## viii. Mental Health

### 20) In the past 30 days, how many days did you feel down, depressed, or hopeless?

**13%** of respondents reported having **poor mental health**\*.

\*Felt down, depressed, or hopeless for 14 or more days in the past 30 days.



More than one in eight respondents said they had poor mental health (felt down, depressed, or hopeless for 14 or more of the past 30 days).

### Significant Differences, by Region Sub-Population

#### Medicaid-Insured Residents

Percent of respondents who reported having **poor mental health**:



Within the Capital Region, Medicaid-insured residents more often reported having poor mental, when compared with Capital Region residents with other types of insurance.

#### LGBT Residents

Percent of respondents who reported having **poor mental health**:



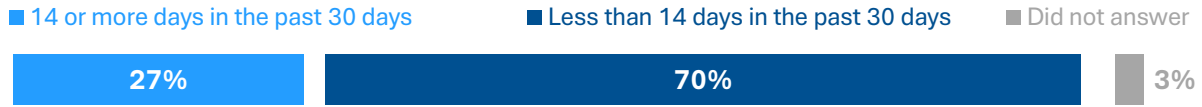
Within the Capital Region, lesbian, gay, bisexual, or transgender (LGBT) residents more often reported having poor mental, when compared with non-LGBT Capital Region residents.



## 21) In the past 30 days, how many days did you feel tense, stressed, nervous, or anxious?

27% of respondents reported having frequent stress or anxiety\*.

\*Felt tense, stressed, nervous, or anxious for 14 or more days in the past 30 days.

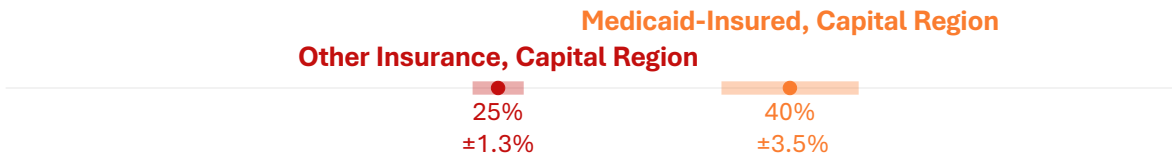


More than one in four respondents said they had frequent stress or anxiety (felt tense, stressed, nervous, or anxious for 14 or more of the past 30 days).

### Significant Differences, by Region Sub-Population

#### Medicaid-Insured Residents

Percent of respondents who reported having frequent stress or anxiety:



Within the Capital Region, Medicaid-insured residents more often reported having frequent stress or anxiety, when compared with Capital Region residents with other types of insurance.

#### LGBT Residents

Percent of respondents who reported having frequent stress or anxiety:



Within the Capital Region, lesbian, gay, bisexual, or transgender (LGBT) residents more often reported having frequent stress or anxiety, when compared with non-LGBT Capital Region residents.

## 22) In the past 12 months, have you talked with a mental health care provider (like a psychologist, psychiatrist, or licensed mental health counselor) about your mental health?

5% of respondents **needed, but were unable**, to **visit a mental health care provider** in the past year



While 23% of respondents said they visited a mental health care provider in the past year to talk about their mental health, 5% said they needed to but were unable to. The main reasons that respondents provided for not being able to visit a mental health care provider were concerns about cost, a lack of insurance, a lack of nearby providers with availability, a lack of nearby providers that accept their insurance, or a lack of time or transportation, among other reasons.

### Significant Differences, by Region Sub-Population

#### LGBT Residents

Percent of respondents who **needed, but were unable**, to **visit a mental health care provider**:

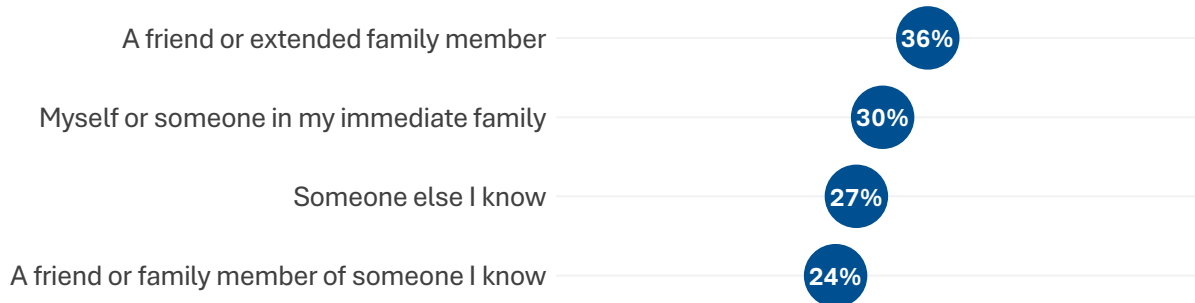


Within the Capital Region, lesbian, gay, bisexual, or transgender (LGBT) residents more often reported they needed to visit a mental health care provider, but were unable to, when compared with non-LGBT Capital Region residents.



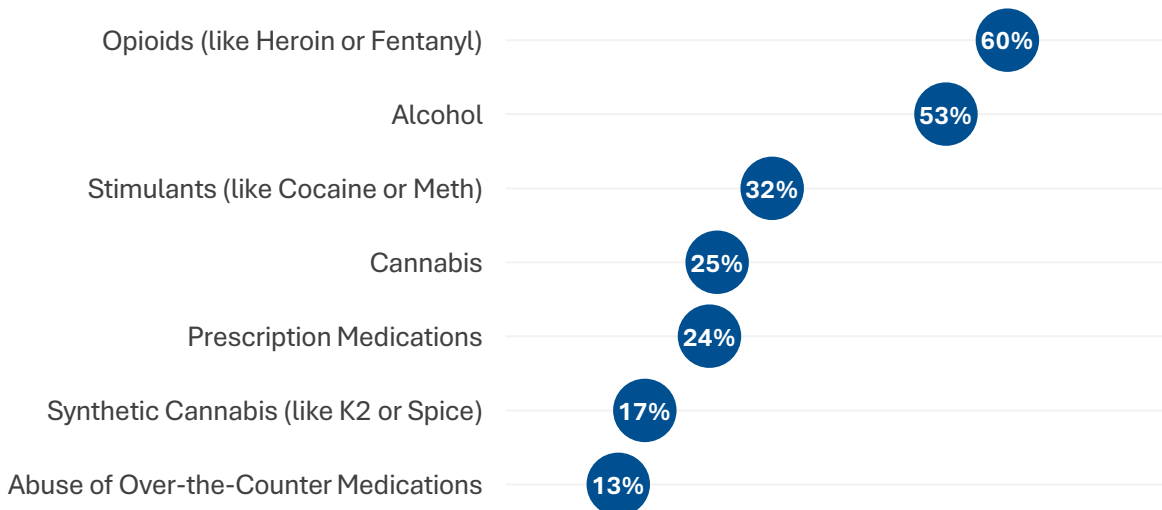
### ix. Substance Use

#### 23) Do you know anyone who has been impacted by addiction to drugs or alcohol?



More than one in three respondents said a friend or extended family member has been impacted by addiction to drugs or alcohol; 30% said they or someone in their immediate family has been impacted. 27% of respondents said someone they know has been impacted and 24% said a friend or family member of someone they know.

#### 24) In your community, which substances are you most concerned about?



More than half of Capital Region respondents said they are most concerned about opioids (like heroin and fentanyl) and alcohol in their community. Close to one in three respondents said they are most concerned about stimulants (like cocaine or meth) and close to one in four said they are most concerned about cannabis or prescription medications. 17% said they were most concerned about synthetic cannabis (like K2 or spice) and 13% said abuse of over-the-counter medications.

## O. Survey (Paper Version)

# Capital Region Community Health Survey, 2024

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### We want to hear from you!

This survey is a project of Healthy Capital District in partnership with regional hospitals and health departments. Your feedback will help us to plan health programs in your community.

Your responses are anonymous. Thank you for your participation.

---

### 1) In your community, which health issues are you most concerned about?

*Select all that apply.*

- Cancer
- Suicide
- Asthma
- Violence
- Injuries & Falls
- COVID-19 & Flu
- Obesity & Diabetes
- Tobacco Use & Vaping
- Heart Disease & Stroke
- Hunger & Food Insecurity
- Childhood Lead Poisoning
- Depression, Anxiety & Stress
- Addiction to Drugs or Alcohol
- Sexually Transmitted Infections
- Infant & Maternal Mortality (Pregnancy-Related Deaths)



**2) In your community, which health services do you wish were more available?**

*Select all that apply.*

- Primary Care (Doctor’s Office)
- Specialty Care (like Cardiology, Gastroenterology, or Endocrinology) - Write in option: \_\_\_\_\_
- Urgent Care
- Emergency Care
- Eye Care
- Dental Care
- Women’s Health Services
- Pregnancy (Prenatal to Postpartum) Care
- Pharmacy
- Addiction Services
- Mental Health Services
- Services for Children with Special Needs
- Chronic Disease Prevention & Management
- Other - Write in option: \_\_\_\_\_

**3) In your community, how difficult is it to access the following?**

	Not Difficult	Somewhat Difficult	Very Difficult
Internet	()	()	()
Childcare	()	()	()
Healthy Food	()	()	()
Affordable Housing	()	()	()
Public Transportation	()	()	()
Places to Exercise or Play	()	()	()
Places to Safely Walk or Bike	()	()	()
Employment with a Livable Wage	()	()	()
Narcan (Naloxone) Opioid Overdose Reversal Kits	()	()	()

**4) How often do you have trouble paying for the following?**

	Rarely	Sometimes	Usually
Food	( )	( )	( )
Child Care	( )	( )	( )
Medications	( )	( )	( )
Transportation	( )	( )	( )
Housing & Utilities	( )	( )	( )
Other Bills	( )	( )	( )
Education (like College or Trade School)	( )	( )	( )

**5) Think about the place you live. Do you have problems with any of the following? Check all that apply.**

- Mold
- Water leaks
- Bug infestation
- Too hot or too cold
- Lead paint or pipes
- Oven or stove not working
- No working smoke detectors

**6) How often do you feel socially isolated from others?**

- ( ) Never
- ( ) Rarely
- ( ) Sometimes
- ( ) Usually
- ( ) Always



**7) How often does anyone, including your family, do the following to you?**

	Never	Rarely	Sometimes	Usually
Physically hurt you	( )	( )	( )	( )
Insult or talk down to you	( )	( )	( )	( )
Threaten you with harm	( )	( )	( )	( )
Scream or curse at you	( )	( )	( )	( )

**8) Where do you get most of the information about your health?**

*Select all that apply.*

- Radio
- Library
- Internet
- Hospital
- Worksite
- Podcasts
- Television
- Newspaper
- Social Media
- Family or Friends
- School or College
- Health Department
- Doctor or Health Professional
- Community-based Organizations
- Other - Write In: \_\_\_\_\_

**9) In what ways would you like to receive information about how to take care of your health?**

*Select all that apply.*

- Online videos
- Online group meetings
- Online one-on-one meetings
- In-person group meetings
- In-person one-on-one meetings
- Health worker phone call or text
- Health worker home visit
- Other - Write In: \_\_\_\_\_

**10) How often do you need to have someone help you when you read instructions, pamphlets, or other written material from your doctor or pharmacy?**

- Never
- Rarely
- Sometimes
- Usually

**11) When was the last time you had your annual physical exam?**

- In the past year
- 1-2 years ago
- 3 years ago or longer
- Never

**12) [If not in the past year] Why did you not receive a physical exam in the past year?**

***Select all that apply.***

- No time
- No paid time off from work
- No insurance
- Concerned about the out-of-pocket price
- No transportation
- No primary care provider
- Only go for health problems
- Go to urgent care when needed
- Go to an emergency room when needed
- Other - Write In: \_\_\_\_\_



**13) In the past 12 months, did you receive care in an emergency room?**

- Yes
- No

**14) [If yes] What was the main reason for your emergency room visit?**

- Pain or severity of health need
- More convenient than primary care
- Primary care appointment not available
- Only place with providers that speak my language
- Knew I could get care there even though I'm uninsured
- To more conveniently get tested or receive a diagnosis
- Other - Write In: \_\_\_\_\_

**15) When was the last time you visited a dentist for a routine cleaning or checkup?**

- In the past year
- 1-2 years
- 3 years or more
- Never

**16) [If not in the past year] Why did you not visit a dentist in the past year?  
*Select all that apply.***

- No time
- No paid time off from work
- No transportation
- No dentists nearby
- No dental insurance
- Dentists near me do not accept my insurance
- Concerned about the out-of-pocket price
- Only go for oral health problems
- Other - Write In: \_\_\_\_\_

**17) Are you a parent, guardian, or caretaker of a child under the age of 18?**

Yes

No

**18) [If you are a parent, guardian, or caregiver] In the past 12 months, did the children in your care go to the dentist for a routine cleaning or checkup?**

Yes

No

**19) [If you are a parent, guardian, or caregiver] Why did the children in your care not go to the dentist in the past 12 months?**

***Select all that apply.***

No time

No paid time off from work

No transportation

No dentists nearby

No dental insurance

Dentists near me don't accept my insurance

Concerned about the out-of-pocket cost

Only go for oral health problems

Other - Write In: \_\_\_\_\_



**20) In the past 30 days, how many days did you feel down, depressed, or hopeless? Choose a number between 0 and 30.**

\_\_\_\_\_

**21) In the past 30 days, how many days did you feel tense, stressed, nervous, or anxious? Choose a number between 0 and 30.**

\_\_\_\_\_

**22) In the past 12 months, have you talked with a mental health care provider (like a psychologist, psychiatrist, or licensed mental health counselor) about your mental health?**

Yes             I needed to, but was unable because:

No            \_\_\_\_\_

**23) Do you know anyone who has been impacted by addiction to drugs or alcohol?**

**Select all that apply.**

- You or someone in your immediate family
- A friend or extended family member
- Someone else you know
- A friend or family member of someone you know

**24) In your community, which substances are you most concerned about?**

**Select all that apply.**

- Opioids (like Heroin or Fentanyl)
- Stimulants (like Cocaine or Meth)
- Alcohol
- Prescription Medications
- Abuse of Over-the-Counter Medications
- Cannabis
- Synthetic Cannabis (like K2 or Spice)
- Other - Write In: \_\_\_\_\_

## Demographic Information

We use this information to ensure our survey is representative of Capital Region residents.

### 25) Which county do you live in?

- Albany       Rensselaer       Other  
 Columbia       Saratoga  
 Greene       Schenectady

### 26) What is your age?

- Under 18       35-39       55-59       75 or older  
 18-24       40-44       60-64  
 25-29       45-49       65-69  
 30-34       50-54       70-74

### 27) How would you describe yourself?

*Select all that apply.*

- Asian  
 Native American  
 Hispanic or Latino  
 White or Caucasian  
 Black or African-American  
 Middle Eastern or North African  
 Native Hawaiian or other Pacific Islander  
 Other - Write In: \_\_\_\_\_



**28) How would you identify yourself?**

- Female
- Male
- Non-Binary
- Other - Write In: \_\_\_\_\_

**29) Which of the following do you consider yourself to be?**

***Select all that apply.***

- Straight or heterosexual
- Lesbian
- Gay
- Bisexual
- Transgender
- Other - Write In: \_\_\_\_\_

**30) What is your ZIP code?**

\_\_\_\_\_

**31) How many people are in your household, including children?**

- 1 [Go to Question #32]
- 2 [Go to Question #32]
- 3 [Go to Question #33]
- 4 [Go to Question #34]
- 5 [Go to Question #35]
- 6 [Go to Question #36]
- 7 [Go to Question #37]
- 8 [Go to Question #38]
- 9 or more [Go to Question #39]
- Prefer not to answer [Go to Question #40]

**32) [If there are 1 or 2 people in your household] What is your household's combined income?**

- \$20,000 or less                       \$40,001 to \$80,000                       Prefer not to answer  
 \$20,001 to \$40,000                       More than \$80,000

**33) [If there are 3 people in your household] What is your household's combined income?**

- \$25,001 to \$50,000                       \$50,001 to \$100,000                       Prefer not to answer  
 \$50,001 to \$100,000                       More than \$100,000

**34) [If there are 4 people in your household] What is your household's combined income?**

- \$35,000 or less                       \$70,001 to \$140,000                       Prefer not to answer  
 \$35,001 to \$70,000                       More than \$140,000

**35) [If there are 5 people in your household] What is your household's combined income?**

- \$40,000 or less                       \$80,001 to \$160,000                       Prefer not to answer  
 \$40,001 to \$80,000                       More than \$160,000

**36) [If there are 6 people in your household] What is your household's combined income?**

- \$45,000 or less                       \$90,001 to \$180,000                       Prefer not to answer  
 \$45,001 to \$90,000                       More than \$180,000

**37) [If there are 7 people in your household] What is your household's combined income?**

- \$50,000 or less                       \$100,001 to \$200,000                       Prefer not to answer  
 \$50,001 to \$100,000                       More than \$200,000



**38) [If there are 8 people in your household] What is your household's combined income?**

- \$55,000 or less
- \$110,001 to \$220,000
- Prefer not to answer
- \$55,001 to \$110,000
- More than \$220,000

**39) [If there are 9 people in your household] What is your household's combined income?**

- \$65,000 or less
- \$130,001 to \$260,000
- Prefer not to answer
- \$65,001 to \$130,000
- More than \$260,000

**40) What type of health insurance do you have?**

- Private Insurance (through an employer or a health plan marketplace like the New York State of Health)
  - Medicaid (including Medicaid Managed Care)
  - Medicare
  - None
  - Other - Write In: \_\_\_\_\_
- 

**Enter to Win a Prize!**

If you would like to be entered for the chance to win a cash prize of **up to \$500\***, please write your contact information below so we can reach out to you if you win. Your contact information will not be shared.

\*One Grand Prize of \$500 and five \$100 prizes will be given out.

**41) Email** \_\_\_\_\_

**42) Phone Number** \_\_\_\_\_

**43) Are you willing to be contacted by Healthy Capital District in the future to participate in other public health surveys?**

- Yes
  - No
-



The 2025 Capital Region Community Health Needs Assessment is a project of the Healthy Capital District and is made possible through the support of its board organizations.

# Sunnyview Rehabilitation Hospital - Full Assessment Report

## Location

Schenectady County, NY

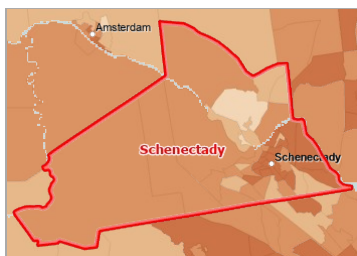
## Demographics

### Citizenship Status

The table below shows the numbers and percent of population by citizenship status for the report area. According to the latest American Community Survey (ACS), the report area has a total of 5,825 non-Citizens, or 3.65% of the total population of 159,603 persons, in contrast to the state average of 9.12% of the population and the national average of 6.61% non-Citizens living in the United States.

Report Area	Native	Born in a US Territory	Born Abroad to US Citizens	Naturalized	Non-Citizen	Non-Citizen, Percent
Schenectady County, NY	140,398	1,469	1,382	10,529	5,825	3.65%
New York	14,869,544	251,495	252,133	2,686,368	1,812,779	9.12%
United States	280,666,495	2,064,560	3,547,584	24,133,728	21,975,173	6.61%

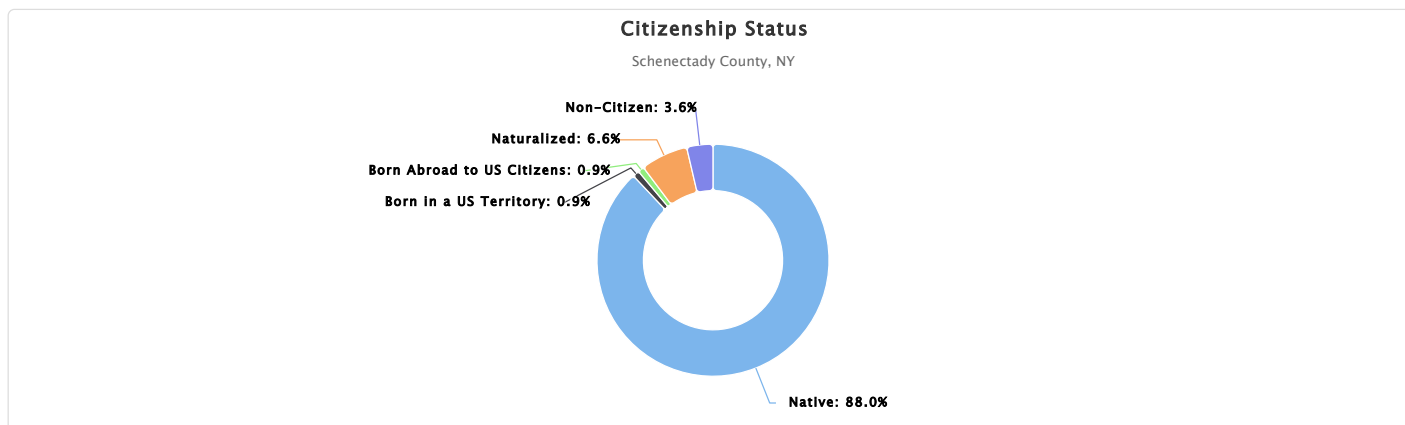
Data Source: US Census Bureau, American Community Survey, 2019-23.



[View larger map](#)

Non US Citizen Population, Percent by Tract, ACS 2019-23

- Over 4.0%
- 1.1 - 4.0%
- Under 1.1%
- No Non-Citizens
- No Data or Data Suppressed
- Schenectady County, NY

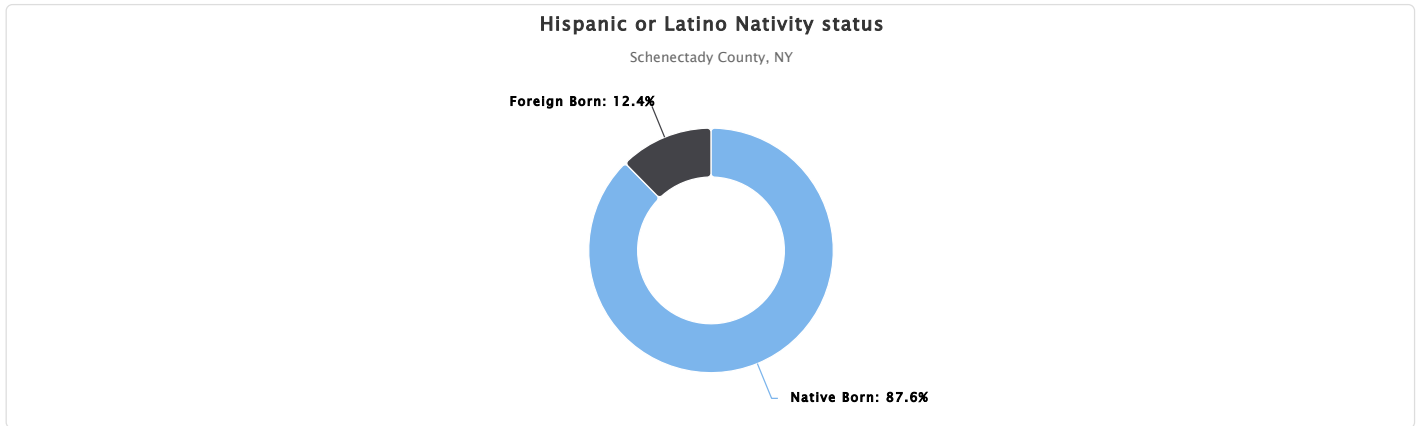


### Hispanic or Latino Nativity status

This indicator reports the nativity status of the Hispanic or Latino population within the report area.

Report Area	Native Born	Native Born, Percent	Foreign Born	Foreign Born, Percent
Schenectady County, NY	11,264	87.62%	1,591	12.38%
New York	2,456,615	63.01%	1,442,037	36.99%
United States	42,711,226	67.65%	20,420,363	32.35%

Data Source: US Census Bureau, American Community Survey, 2019-23.

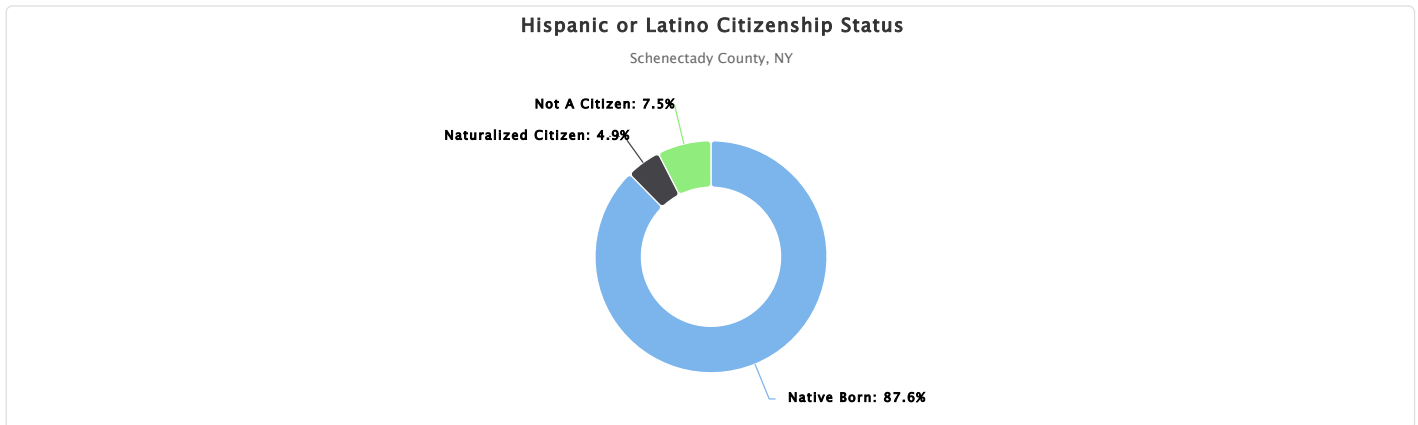


## Hispanic or Latino Citizenship Status

This indicator reports the citizenship status of the Hispanic or Latino population within the report area.

Report Area	Native Born	Native Born, Percent	Naturalized Citizen	Naturalized Citizen, Percent	Not A Citizen	Not A Citizen, Percent
Schenectady County, NY	11,264	87.62%	626	4.87%	965	7.51%
New York	2,456,615	63.01%	693,813	17.80%	748,224	19.19%
United States	42,711,226	67.65%	8,201,984	12.99%	12,218,379	19.35%

Data Source: US Census Bureau, American Community Survey, 2019-23.

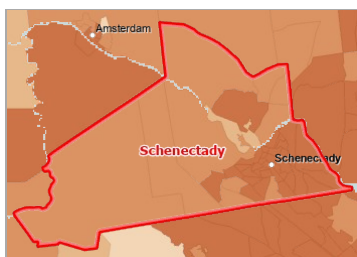


## Foreign-Born Population

This indicator reports the percentage of the population that is foreign-born. The foreign-born population includes anyone who was not a U.S. citizen or a U.S. national at birth. This includes any non-citizens, as well as persons born outside of the U.S. who have become naturalized citizens. The native U.S. population includes any person born in the United States, Puerto Rico, a U.S. Island Area (such as Guam), or abroad of American (U.S. citizen) parent or parents. The latest figures from the U.S. Census Bureau show that 16,354 persons in the report area are of foreign birth, which represents 10.25% of the report area population. This percentage is less than the national average of 13.87%.

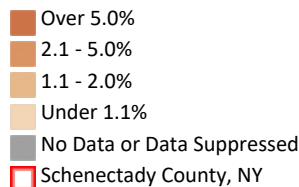
Report Area	Total Population	Naturalized U.S. Citizens	Population w/o U.S. Citizenship	Total Foreign-Birth Population	Foreign-Birth Population, Percent of Total Population
Schenectady County, NY	159,603	10,529	5,825	16,354	10.25%
New York	99,975,459	13,445,922	9,077,009	22,522,931	22.53%
United States	332,387,540	24,133,728	21,975,173	46,108,901	13.87%

Data Source: US Census Bureau, American Community Survey, 2019-23.



[View larger map](#)

Foreign-Born Population (Non-Citizen or Naturalized), Percent by Tract, ACS 2019-23

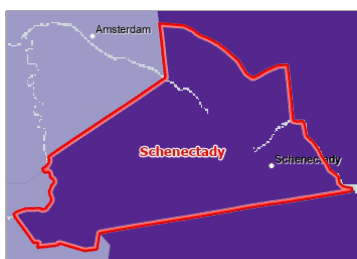


## Medicare Enrollment

This indicator reports information about the Medicare population, including the number of beneficiaries enrolled in parts A & B (the Fee-for-Service population) and the number enrolled in Medicare Advantage. Demographic information is provided for the Fee-for-Service population only. In the report area, there are 30,437 Medicare Beneficiaries. Of those, 22.85% are eligible for Medicaid. The average age of the Fee-for-Service population is 72.

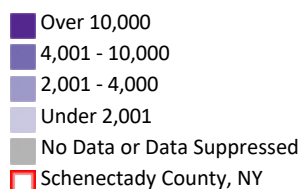
Report Area	Total Medicare Beneficiaries	Medicare Advantage Beneficiaries	FFS Beneficiaries	Medicaid Eligible, Percentage	Avg. Age of FFS Beneficiaries
Schenectady County, NY	30,437	19,985	10,452	22.85%	72
New York	3,435,250	1,886,960	1,548,280	22.53%	74
United States	60,257,800	31,849,000	28,408,800	15.8%	73

Data Source: Centers for Medicare and Medicaid Services, CMS - Geographic Variation Public Use File - 2023.



[View larger map](#)

Medicare Beneficiaries, Fee-for-service, Total by County, CMS 2023

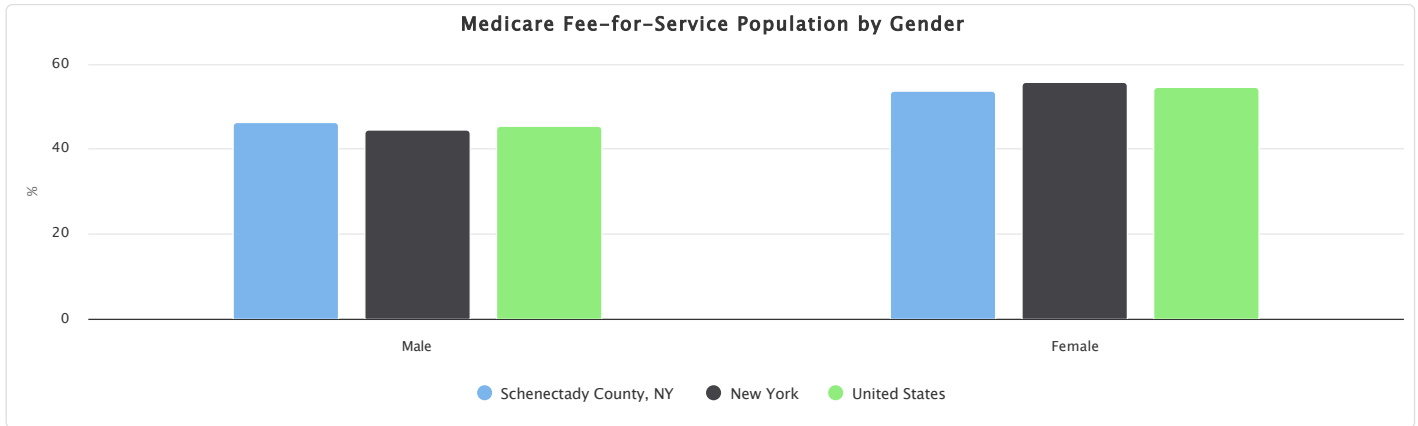


## Medicare Fee-for-Service Population by Gender

The table below reports the percentage of the Medicare Fee-for-Service population by gender. Among FFS Beneficiaries in the report area, 46.24% are male, and 53.76% are female.

Report Area	Fee-for-Service Beneficiaries	Male	Female
Schenectady County, NY	10,452	46.24%	53.76%
New York	1,548,280	44.37%	55.63%
United States	28,408,800	45.39%	54.61%

Data Source: Centers for Medicare and Medicaid Services, CMS - Geographic Variation Public Use File - 2023.

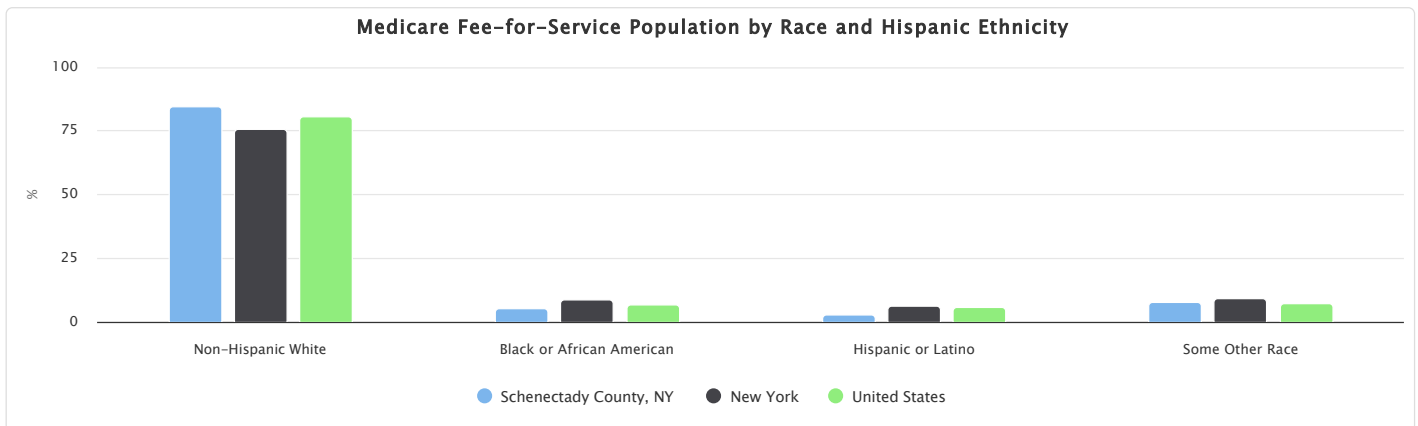


### Medicare Fee-for-Service Population by Race and Hispanic Ethnicity

The table below reports the percentage of the Medicare Fee-for-Service population by race and Hispanic ethnicity. Among FFS Beneficiaries in the report area, 84.62% are non-Hispanic white, 5.1% are non-Hispanic Black, and 2.66% are Hispanic or Latino. The remaining population are some other race or unknown.

Report Area	Fee-for-Service Beneficiaries	Non-Hispanic White	Black or African American	Hispanic or Latino	Some Other Race
Schenectady County, NY	10,452	84.62%	5.1%	2.66%	7.62%
New York	1,548,280	75.78%	8.85%	6.39%	8.98%
United States	28,408,800	80.37%	6.85%	5.63%	7.15%

Data Source: Centers for Medicare and Medicaid Services, CMS - Geographic Variation Public Use File - 2023.

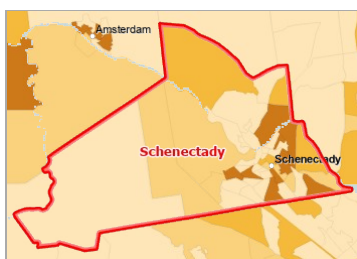


### Population Age 0-4

Of the estimated 159,603 total population in the report area, an estimated 9,253 are children under the age of 5, representing 5.80% of the population. These data are based on the latest U.S. Census Bureau American Community Survey 5-year estimates. The number of children under age 5 is relevant because this population has unique needs which should be considered separately from other age groups.

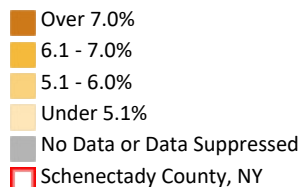
Report Area	Total Population	Population Age 0-4	Percent Population Age 0-4
Schenectady County, NY	159,603	9,253	5.80%
New York	19,872,319	1,102,961	5.55%
United States	332,387,540	18,939,899	5.70%

Data Source: US Census Bureau, American Community Survey, 2019-23.



[View larger map](#)

Population Age 0-4, Percent by Tract, ACS 2019-23

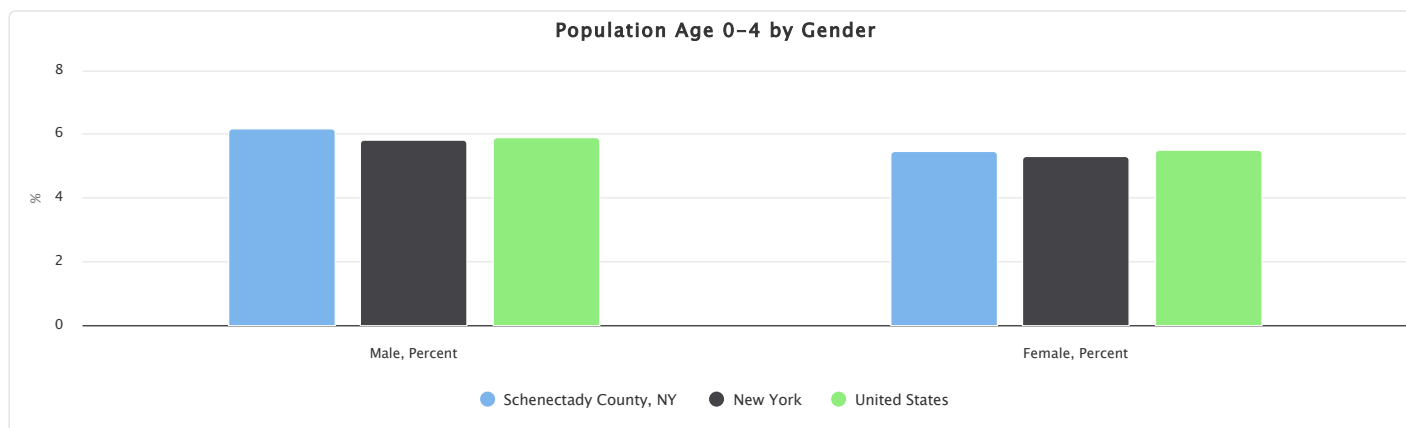


## Population Age 0-4 by Gender

The table below reports the percentage of the population that is under age 5 by gender. Among the male population in the report area, 6.15% are aged 0-4 years. Among the female population, 5.46% are aged 0-4 years.

Report Area	Male	Female	Male, Percent	Female, Percent
Schenectady County, NY	4,820	4,433	6.15%	5.46%
New York	563,327	539,634	5.81%	5.31%
United States	9,688,436	9,251,463	5.89%	5.51%

Data Source: US Census Bureau, American Community Survey, 2019-23.

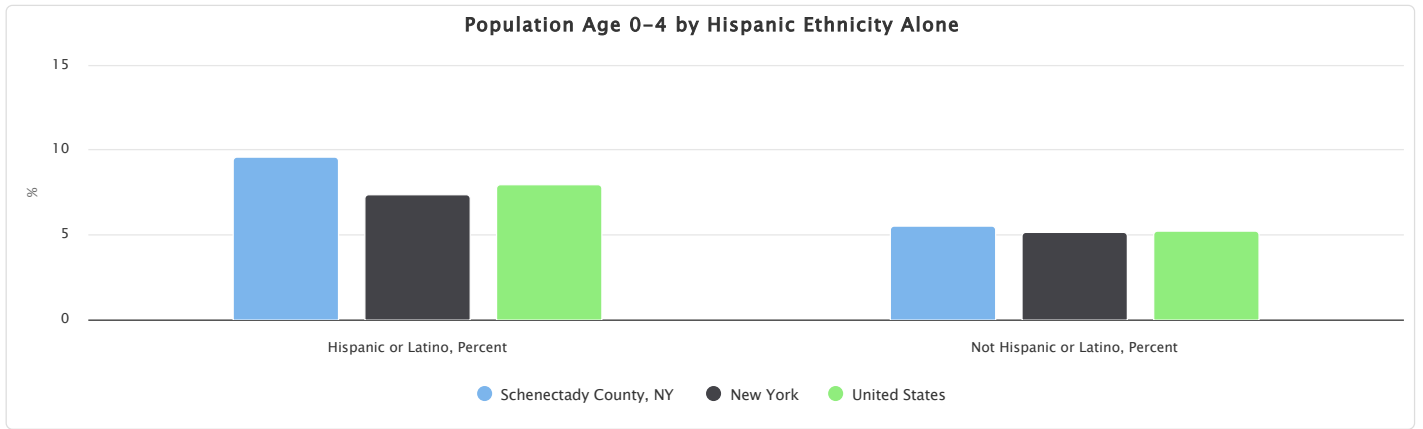


## Population Age 0-4 by Hispanic Ethnicity Alone

This indicator reports the percentage of population age under 5 by Hispanic ethnicity alone. The percentage values could be interpreted as, for example, "Among the Hispanic population in the report area, the percentage of the population age under 5 is (value)."

Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Schenectady County, NY	1,228	8,025	9.55%	5.47%
New York	285,979	816,982	7.34%	5.11%
United States	4,997,308	13,942,591	7.92%	5.18%

Data Source: US Census Bureau, American Community Survey, 2019-23.

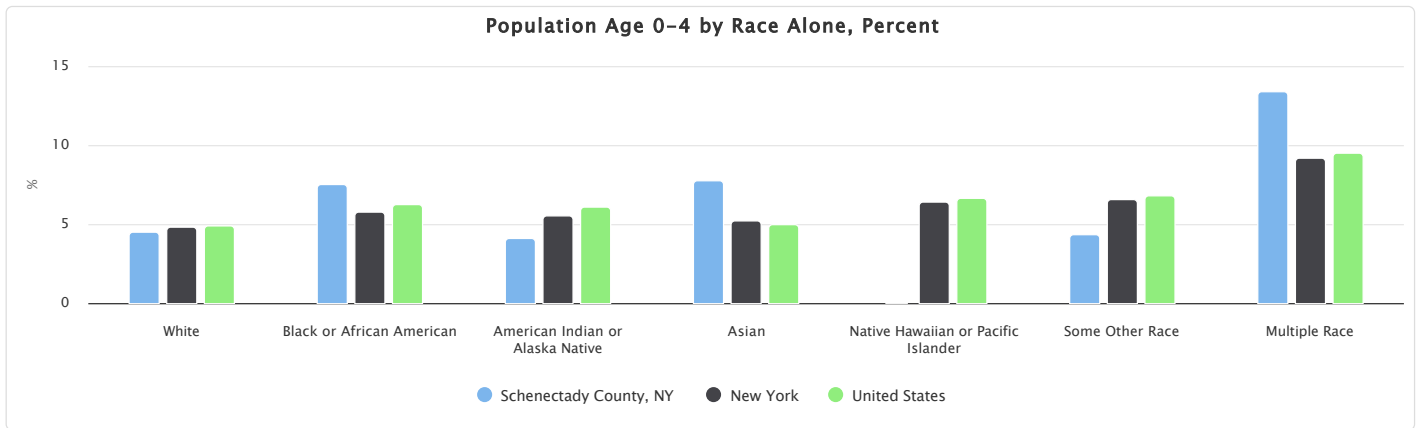


## Population Age 0-4 by Race Alone, Percent

This indicator reports the percentage of population that are under age 5 by race alone. The percentage values could be interpreted as, for example, "Among the white population in the report area, the percentage of the population age under 5 is (value)."

Report Area	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	4.49%	7.49%	4.06%	7.76%	0.00%	4.33%	13.38%
New York	4.82%	5.77%	5.53%	5.19%	6.38%	6.55%	9.16%
United States	4.91%	6.21%	6.06%	4.96%	6.61%	6.79%	9.47%

Data Source: US Census Bureau, American Community Survey, 2019-23.

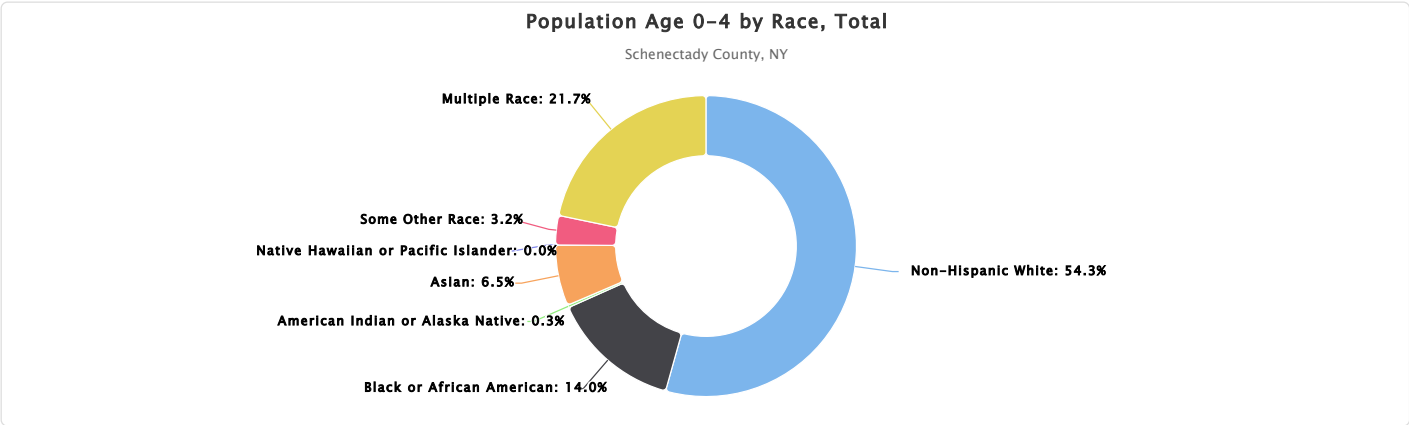


## Population Age 0-4 by Race, Total

This indicator reports the proportion of each race (alone) making up the population aged under 5.

Report Area	Non-Hispanic White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	5,027	1,293	25	605	0	292	2,011
New York	546,073	168,837	5,697	91,762	617	127,631	162,344
United States	10,351,502	2,551,483	177,347	959,268	41,595	1,488,921	3,369,783

Data Source: US Census Bureau, American Community Survey, 2019-23.



### Population Age 18+

Of the estimated 159,603 total population in the report area, an estimated 125,159 persons are adults over age 18, representing 78.42% of the population. These data are based on the latest U.S. Census Bureau American Community Survey 5-year estimates.

Report Area	Total Population	Population Age 18+	Percent Population Age 18+
Schenectady County, NY	159,603	125,159	78.42%
New York	19,872,319	15,763,042	79.32%
United States	332,387,540	258,742,302	77.84%

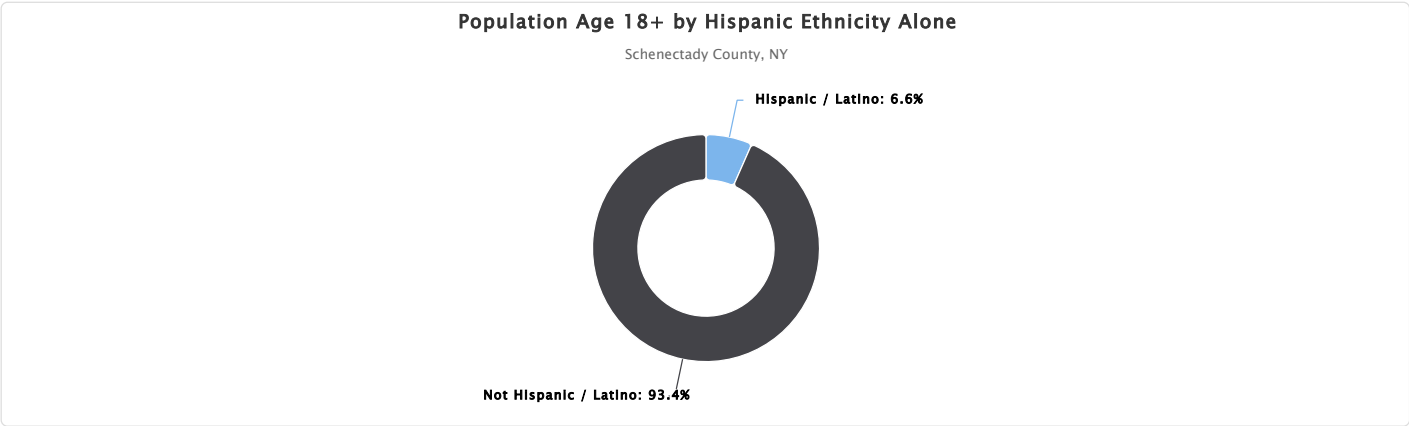
Data Source: US Census Bureau, American Community Survey, 2019-23.

### Population Age 18+ by Hispanic Ethnicity Alone

This indicator reports the percentage of adult population (age 18+) that is Hispanic or Latino.

Report Area	Hispanic or Latino Age 18+	Not Hispanic or Latino Age 18+	Percent Hispanic or Latino Age 18+	Percent Not Hispanic or Latino Age 18+
Schenectady County, NY	8,271	116,888	6.61%	93.39%
New York	2,868,299	8,731,638	24.73%	75.27%
United States	44,044,643	158,035,258	21.80%	78.20%

Data Source: US Census Bureau, American Community Survey, 2019-23.



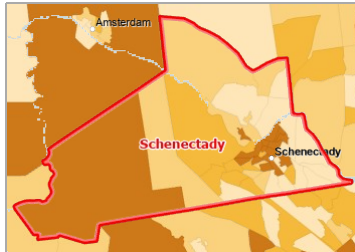
### Population Age 18-64

Of the estimated 159,603 total population in the report area, an estimated 97,068 persons are between the ages of 18 and 64, representing 60.82% of the population. These data are based on the latest U.S. Census Bureau American Community Survey 5-

year estimates. The number of adults in the report area is relevant because this population has unique needs which should be considered separately from other age groups.

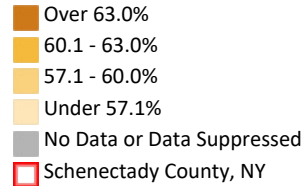
Report Area	Total Population	Population Age 18-64	Population Age 18-64, Percent
Schenectady County, NY	159,603	97,068	60.82%
New York	19,872,319	12,301,856	61.90%
United States	332,387,540	202,772,255	61.00%

Data Source: US Census Bureau, American Community Survey, 2019-23.



[View larger map](#)

Population Age 18-64, Percent by Tract, ACS 2019-23

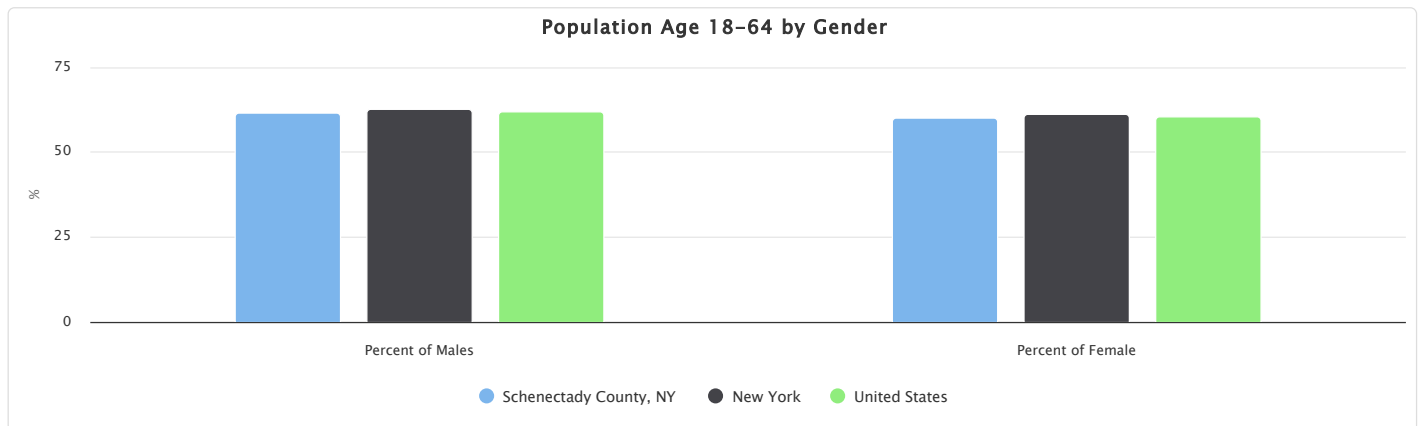


### Population Age 18-64 by Gender

The table below reports the percentage of the population that is age 18 to 64 by gender. Among the male population in the report area, 61.44% are aged 18-64 years. Among the female population, 60.22% are aged 18-64 years.

Report Area	Male	Female	Male, Percent	Female, Percent
Schenectady County, NY	48,150	48,918	61.44%	60.22%
New York	6,079,459	6,222,397	62.66%	61.18%
United States	101,632,138	101,140,117	61.77%	60.26%

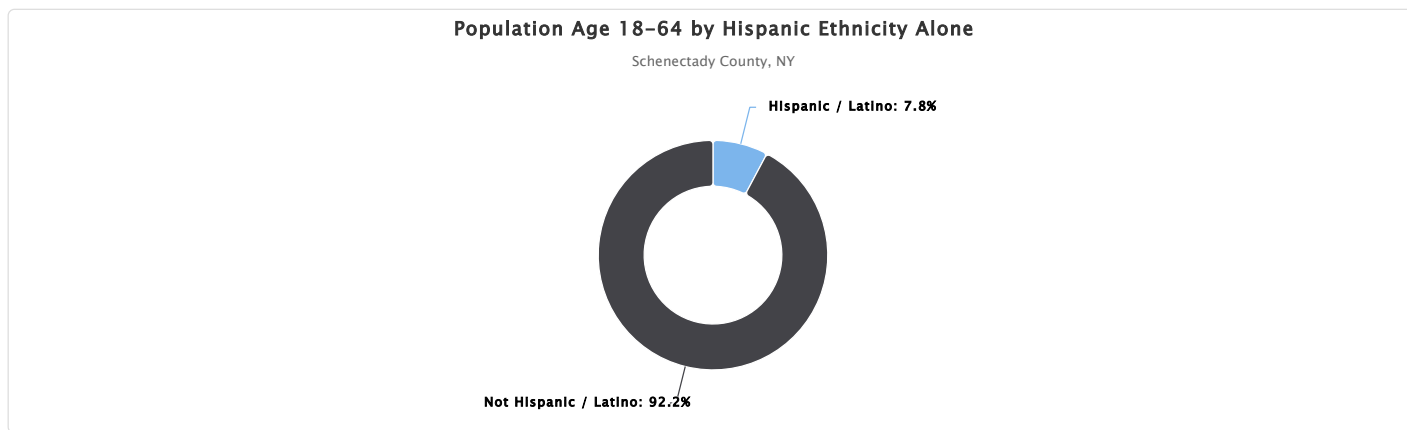
Data Source: US Census Bureau, American Community Survey, 2019-23.



### Population Age 18-64 by Hispanic Ethnicity Alone

This indicator reports the percentage of population by Hispanic ethnicity alone that are between the ages of 18 to 64. In the report area, among the population age 18-64, 7.77% are Hispanic or Latino and 92.23% are not Hispanic or Latino.

Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Schenectady County, NY	7,544	89,524	7.77%	92.23%
New York	2,453,803	9,848,053	19.95%	80.05%
United States	39,000,339	163,771,916	19.23%	80.77%

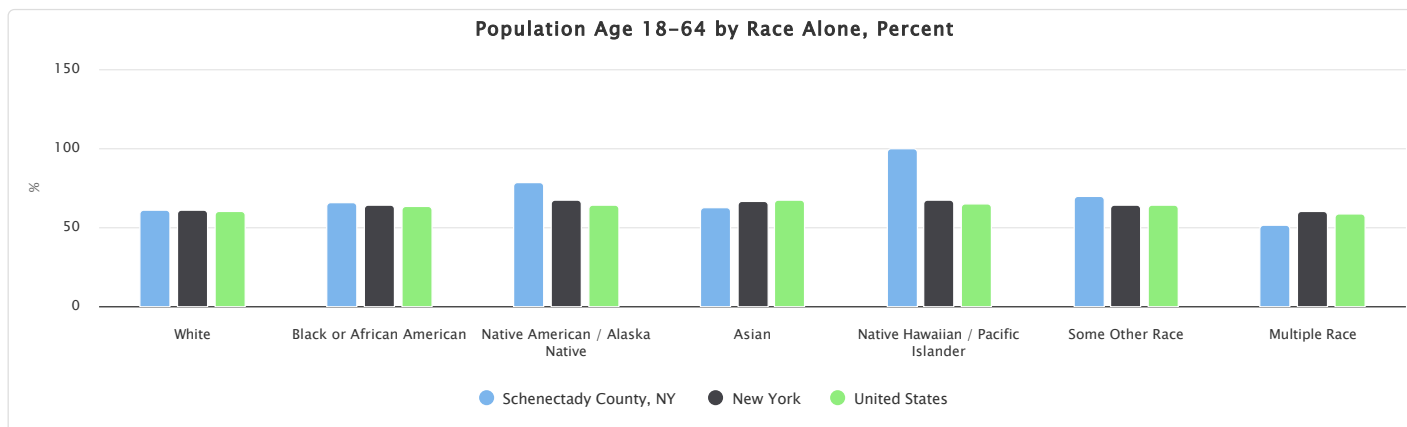


## Population Age 18-64 by Race Alone, Percent

This indicator reports the percentage of population age 18-64 by race alone. The percentage values could be interpreted as, for example, "Among the white population in the report area, the percentage of the population age 18-64 is (value)."

Report Area	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	60.70%	65.32%	78.57%	62.24%	100.00%	69.27%	51.11%
New York	60.67%	63.83%	66.77%	66.52%	66.90%	63.76%	59.64%
United States	60.22%	63.17%	63.68%	66.76%	64.39%	63.91%	57.98%

Data Source: US Census Bureau, American Community Survey, 2019-23.



## Population Age 18-64 by Race Alone, Total

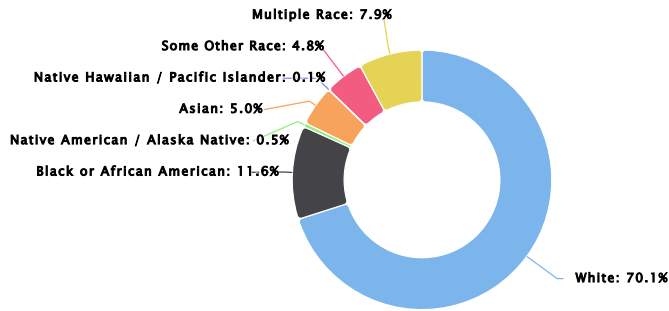
This indicator reports the proportion of each race (alone) making up the population aged 18 to 64.

Report Area	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	68,036	11,283	484	4,853	54	4,676	7,682
New York	6,880,837	1,868,266	68,722	1,176,937	6,470	1,243,336	1,057,288
United States	126,980,899	25,943,978	1,862,598	12,920,437	405,219	14,023,237	20,635,887

Data Source: US Census Bureau, American Community Survey, 2019-23.

### Population Age 18-64 by Race Alone, Total

Schenectady County, NY

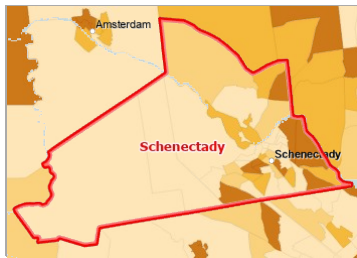


### Population Age 5-17

Of the estimated 159,603 total population in the report area, an estimated 25,191 persons are youth between the ages of 5 and 17, representing 15.78% of the population. These data are based on the latest U.S. Census Bureau American Community Survey 5-year estimates. The number of young persons in the report area is relevant because this population has needs which should be considered separately from other age groups.

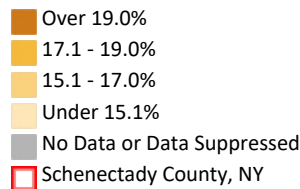
Report Area	Total Population	Population Age 5-17	Population Age 5-17, Percent
Schenectady County, NY	159,603	25,191	15.78%
New York	19,872,319	3,006,316	15.13%
United States	332,387,540	54,705,339	16.46%

Data Source: US Census Bureau, American Community Survey, 2019-23.



[View larger map](#)

### Population Age 5-17, Percent by Tract, ACS 2019-23

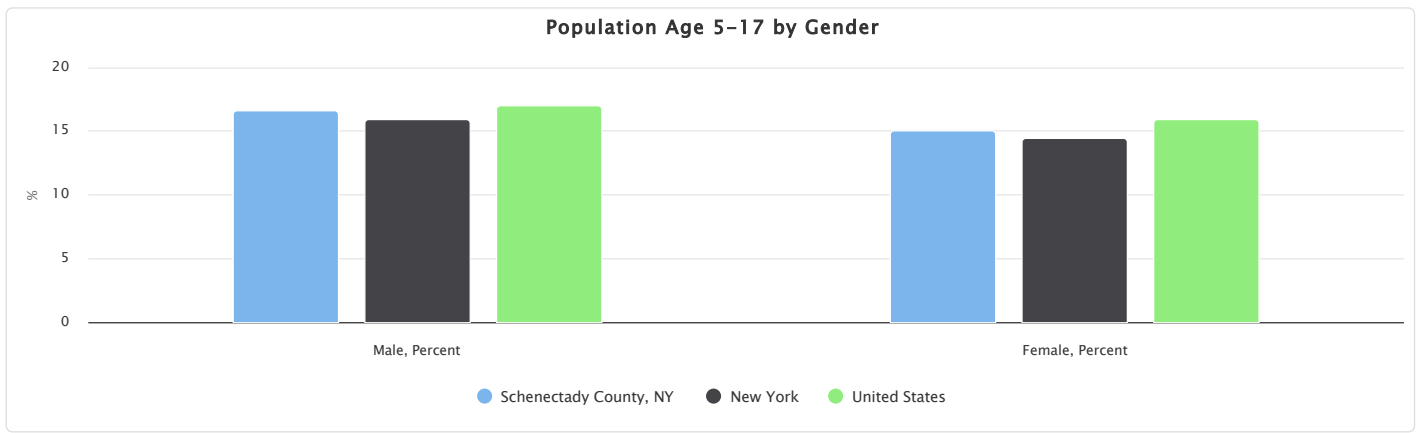


### Population Age 5-17 by Gender

The table below reports the percentage of the population that is age 5 to 17 by gender. Among the male population in the report area, 16.57% are aged 5-17 years. Among the female population, 15.02% are aged 5-17 years.

Report Area	Male	Female	Male, Percent	Female, Percent
Schenectady County, NY	12,987	12,204	16.57%	15.02%
New York	1,540,370	1,465,946	15.88%	14.41%
United States	28,005,434	26,699,905	17.02%	15.91%

Data Source: US Census Bureau, American Community Survey, 2019-23.

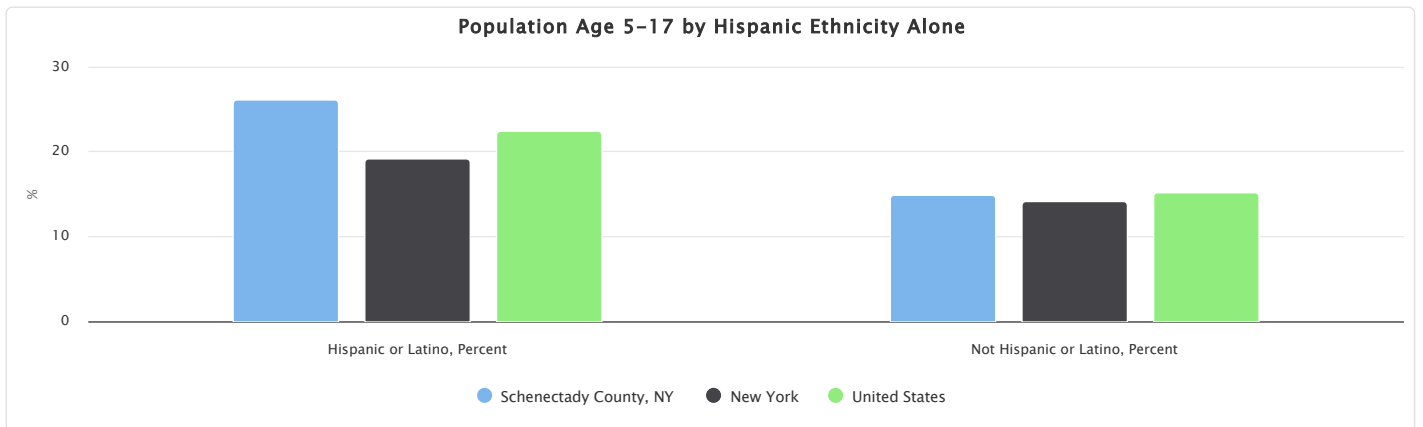


### Population Age 5-17 by Hispanic Ethnicity Alone

This indicator reports the percentage of population that are at age 5-17 by Hispanic ethnicity alone. In the report area, 26.11% of the Hispanic or Latino population and 14.88% of the non-Hispanic or Latino population are between the ages of 5-17.

Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Schenectady County, NY	3,356	21,835	26.11%	14.88%
New York	744,374	2,261,942	19.09%	14.16%
United States	14,089,638	40,615,701	22.32%	15.08%

Data Source: US Census Bureau, American Community Survey, 2019-23.

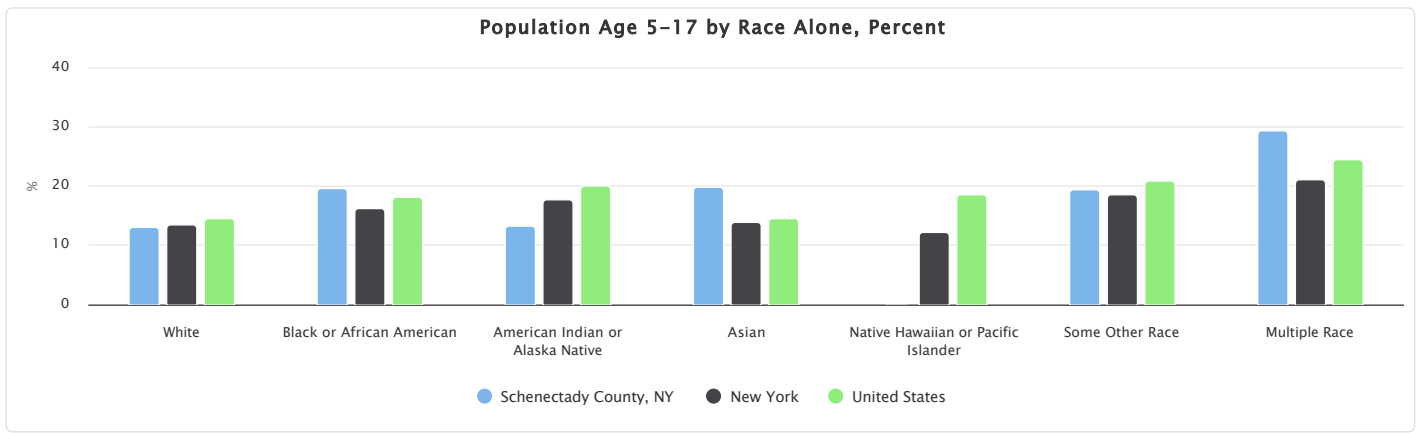


### Population Age 5-17 by Race Alone, Percent

This indicator reports the percentage of population age 5-17 by race alone. The percentage values could be interpreted as, for example, "Among the white population in the report area, the percentage of the population age 5-17 is (value)."

Report Area	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	12.92%	19.67%	13.15%	19.75%	0.00%	19.32%	29.21%
New York	13.51%	16.20%	17.77%	13.95%	12.26%	18.50%	21.02%
United States	14.48%	18.03%	19.93%	14.46%	18.54%	20.94%	24.39%

Data Source: US Census Bureau, American Community Survey, 2019-23.

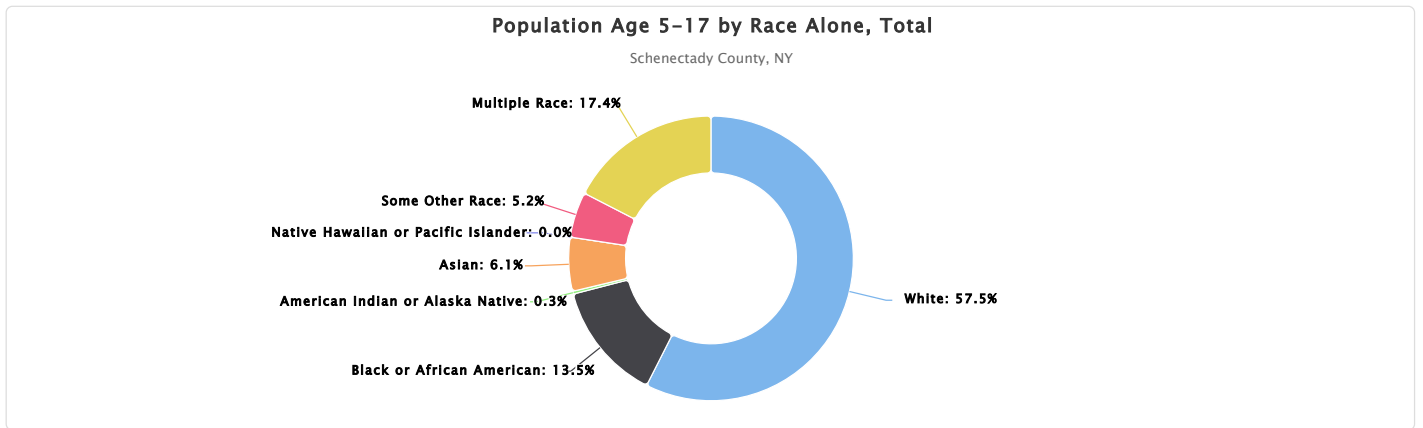


## Population Age 5-17 by Race Alone, Total

This indicator reports the proportion of each race (alone) making up the population aged 5 - 17.

Report Area	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	14,478	3,398	81	1,540	0	1,304	4,390
New York	1,532,707	474,096	18,291	246,814	1,186	360,637	372,585
United States	30,528,016	7,403,945	583,055	2,798,079	116,678	4,593,257	8,682,309

Data Source: US Census Bureau, American Community Survey, 2019-23.

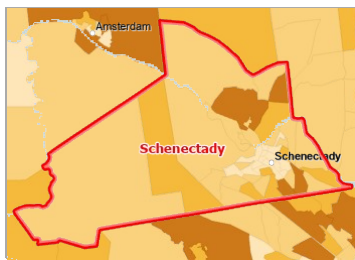


## Population Age 65+

Of the estimated 159,603 total population in the report area, an estimated 28,091 persons are adults aged 65 and older, representing 17.60% of the population. These data are based on the latest U.S. Census Bureau American Community Survey 5-year estimates. The number of older adults in the report area is relevant because this population has unique needs which should be considered separately from other age groups.

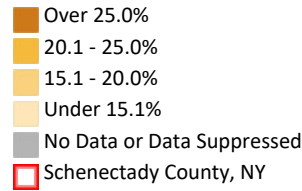
Report Area	Total Population	Population Age 65+	Population Age 65+, Percent
Schenectady County, NY	159,603	28,091	17.60%
New York	19,872,319	3,461,186	17.42%
United States	332,387,540	55,970,047	16.84%

Data Source: US Census Bureau, American Community Survey, 2019-23.



[View larger map](#)

#### Population Age 65+, Percent by Tract, ACS 2019-23

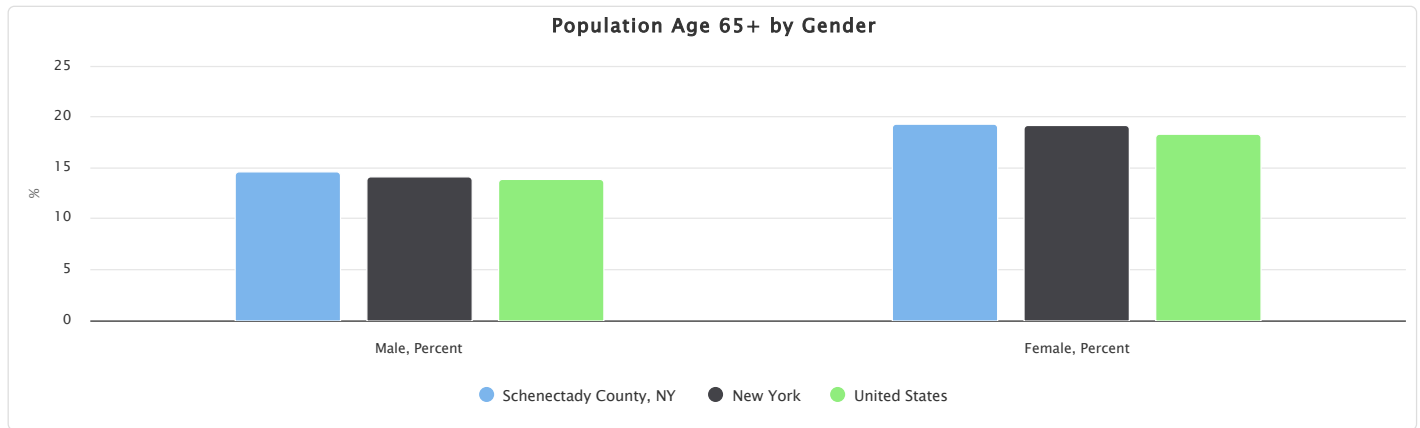


## Population Age 65+ by Gender

The table below reports the percentage of the population that is age 65 or older by gender. Among the male population in the report area, 14.55% are aged 65 years or older. Among the female population, 19.31% are aged 65 years or older.

Report Area	Male	Female	Male, Percent	Female, Percent
Schenectady County, NY	11,405	15,683	14.55%	19.31%
New York	1,364,607	1,941,925	14.06%	19.09%
United States	22,891,164	30,750,968	13.91%	18.32%

Data Source: US Census Bureau, American Community Survey, 2019-23.

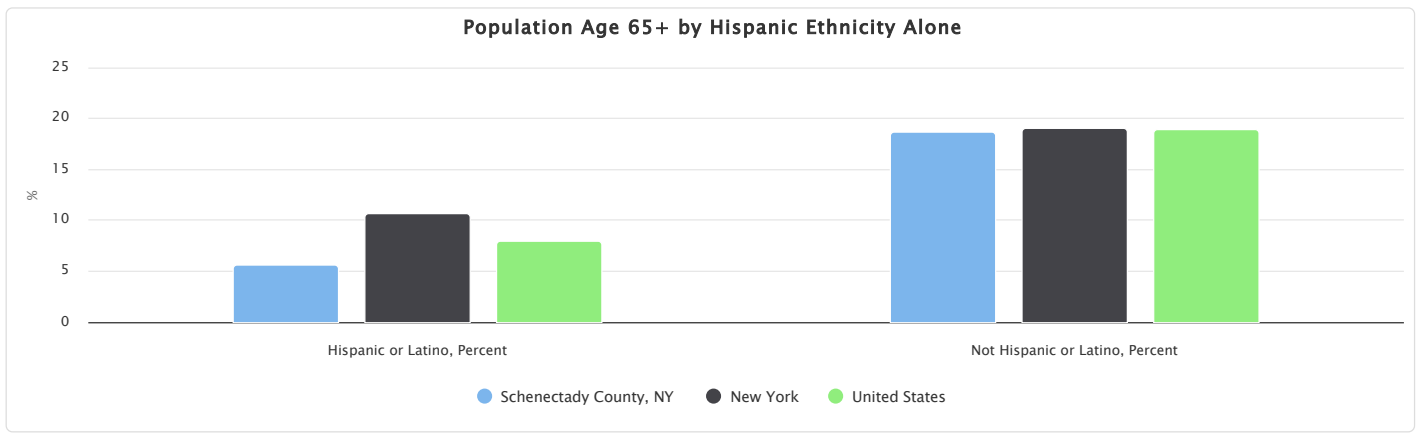


## Population Age 65+ by Hispanic Ethnicity Alone

This indicator reports the percentage of population that are at age 65+ by Hispanic ethnicity alone. In the report area, 5.66% of Hispanic / Latino population are at age 65+, and 18.65% of non Hispanic / Latino population are at age 65+.

Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Schenectady County, NY	727	27,364	5.66%	18.65%
New York	414,496	3,046,690	10.63%	19.07%
United States	5,044,304	50,925,743	7.99%	18.91%

Data Source: US Census Bureau, American Community Survey, 2019-23.

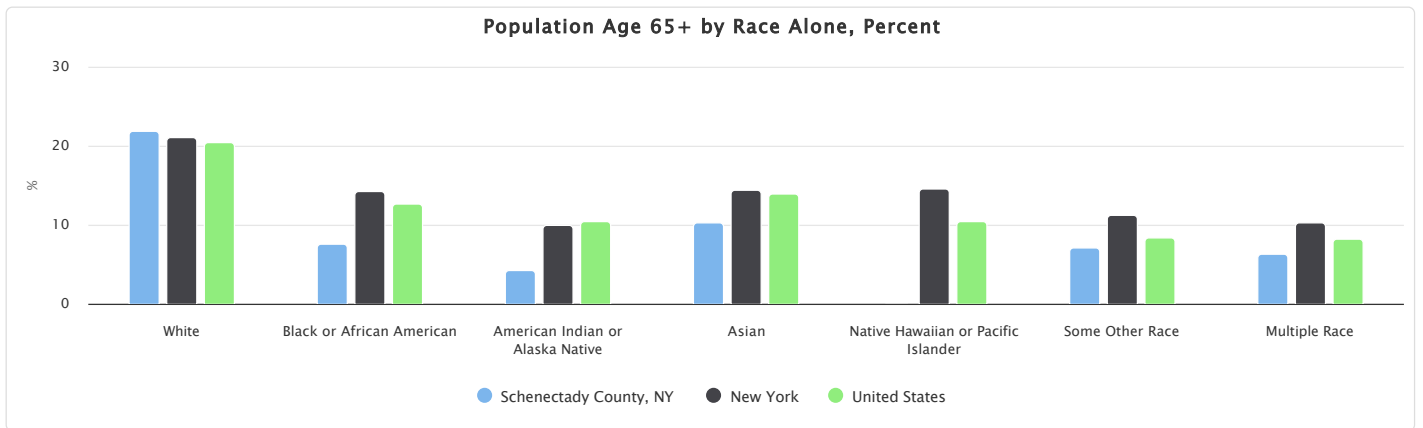


## Population Age 65+ by Race Alone, Percent

This indicator reports the percentage of population age 65+ by race alone. The percentage values could be interpreted as, for example, "Among the white population in the report area, the percentage of the population age 65+ is (value)."

Report Area	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	21.90%	7.52%	4.22%	10.25%	0.00%	7.08%	6.31%
New York	21.00%	14.21%	9.93%	14.34%	14.46%	11.20%	10.18%
United States	20.40%	12.59%	10.32%	13.82%	10.46%	8.36%	8.16%

Data Source: US Census Bureau, American Community Survey, 2019-23.



## Population Age 65+ by Race Alone, Total

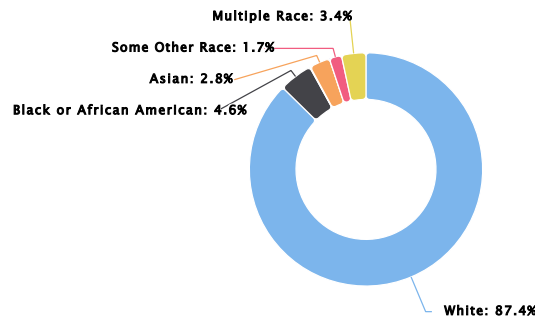
This indicator reports the proportion of each race (alone) making up the population aged 65 or older.

Report Area	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	24,541	1,299	26	799	0	478	948
New York	2,381,327	415,809	10,217	253,711	1,398	218,300	180,424
United States	43,015,029	5,171,484	301,996	2,674,875	65,800	1,835,121	2,905,742

Data Source: US Census Bureau, American Community Survey, 2019-23.

### Population Age 65+ by Race Alone, Total

Schenectady County, NY



## Population Geographic Mobility

This indicator reports information about population in-migration by assessing changes in residence within a one year period. Of the 157,926 persons residing in the report area, an estimated 6.35% relocated to the area, according to the latest American Community Survey 5-year estimates. 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.

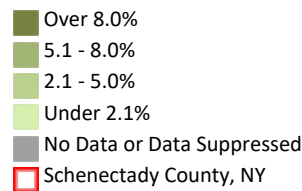
Report Area	Total Population	Population In-Migration	Percent Population In-Migration
Schenectady County, NY	157,926	10,034	6.35%
New York	19,658,209	931,193	4.74%
United States	328,888,644	19,939,931	6.06%

Data Source: US Census Bureau, American Community Survey, 2019-23.



[View larger map](#)

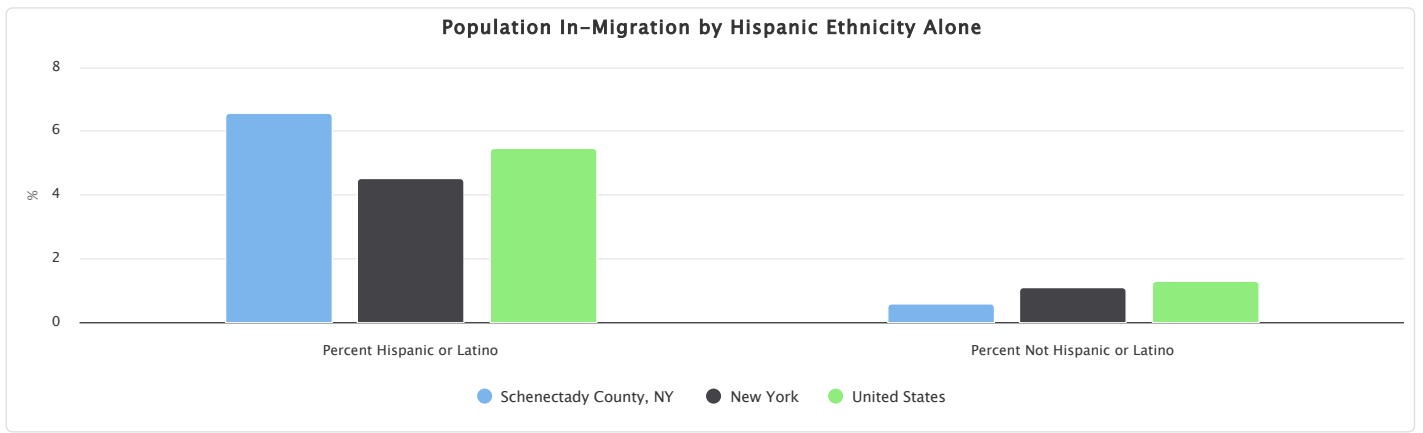
### Population Migrated from Outside of the County, State, or Country, Percent of Total Population by Tract, ACS 2019-23



## Population In-Migration by Hispanic Ethnicity Alone

Report Area	Total Hispanic or Latino	Total Not Hispanic or Latino	Percent Hispanic or Latino	Percent Not Hispanic or Latino
Schenectady County, NY	835	9,199	6.57%	0.57%
New York	173,505	757,688	4.52%	1.10%
United States	3,385,498	16,554,433	5.44%	1.27%

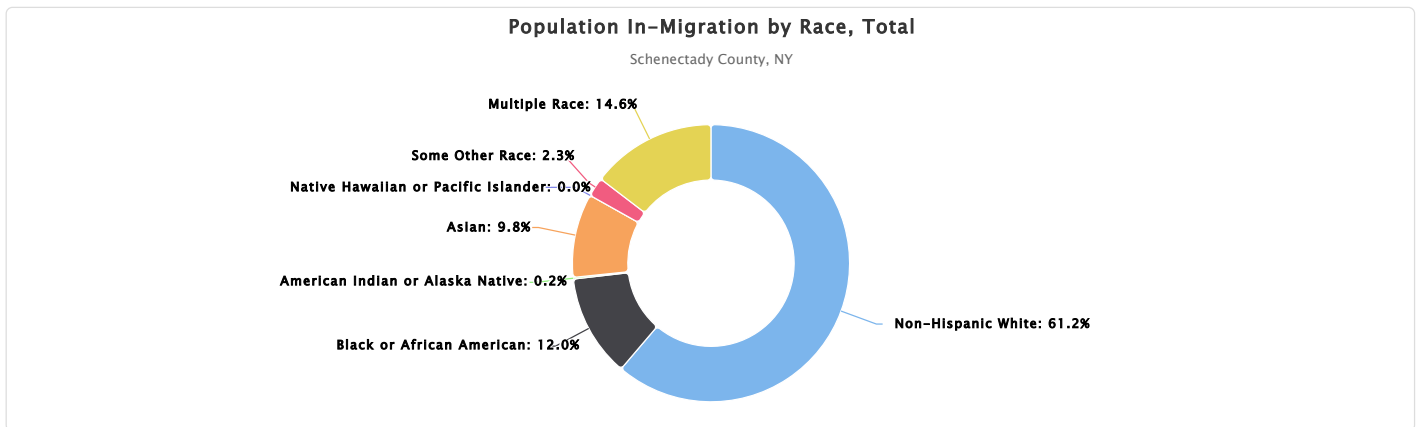
Data Source: US Census Bureau, American Community Survey, 2019-23.



## Population In-Migration by Race, Total

Report Area	Non-Hispanic White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	6,143	1,200	18	981	0	226	1,466
New York	512,382	126,025	5,526	122,328	750	76,854	87,328
United States	12,364,425	2,544,095	174,934	1,515,441	46,744	1,141,294	2,152,998

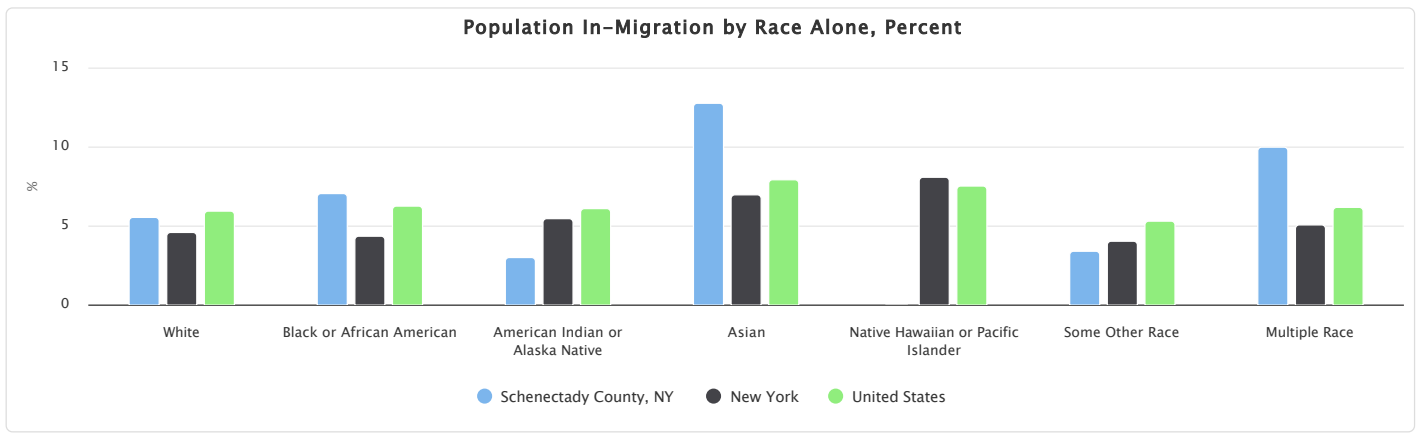
Data Source: US Census Bureau, American Community Survey, 2019-23.



## Population In-Migration by Race Alone, Percent

Report Area	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	5.53%	7.01%	2.97%	12.77%	0.00%	3.37%	9.95%
New York	4.56%	4.35%	5.43%	6.98%	8.02%	3.99%	5.02%
United States	5.92%	6.26%	6.04%	7.90%	7.53%	5.27%	6.16%

Data Source: US Census Bureau, American Community Survey, 2019-23.

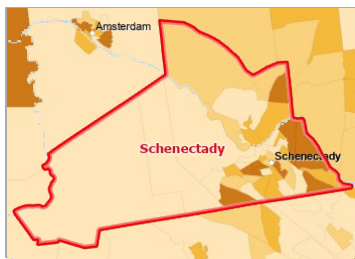


## Population Under Age 18

Of the estimated 159,603 total population in the report area, an estimated 34,444 persons are under the age of 18, representing 21.58% of the population. These data are based on the latest U.S. Census Bureau American Community Survey 5-year estimates. The number of persons under age 18 is relevant because this population has unique needs which should be considered separately from other age groups.

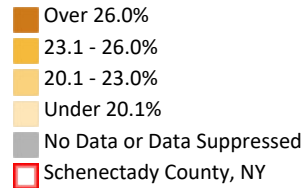
Report Area	Total Population	Population Age 0-17	Population Age 0-17, Percent
Schenectady County, NY	159,603	34,444	21.58%
New York	19,872,319	4,109,277	20.68%
United States	332,387,540	73,645,238	22.16%

Data Source: US Census Bureau, American Community Survey, 2019-23.



[View larger map](#)

### Population Age 0-17, Percent by Tract, ACS 2019-23

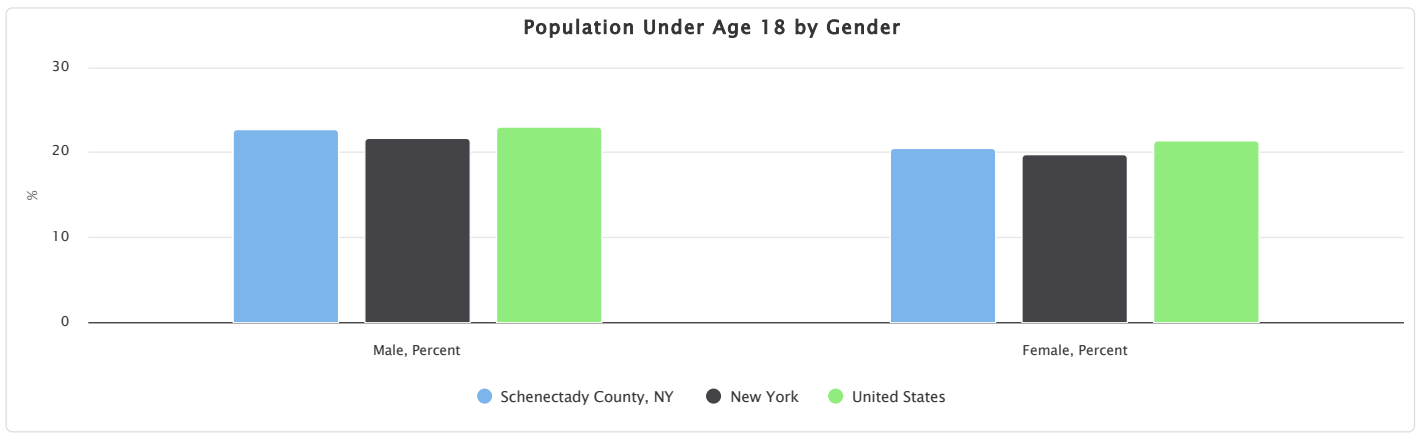


## Population Under Age 18 by Gender

This indicator reports the percentage of population that is under age 18 by gender, when compared to the total population of all ages, by gender.

Report Area	Male	Female	Male, Percent	Female, Percent
Schenectady County, NY	17,807	16,637	22.72%	20.48%
New York	2,103,697	2,005,580	21.68%	19.72%
United States	37,693,870	35,951,368	22.91%	21.42%

Data Source: US Census Bureau, American Community Survey, 2019-23.

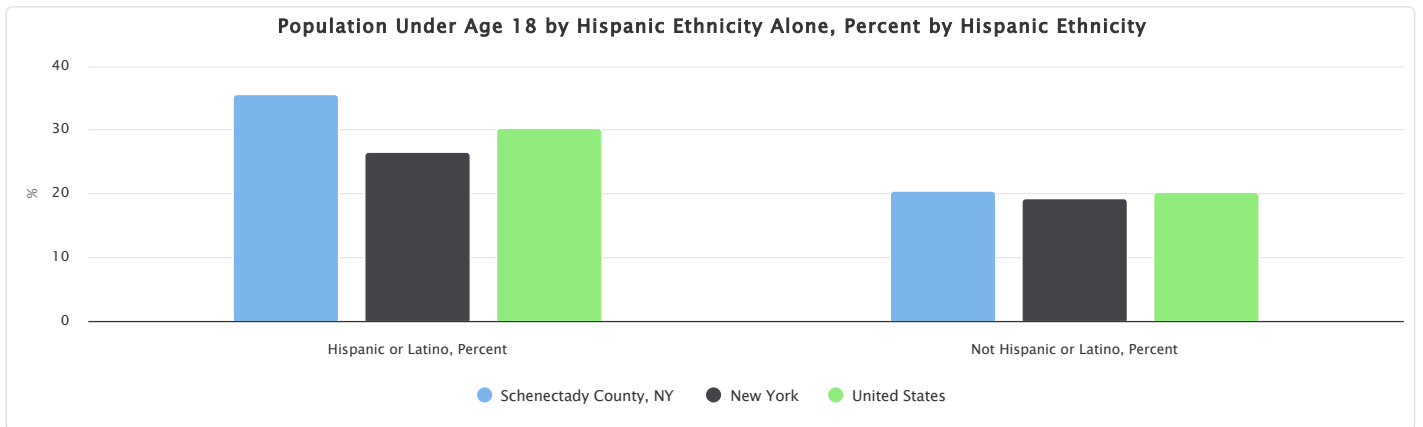


### Population Under Age 18 by Hispanic Ethnicity Alone, Percent by Hispanic Ethnicity

This indicator reports the percentage of population who are under age 18 by Hispanic ethnicity alone during 2019-2023, according to the American Community Survey (ACS). Within the report area, there were 4,584 persons of Hispanic or Latino origin under age 18 in the report area, representing 35.66% of the Hispanic or Latino population. There were 29,860 persons not of Hispanic or Latino origin under age 18 in the report area, representing 20.35% of the total non-Hispanic population. Data for this indicator is only reported for individuals where age, race, and ethnicity were identified in the American Community Survey.

Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Schenectady County, NY	4,584	29,860	35.66%	20.35%
New York	1,030,353	3,078,924	26.43%	19.27%
United States	19,086,946	54,558,292	30.23%	20.26%

Data Source: US Census Bureau, American Community Survey, 2019-23.



### Population Under Age 18 by Hispanic Ethnicity Alone, Percent of Total

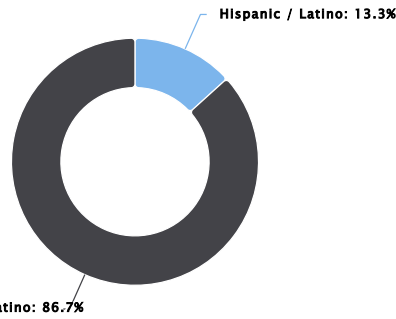
This indicator reports the percentage of population who are under age 18 by Hispanic ethnicity alone during 2019-2023, according to the American Community Survey (ACS). Within the report area, there were 4,584 persons of Hispanic or Latino origin under age 18, representing 13.31% of the total population under age 18. There were 29,860 persons not of Hispanic or Latino origin under age 18 in the report area, representing 86.69% of the total population under age 18. Data for this indicator is only reported for individuals where age, race, and ethnicity were identified in the American Community Survey.

Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Schenectady County, NY	4,584	29,860	13.31%	86.69%
New York	1,030,353	3,078,924	25.07%	74.93%
United States	19,086,946	54,558,292	25.92%	74.08%

Data Source: US Census Bureau, American Community Survey, 2019-23.

### Population Under Age 18 by Hispanic Ethnicity Alone, Percent of Total

Schenectady County, NY



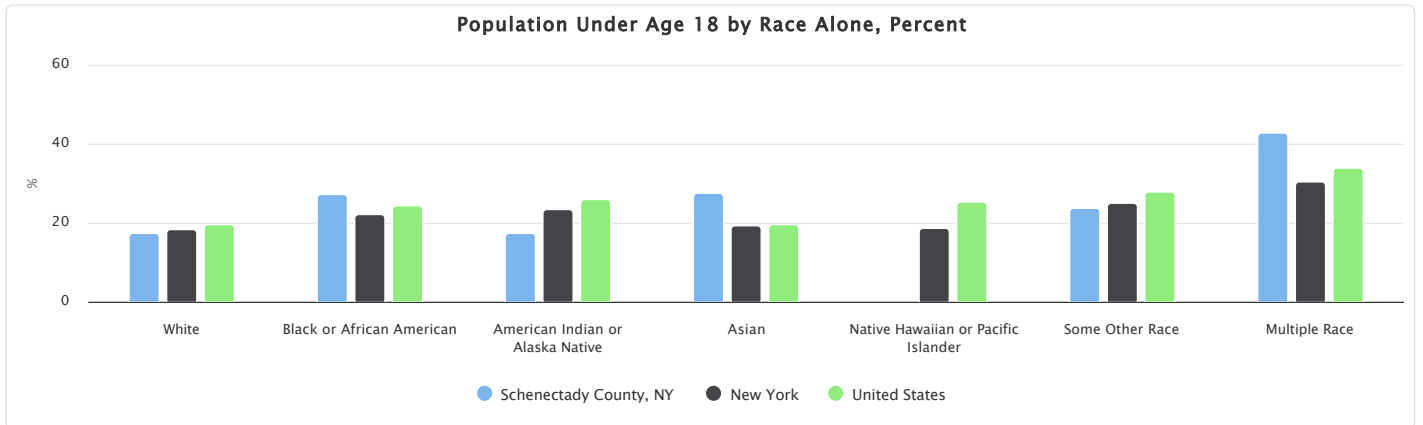
### Population Under Age 18 by Race Alone, Percent

This indicator reports the percentage of population that is under age 18 by race alone. The percentage values could be interpreted as, for example, "Of all the white population in the report area, the percentage under age 18 is (value)."

Report Area	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	17.40%	27.16%	17.21%	27.51%	No data	23.64%	42.59%
New York	18.33%	21.97%	23.31%	19.14%	18.64%	25.04%	30.18%
United States	19.39%	24.24%	26.00%	19.42%	25.15%	27.72%	33.86%

Data Source: US Census Bureau, American Community Survey, 2019-23.

### Population Under Age 18 by Race Alone, Percent

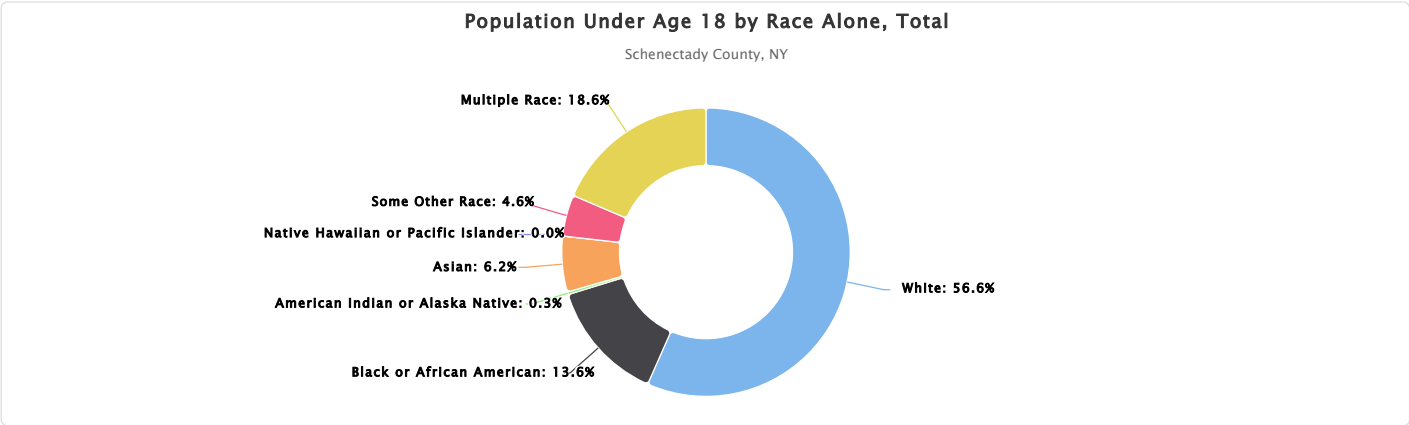


### Population Under Age 18 by Race Alone, Total

This indicator reports the proportion of each race (alone) making up the population under age 18.

Report Area	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	19,505	4,691	106	2,145	0	1,596	6,401
New York	2,078,780	642,933	23,988	338,576	1,803	488,268	534,929
United States	40,879,518	9,955,428	760,402	3,757,347	158,273	6,082,178	12,052,092

Data Source: US Census Bureau, American Community Survey, 2019-23.

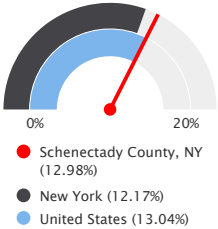


### Population with Any Disability

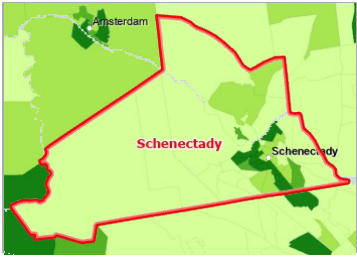
This indicator reports the percentage of the total civilian non-institutionalized population with any disability. The report area has a total population of 158,042 for whom disability status has been determined, of which 20,507 or 12.98% have any disability. This indicator is relevant because disabled individuals may require targeted services and outreach by providers.

Report Area	Total Population (For Whom Disability Status Is Determined)	Population with Any Disability	Population with Any Disability, Percent
Schenectady County, NY	158,042	20,507	<b>12.98%</b>
New York	19,674,246	2,394,964	12.17%
United States	327,425,278	42,703,063	13.04%

Population with Any Disability Percent



Note: This indicator is compared to the state average.  
Data Source: US Census Bureau, American Community Survey, 2019-23.



[View larger map](#)

Population with Any Disability, Percent by Tract, ACS 2019-23

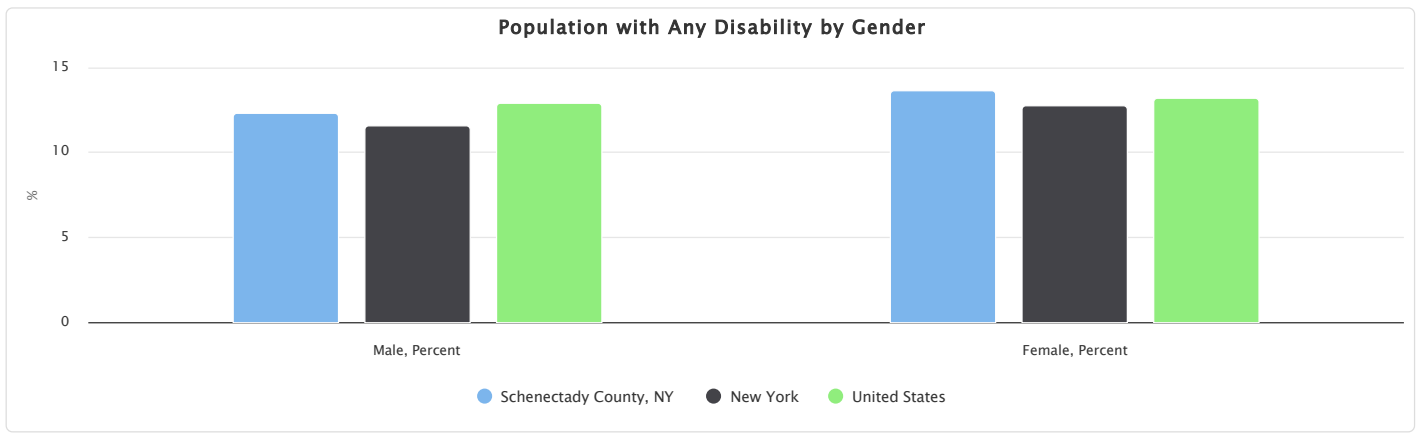
- Over 18.0%
- 15.1 - 18.0%
- 12.1 - 15.0%
- Under 12.1%
- No Data or Data Suppressed
- Schenectady County, NY

### Population with Any Disability by Gender

This indicator reports the percentage of the total civilian non-institutionalized population with a disability by gender. Of the total male population in the report area, the percentage with a disability is 12.29%. Of the total females in the report area, the percentage with a disability is 13.64%.

Report Area	Male	Female	Male, Percent	Female, Percent
Schenectady County, NY	9,561	10,946	12.29%	13.64%
New York	1,105,868	1,289,096	11.55%	12.77%
United States	20,717,340	21,985,723	12.87%	13.21%

Data Source: US Census Bureau, American Community Survey, 2019-23.

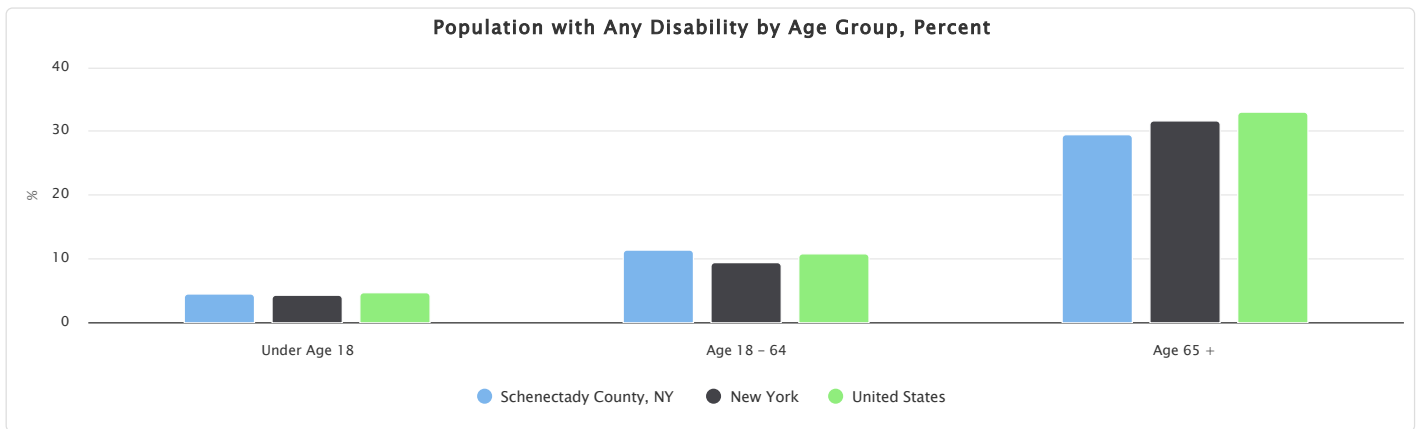


## Population with Any Disability by Age Group, Percent

This indicator reports the percentage of the total civilian non-institutionalized population with a disability by age group. The percentage values could be interpreted as, for example, "Among the population age 65+ in the report area, the percentage of population with disability is (value)."

Report Area	Under Age 18	Age 18 - 64	Age 65 +
Schenectady County, NY	4.43%	11.42%	29.47%
New York	4.32%	9.44%	31.63%
United States	4.69%	10.67%	32.95%

Data Source: US Census Bureau, American Community Survey, 2019-23.



## Population with Any Disability by Age Group, Total

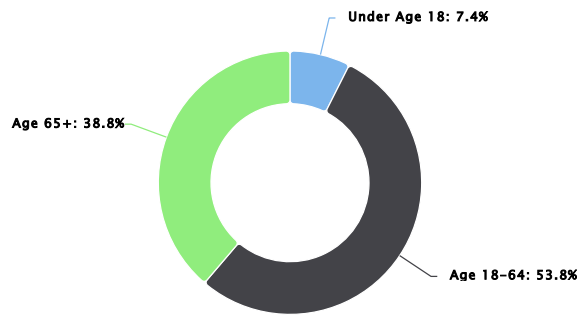
This indicator reports the proportion of the total civilian non-institutionalized population with a disability by age group.

Report Area	Under Age 18	Age 18-64	Age 65+
Schenectady County, NY	1,524	11,034	7,949
New York	177,333	1,151,101	1,066,530
United States	3,451,805	21,269,700	17,981,558

Data Source: US Census Bureau, American Community Survey, 2019-23.

### Population with Any Disability by Age Group, Total

Schenectady County, NY



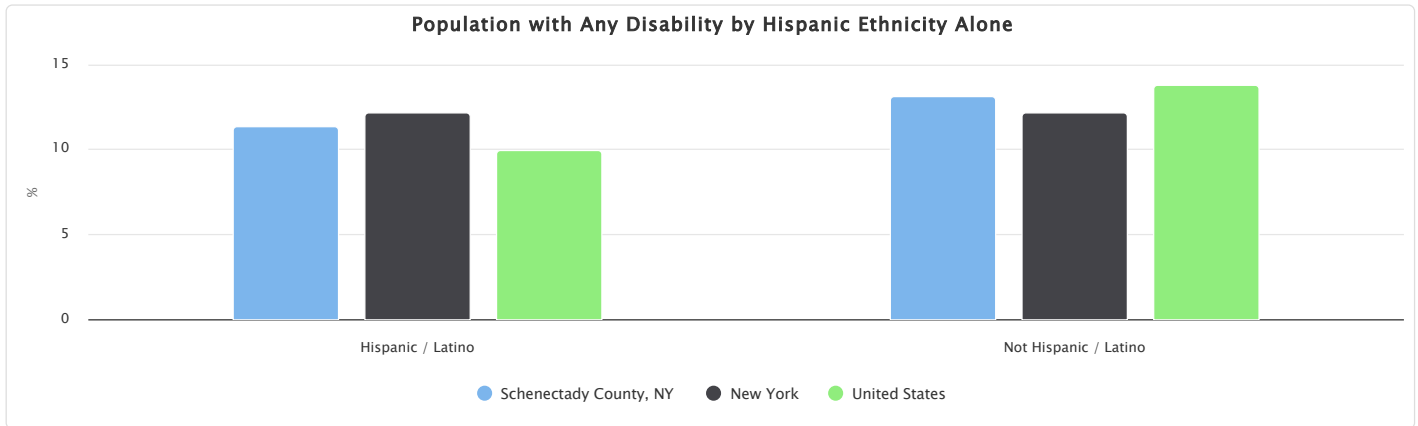
### Population with Any Disability by Hispanic Ethnicity Alone

This indicator reports the percentage of the total civilian non-institutionalized population with a disability by Hispanic ethnicity alone. The percentage values could be interpreted as, for example, "Among the Hispanic population in the report area, the percentage of the population with disability is (value)."

Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Schenectady County, NY	1,454	19,053	11.37%	13.12%
New York	470,370	1,924,594	12.16%	12.18%
United States	6,190,802	36,512,261	9.92%	13.78%

Data Source: US Census Bureau, American Community Survey, 2019-23.

### Population with Any Disability by Hispanic Ethnicity Alone

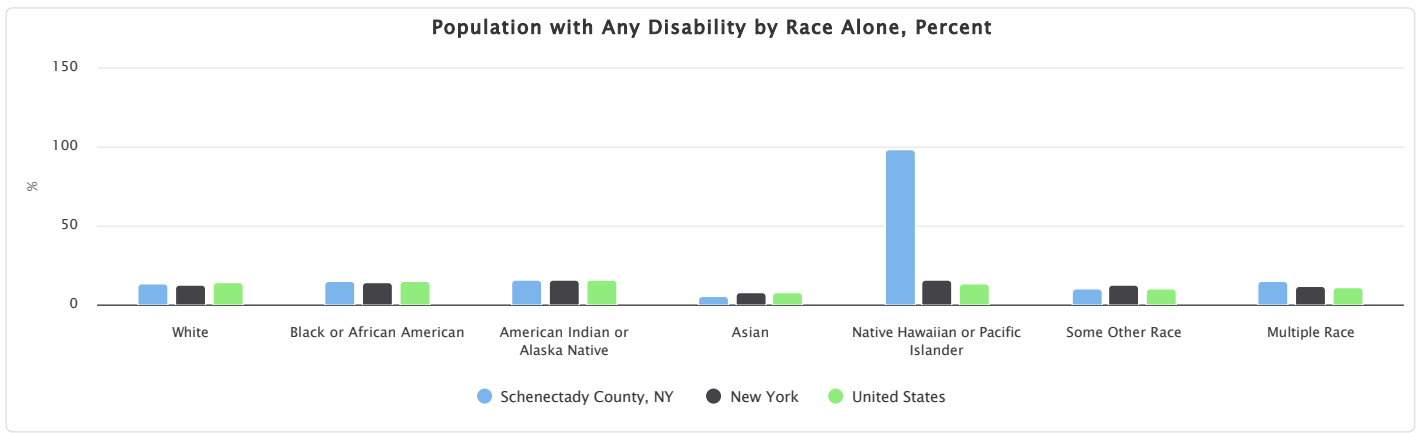


### Population with Any Disability by Race Alone, Percent

This indicator reports the percentage of the total civilian non-institutionalized population with a disability by race alone. The percentage values could be interpreted as, for example, "Of all the white population in the report area, the percentage of population with any disability is (value)."

Report Area	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	13.23%	14.37%	15.08%	4.93%	98.15%	10.16%	14.59%
New York	12.55%	13.73%	15.47%	7.81%	15.46%	11.96%	11.65%
United States	13.90%	14.46%	15.73%	7.88%	12.70%	10.01%	10.87%

Data Source: US Census Bureau, American Community Survey, 2019-23.

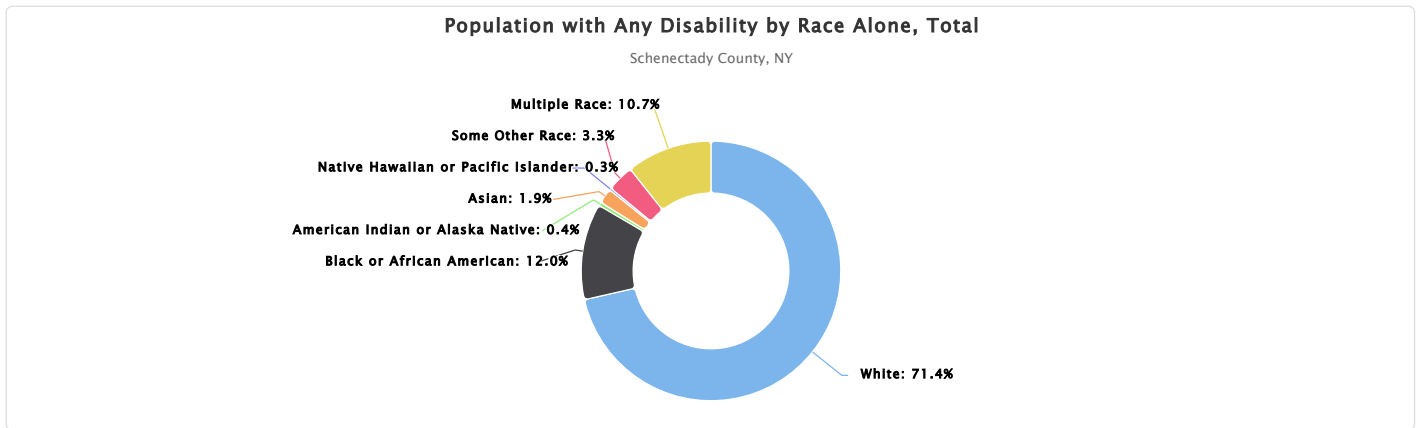


## Population with Any Disability by Race Alone, Total

This indicator reports the proportion of the total civilian non-institutionalized population with a disability by race alone.

Report Area	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	14,651	2,457	90	384	53	683	2,189
New York	1,409,328	394,031	15,791	137,752	1,444	231,374	205,244
United States	28,892,180	5,767,051	449,827	1,516,847	77,971	2,175,598	3,823,589

Data Source: US Census Bureau, *American Community Survey*. 2019-23.



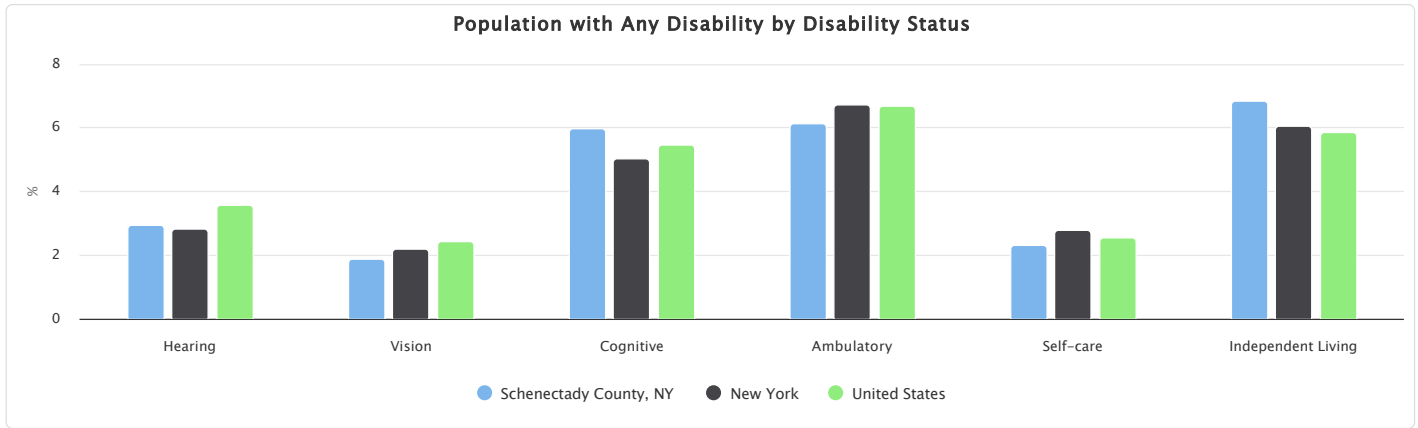
## Population with Any Disability by Disability Status

This indicator reports the percentage of the total civilian non-institutionalized population with a disability by disability status. Note that ACS measures disability status within different age groups: hearing and vision difficulty for all the people; cognitive, ambulatory, and self-care for people 5 years and older; and independent living for people 15 years and older (reported for people 18 years and older in ACS2019-23 data).

Percentage values can be interpreted as follows: Within the report area, individuals with hearing difficulty are 2.92% of the total population; individuals with vision difficulty are 1.89% of the total population; individuals with cognitive difficulty are 5.98% of the total population age 5+; individuals with ambulatory difficulty are 6.11% of the total population age 5+; individuals with self-care difficulty are 2.32% of the total population age 5+; and individuals with independent living difficulty are 6.85% of the total population age 18+.

Report Area	Hearing	Vision	Cognitive	Ambulatory	Self-care	Independent Living
Schenectady County, NY	2.92%	1.89%	5.98%	6.11%	2.32%	6.85%
New York	2.83%	2.18%	5.02%	6.70%	2.78%	6.06%
United States	3.57%	2.42%	5.44%	6.67%	2.56%	5.86%

Data Source: US Census Bureau, American Community Survey, 2019-23.

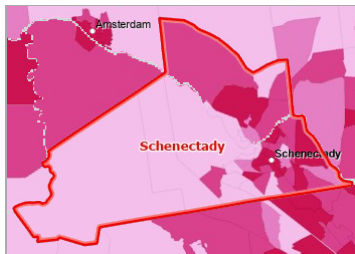
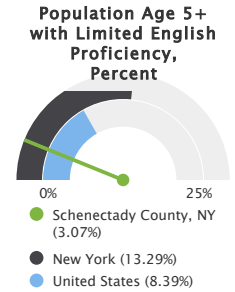


## Population with Limited English Proficiency

This indicator reports the percentage of the population aged 5 and older who speak a language other than English at home and speak English less than "very well". This indicator is relevant because an inability to speak English well creates barriers to healthcare access, provider communications, and health literacy/education. Of the 150,350 total population aged 5 and older in the report area, 4,617 or 3.07% have limited English proficiency.

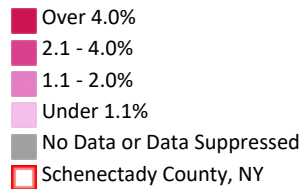
Report Area	Population Age 5+	Population Age 5+ with Limited English Proficiency	Population Age 5+ with Limited English Proficiency, Percent
Schenectady County, NY	150,350	4,617	3.07%
New York	18,769,358	2,494,875	13.29%
United States	313,447,641	26,299,012	8.39%

Note: This indicator is compared to the state average.  
Data Source: US Census Bureau, American Community Survey, 2019-23.



[View larger map](#)

### Population with Limited English Proficiency, Percent by Tract, ACS 2019-23

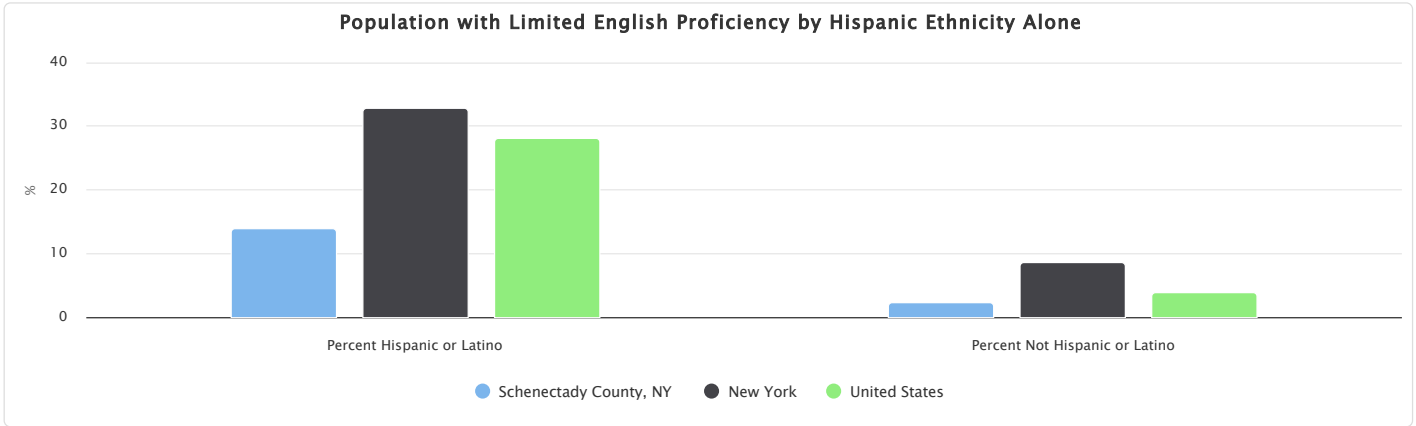


## Population with Limited English Proficiency by Hispanic Ethnicity Alone

This indicator reports the total and percentage of population aged 5 and older who speak a language other than English at home and speak English less than "very well" by Hispanic ethnicity alone in the report area. The percentage values could be interpreted as, for example, "Among the Hispanic population in the report area, the percentage of the population with limited English proficiency is (value)."

Report Area	Total Hispanic or Latino	Total Not Hispanic or Latino	Percent Hispanic or Latino	Percent Not Hispanic or Latino
Schenectady County, NY	1,612	3,005	13.86%	2.17%
New York	1,182,084	1,312,791	32.72%	8.66%
United States	16,290,980	10,008,032	28.02%	3.92%

Data Source: US Census Bureau, American Community Survey, 2019-23.



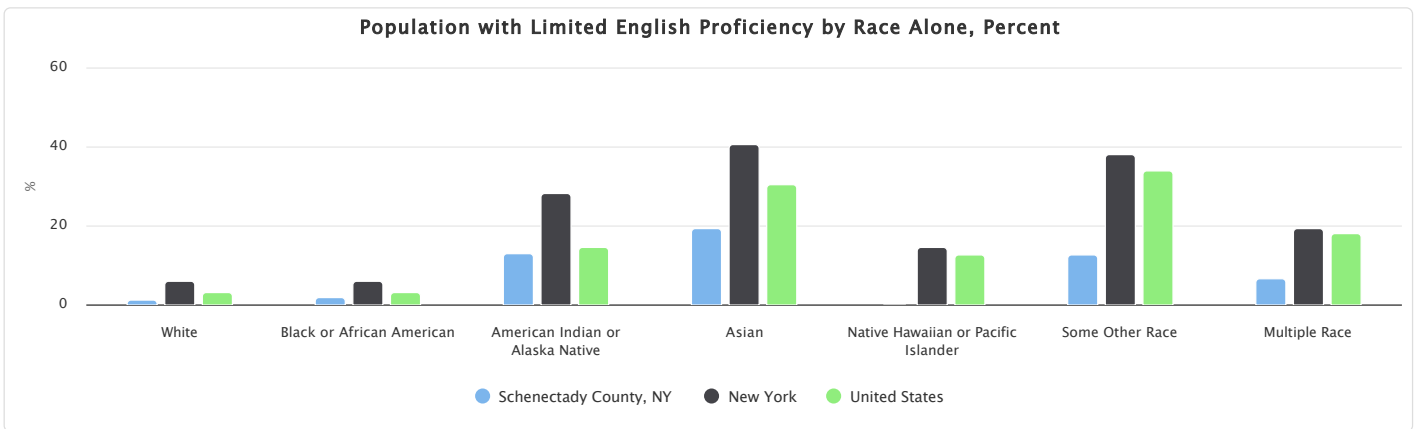
### Population with Limited English Proficiency by Race Alone, Percent

This indicator reports the percentage of the population aged 5 and older who speak a language other than English at home and speak English less than "very well" by race alone in the report area.

The percentage values could be interpreted as, for example, "Of all the white population in the report area, the percentage of population with limited English proficiency is (value)."

Report Area	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	1.16%	1.77%	12.86%	19.12%	0.00%	12.42%	6.42%
New York	5.76%	5.98%	28.09%	40.35%	14.49%	37.92%	19.33%
United States	3.13%	3.11%	14.39%	30.47%	12.50%	33.93%	18.06%

Data Source: US Census Bureau, American Community Survey, 2019-23.

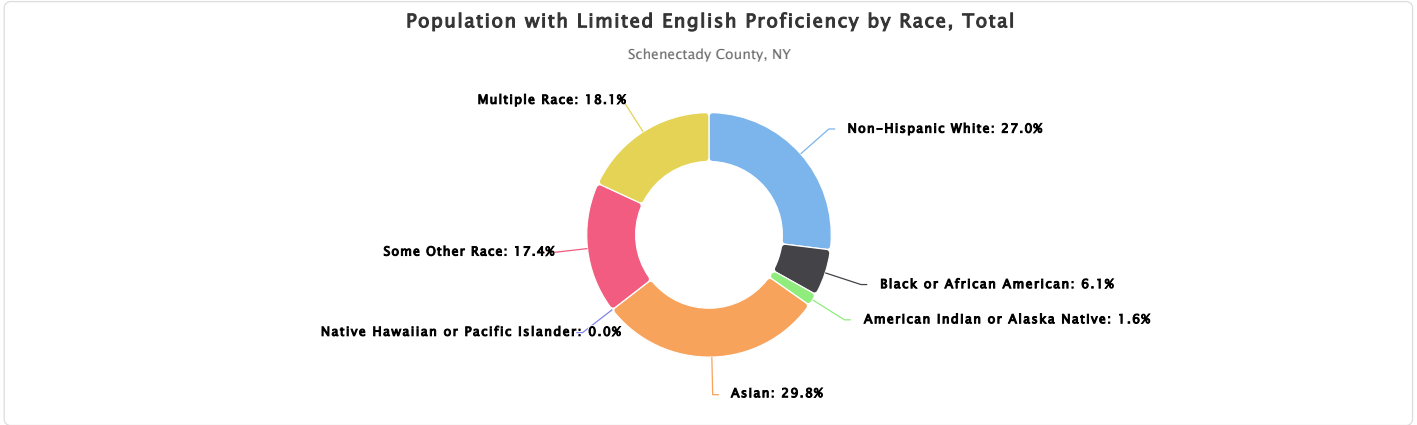


### Population with Limited English Proficiency by Race, Total

This indicator reports the total population aged 5 and older who speak a language other than English at home and speak English less than "very well" by race alone in the report area.

Report Area	Non-Hispanic White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	1,245	283	76	1,375	0	802	836
New York	621,898	165,054	27,315	676,921	1,312	691,054	311,321
United States	6,268,072	1,198,675	395,358	5,604,715	73,488	6,939,133	5,819,571

Data Source: US Census Bureau, American Community Survey, 2019-23.

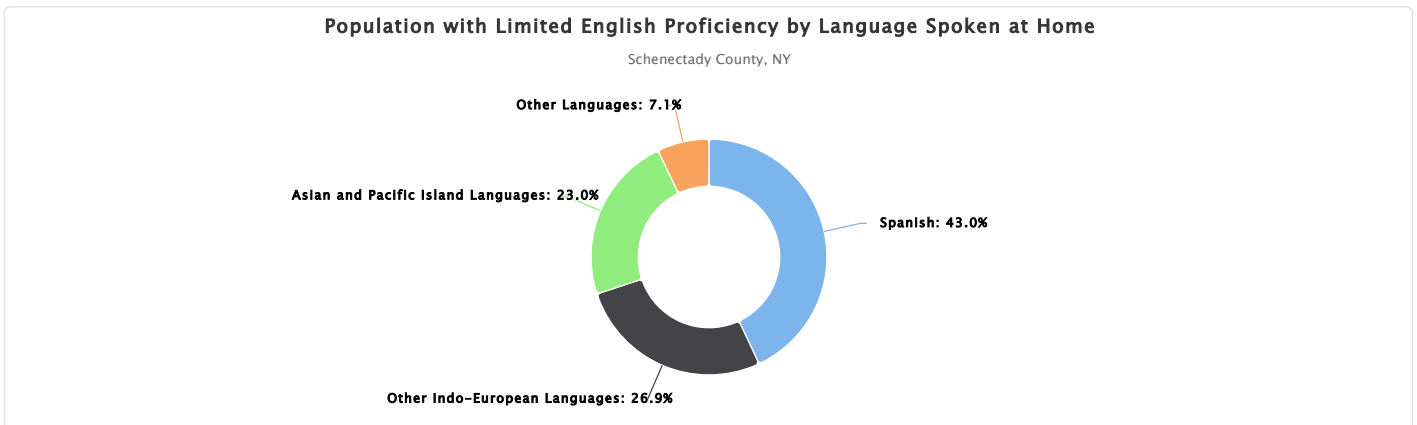


### Population with Limited English Proficiency by Language Spoken at Home

This indicator reports the total population aged 5 and older who speak a language other than English at home and speak English less than "very well" by language spoken at home in the report area.

Report Area	Spanish	Other Indo-European Languages	Asian and Pacific Island Languages	Other Languages
Schenectady County, NY	1,987	1,242	1,060	328
New York	1,203,088	659,675	526,038	106,074
United States	16,642,933	3,637,966	4,890,240	1,127,873

Data Source: US Census Bureau, American Community Survey, 2019-23.

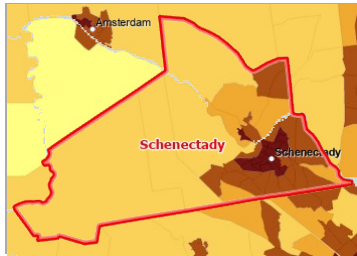


### Total Population

A total of 159,603 people live in the 204.67 square mile report area defined for this assessment according to the U.S. Census Bureau American Community Survey 2019-23 5-year estimates. The population density for this area, estimated at 780 persons per square mile, is greater than the national average population density of 94 persons per square mile.

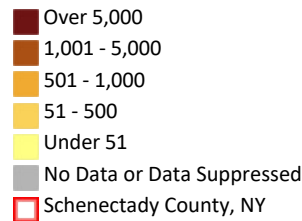
Report Area	Total Population	Total Land Area (Square Miles)	Population Density (Per Square Mile)
Schenectady County, NY	159,603	204.67	780
New York	19,872,319	47,123.42	422
United States	332,387,540	3,533,298.58	94

Data Source: US Census Bureau, American Community Survey, 2019-23.



[View larger map](#)

Population, Density (Persons per Sq Mile) by Tract, ACS 2019-23



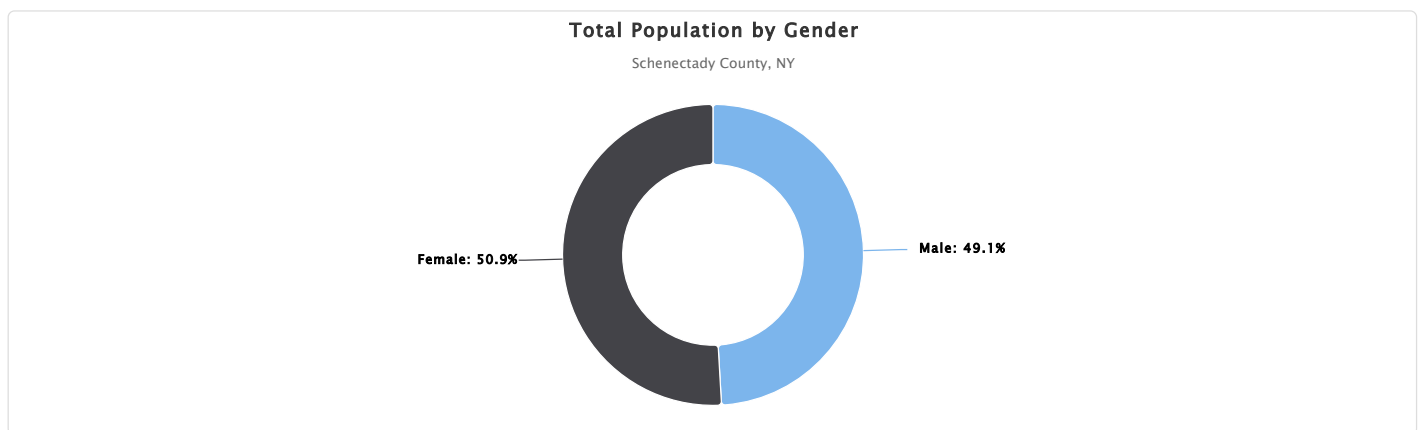
## Total Population by Gender

This indicator reports the total population of the report area by gender.

The percentage values could be interpreted as, for example, "Among the total report area population, the percentage of population that is male is (value)."

Report Area	Male	Female	Male, Percent	Female, Percent
Schenectady County, NY	78,365	81,238	49.10%	50.90%
New York	9,702,417	10,169,902	48.82%	51.18%
United States	164,545,087	167,842,453	49.50%	50.50%

Data Source: US Census Bureau, American Community Survey, 2019-23.



## Total Population by Age Groups, Total

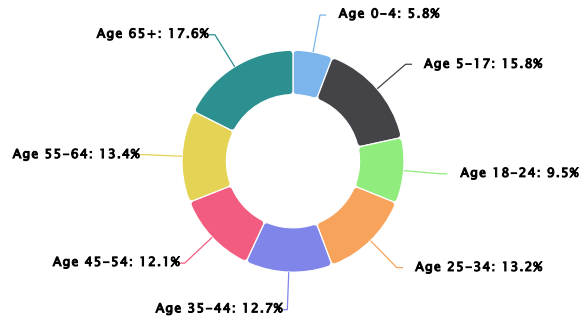
This indicator reports the total population of the report area by age groups.

Report Area	Age 0-4	Age 5-17	Age 18-24	Age 25-34	Age 35-44	Age 45-54	Age 55-64	Age 65+
Schenectady County, NY	9,253	25,191	15,224	20,991	20,230	19,259	21,364	28,091
New York	1,102,961	3,006,316	1,766,904	2,835,463	2,554,229	2,474,561	2,670,699	3,461,186
United States	18,939,899	54,705,339	30,307,641	45,497,632	43,492,887	40,847,713	42,626,382	55,970,047

Data Source: US Census Bureau, American Community Survey, 2019-23.

### Total Population by Age Groups, Total

Schenectady County, NY



### Total Population by Age Groups, Percent

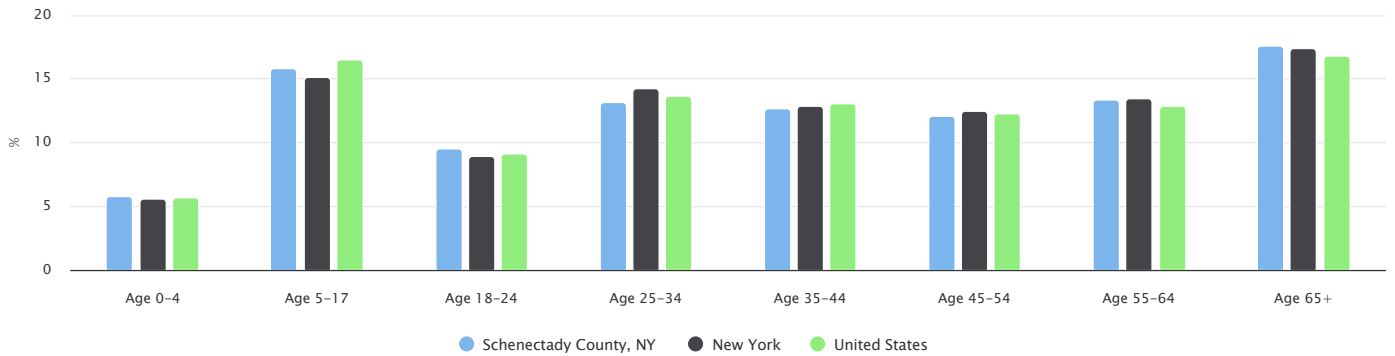
This indicator reports the percentage of age groups in the population of the report area.

The percentage values could be interpreted as, for example, "Of the total population in the report area, the percentage of population age 0-4 is (value)."

Report Area	Age 0-4	Age 5-17	Age 18-24	Age 25-34	Age 35-44	Age 45-54	Age 55-64	Age 65+
Schenectady County, NY	5.80%	15.78%	9.54%	13.15%	12.68%	12.07%	13.39%	17.60%
New York	5.55%	15.13%	8.89%	14.27%	12.85%	12.45%	13.44%	17.42%
United States	5.70%	16.46%	9.12%	13.69%	13.08%	12.29%	12.82%	16.84%

Data Source: US Census Bureau, American Community Survey, 2019-23.

### Total Population by Age Groups, Percent

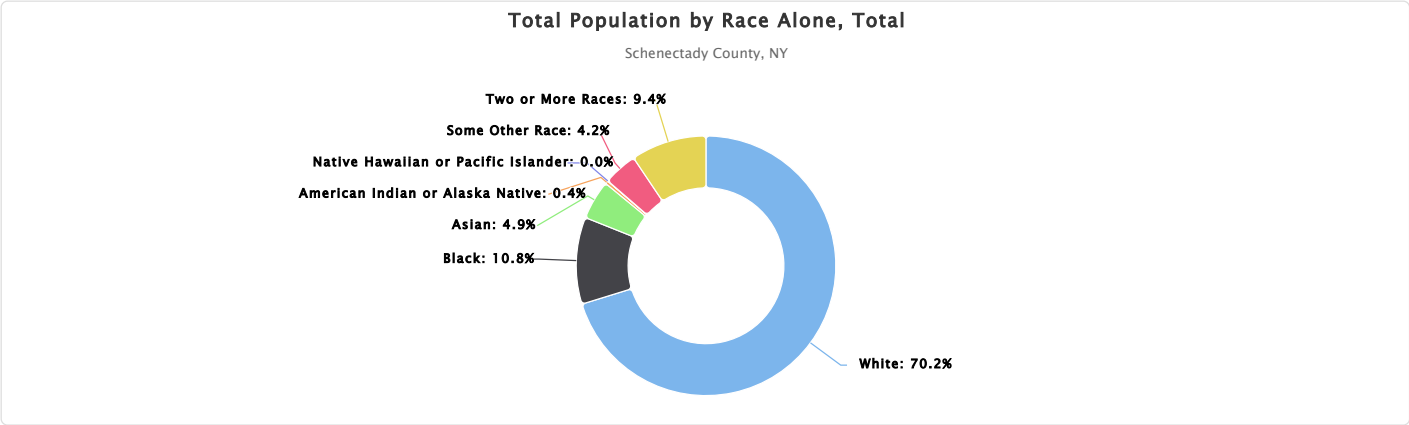


### Total Population by Race Alone, Total

This indicator reports the total population of the report area by race alone, without considering respondents' ethnicity. An ACS survey respondent may identify as a single race, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races."

Report Area	White	Black	Asian	American Indian or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race	Two or More Races
Schenectady County, NY	112,082	17,273	7,797	616	54	6,750	15,031
New York	11,340,944	2,927,008	1,769,224	102,927	9,671	1,949,904	1,772,641
United States	210,875,446	41,070,890	19,352,659	2,924,996	629,292	21,940,536	35,593,721

Data Source: US Census Bureau, American Community Survey, 2019-23.



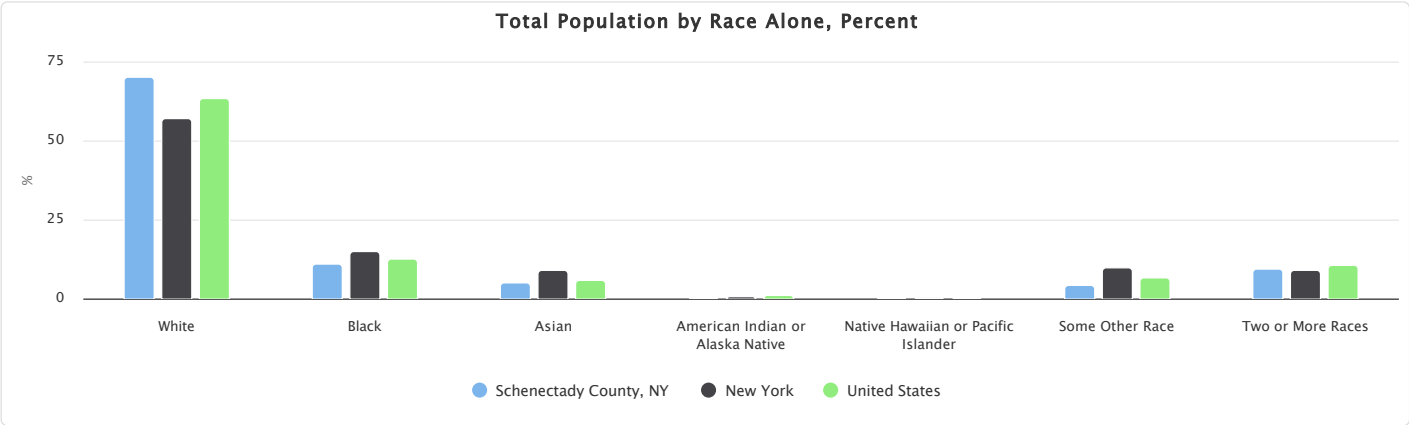
### Total Population by Race Alone, Percent

This indicator reports the percentage of population by race alone in the report area, without considering respondents' ethnicity. An ACS survey respondent may identify as a single race, or may choose multiple races. Respondents selecting multiple categories are racially identified as "Two or More Races."

The percentage values could be interpreted as, for example, "Of all the population in the report area, the percentage of population who are white alone is (value)."

Report Area	White	Black	Asian	American Indian or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race	Two or More Races
Schenectady County, NY	70.23%	10.82%	4.89%	0.39%	0.03%	4.23%	9.42%
New York	57.07%	14.73%	8.90%	0.52%	0.05%	9.81%	8.92%
United States	63.44%	12.36%	5.82%	0.88%	0.19%	6.60%	10.71%

Data Source: US Census Bureau, American Community Survey, 2019-23.



### Total Population by Race Alone or in Combination with One or More Other Races, Total

This indicator reports the total population of the selected area by race alone or in combination with one or more other races, without considering respondents' ethnicity.

For example, the count for *White* represents the number of people who identify as *White alone or in combination with any other race(s)*. Similarly, the count for *Black* includes individuals who identify as *Black alone or Black in combination with other race(s)*.

Report Area	White	Black	Asian	American Indian or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race
Schenectady County, NY	123,480	23,773	11,037	2,850	624	14,144
New York	12,770,231	3,519,047	2,012,569	279,352	35,584	3,186,176
United States	243,824,103	47,893,286	23,789,529	7,334,948	1,540,829	46,162,229

Data Source: US Census Bureau, American Community Survey, 2019-23.

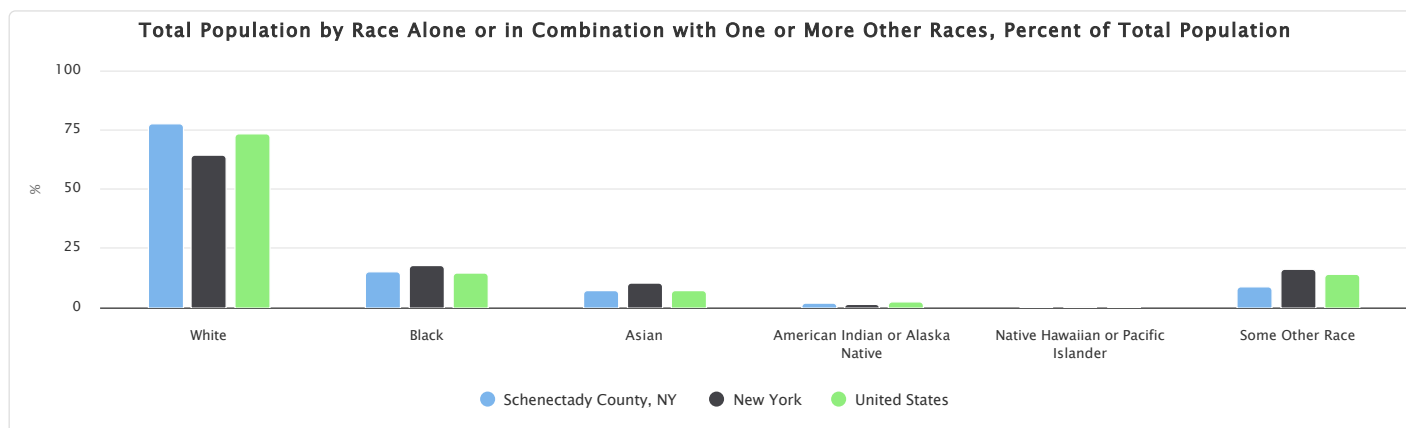
## Total Population by Race Alone or in Combination with One or More Other Races, Percent of Total Population

This indicator reports the percentage of population by race alone or in combination with one or more other races in the report area, without considering respondents' ethnicity.

The percentage values could be interpreted as, for example, "Of all the population in the report area, the percentage of population who are white alone or white in combination with other race(s) is (value)."

Report Area	White	Black	Asian	American Indian or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race
Schenectady County, NY	77.37%	14.90%	6.92%	1.79%	0.39%	8.86%
New York	64.26%	17.71%	10.13%	1.41%	0.18%	16.03%
United States	73.36%	14.41%	7.16%	2.21%	0.46%	13.89%

Data Source: US Census Bureau, American Community Survey, 2019-23.



## Total Population by Hispanic Ethnicity Alone

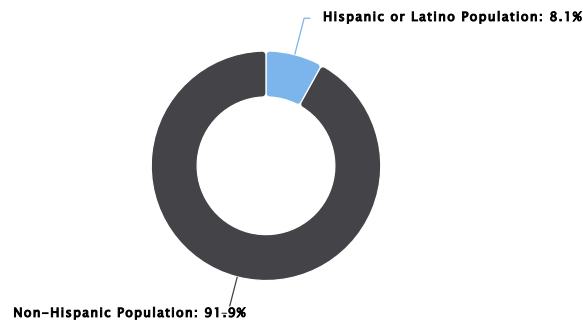
This indicator reports the total population of the report area by Hispanic ethnicity alone.

Report Area	Total Population	Hispanic or Latino Population	Hispanic or Latino Population, Percent	Non-Hispanic Population	Non-Hispanic Population, Percent
Schenectady County, NY	159,603	12,855	8.05%	146,748	91.95%
New York	19,872,319	3,898,652	19.62%	15,973,667	80.38%
United States	332,387,540	63,131,589	18.99%	269,255,951	81.01%

Data Source: US Census Bureau, American Community Survey, 2019-23.

### Total Population by Hispanic Ethnicity Alone

Schenectady County, NY



### Hispanic Population by Race Alone, Total

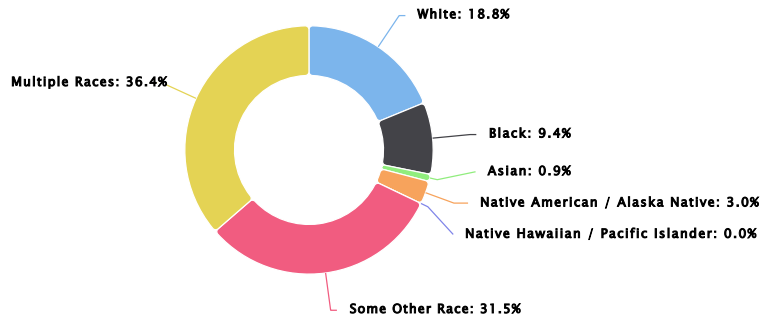
This indicator reports the total of Hispanic or Latino population in the report area by race alone.

Report Area	White	Black	Asian	American Indian or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Races
Schenectady County, NY	2,418	1,202	120	386	0	4,054	4,675
New York	732,102	218,914	14,267	65,715	3,451	1,770,948	1,093,255
United States	17,537,179	1,089,281	245,786	1,173,658	63,669	20,294,334	22,727,682

Data Source: US Census Bureau, American Community Survey, 2019-23.

### Hispanic Population by Race Alone, Total

Schenectady County, NY



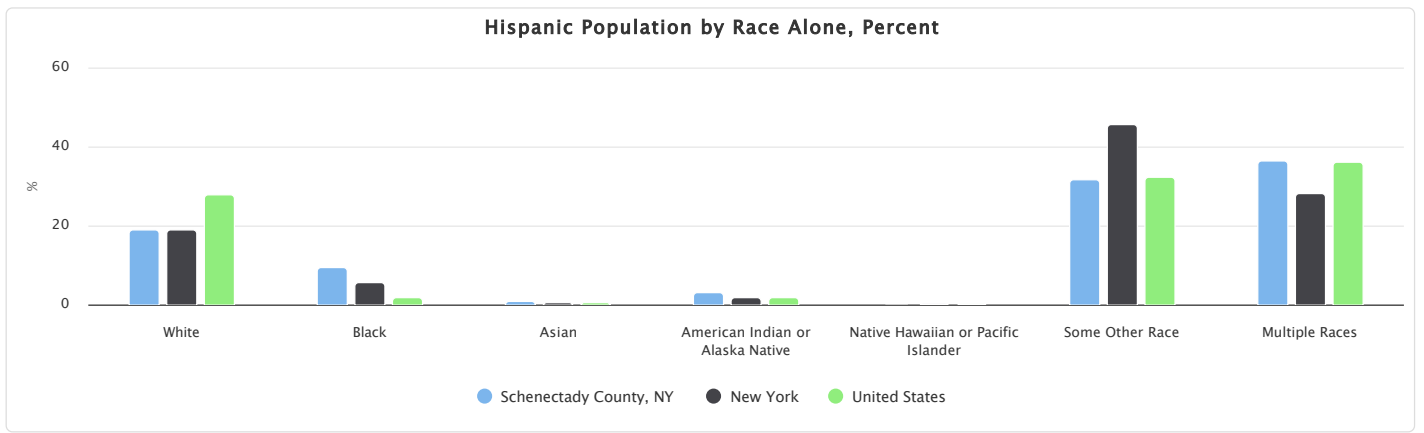
### Hispanic Population by Race Alone, Percent

This indicator reports the percentage of Hispanic or Latino population in the report area by race alone.

The percentage values could be interpreted as, for example, "Of all the Hispanic population in the report area, the percentage of population who are white is (value)."

Report Area	White	Black	Asian	American Indian or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Races
Schenectady County, NY	18.81%	9.35%	0.93%	3.00%	0.00%	31.54%	36.37%
New York	18.78%	5.62%	0.37%	1.69%	0.09%	45.42%	28.04%
United States	27.78%	1.73%	0.39%	1.86%	0.10%	32.15%	36.00%

Data Source: US Census Bureau, American Community Survey, 2019-23.

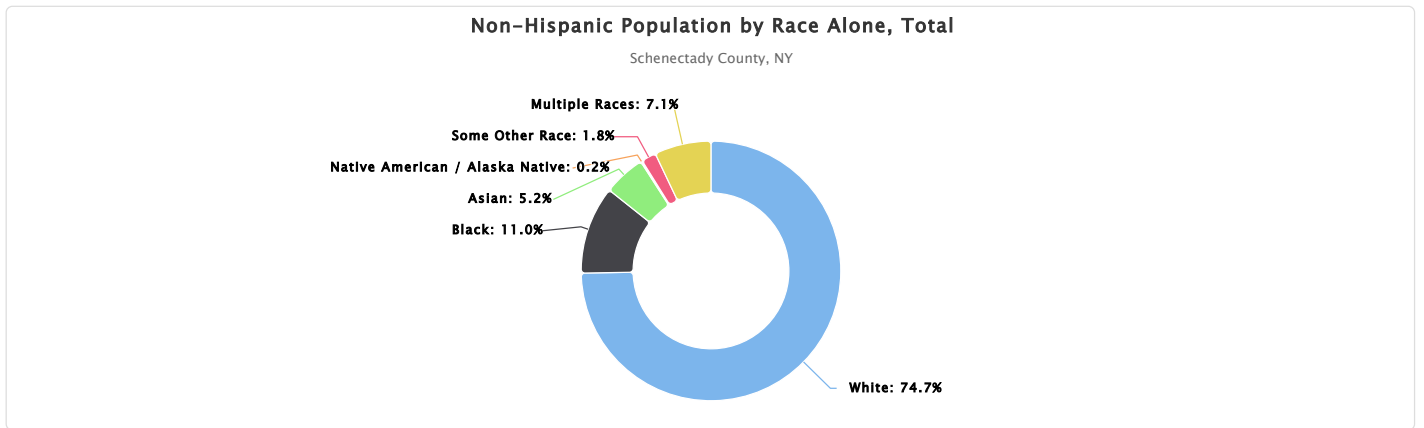


## Non-Hispanic Population by Race Alone, Total

This indicator reports the total non-Hispanic population in the report area by race alone.

Report Area	White	Black	Asian	American Indian or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Races
Schenectady County, NY	109,664	16,071	7,677	230	54	2,696	10,356
New York	10,608,842	2,708,094	1,754,957	37,212	6,220	178,956	679,386
United States	193,338,267	39,981,609	19,106,873	1,751,338	565,623	1,646,202	12,866,039

Data Source: US Census Bureau, *American Community Survey*. 2019-23.



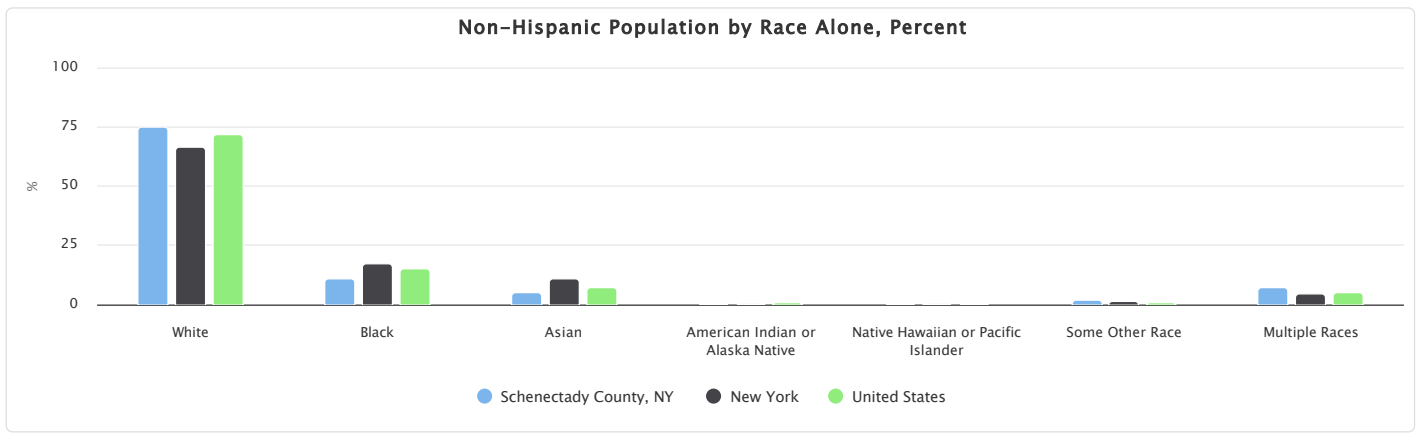
## Non-Hispanic Population by Race Alone, Percent

This indicator reports the percentage of the non-Hispanic population in the report area by race alone.

The percentage values could be interpreted as, for example, "Of all the non-Hispanic population in the report area, the percentage of population who are white is (value)."

Report Area	White	Black	Asian	American Indian or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Races
Schenectady County, NY	74.73%	10.95%	5.23%	0.16%	0.04%	1.84%	7.06%
New York	66.41%	16.95%	10.99%	0.23%	0.04%	1.12%	4.25%
United States	71.80%	14.85%	7.10%	0.65%	0.21%	0.61%	4.78%

Data Source: US Census Bureau, *American Community Survey*. 2019-23.



## Total Population by Combined Race and Hispanic Ethnicity

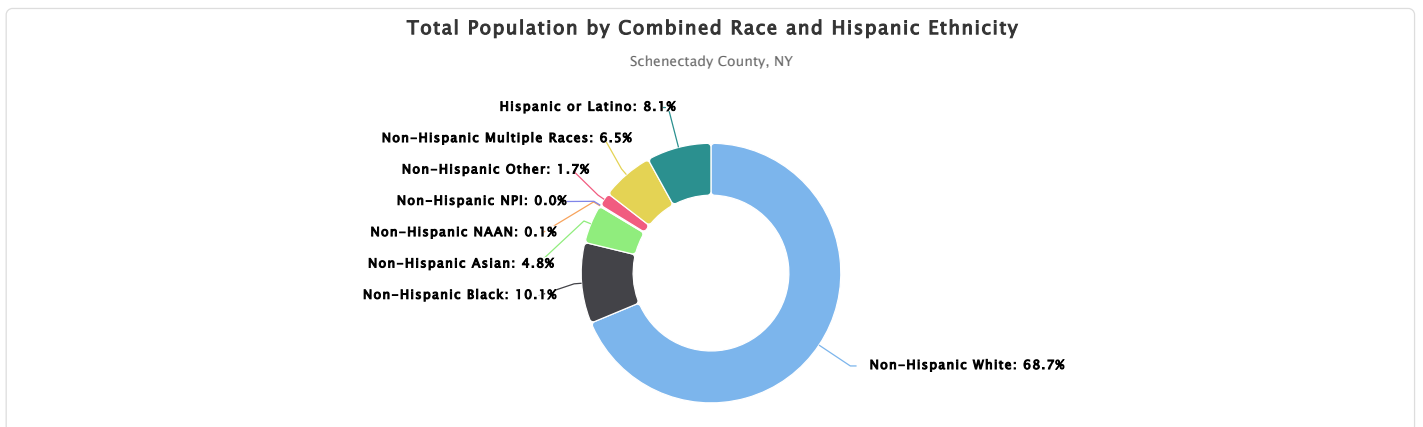
This indicator reports the percentage of the total population in the report area by combined race and Hispanic ethnicity. The percentage values could be interpreted as, for example, "Of all the population in the report area, the percentage of population who are non-Hispanic white is (value)."

Note: Some of the combined race/ethnicity groups use acronyms for their names in the following table and chart. The full forms are as followed:

- Non-Hispanic NAAN = Non-Hispanic Native American or Alaska Native
- Non-Hispanic NPI = Non-Hispanic Native Hawaiian or Pacific Islander
- Non-Hispanic Other = Non-Hispanic Some Other Race

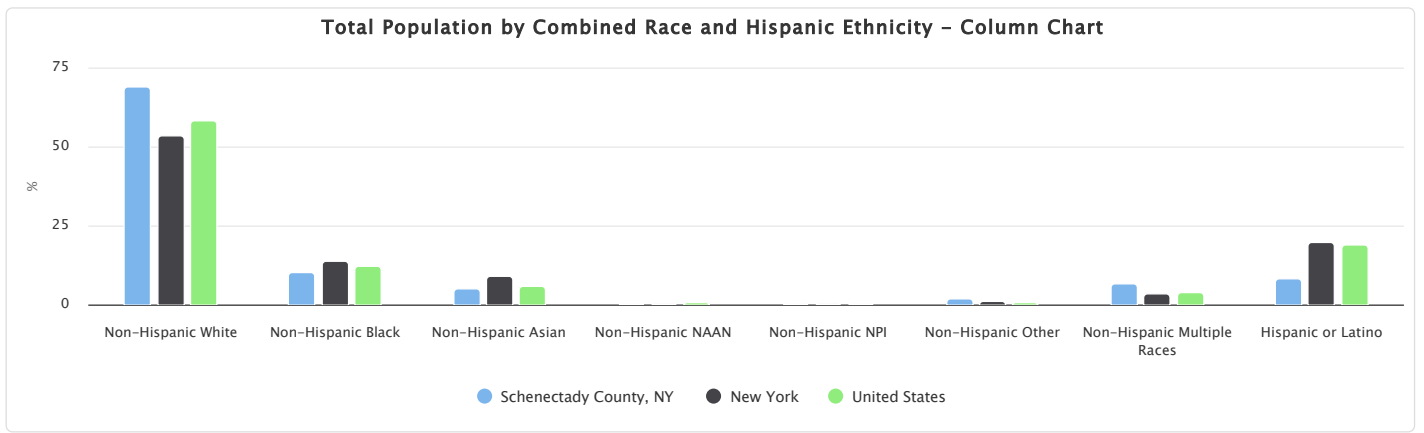
Report Area	Non-Hispanic White	Non-Hispanic Black	Non-Hispanic Asian	Non-Hispanic NAAN	Non-Hispanic NPI	Non-Hispanic Other	Non-Hispanic Multiple Races	Hispanic or Latino
Schenectady County, NY	68.71%	10.07%	4.81%	0.14%	0.03%	1.69%	6.49%	8.05%
New York	53.39%	13.63%	8.83%	0.19%	0.03%	0.90%	3.42%	19.62%
United States	58.17%	12.03%	5.75%	0.53%	0.17%	0.50%	3.87%	18.99%

Data Source: US Census Bureau, American Community Survey, 2019-23.



## Total Population by Combined Race and Hispanic Ethnicity - Column Chart

The chart below represents combined race and Hispanic ethnicity data in a column chart. This chart enables comparison between the report area and state and/or national averages.

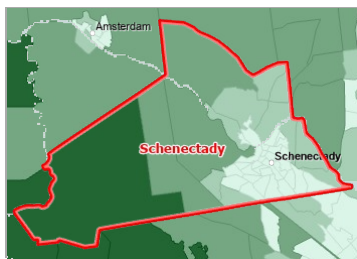


## Urban and Rural Population

This indicator reports the percentage of population living in urban and rural areas as of 2020. Urban areas are identified using population density, count, and size thresholds. Urban areas also include territory with a high degree of impervious surface (development). Rural areas are all areas that are not urban. Of the report areas 158,061 population, 144,075 or 91.15% of the population is classified urban while 13,986 or 8.85% is rural.

Report Area	Total Population	Urban Population	Rural Population	Urban Population, Percent	Rural Population, Percent
Schenectady County, NY	158,061	144,075	13,986	91.15%	8.85%
New York	20,201,249	17,665,166	2,536,083	87.45%	12.55%
United States	331,449,281	265,149,027	66,300,254	80.00%	20.00%

Data Source: US Census Bureau, [Decennial Census](#), 2020.



[View larger map](#)

Population Living in Rural Areas, Percent by Tract, US Census Bureau 2020

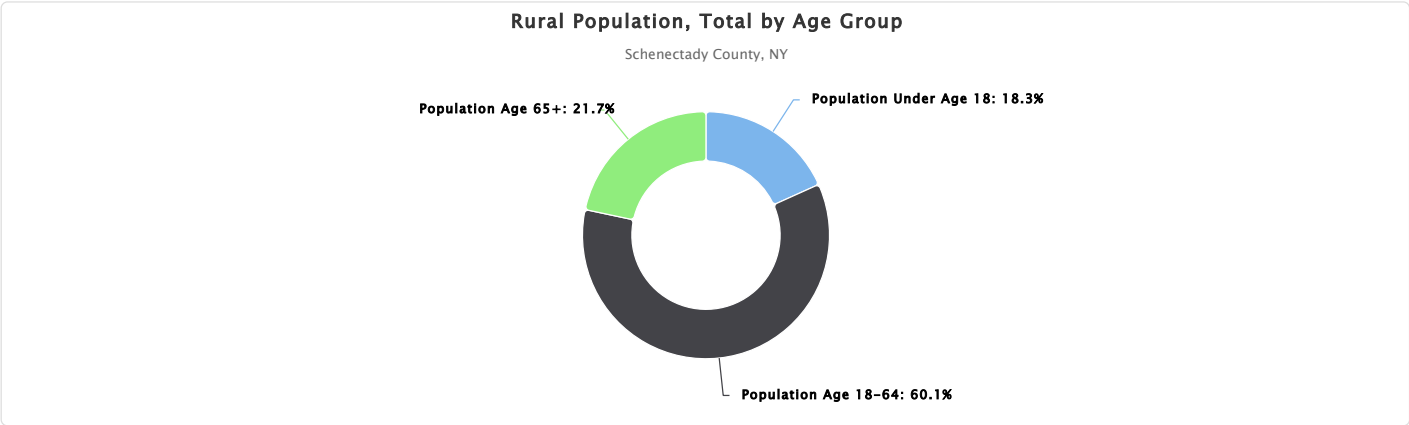
- Over 99.0%
- 17.0 - 99.0%
- Under 17.0%
- No Rural Population
- No Data or Data Suppressed
- Schenectady County, NY

## Rural Population, Total by Age Group

This indicator reports the total rural population of the report area by age group.

Report Area	Population Under Age 18	Population Age 18-64	Population Age 65+
Schenectady County, NY	2,535	8,338	3,008
New York	493,081	1,501,601	521,722
United States	13,901,034	38,682,984	13,426,319

Data Source: US Census Bureau, [Decennial Census](#), 2020.

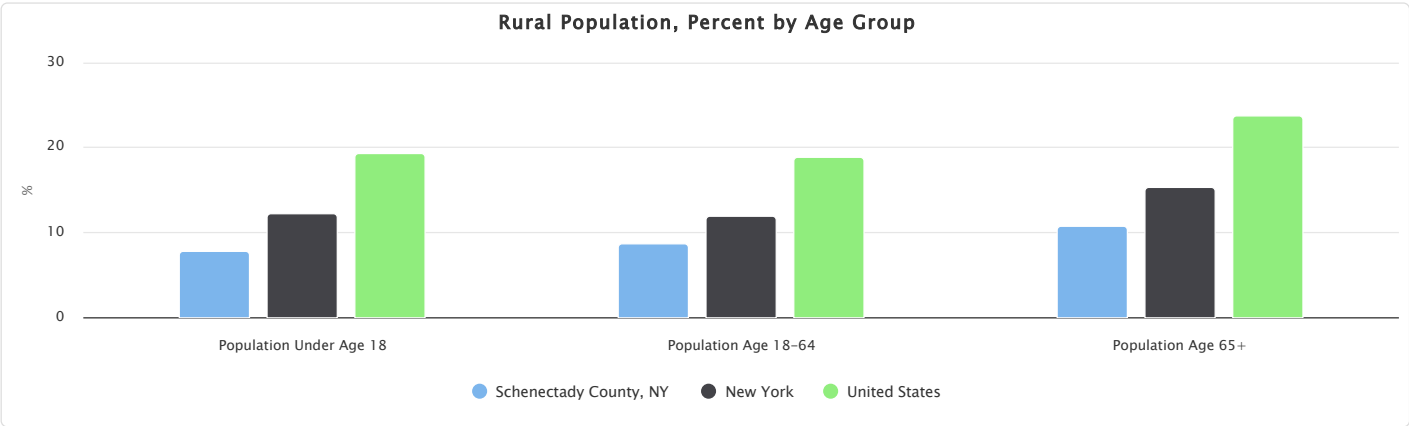


### Rural Population, Percent by Age Group

This indicator reports the total rural population of the report area by age group. The percentage values could be interpreted as, for example, "Of all the population under age 18 within the report area, the proportion of rural population is (value)."

Report Area	Population Under Age 18	Population Age 18-64	Population Age 65+
Schenectady County, NY	7.71%	8.68%	10.66%
New York	12.25%	11.84%	15.31%
United States	19.35%	18.91%	23.75%

Data Source: US Census Bureau, Decennial Census, 2020.



### Rural Population, Total by Race Alone

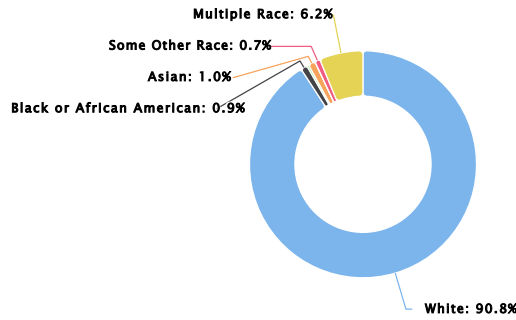
This indicator reports the total rural population of the report area by race alone.

Report Area	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	12,703	128	41	139	2	103	870
New York	2,251,914	49,754	16,047	27,223	637	43,472	147,036
United States	54,088,660	3,902,208	1,209,823	611,072	67,638	2,238,639	4,449,180

Data Source: US Census Bureau, Decennial Census, 2020.

### Rural Population, Total by Race Alone

Schenectady County, NY



### Rural Population, Percent by Race Alone

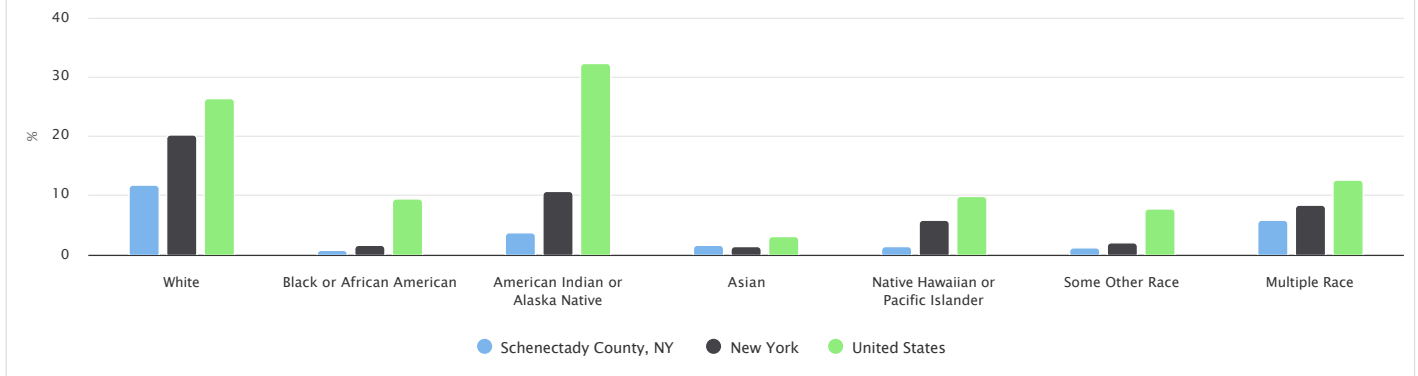
This indicator reports the percentage of rural population in the report area by race alone.

The percentage values could be interpreted as, for example, "Of all the white population within the report area, the proportion of rural population is (value)."

Report Area	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	11.82%	0.74%	3.64%	1.66%	1.38%	1.22%	5.74%
New York	20.21%	1.67%	10.72%	1.41%	5.89%	1.97%	8.32%
United States	26.41%	9.44%	32.30%	3.07%	9.79%	7.79%	12.54%

Data Source: US Census Bureau, Decennial Census, 2020.

### Rural Population, Percent by Race Alone

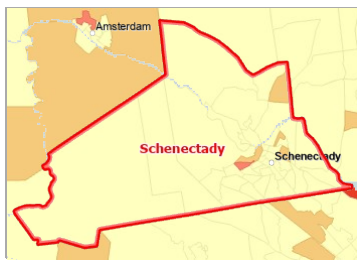


### Veteran Population

This indicator reports the percentage of the population age 18 and older that served (even for a short time), but is not currently serving, on active duty in the U.S. Army, Navy, Air Force, Marine Corps, or the Coast Guard, or that served in the U.S. Merchant Marine during World War II. Of the 125,001 population of the report area, 7,025 or 5.62% are veterans.

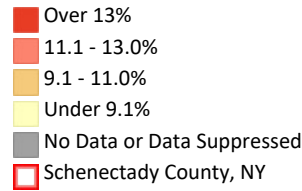
Report Area	Total Population Age 18+	Total Veterans	Veterans, Percent of Total Population
Schenectady County, NY	125,001	7,025	5.62%
New York	15,737,168	607,728	3.86%
United States	257,456,135	16,569,149	6.44%

Data Source: US Census Bureau, American Community Survey, 2019-23.



[View larger map](#)

### Veterans, Percent of Total Population by Tract, ACS 2019-23



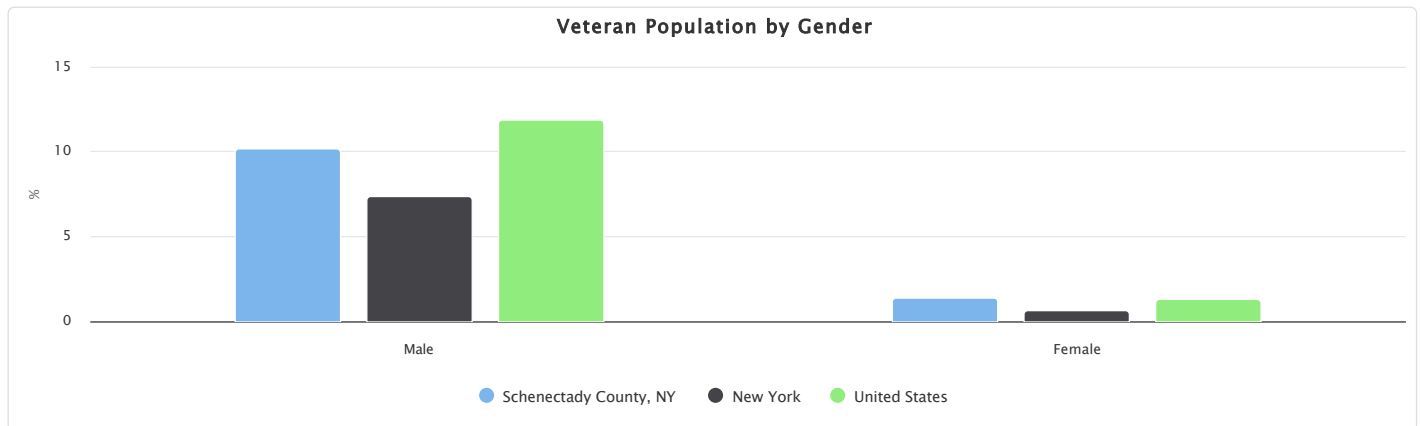
## Veteran Population by Gender

This indicator reports the veteran population in the report area by gender.

The percentage values could be interpreted as, of all the males within the report area, the veteran population is 10.18%; of all the females within the report area, the veteran population is 1.36%.

Report Area	Male	Female	Male, Percent	Female, Percent
Schenectady County, NY	6,150	875	10.18%	1.36%
New York	558,698	49,030	7.37%	0.60%
United States	14,907,774	1,661,375	11.85%	1.26%

Data Source: US Census Bureau, *American Community Survey*. 2019-23.



## Veteran Population by Age Group, Total

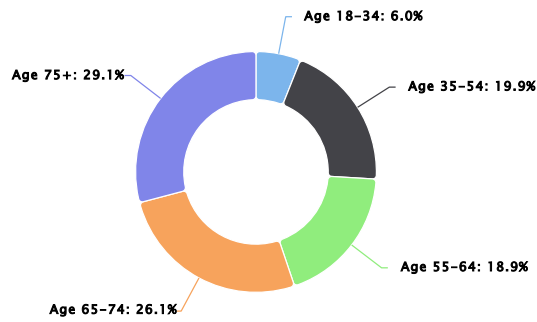
This indicator reports the total veteran population in the report area by age group.

Report Area	Age 18-34	Age 35-54	Age 55-64	Age 65-74	Age 75+
Schenectady County, NY	423	1,400	1,325	1,832	2,045
New York	44,141	122,681	105,883	144,815	190,208
United States	1,390,967	3,948,537	3,070,764	3,988,264	4,170,617

Data Source: US Census Bureau, *American Community Survey*. 2019-23.

### Veteran Population by Age Group, Total

Schenectady County, NY



### Veteran Population by Age Group, Percent

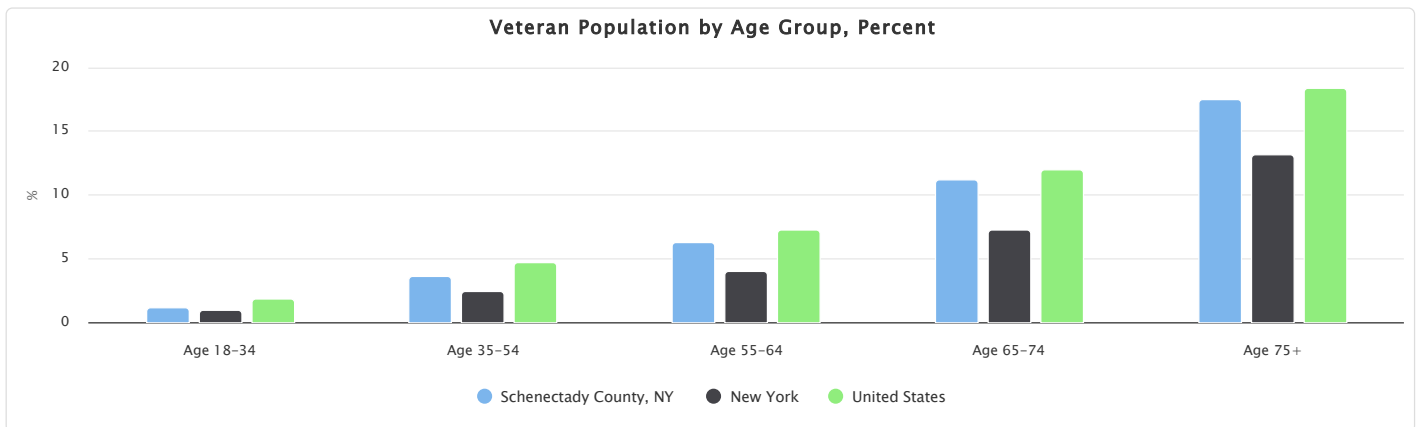
This indicator reports the percentage of veterans in the report area by age group.

The percentage values could be interpreted as, for example, "Of all the population age 18-34 in the report area, the percentage of veterans is (value)."

Report Area	Age 18-34	Age 35-54	Age 55-64	Age 65-74	Age 75+
Schenectady County, NY	1.17%	3.55%	6.21%	11.16%	17.51%
New York	0.96%	2.44%	3.97%	7.20%	13.11%
United States	1.86%	4.70%	7.21%	11.98%	18.39%

Data Source: US Census Bureau, American Community Survey, 2019-23.

### Veteran Population by Age Group, Percent



## Healthcare Access

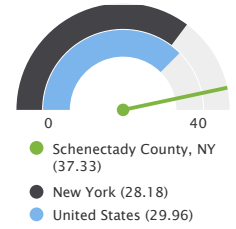
### Access to Care - Addiction/Substance Abuse Providers

This indicator reports the number of providers who specialize in addiction or substance use disorder treatment, rehabilitation, addiction medicine, or providing methadone. The providers include Doctors of Medicine (MDs), Doctor of Osteopathic Medicine (DOs), and other credentialed professionals with a Center for Medicare and Medicaid Services (CMS) and a valid National Provider Identifier (NPI). The number of facilities that specialize in addiction and substance use disorder treatment are also listed (but are not included in the calculated rate). Data are from latest Centers for Medicare and Medicaid Services (CMS) National Plan and Provider Enumeration System (NPPES) Downloadable File.

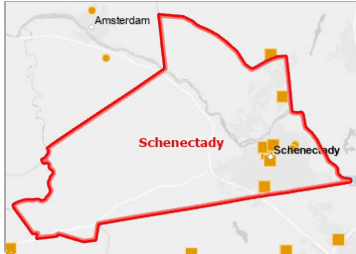
Within the report area there are 59 providers who specialize in addiction or substance use disorder. This represents 37.33 providers per 100,000 total population.

Report Area	Total Population (2020)	Number of Facilities	Number of Providers	Providers, Rate per 100,000 Population
Schenectady County, NY	158,061	7	59	<b>37.33</b>
New York	20,201,249	561	5,693	28.18
United States	334,735,155	23,633	100,276	29.96

Addiction/Substance Abuse Providers, Rate per 100,000 Population



Note: This indicator is compared to the state average.  
 Data Source: Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPPES). December 2025.



[View larger map](#)

Addiction/Substance Abuse Treatment Providers, CMS NPPES December 2025

- Individual
- Organization
- Schenectady County, NY

### Addiction/Substance Use Disorder Providers

The table below lists providers in the report area that specialize in addiction/substance use treatment. Please note that the number of records returned is limited to 25. To view all records, please enter the map.

Provider	Address	City	State	ZIP Code	Phone Number	Provider Type (Primary)
DOMINICK MASSARO, CDC III	2925 HAMBURG ST	SCHENECTADY	NY	12303-4343	(518)3572909	Counselor
MICHAEL COFFIN	600 FRANKLIN ST STE 204	SCHENECTADY	NY	12305-2107	(518)3727031	Counselor
BRANDON EPTING, BS	1044 STATE ST	SCHENECTADY	NY	12307-1508	(518)3701441	Counselor
CHRISTOPHER RIZZO, M.D.	79 GLENRIDGE RD	GLENVILLE	NY	12302-4523	(518)9528142	Internal Medicine
KRISTEN RIZZUTO, LMSW	79 GLENRIDGE RD	GLENVILLE	NY	12302-4523	(518)9528140	Counselor
DAVID DOWNING, CASAC	600 FRANKLIN ST	SCHENECTADY	NY	12305-2100	(518)3727031	Counselor
FELICIA FRALEY, CIT	600 FRANKLIN ST	SCHENECTADY	NY	12305-2107	(518)3727031	Counselor
TERRENCE CONNOR	600 FRANKLIN ST	SCHENECTADY	NY	12305-2107	(518)3727031	Counselor
AMY GIOVANNANGELO	600 FRANKLIN ST STE 204	SCHENECTADY	NY	12305-2107	(518)3727031	Counselor
TYRONE BUSSEY, CASAC	2925 HAMBURG ST	SCHENECTADY	NY	12303-4343	(518)3572909	Counselor
JESSICA BOER	2925 HAMBURG ST	SCHENECTADY	NY	12303-4343	(518)3572909	Counselor
ASHLEY POLLOCK, CASAC	2925 HAMBURG ST	SCHENECTADY	NY	12303-4343	(518)3572909	Counselor
BRENDON RUSSELL	600 FRANKLIN ST	SCHENECTADY	NY	12305-2107	(518)3727031	Counselor
DAWN LACARTE, CASAC	600 FRANKLIN ST	SCHENECTADY	NY	12305-2107	(518)3727031	Counselor
JAMES FINALE, MA	2925 HAMBURG ST	SCHENECTADY	NY	12303-4343	(518)3572909	Counselor
JILLAIN SPAGNOLA	600 FRANKLIN ST STE 204	SCHENECTADY	NY	12305-2100	(518)3727031	Counselor
MELINDA BEAULIEU	600 FRANKLIN ST STE 204	SCHENECTADY	NY	12305-2100	(518)3727031	Counselor
MARY VANDYKE, LMSW	2925 HAMBURG ST	SCHENECTADY	NY	12303-4343	(518)3572909	Counselor
PETER GRAY, CASAC	600 FRANKLIN ST	SCHENECTADY	NY	12305-2100	(518)3727031	Counselor
JOHN SPERAW, CASAC	600 FRANKLIN ST	SCHENECTADY	NY	12305-2100	(518)3727031	Counselor
MIRANDA DEETZ	600 FRANKLIN ST STE 204	SCHENECTADY	NY	12305-2100	(518)3727031	Counselor
ATIF POINSETTE, CASAC	2925 HAMBURG ST	SCHENECTADY	NY	12303-4343	(218)3732909	Counselor
JOHN MELBOURNE	600 FRANKLIN ST	SCHENECTADY	NY	12305-2107	(518)3727031	Internal Medicine
GAYANN COLLASH	600 FRANKLIN ST	SCHENECTADY	NY	12305-2107	(518)3727031	Counselor
CAROLE PRAGA, CASAC	2310 NOTT STREET EAST	NISKAYUNA	NY	12309-2309	(518)3746263	Counselor

Data Source: Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPPES). December 2025.

## Addiction/Substance Use Disorder Facilities

The table below lists providers in the report area that specialize in addiction/substance use treatment. Please note that the number of records returned is limited to 25. To view all records, please enter the map.

Organization	Address	City	State	ZIP Code	Phone Number	Provider Type (Primary)
CARVER COMMUNITY CENTER OF SCHENECTADY, INC.	846 STATE STREET	SCHENECTADY	NY	12307-2307	(518)3827838	Counselor
CONIFER PARK, INC.	79 GLENRIDGE RD	GLENVILLE	NY	12302-4523	(518)9528121	Clinic/Center
ST. PETER'S HOSPITAL OF THE CITY OF ALBANY	2925 HAMBURG STREET SUITE 1	SCHENECTADY	NY	12303-4349	(518)3572909	Clinic/Center
CONIFER PARK, INC	79 GLENRIDGE RD	GLENVILLE	NY	12302-4523	(518)9528142	Substance Abuse Rehabilitation Facility
CONIFER PARK, INC.	600 FRANKLIN ST	SCHENECTADY	NY	12305-2100	(518)3727031	Clinic/Center
820 RIVER STREET INC.	428 DUANE AVE	SCHENECTADY	NY	12304-2627	(518)3772448	Substance Abuse Rehabilitation Facility
BRIDGE CENTER OF SCHENECTADY, INC.	72 UNION AVE	SCHENECTADY	NY	12308-2430	(518)3461277	Substance Abuse Rehabilitation Facility

## Access to Care - Dentists

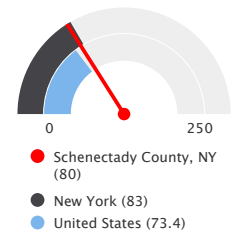
This indicator reports the number of dentists in the report area as a rate per 100,000 total population. This indicator includes all dentists - qualified as having a doctorate in dental surgery (D.D.S.) or dental medicine (D.M.D.), who are licensed by the state to practice dentistry and who are practicing within the scope of that license. Data from the 2022 Area Health Resources File (AHRF) are used in the 2025 County Health Rankings.

Within the report area there are 128 dentists. This represents 80 providers per 100,000 total population.

Note: Data are suppressed for counties with population greater than 4,000 and 0 dentists.

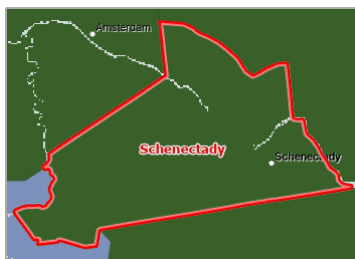
Report Area	Estimated Population	Number of Dentists	Ratio of Dental Providers to Population (1 Provider per x Persons)	Dentists, Rate (Per 100,000 Population)
Schenectady County, NY	160,000	128	1,250	<b>80</b>
New York	19,677,108	16,332	1,204.8	83
United States	333,458,894	244,811	1,362.1	73.4

Dentists Rate Per 100,000 Population



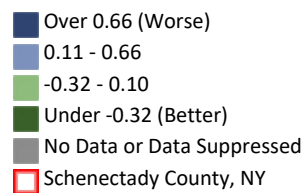
Note: This indicator is compared to the state average.

Data Source: US Department of Health & Human Services, Health Resources and Services Administration, HRSA - Area Health Resource File. Accessed via County Health Rankings, 2022.



[View larger map](#)

### Access to Dentists, Z-Score by County, County Health Rankings 2025



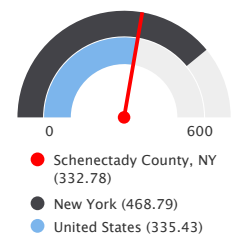
## Access to Care - Mental Health Providers

This indicator reports the number of providers with a CMS National Provider Identifier (NPI) that specialize in mental health. Mental health providers include licensed clinical social workers and other credentialed professionals specializing in psychiatry, psychology, counseling, or child, adolescent, or adult mental health. The number of facilities that specialize in mental health are also listed (but are not included in the calculated rate). Data are from the latest Centers for Medicare and Medicaid Services (CMS) National Provider Identifier (NPI) downloadable file.

Within the report area there are 526 mental health providers with a CMS National Provider Identifier (NPI). This represents 332.78 providers per 100,000 total population.

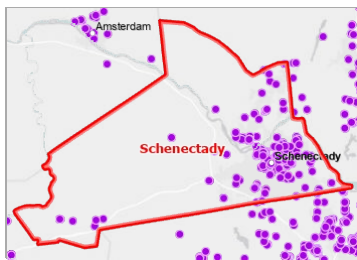
Report Area	Total Population (2020)	Number of Facilities	Number of Providers	Providers, Rate per 100,000 Population
Schenectady County, NY	158,061	34	526	<b>332.78</b>
New York	20,201,249	7,160	94,702	468.79
United States	334,735,155	157,415	1,122,800	335.43

Mental Health Care Providers Rate per 100,000 Population




Note: This indicator is compared to the state average.

Data Source: Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPPES), December 2025.



[View larger map](#)

## Mental Health Providers, CMS NPPES December 2025

 Schenectady County, NY

### Mental Health Care Providers

The table below lists providers in the report area that specialize in mental health care.

*Please note that the number of records returned is limited to 25. To view all records, please enter the map.*

Provider	Address	City	State	ZIP Code	Phone Number	Provider Type (Primary)
ARUN DHINGRA, MD	1101 NOTT ST	SCHENECTADY	NY	12308-2425	(518)2434154	Psychiatry & Neurology
BEATRICE KOVASZNAY, M.D.	1101 NOTT ST	SCHENECTADY	NY	12308-2425	(518)2434162	Psychiatry & Neurology
RONALD OTWORI, FNP	1101 NOTT ST	SCHENECTADY	NY	12308-2425	(518)2434135	Nurse Practitioner
JEAN BORGER, LCSW	1880 LANCASTER ST	SCHENECTADY	NY	12308-1533	(518)8812000	Social Worker
AKEEM TYRELL	1101 NOTT ST	SCHENECTADY	NY	12308-2425	(518)2433300	Social Worker
JAMES PENK, LCSW-R	1311 UNION ST.	SCHENECTADY	NY	12308-2308	(518)3746263	Social Worker
SUSAN NAUGHTON, LCSW	1311 UNION STREET	SCHENECTADY	NY	12308-2308	(518)3746263	Social Worker
NANCY MARTINELLI, LCSW	1575 UNION ST	SCHENECTADY	NY	12309-6121	(518)2298457	Social Worker
PAUL PARTRIDGE, PH.D.	1311 UNION ST	SCHENECTADY	NY	12308-2905	(518)3746263	Psychologist
NANCY MIRANDA, LCSW	1311 UNION ST	SCHENECTADY	NY	12308-2905	(518)3746263	Social Worker
TYMESIA NABORS, LCSW	1445 THE PLZ	SCHENECTADY	NY	12308-2639	(518)8812000	Social Worker
LAUREN SAVAGE, LCSW ACSW R	1411 UNION STREET	SCHEN	NY	12308-2308	(518)3778846	Social Worker
KENDELL MARGOLIES, LCSW	1311 UNION ST	SCHENECTADY	NY	12308-2905	(518)3746263	Social Worker
LISA BRAUN, PSYD	1401 UNION STREET	SCHENECTADY	NY	12308-3009	(518)3814105	Psychologist
ELIZABETH RUSSO, LCSW-R	1311 UNION ST	SCHENECTADY	NY	12308-2905	(518)3746263	Social Worker
THOMAS OLIVE, LMHC	1311 UNION ST	SCHENECTADY	NY	12308-2905	(518)3746263	Counselor
CYNTHIA BENNETT, LCSW-R	1347 UNION ST	SCHENECTADY	NY	12308-3020	(518)8105172	Social Worker
NATHANIEL WYLIE, LMSW	1445 THE PLZ	SCHENECTADY	NY	12308-2639	(518)8812044	Social Worker
DAVID BROWN, LCSW-R	1541 UNION ST	SCHENECTADY	NY	12309-6001	(518)4802173	Social Worker
CARRIE GLANS, PMHNP	1311 UNION STREET	SCHENECTADY	NY	12308-2308	(518)3746263	Nurse Practitioner
KONSTANTIN TIMOFEEV, M.D.	1101 NOTT ST	SCHENECTADY	NY	12308-2425	(518)2433387	Psychiatry & Neurology
VIVIAN BLANCO	1101 NOTT ST	SCHENECTADY	NY	12308-2425	(518)2434000	Nurse Practitioner
CRYSTAL JONES	1101 NOTT ST	SCHENECTADY	NY	12308-2489	(518)2434000	Nurse Practitioner
ELIZABETH DUNN	806 KARENWALD LN	SCHENECTADY	NY	12309-6414	(518)3936551	Social Worker
ZOSER MOHAMED, M.D.	1538 UNION ST	NISKAYUNA	NY	12309-6002	(518)3775948	Psychiatry & Neurology

Data Source: Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPPES), December 2025.

### Mental Health Care Facilities

The table below lists facilities in the report area that specialize in mental health care.

*Please note that the number of records returned is limited to 25. To view all records, please enter the map.*

Organization	Address	City	State	ZIP Code	Phone Number	Provider Type (Primary)
TRI CITY PSYCH MEDICAL SERVICES PC	917 NOTT ST	SCHENECTADY	NY	12308-2318	(518)3829116	Psychiatry & Neurology
CARVER COMMUNITY CENTER OF SCHENECTADY, INC.	846 STATE STREET	SCHENECTADY	NY	12307-2307	(518)3827838	Counselor
LEGACY LCSW COUNSELING SERVICES PC	1541 UNION ST	SCHENECTADY	NY	12309-6001	(518)3646632	Social Worker
ST. JOSEPH'S ADDICTION TREATMENT & RECOVERY CENTERS	917 CONGRESS ST	SCHENECTADY	NY	12303-1727	(518)3578387	Peer Specialist
NEUROLOGICAL ASSOC OF NENY PC	1401 UNION ST	SCHENECTADY	NY	12308-3009	(518)3993969	Psychiatry & Neurology
AMBER L. SHUTTER N.P., IN PSYCHIATRY, PLLC	220 HARBORSIDE DR STE 201	SCHENECTADY	NY	12305-1065	(518)7887983	Nurse Practitioner
MARY CARLSON, LCSW, PLLC	1541 UNION ST	SCHENECTADY	NY	12309-6060	(518)8789729	Clinic/Center
CURLEY ELLIS AND FELSMAN PSYCHOLOGISTS PC	2310 NOTT ST E	NISKAYUNA	NY	12309-4303	(518)3726080	Psychologist
BETHESDA HOUSE OF SCHENECTADY, INC.	834 STATE ST	SCHENECTADY	NY	12307-1202	(518)3747873	Psychologist
SCHENECTADY MENTAL HEALTH ASSOCIATES	1362 UNION ST	SCHENECTADY	NY	12308-3017	(518)3740295	Psychiatry & Neurology
KLARA GRANGER LCSW PLLC	600 FRANKLIN ST STE 102	SCHENECTADY	NY	12305-2100	(646)7809322	Social Worker
JR NURSE PRACTITIONER IN PSYCHIATRY, PLLC	430 FRANKLIN ST STE 2304	SCHENECTADY	NY	12305-2018	(518)7887983	Nurse Practitioner
TEARLE ASHBY LCSW PC	1758 UNION ST	NISKAYUNA	NY	12309-6314	(518)9821274	Social Worker
NEW HEIGHTS LCSW PLLC	4 WYNDON RD	BALLSTON LAKE	NY	12019-2527	(518)9529206	Social Worker
COMMUNITY CARE PHYSICIANS, PC	2125 RIVER RD	SCHENECTADY	NY	12309-2309	(518)3811800	Psychiatry & Neurology
BRIDGE CENTER OF SCHENECTADY, INC.	72 UNION AVE	SCHENECTADY	NY	12308-2430	(518)3461277	Substance Abuse Rehabilitation Facility
TRAUMA AND ADDICTIONS RECOVERY ASSOC.	801 BEDFORD RD	SCHENECTADY	NY	12308-3407	(518)3959187	Psychologist
CAMPBELL HOUSE PSYCHOLOGICAL ASSOCIATES	101 STATE ST	SCHENECTADY	NY	12305-1707	(518)3460762	Psychologist
BLISSFULL HAVEN GRUOP HOME LLC	38 SPRUCE ST	SCHENECTADY	NY	12304-1403	(518)9484836	Psychologist
SEASONS OF CHANGE COUNSELING, LLC	34 JAY ST	SCHENECTADY	NY	12305-1971	(518)2053348	Social Worker
NORTHEAST PARENT AND CHILD SOCIETY, INC.	530 FRANKLIN ST	SCHENECTADY	NY	12305-2011	(518)3818911	Social Worker
CONIFER PARK, INC.	79 GLENRIDGE RD	GLENVILLE	NY	12302-4523	(518)9528121	Clinic/Center
820 RIVER STREET INC.	428 DUANE AVE	SCHENECTADY	NY	12304-2627	(518)3772448	Substance Abuse Rehabilitation Facility
CONIFER PARK, INC	79 GLENRIDGE RD	GLENVILLE	NY	12302-4523	(518)9528142	Substance Abuse Rehabilitation Facility
MARY LAFOUNTAIN LCSW PLLC	1918 OAKLAND AVE	SCHENECTADY	NY	12308-1321	(518)2579131	Social Worker

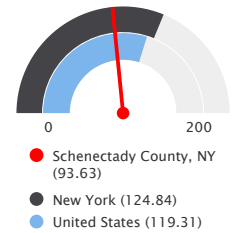
Data Source: Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPDES), December 2025.

## Access to Care - Primary Care

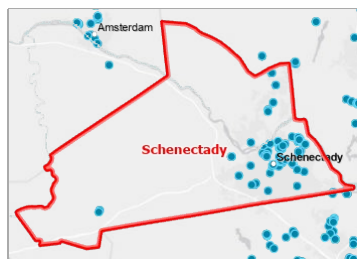
This indicator reports the number of providers with a CMS National Provider Identifier (NPI) that specialize in primary care. Primary health providers include practicing physicians specializing in general practice medicine, family medicine, internal medicine, and pediatrics. The number of facilities that specialize in primary health care are also listed (but are not included in the calculated rate). Data are from the latest Centers for Medicare and Medicaid Services (CMS) National Provider Identifier (NPI) downloadable file.

Report Area	Total Population (2020)	Number of Facilities	Number of Providers	Providers, Rate per 100,000 Population
Schenectady County, NY	158,061	43	148	<b>93.63</b>
New York	20,201,249	7,646	25,220	124.84
United States	334,735,155	135,895	399,358	119.31

Primary Care Providers, Rate per 100,000 Population

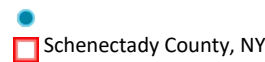


Note: This indicator is compared to the state average.  
Data Source: Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPPES). December 2025.



[View larger map](#)

Primary Care Physicians, All, CMS NPPES December 2025



## Primary Health Care Providers

The table below lists primary care providers in the report.

Please note that the number of records returned is limited to 25. To view all records, please enter the map.

Provider	Address	City	State	ZIP Code	Phone Number	Provider Type (Primary)	Provider Type (Secondary)
DONNA TUTTLE, M.D.	3040 BROADWAY	SCHENECTADY	NY	12306-2102	(518)3572011	Family Medicine	No data
ZOFIA DRZYMALSKI, M.D.	1925 CURRY RD	SCHENECTADY	NY	12303-3939	(518)3565377	Family Medicine	No data
ERIN JULIANO, MD	112 CHARLTON RD	BALLSTON LAKE	NY	12019-2547	(518)3997723	Family Medicine	No data
MEGHAN MONTHIE	112 CHARLTON RD	BALLSTON LAKE	NY	12019-2547	(518)3997723	Family Medicine	No data
ARPIT SANGHVI, M.D.	1101 NOTT ST	SCHENECTADY	NY	12308-2425	(518)2434135	Family Medicine	No data
AZUKA ITABOR, M.D.	624 MCCLELLAN ST	SCHENECTADY	NY	12304-1020	(518)3822260	Family Medicine	No data
VENKATESWARARAO VOLETI, MD	700 MCCLELLAN ST STE 103	SCHENECTADY	NY	12304-1019	(518)3742525	Internal Medicine	No data
KRISTIN CROUSE, D.O.	624 MCCLELLAN ST STE 101	SCHENECTADY	NY	12304-1020	(518)3822260	Family Medicine	No data
IVAN SHVACHUK, MD	1101 NOTT ST	SCHENECTADY	NY	12308-2425	(518)2434000	Family Medicine	No data
SARA HITCHCOCK	1769 UNION ST	NISKAYUNA	NY	12309-6494	(518)2649000	Family Medicine	No data
KATHRYN LAHN, M.D.	1044 STATE ST	SCHENECTADY	NY	12307-1508	(518)3701441	Family Medicine	No data
DANIEL HUBICKI, M.D.	112 CHARLTON RD	BALLSTON LAKE	NY	12019-2547	(518)3997723	General Practice	No data
LAUREN SEQUEIRA, M.D.	624 MCCLELLAN ST	SCHENECTADY	NY	12304-1020	(518)3475293	Family Medicine	No data
RICHARD YAN, M.D.	700 MCCLELLAN ST	SCHENECTADY	NY	12304-1019	(518)3725637	Pediatrics	No data
DAVID MOBAREK	624 MCCLELLAN ST STE 101	SCHENECTADY	NY	12304-1020	(518)3475043	Family Medicine	No data
EUGENE HABER, M.D.	976 BALLTOWN RD	SCHENECTADY	NY	12309-6428	(518)3930391	Family Medicine	No data
STEPHANIE EVANS, MD	1044 STATE ST	SCHENECTADY	NY	12307-1508	(518)3701441	Pediatrics	No data
SUZANNE MURPHY, M.D.	624 MCCLELLAN STREET	SCHENECTADY	NY	12304-1020	(518)3475113	Family Medicine	No data
INNESSA SARKISOVA, M.D.	624 MCCLELLAN ST	SCHENECTADY	NY	12304-1020	(518)3475293	Family Medicine	No data
GARY DUNKERLEY, M.D.	624 MCCLELLAN STREET	SCHENECTADY	NY	12304-1020	(518)3822260	Family Medicine	No data
CLAIRE NADLER, D.O.	624 MCCLELLAN ST	SCHENECTADY	NY	12304-1020	(518)3822260	Family Medicine	No data
HADI KOOHSARI, MD	701 UNION ST	SCHENECTADY	NY	12305-1504	(518)3741610	Pediatrics	No data
JEENA MADDEN, MD	624 MCCLELLAN STREET	SCHENECTADY	NY	12304-1020	(518)3475113	Pediatrics	No data
MINA SUN, MD	115 SARATOGA RD STE 200	GLENVILLE	NY	12302-4224	(518)2433360	Internal Medicine	No data
JOHN PETRILLO, D.O.	624 MCCLELLAN STREET	SCHENECTADY	NY	12304-1020	(518)3822260	Family Medicine	No data

Data Source: Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPPES), December 2025.

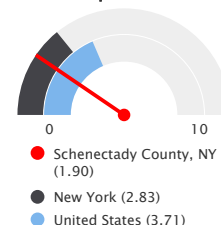
## Federally Qualified Health Centers

This indicator reports the number of Federally Qualified Health Centers (FQHCs) in the community. This indicator is relevant because FQHCs are community assets that provide health care to vulnerable populations; they receive extra funding from the federal government to promote access to ambulatory care in areas designated as medically underserved.

Within the report area, there are 3 Federally Qualified Health Centers. This means there is a rate of 1.90 Federally Qualified Health Centers per 100,000 total population.

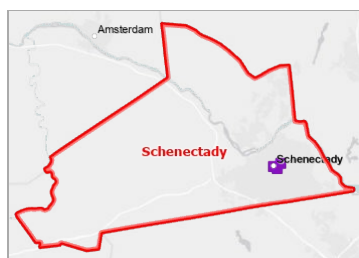
Report Area	Total Population (2020)	Number of Federally Qualified Health Centers	Rate of Federally Qualified Health Centers per 100,000 Population
Schenectady County, NY	158,061	3	<b>1.90</b>
New York	20,201,249	571	2.83
United States	334,735,155	12,431	3.71

Federally Qualified Health Centers, Rate per 100,000 Population



Note: This indicator is compared to the state average.

Data Source: US Department of Health & Human Services, Center for Medicare & Medicaid Services, [Provider of Services File](#). 2025.



[View larger map](#)

Federally Qualified Health Centers, POS June 2025



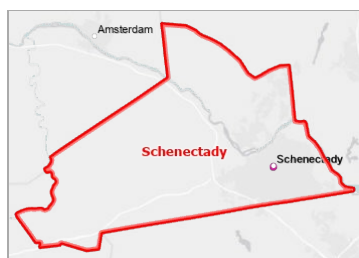
## Health Professional Shortage Areas

This indicator reports the number and location of health care facilities designated as "Health Professional Shortage Areas" (HPSAs), defined as having shortages of primary medical care, dental or mental health providers. This indicator is relevant because a shortage of health professionals contributes to access and health status issues.

Within the report area, there are a total of 3 Health Professional Shortage Areas (HPSAs).

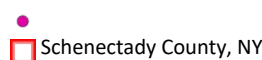
Report Area	Primary Care Facilities	Mental Health Care Facilities	Dental Health Care Facilities	Total HPSA Facility Designations
Schenectady County, NY	1	1	1	3
New York	114	137	117	368
United States	4,608	4,674	4,541	13,823

Data Source: US Department of Health & Human Services, Health Resources and Services Administration, [HRSA - Health Professional Shortage Areas Database](#). 2025.



[View larger map](#)

Facilities Designated as HPSAs by Discipline, Primary Care Facilities, HRSA HPSA Database 2025



## Health Professional Shortage Areas - Dental Care

A **Health Professional Shortage Area (HPSA)** is a designation given by the Health Resources and Services Administration (HRSA) in the United States to identify geographic areas, populations, or facilities that lack sufficient health care professionals to meet the health needs of the community. HPSAs are categorized into three main types based on the specific type of health professional shortage:

### Types of HPSA

- **Primary Care HPSA:** Areas with a shortage of primary care physicians, including family medicine, internal medicine, pediatrics, obstetrics, and gynecology.
- **Dental Health HPSA:** Areas with a shortage of dental health professionals, such as general and pediatric dentists.
- **Mental Health HPSA:** Areas with a shortage of mental health providers, including psychiatrists, clinical psychologists, clinical social workers, psychiatric nurse specialists, and marriage and family therapists.

This indicator reports the total population in the report area that is living in a dental health care Health Professional Shortage Area, regardless of the degree of shortage, or whether the HPSA covers the entire geographic area or a population subgroup. Indicator data are based on the following calculation:

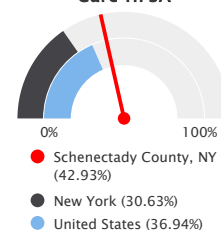
$$\text{Percentage} = [\text{HPSA Population}] / [\text{Report Area Population}] * 100$$

The population figures used in this calculation are from the 2023 American Community Survey 5-year Estimates.

Within the report area, there are 68,521 people living in a dental health care Health Professional Shortage Area. This means 42.93% of people likely don't have reliable or affordable access to a dentist.

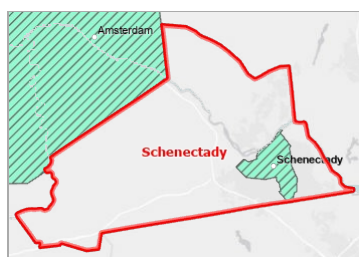
Report Area	Total Population (ACS 2023 5-Year Estimates)	Population Living in an Area Affected by a Dental Care HPSA	Percentage of Population Living in an Area Affected by a Dental Care HPSA
Schenectady County, NY	159,603	68,521	42.93%
New York	19,872,319	6,087,594	30.63%
United States	332,387,540	122,798,386	36.94%

Percentage of Population Living in an Area Affected by a Dental Care HPSA



Note: This indicator is compared to the state average.

Data Source: US Department of Health & Human Services, Health Resources and Services Administration, HRSA - Health Professional Shortage Areas Database. 2025.



[View larger map](#)

### Dental Care HPSA Components, Type and Degree of Shortage by Tract / County, HRSA HPSA Database 2025

- Geographic Area; Over 20.0 FTE Needed
- Geographic Area; 1.1 - 20.0 FTE Needed
- Geographic Area; Under 1.1 FTE Needed
- Population Group; Over 20.0 FTE Needed
- Population Group; 1.1 - 20.0 FTE Needed
- Population Group; Under 1.1 FTE Needed
- Schenectady County, NY

## Dental Care HPSA Population Underserved

This indicator reports the designated dental care HPSA population in the report area that are underserved, regardless of the degree of shortage, or whether the HPSA covers the entire geographic area or a population subgroup. Indicator data are based on the following calculation:

$$\text{Percentage} = [\text{Underserved HPSA Population}] / [\text{Designated HPSA Population}] * 100$$

Report Area	Designated Dental Care HPSA Population	Dental Care HPSA Population Underserved	Percentage of Dental Care HPSA Population Underserved
Schenectady County, NY	33,227	30,464	91.68%
New York	2,761,841	2,318,165	83.94%
United States	55,012,855	37,322,660	67.70%

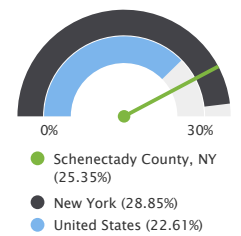
Data Source: US Department of Health & Human Services, Health Resources and Services Administration, *HRSA - Health Professional Shortage Areas Database*. 2025.

## Insurance - Population Receiving Medicaid

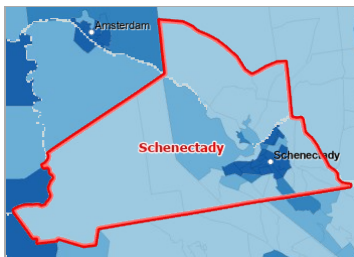
This indicator reports the percentage of the population with insurance enrolled in Medicaid (or other means-tested public health insurance). This indicator is relevant because it assesses vulnerable populations which are more likely to have multiple health access, health status, and social support needs; when combined with poverty data, providers can use this measure to identify gaps in eligibility and enrollment.

Report Area	Total Population (For Whom Insurance Status is Determined)	Population with Any Health Insurance	Population Receiving Medicaid	Percent of Insured Population Receiving Medicaid
Schenectady County, NY	158,042	152,723	38,714	25.35%
New York	19,674,246	18,672,073	5,387,796	28.85%
United States	327,425,278	299,424,402	67,698,700	22.61%

Percent of Insured Population Receiving Medicaid



Note: This indicator is compared to the state average.  
Data Source: US Census Bureau, *American Community Survey*. 2019-23.



[View larger map](#)

Insured, Medicaid / Means-Tested Coverage, Percent by Tract, ACS 2019-23

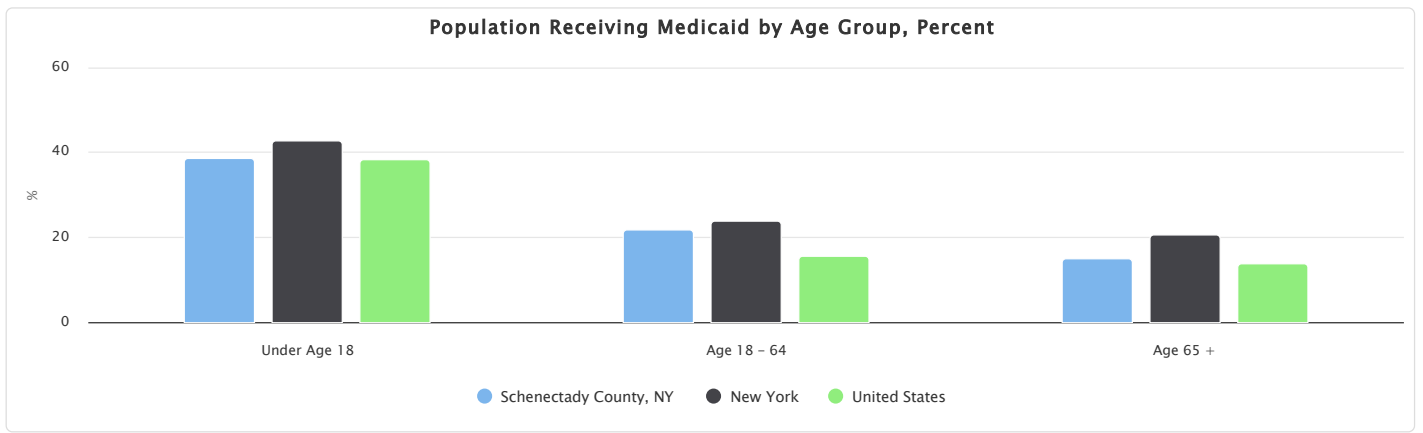
- Over 25.0%
- 20.1 - 25.0%
- 15.1 - 20.0%
- Under 15.1%
- No Data or Data Suppressed
- Schenectady County, NY

## Population Receiving Medicaid by Age Group, Percent

This indicator reports percent of population receiving Medicaid by age group. The percentage values could be interpreted as, for example, "Of all the population under age 18 within the report area, the proportion receiving Medicaid is (value)."

Report Area	Under Age 18	Age 18 - 64	Age 65 +
Schenectady County, NY	38.61%	21.74%	14.80%
New York	42.81%	23.70%	20.47%
United States	38.38%	15.50%	13.83%

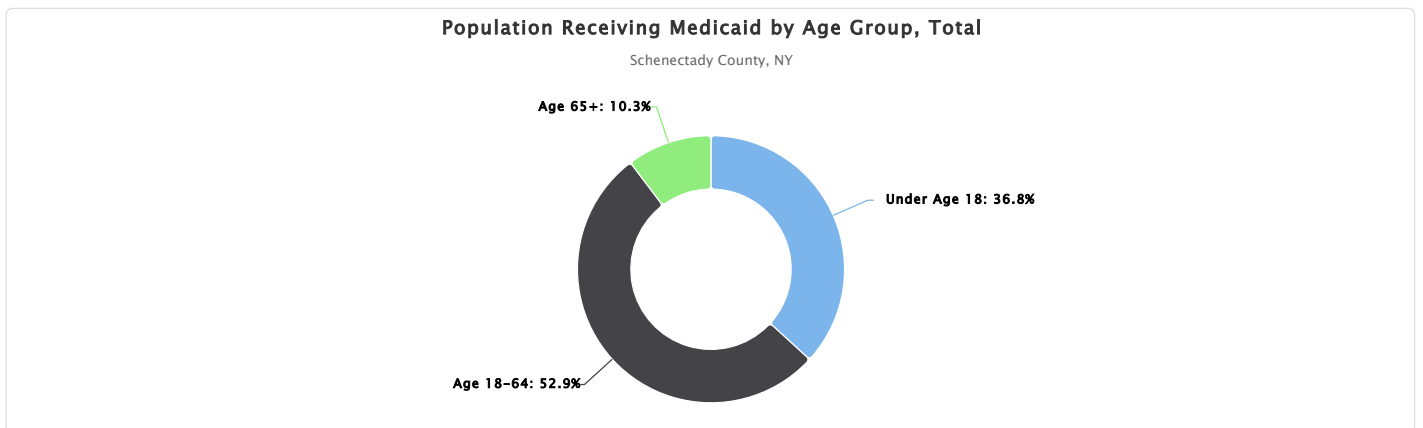
Data Source: US Census Bureau, *American Community Survey*. 2019-23.



## Population Receiving Medicaid by Age Group, Total

Report Area	Under Age 18	Age 18-64	Age 65+
Schenectady County, NY	14,243	20,480	3,991
New York	1,868,273	2,829,354	690,169
United States	29,953,909	30,198,594	7,546,197

Data Source: US Census Bureau, American Community Survey, 2019-23.



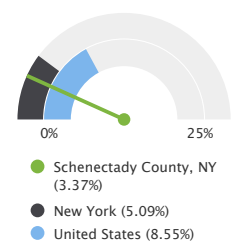
## Insurance - Uninsured Population

The lack of health insurance is considered a *key driver* of health status.

In the report area 3.37% of the total civilian non-institutionalized population are without health insurance coverage. The rate of uninsured persons in the report area is less than the state average of 5.09%. This indicator is relevant because lack of insurance is a primary barrier to healthcare access including regular primary care, specialty care, and other health services that contributes to poor health status.

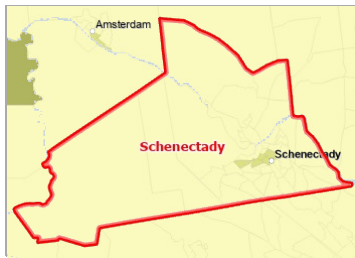
Report Area	Total Population (For Whom Insurance Status is Determined)	Uninsured Population	Uninsured Population, Percent
Schenectady County, NY	158,042	5,319	3.37%
New York	19,674,246	1,002,173	5.09%
United States	327,425,278	28,000,876	8.55%

Uninsured Population, Percent



Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey, 2019-23.



[View larger map](#)

Uninsured Population, Percent by Tract, ACS 2019-23

- Over 20.0%
- 15.1 - 20.0%
- 10.1 - 15.0%
- Under 10.1%
- No Data or Data Suppressed
- Schenectady County, NY

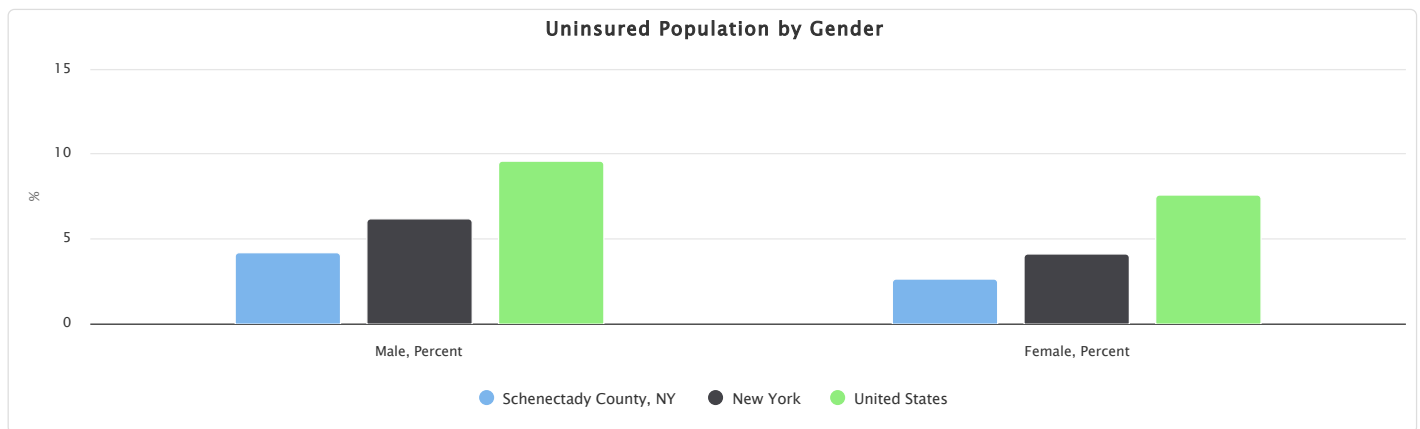
## Uninsured Population by Gender

This indicator reports the uninsured population by gender.

The percentage values could be interpreted as, for example, "Of all the male population within the report area, the proportion without health insurance coverage is (value)."

Report Area	Male	Female	Male, Percent	Female, Percent
Schenectady County, NY	3,217	2,102	4.14%	2.62%
New York	588,299	413,874	6.14%	4.10%
United States	15,443,840	12,557,036	9.59%	7.55%

Data Source: US Census Bureau, American Community Survey, 2019-23.



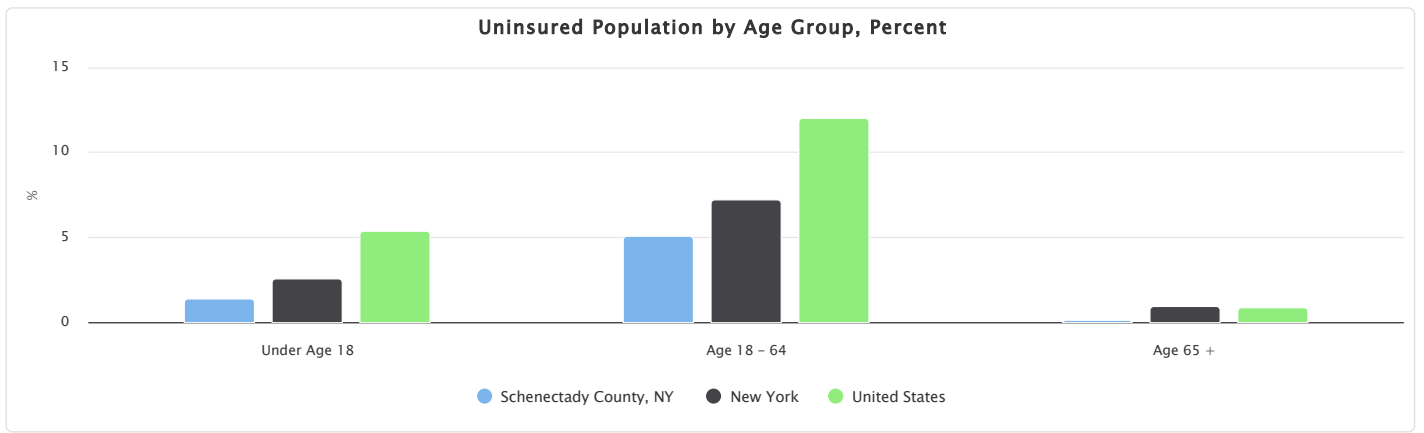
## Uninsured Population by Age Group, Percent

This indicator reports the percentage of uninsured population by age group.

The percentage values could be interpreted as, for example, "Of all the population under age 18 within the report area, the proportion without health insurance coverage is (value)."

Report Area	Under Age 18	Age 18 - 64	Age 65 +
Schenectady County, NY	1.36%	5.08%	0.14%
New York	2.54%	7.21%	0.90%
United States	5.39%	11.98%	0.83%

Data Source: US Census Bureau, American Community Survey, 2019-23.

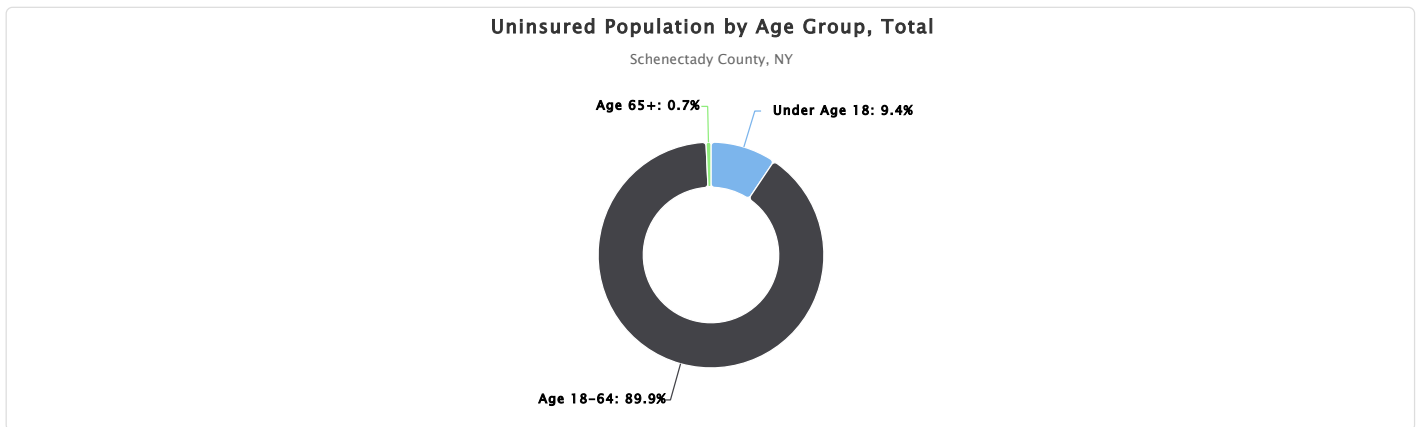


## Uninsured Population by Age Group, Total

This indicator reports the total uninsured population by age group.

Report Area	Under Age 18	Age 18-64	Age 65+
Schenectady County, NY	500	4,781	38
New York	110,648	861,162	30,363
United States	4,208,983	23,338,717	453,176

Data Source: US Census Bureau, American Community Survey, 2019-23.



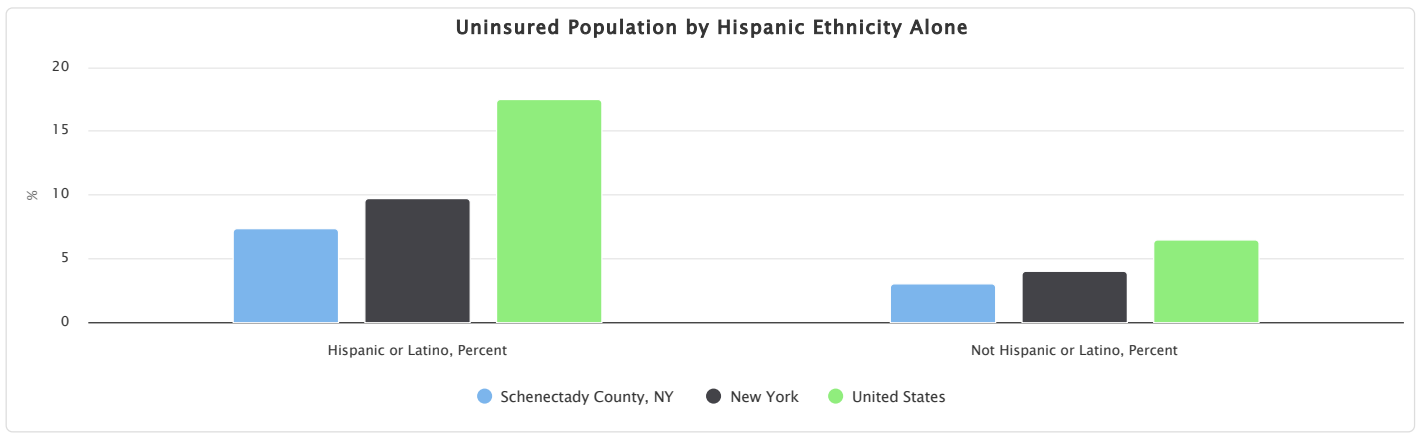
## Uninsured Population by Hispanic Ethnicity Alone

This indicator reports the uninsured population by Hispanic ethnicity alone.

The percentage values could be interpreted as, for example, "Of all the Hispanic population within the report area, the proportion without health insurance coverage is (value)."

Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Schenectady County, NY	935	4,384	7.31%	3.02%
New York	376,900	625,273	9.74%	3.96%
United States	10,900,185	17,100,691	17.47%	6.45%

Data Source: US Census Bureau, American Community Survey, 2019-23.



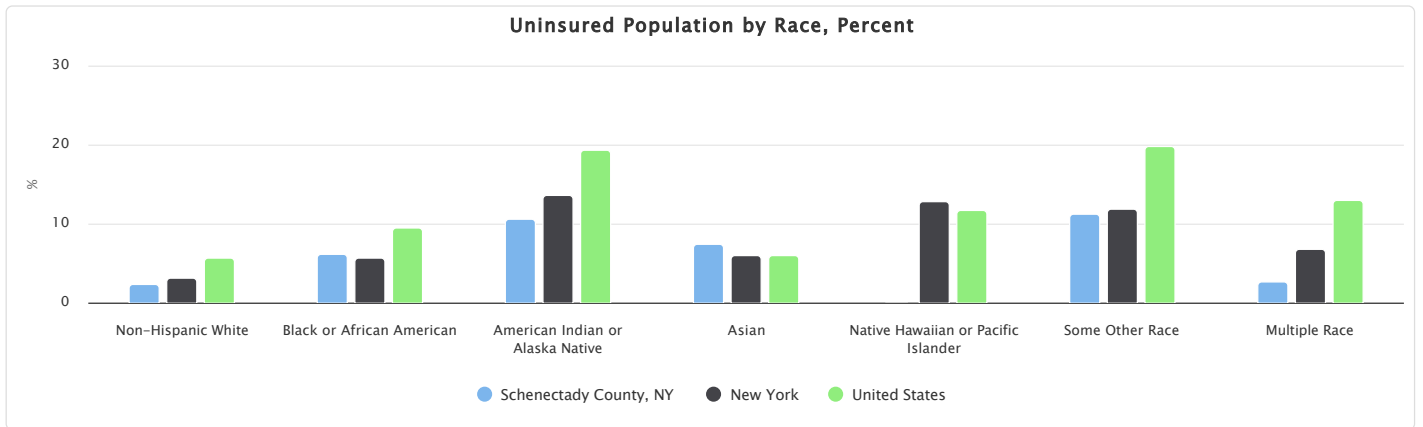
## Uninsured Population by Race, Percent

This indicator reports the percentage of uninsured population by race alone.

The percentage values could be interpreted as, for example, "Of all the non-Hispanic white population within the report area, the proportion without health insurance coverage is (value)."

Report Area	Non-Hispanic White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	2.25%	6.05%	10.55%	7.41%	0.00%	11.23%	2.54%
New York	3.12%	5.57%	13.61%	5.98%	12.81%	11.75%	6.78%
United States	5.71%	9.46%	19.22%	5.89%	11.59%	19.70%	12.98%

Data Source: US Census Bureau, American Community Survey, 2019-23.



## Uninsured Population by Race, Total

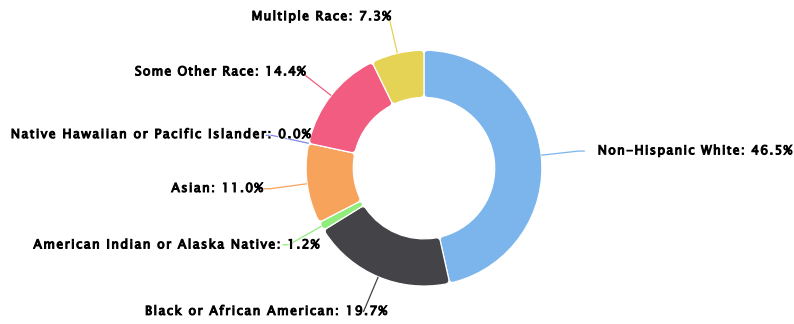
This indicator reports the total uninsured population by race alone.

Report Area	Non-Hispanic White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	2,443	1,035	63	577	0	755	381
New York	327,500	159,797	13,900	105,507	1,197	227,385	119,484
United States	10,876,176	3,775,959	549,575	1,134,010	71,131	4,280,782	4,567,337

Data Source: US Census Bureau, American Community Survey, 2019-23.

### Uninsured Population by Race, Total

Schenectady County, NY



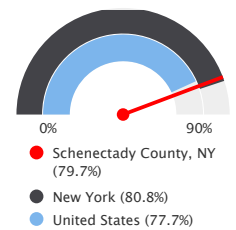
### Recent Primary Care Visit

This indicator reports the percentage of adults age 18 and older who reported having been to a doctor for a routine checkup (e.g., a general physical exam, not an exam for a specific injury, illness, or condition) in the previous year.

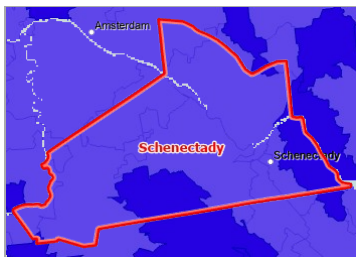
Within the report area, an estimate 79.7% of adults age 18+ had a routine checkup in the past year.

Report Area	Total Population	Adults Age 18+ with Routine Checkup in Past 1 Year (Crude)	Adults Age 18+ with Routine Checkup in Past 1 Year (Age-Adjusted)
Schenectady County, NY	159,902	<b>79.7%</b>	78.1%
New York	19,571,216	80.8%	79.2%
United States	334,914,895	77.7%	75.7%

percentage of Adults Age 18+ with Routine Checkup in Past Year

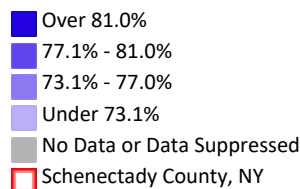


Note: This indicator is compared to the state average.  
Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.



[View larger map](#)

### Primary Care Physician Visit, Percent of Adults Seen in Past 1 Year by ZCTA, CDC BRFSS PLACES Project 2023

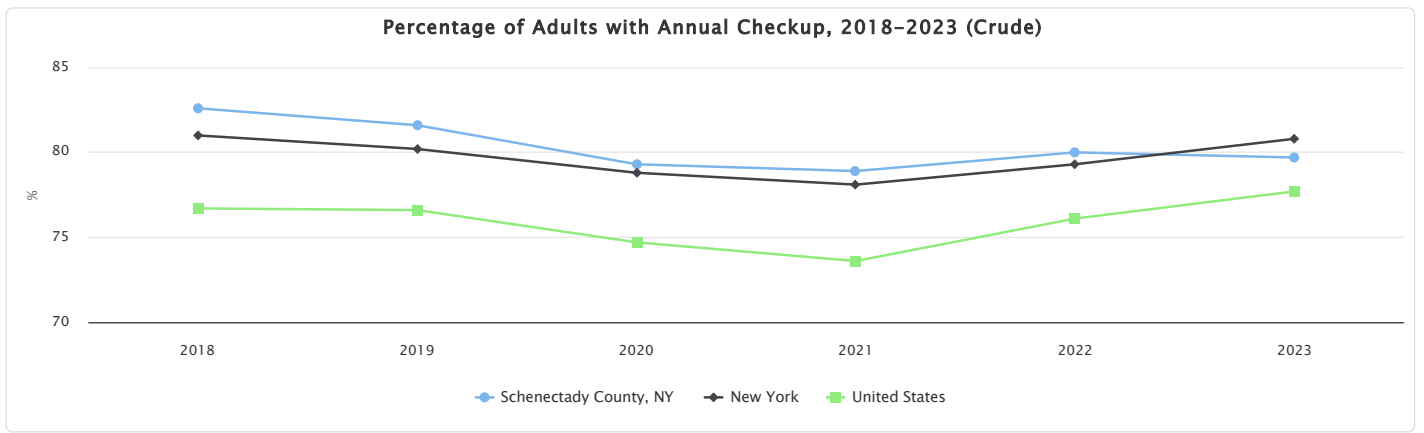


### Percentage of Adults with Annual Checkup, 2018-2023 (Crude)

The table and chart below display annual trends in the percentage of adults age 18+ who report having had a regular checkup in the past year.

Report Area	2018	2019	2020	2021	2022	2023
Schenectady County, NY	82.6%	81.6%	79.3%	78.9%	80.0%	79.7%
New York	81.0%	80.2%	78.8%	78.1%	79.3%	80.8%
United States	76.7%	76.6%	74.7%	73.6%	76.1%	77.7%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.



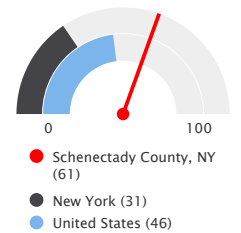
## Economic Stability

### Area Deprivation Index

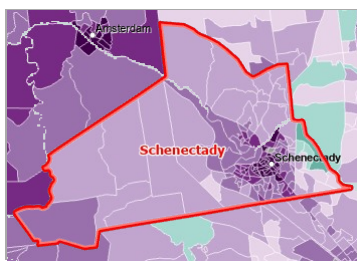
This indicator reports the average (population weighted) Area Deprivation Index (ADI) for the selected area. The Area Deprivation Index ranks neighborhoods and communities relative to all neighborhoods across the nation (National Percentile) or relative to other neighborhoods within just one state (State Percentile). The ADI is calculated based on 17 measures related to four primary domains (Education; Income & Employment; Housing; and Household Characteristics). The overall scores are measured on a scale of 1 to 100 where 1 indicates the lowest level of deprivation (least disadvantaged) and 100 is the highest level of deprivation (most disadvantaged).

Report Area	Total Population (2020)	State Percentile	National Percentile
Schenectady County, NY	158,061	80	<b>61</b>
New York	20,201,249	51	31
United States	331,129,211	51	46

Area Deprivation Index Score (National Percentile)



Note: This indicator is compared to the state average.  
Data Source: University of Wisconsin-Madison School of Medicine and Public Health, *Neighborhood Atlas*, 2023.



[View larger map](#)

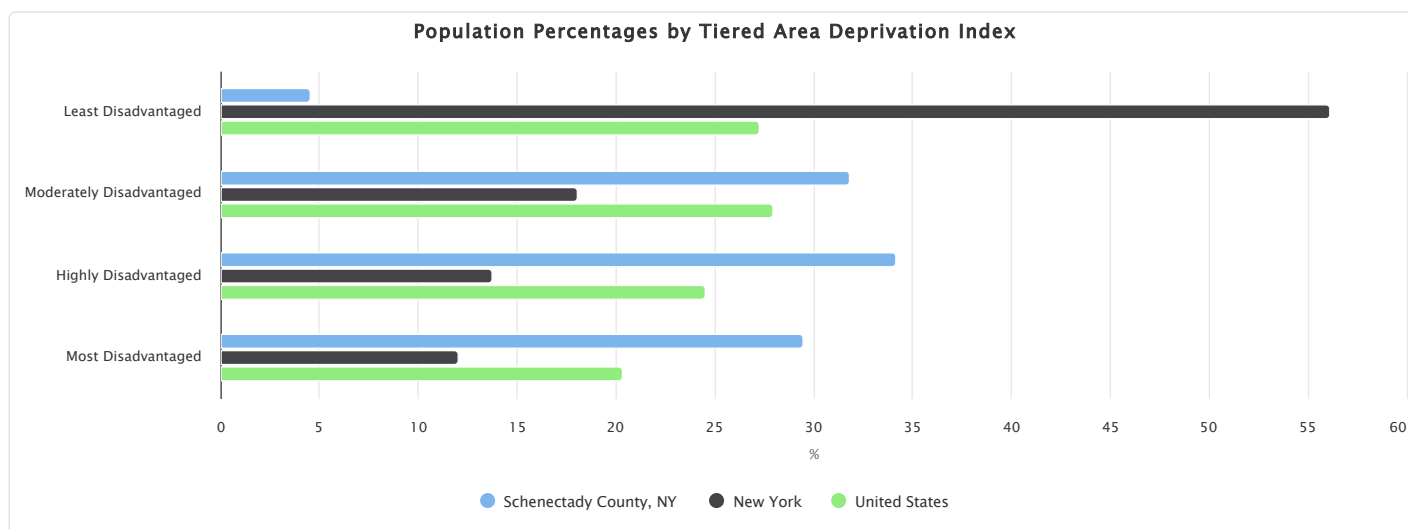
Area Deprivation Index (2023), State Decile by Block Group, UW Neighborhood Atlas 2023



### Population Percentages by Tiered Area Deprivation Index

This indicator reports the population percentages for four types of neighborhoods (least disadvantaged, most disadvantaged, and two middle groups) based on tiered Area Deprivation Index (ADI national percentile) for all the block groups in the selected area.

Report Area	Least Disadvantaged	Moderately Disadvantaged	Highly Disadvantaged	Most Disadvantaged
Schenectady County, NY	4.56%	31.81%	34.17%	29.46%
New York	56.13%	18.07%	13.75%	12.05%
United States	27.23%	27.91%	24.52%	20.34%



### Employment - Jobs and Earnings by Sector

The number of jobs and total wage and salary earnings from employment in the report area are broken down by economic sector in this indicator output. These figures include both private and government employment. The sectors listed represent private employment except for the last table which includes all the earnings from jobs with local, state and federal government. A negative number means that overall business in that sector lost money for the year in the report area.

#### Farm; Nonfarm; Private Nonfarm

Report Area	Farm Jobs	Farm Earnings (\$1,000)	Farm Average	Nonfarm Jobs	Nonfarm Earnings (\$1,000)	Nonfarm Average	Private Nonfarm Jobs	Private Nonfarm Earnings (\$1,000)	Private Nonfarm Average
Schenectady County, NY	172	\$14	\$81	77,453	\$5,411,898	\$69,873	67,829	\$4,339,382	\$63,975
New York	52,933	\$2,442,888	\$46,151	12,839,113	\$1,159,457,297	\$90,307	11,398,004	\$981,206,716	\$86,086
United States	2,567,000	\$114,272,000	\$44,516	209,875,000	\$15,093,680,000	\$71,917	185,677,000	\$12,861,899,000	\$69,270

Data Source: US Department of Commerce, *US Bureau of Economic Analysis*, 2022.

#### Forestry, Fishing, and Related Activities; Mining; Utilities

Report Area	Forestry, Fishing, and Related Activities Jobs	Forestry, Fishing, and Related Activities Earnings (\$1,000)	Forestry, Fishing, and Related Activities Average	Mining Jobs	Mining Earnings (\$1,000)	Mining Average	Utilities Jobs	Utilities Earnings (\$1,000)	Utilities Average
Schenectady County, NY	No data	No data	No data	No data	No data	No data	165	\$31,530	\$191,091
New York	14,365	\$527,912	\$36,750	10,882	\$3,263,158	\$299,867	40,033	\$10,577,231	\$264,213
United States	966,800	\$39,487,000	\$40,843	1,050,200	\$170,144,000	\$162,011	605,600	\$128,249,000	\$211,772

Data Source: US Department of Commerce, *US Bureau of Economic Analysis*, 2022.

#### Construction; Manufacturing

Report Area	Construction Jobs	Construction Earnings (\$1,000)	Construction Average	Manufacturing Jobs	Manufacturing Earnings (\$1,000)	Manufacturing Average
Schenectady County, NY	3,891	\$276,984	\$71,186	4,927	\$529,940	\$107,558
New York	553,456	\$47,369,124	\$85,588	454,887	\$43,909,194	\$96,528
United States	11,867,800	\$915,317,000	\$77,126	13,523,700	\$1,335,947,000	\$98,786

Data Source: US Department of Commerce, US Bureau of Economic Analysis, 2022.

## Wholesale Trade; Retail Trade; Transportation and Warehousing

Report Area	Wholesale Trade Jobs	Wholesale Trade Earnings (\$1,000)	Wholesale Trade Average	Retail Trade Jobs	Retail Trade Earnings (\$1,000)	Retail Trade Average	Transportation and Warehousing Jobs	Transportation and Warehousing Earnings (\$1,000)	Transportation and Warehousing Average
Schenectady County, NY	1,530	\$163,776	\$107,043	8,153	\$348,567	\$42,753	4,505	\$198,909	\$44,153
New York	357,206	\$39,582,877	\$110,812	1,025,204	\$52,687,205	\$51,392	601,772	\$29,759,554	\$49,453
United States	6,757,300	\$710,955,000	\$105,213	19,510,300	\$861,699,000	\$44,166	11,473,500	\$638,088,000	\$55,614

Data Source: US Department of Commerce, US Bureau of Economic Analysis, 2022.

## Information; Finance and Insurance; Real Estate and Rental and Leasing

Report Area	Information Jobs	Information Earnings (\$1,000)	Information Average	Finance and Insurance Jobs	Finance and Insurance Earnings (\$1,000)	Finance and Insurance Average	Real Estate and Rental and Leasing Jobs	Real Estate and Rental and Leasing Earnings (\$1,000)	Real Estate and Rental and Leasing Average
Schenectady County, NY	1,319	\$99,633	\$75,537	4,172	\$255,945	\$61,348	3,580	\$61,845	\$17,275
New York	350,619	\$68,495,540	\$195,356	1,129,778	\$187,772,579	\$166,203	877,036	\$17,055,056	\$19,446
United States	3,861,900	\$566,943,000	\$146,804	12,982,300	\$1,078,856,000	\$83,102	11,832,200	\$389,364,000	\$32,907

Data Source: US Department of Commerce, US Bureau of Economic Analysis, 2022.

## Professional, Scientific, and Technical Services; Management of Companies and Enterprises

Report Area	Professional, Scientific, and Technical Services Jobs	Professional, Scientific, and Technical Services Earnings (\$1,000)	Professional, Scientific, and Technical Services Average	Management of Companies and Enterprises Jobs	Management of Companies and Enterprises Earnings (\$1,000)	Management of Companies and Enterprises Average
Schenectady County, NY	8,010	\$887,281	\$110,772	1,286	\$170,324	\$132,445
New York	1,067,137	\$148,000,429	\$138,689	173,339	\$27,382,598	\$157,971
United States	15,978,400	\$1,725,868,000	\$108,013	2,953,800	\$416,065,000	\$140,858

Data Source: US Department of Commerce, US Bureau of Economic Analysis, 2022.

## Administrative and Waste Management Services; Educational Services

Report Area	Administrative and Waste Management Services <i>Jobs</i>	Administrative and Waste Management Services <i>Earnings</i> (\$1,000)	Administrative and Waste Management Services <i>Average</i>	Educational Services <i>Jobs</i>	Educational Services <i>Earnings</i> (\$1,000)	Educational Services <i>Average</i>
Schenectady County, NY	2,416	\$121,090	\$50,120	2,875	\$118,778	\$41,314
New York	644,088	\$42,685,682	\$66,273	480,451	\$33,209,067	\$69,121
United States	13,058,300	\$691,776,000	\$52,976	4,885,700	\$254,764,000	\$52,145

Data Source: US Department of Commerce, US Bureau of Economic Analysis, 2022.

## Health Care and Social Assistance; Arts, Entertainment, and Recreation

Report Area	Health Care and Social Assistance <i>Jobs</i>	Health Care and Social Assistance <i>Earnings</i> (\$1,000)	Health Care and Social Assistance <i>Average</i>	Arts, Entertainment, and Recreation <i>Jobs</i>	Arts, Entertainment, and Recreation <i>Earnings</i> (\$1,000)	Arts, Entertainment, and Recreation <i>Average</i>
Schenectady County, NY	10,393	\$673,610	\$64,814	1,469	\$26,716	\$18,187
New York	1,845,408	\$134,658,727	\$72,970	327,119	\$25,525,610	\$78,032
United States	23,545,500	\$1,684,068,000	\$71,524	4,457,300	\$203,533,000	\$45,663

Data Source: US Department of Commerce, US Bureau of Economic Analysis, 2022.

## Accommodation and Food Services; Other Services, Except Public Administration

Report Area	Accommodation and Food Services <i>Jobs</i>	Accommodation and Food Services <i>Earnings</i> (\$1,000)	Accommodation and Food Services <i>Average</i>	Other Services, Except Public Administration <i>Jobs</i>	Other Services, Except Public Administration <i>Earnings</i> (\$1,000)	Other Services, Except Public Administration <i>Average</i>
Schenectady County, NY	5,165	\$190,510	\$36,885	3,807	\$164,966	\$43,332
New York	779,492	\$35,400,643	\$45,415	665,732	\$33,344,530	\$50,087
United States	14,750,300	\$536,234,000	\$36,354	11,616,100	\$514,542,000	\$44,296

Data Source: US Department of Commerce, US Bureau of Economic Analysis, 2022.

## Government and Government Enterprises

Report Area	Government and Government Enterprises <i>Jobs</i>	Government and Government Enterprises <i>Earnings</i> (\$1,000)	Government and Government Enterprises <i>Average</i>
Schenectady County, NY	9,624	\$1,072,516	\$111,442
New York	1,441,109	\$178,250,581	\$123,690
United States	24,198,000	\$2,231,781,000	\$92,230

Data Source: US Department of Commerce, US Bureau of Economic Analysis, 2022.

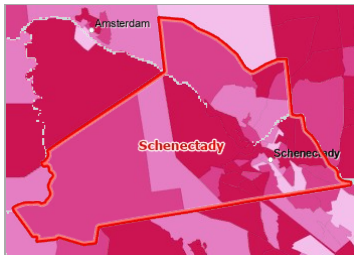
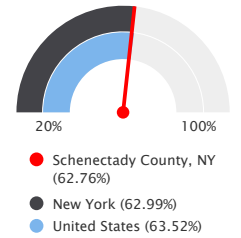
## Employment - Labor Force Participation Rate

The table below displays the labor force participation rate for the report area. According to the 2019 – 2023 American Community Survey, of the 129,211 working age population, 81,094 are included in the labor force. The labor force participation rate is 62.76%.

Report Area	Total Population Age 16+	Labor Force	Labor Force Participation Rate
Schenectady County, NY	129,211	81,094	<b>62.76%</b>
New York	16,235,440	10,226,460	62.99%
United States	267,393,519	169,855,626	63.52%

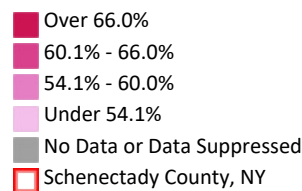
Note: This indicator is compared to the state average.  
Data Source: US Census Bureau, American Community Survey, 2019-23.

Labor Force Participation Rate



[View larger map](#)

Labor Force, Participation Rate by Tract, ACS 2019-23



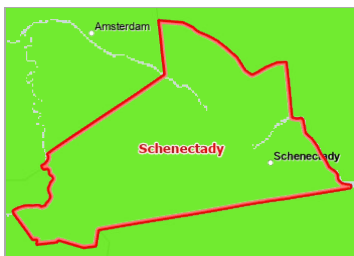
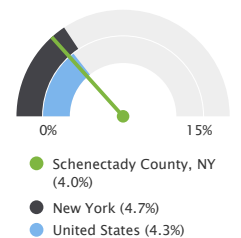
## Employment - Unemployment Rate

Total unemployment in the report area for the current month equals 3,144, or 4.0% of the civilian non-institutionalized population age 16 and older (non-seasonally adjusted). This indicator is relevant because unemployment creates financial instability and barriers to access including insurance coverage, health services, healthy food, and other necessities that contribute to poor health status.

Report Area	Labor Force	Number Employed	Number Unemployed	Unemployment Rate
Schenectady County, NY	77,632	74,488	3,144	<b>4.0%</b>
New York	9,973,218	9,499,596	473,622	4.7%
United States	172,446,542	165,048,029	7,398,513	4.3%

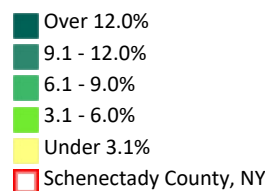
Note: This indicator is compared to the state average.  
Data Source: US Department of Labor, Bureau of Labor Statistics, 2025 - September.

Unemployment Rate:%



[View larger map](#)

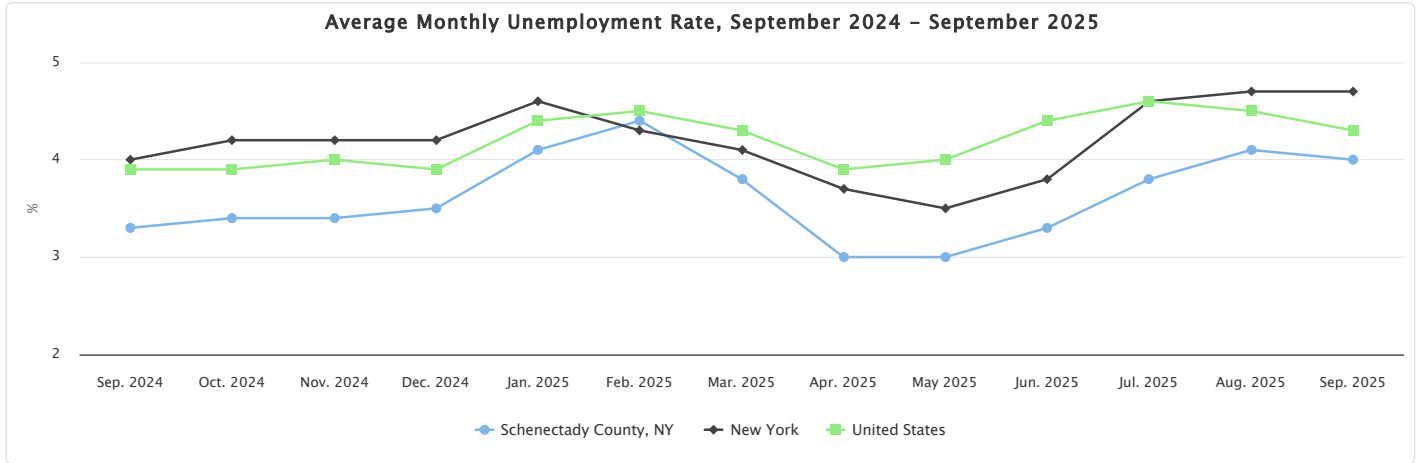
Unemployment, Rate by County, BLS 2025 - September



Average Monthly Unemployment Rate, September 2024 - September 2025

Report Area	Sep. 2024	Oct. 2024	Nov. 2024	Dec. 2024	Jan. 2025	Feb. 2025	Mar. 2025	Apr. 2025	May 2025	Jun. 2025	Jul. 2025	Aug. 2025	Sep. 2025
Schenectady County, NY	3.3%	3.4%	3.4%	3.5%	4.1%	4.4%	3.8%	3.0%	3.0%	3.3%	3.8%	4.1%	4.0%
New York	4.0%	4.2%	4.2%	4.2%	4.6%	4.3%	4.1%	3.7%	3.5%	3.8%	4.6%	4.7%	4.7%
United States	3.9%	3.9%	4.0%	3.9%	4.4%	4.5%	4.3%	3.9%	4.0%	4.4%	4.6%	4.5%	4.3%

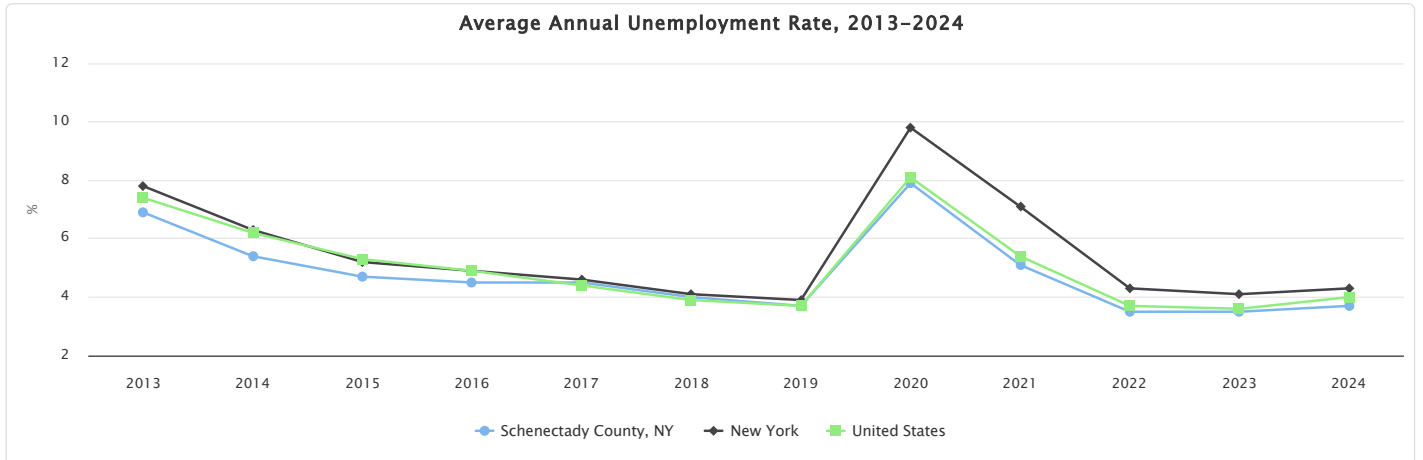
Data Source: US Department of Labor, Bureau of Labor Statistics. 2025 - September.



### Average Annual Unemployment Rate, 2013-2024

Report Area	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Schenectady County, NY	6.9%	5.4%	4.7%	4.5%	4.5%	4.0%	3.7%	7.9%	5.1%	3.5%	3.5%	3.7%
New York	7.8%	6.3%	5.2%	4.9%	4.6%	4.1%	3.9%	9.8%	7.1%	4.3%	4.1%	4.3%
United States	7.4%	6.2%	5.3%	4.9%	4.4%	3.9%	3.7%	8.1%	5.4%	3.7%	3.6%	4.0%

Data Source: US Department of Labor, Bureau of Labor Statistics. 2025 - September.



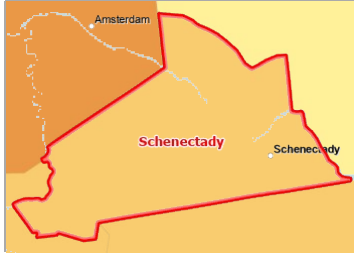
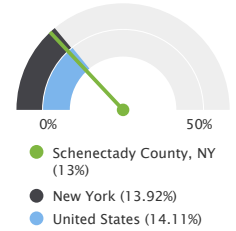
### Food Insecurity Rate

This indicator reports the estimated percentage of the population that experienced food insecurity at some point during the report year. Food insecurity is the household-level economic and social condition of limited or uncertain access to adequate food.

Report Area	Total Population	Food Insecure Population, Total	Food Insecurity Rate
Schenectady County, NY	154,769	20,120	13%
New York	19,712,813	2,744,890	13.92%
United States	331,287,882	46,753,190	14.11%

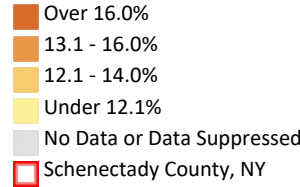
Note: This indicator is compared to the state average.  
Data Source: Feeding America. 2023.

percentage of Total Populatio with Food Insecurity



[View larger map](#)

Food Insecure Population, Percent by County, Feeding America 2023



### Food Insecurity - Food Insecure Children

This indicator reports the estimated percentage of the population under age 18 that experienced food insecurity at some point during the report year. Food insecurity is the household-level economic and social condition of limited or uncertain access to adequate food.

Report Area	Population Under Age 18	Food Insecure Children, Total	Child Food Insecurity Rate
Schenectady County, NY	32,938	5,270	16%
New York	8,051,802	1,483,640	18.43%
United States	72,810,721	13,128,990	18.03%

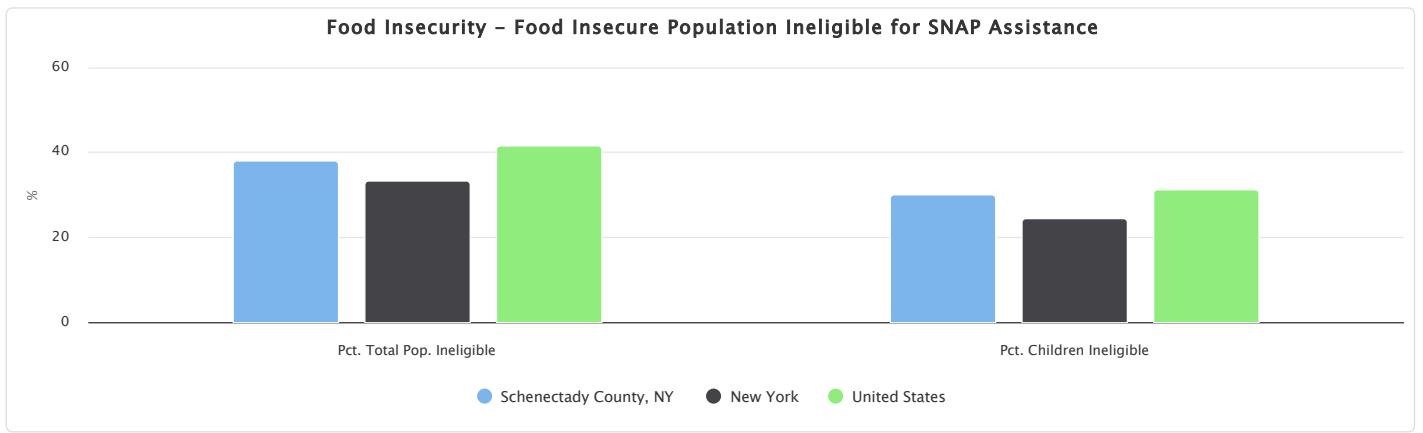
Data Source: Feeding America. 2023.

### Food Insecurity - Food Insecure Population Ineligible for SNAP Assistance

This indicator reports the estimated percentage of the total population and the population under age 18 that experienced food insecurity at some point during the report year, but are ineligible for SNAP assistance. Food insecurity is the household-level economic and social condition of limited or uncertain access to adequate food. Assistance eligibility is determined based on household income of the food insecure households relative to the maximum income-to-poverty ratio for SNAP.

Report Area	Food Insecure Population	Food Insecure Population Ineligible for Assistance, Percent	Food Insecure Children	Food Insecure Children Ineligible for Assistance, Percent
Schenectady County, NY	18,060	38%	5,270	30%
New York	2,518,850	33.26%	736,120	24.27%
United States	42,657,200	41.49%	13,128,990	31.21%

Data Source: Feeding America. 2023.

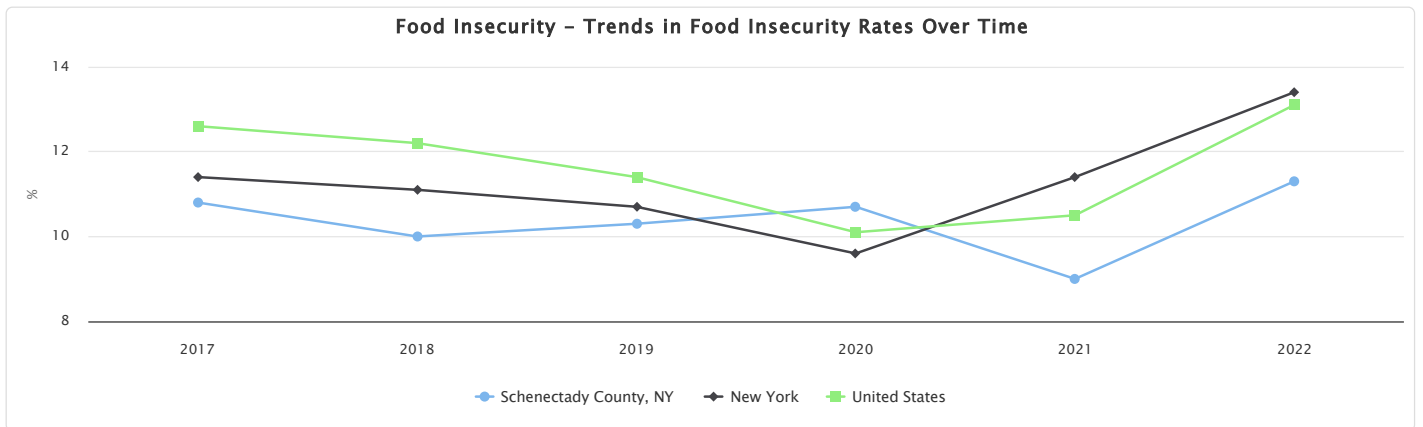


## Food Insecurity - Trends in Food Insecurity Rates Over Time

This indicator reports the estimated percentage of the food insecurity trend observed at various points throughout the report year. Food insecurity is the household-level economic and social condition of limited or uncertain access to adequate food.

Report Area	2017	2018	2019	2020	2021	2022
Schenectady County, NY	10.8%	10%	10.3%	10.7%	9%	11.3%
New York	11.4%	11.1%	10.7%	9.6%	11.4%	13.4%
United States	12.6%	12.2%	11.4%	10.1%	10.5%	13.1%

Data Source: Feeding America. 2023.



## Homeless Children and Youth

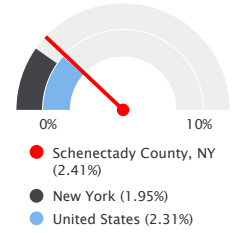
This indicator reports the number of children and youth experiencing homelessness enrolled in the public school system during the 2021-2022 school year. This data source reports the number of students experiencing homelessness, defined as individuals who lack a fixed, regular, and adequate nighttime residence. This includes those who are sharing the housing of others, living in motels, hotels, or camping grounds, staying in emergency transitional shelters, or are unsheltered. Data are aggregated to the report-area level based on school-district summaries where three or more children experiencing homelessness are counted.

In the report area, of the 22,262 students enrolled in reported districts during the 2021-22 school year, there were 537 or 2.41% students experiencing homelessness, which is higher than the statewide rate of 1.95%.

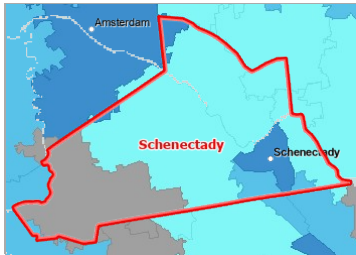
*Note: Data are available for 90.90% school districts in the report area, representing 98.10% of the public school student population.*

Report Area	Students in All Districts	Students Reporting Experiencing Homelessness	Students Reporting Experiencing Homelessness, Percent	Districts Reporting	Students in Reported Districts
Schenectady County, NY	22,262	537	2.41%	90.90%	98.10%
New York	1,506,623	29,320	1.95%	91.94%	100.00%
United States	45,802,935	1,056,199	2.31%	88.40%	99.27%

Percentage of Students Experiencing Homelessness

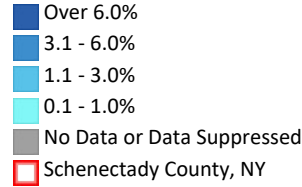


Note: This indicator is compared to the state average.  
 Data Source: US Department of Education, [ED Data Express](#). Additional data analysis by CARES. 2021-2022.



[View larger map](#)

Students Experiencing Homelessness, Percent by School District (Elementary), Ed Data Express 2021-22



## Students Experiencing Homelessness by Primary Nighttime Residence

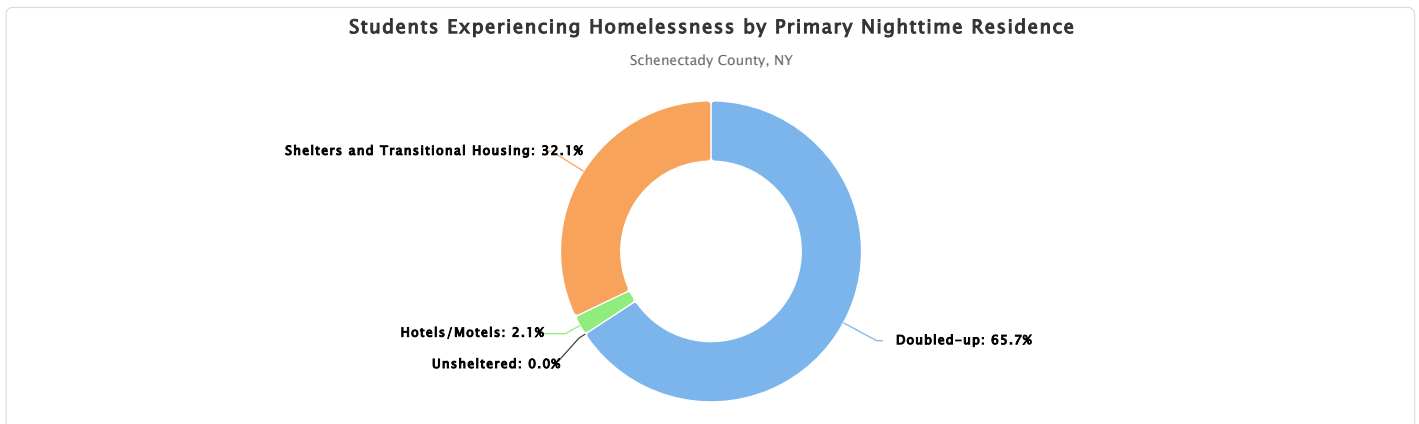
This table and chart below report the number of students experiencing homelessness by their primary nighttime residence. Data represent students who were enrolled in the public school system during the 2021-2022 school year. The data are aggregated at the report-area level based on school district summaries where three or more students were counted.

A brief description of each column is provided below:

- **Doubled-up:** Refers to doubled-up or shared housing due to loss of housing, economic hardship, or similar reasons.
- **Unsheltered:** Includes situations such as living in cars, parks, campgrounds, temporary trailers (including FEMA trailers), or abandoned buildings.
- **Hotels/Motels:** As indicated by the name, refers to stays in hotels or motels.
- **Shelters and Transitional Housing:** Refers to stays in shelters or transitional housing programs, as indicated.

Report Area	Total	Doubled-up	Unsheltered	Hotels/motels	Shelters and transitional housing
Schenectady County, NY	537	309	0	10	151
New York	29,320	20,310	81	2,155	4,549
United States	1,056,199	785,532	40,035	95,315	87,097

Data Source: US Department of Education, [ED Data Express](#). Additional data analysis by CARES. 2021-2022.

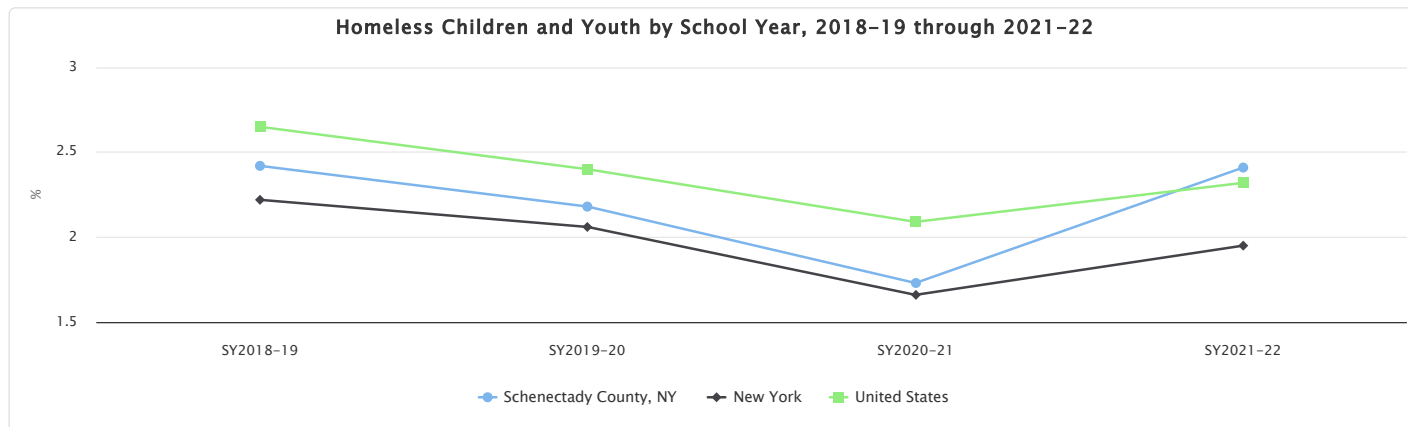


## Homeless Children and Youth by School Year, 2018-19 through 2021-22

This indicator reports the number of children and youth experiencing homelessness enrolled in the public school system from SY2018-19 through SY2021-2022. Data are aggregated to the report-area level based on school-district summaries where three or more children experiencing homelessness are counted.

Report Area	SY2018-19	SY2019-20	SY2020-21	SY2021-22
Schenectady County, NY	2.42%	2.18%	1.73%	2.41%
New York	2.22%	2.06%	1.66%	1.95%
United States	2.65%	2.40%	2.09%	2.32%

Data Source: US Department of Education, [ED Data Express](#). Additional data analysis by [CARES](#). 2021-2022.



## Income - Median Household Income

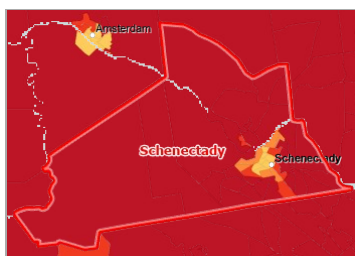
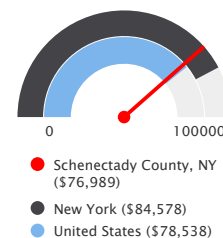
This indicator reports median household income based on the latest 5-year American Community Survey estimates. This includes the income of the householder and all other individuals 15 years old and over in the household, whether they are related to the householder or not. Because many households consist of only one person, median household income is usually less than median family income. There are 66,324 households in the report area, with an average income of \$99,121 and a median income of \$76,989.

Report Area	Total Households	Average Household Income	Median Household Income
Schenectady County, NY	66,324	\$99,121	<b>\$76,989</b>
New York	7,668,956	\$125,908	\$84,578
United States	127,482,865	\$110,490	\$78,538

Note: This indicator is compared to the state average.

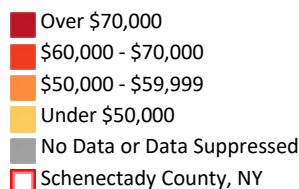
Data Source: US Census Bureau, [American Community Survey](#). 2019-23.

Median Household Income



[View larger map](#)

Median Household Income by Tract, ACS 2019-23

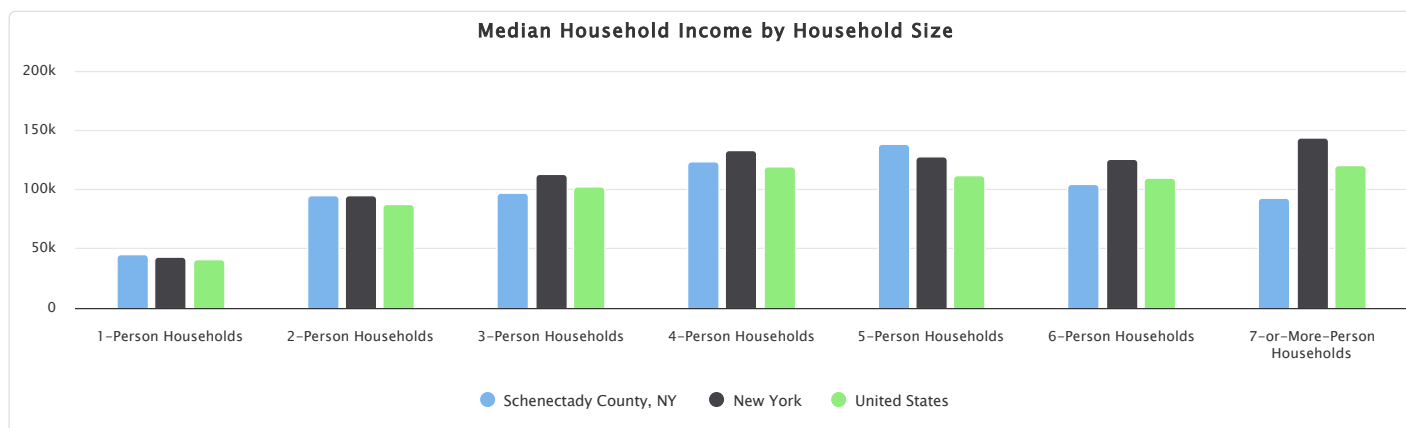


## Median Household Income by Household Size

This indicator reports the median household income of the report area by household size.

Report Area	1-Person Households	2-Person Households	3-Person Households	4-Person Households	5-Person Households	6-Person Households	7-or-More-Person Households
Schenectady County, NY	\$45,456	\$94,704	\$96,342	\$123,396	\$138,063	\$104,328	\$92,838
New York	\$43,202	\$94,313	\$112,195	\$132,851	\$128,024	\$125,512	\$143,162
United States	\$40,456	\$86,971	\$102,372	\$118,913	\$111,952	\$109,893	\$120,082

Data Source: US Census Bureau, American Community Survey, 2019-23.

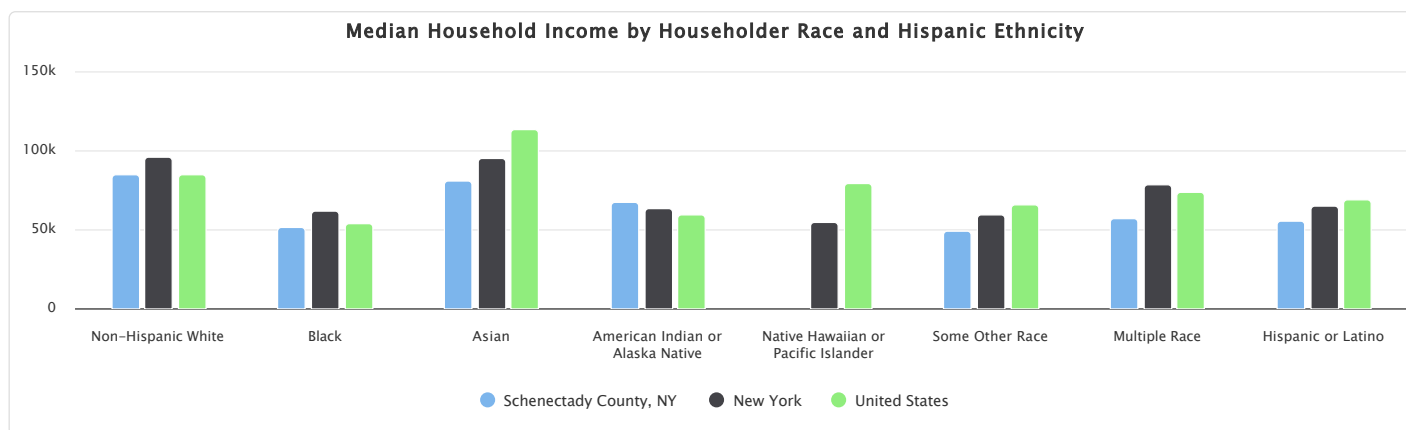


## Median Household Income by Householder Race and Hispanic Ethnicity

This indicator reports the median household income of the report area by race and Hispanic ethnicity of householder.

Report Area	Non-Hispanic White	Black	Asian	American Indian or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race	Hispanic or Latino
Schenectady County, NY	\$84,179	\$51,492	\$80,230	\$67,041	No data	\$48,647	\$57,017	\$55,326
New York	\$95,712	\$61,528	\$94,665	\$63,315	\$54,522	\$58,747	\$78,026	\$64,615
United States	\$84,745	\$53,444	\$113,106	\$59,393	\$78,640	\$65,558	\$73,412	\$68,890

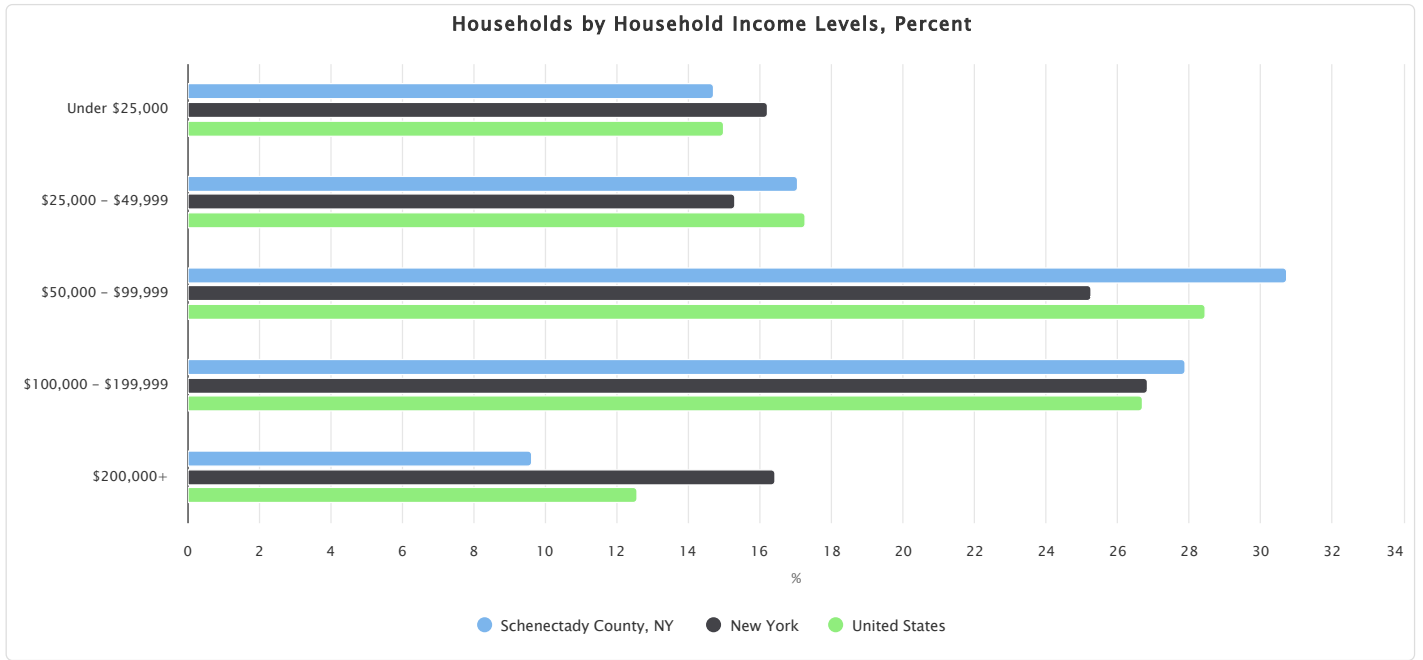
Data Source: US Census Bureau, American Community Survey, 2019-23.



## Households by Household Income Levels, Percent

Report Area	Under \$25,000	\$25,000 - \$49,999	\$50,000 - \$99,999	\$100,000 - \$199,999	\$200,000+
Schenectady County, NY	14.72%	17.04%	30.73%	27.89%	9.63%
New York	16.21%	15.30%	25.24%	26.84%	16.42%
United States	15.00%	17.28%	28.46%	26.70%	12.56%

Data Source: US Census Bureau, American Community Survey, 2019-23.



## Poverty - Children Below 200% FPL

In the report area 31.92% or 10,888 children are living in households with income below 200% of the Federal Poverty Level (FPL). This indicator is relevant because poverty creates barriers to access including health services, healthy food, and other necessities that contribute to poor health status.

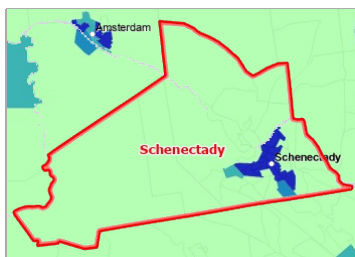
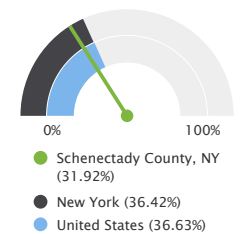
*Note: The total population measurements for poverty reports are lower than population totals for some other indicators, as poverty data collection does not include people in group quarters. See "Show more details" for more information.*

Report Area	Total Population Under Age 18	Population Under Age 18 Below 200% FPL	Population Under Age 18 Below 200% FPL, Percent
Schenectady County, NY	34,105	10,888	31.92%
New York	4,028,700	1,467,334	36.42%
United States	72,472,636	26,544,399	36.63%

Note: This indicator is compared to the state average.

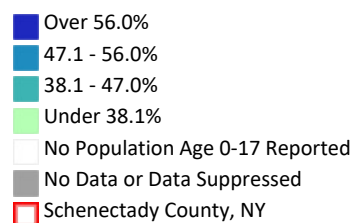
Data Source: US Census Bureau, American Community Survey, 2019-23.

Population Under Age 18 Below 200% FPL, Percent



[View larger map](#)

Population Below 200% Poverty Level, Children (Age 0-17), Percent by Tract, ACS 2019-23



## Poverty - Children Eligible for Free/Reduced Price Lunch

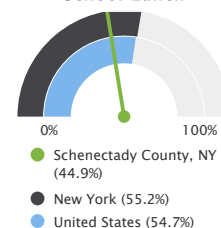
Free or reduced price lunches are served to qualifying students in families with income between under 185 percent (reduced price) or under 130 percent (free lunch) of the US federal poverty threshold as part of the federal National School Lunch Program (NSLP).

Out of 21,710 total public school students in the report area, 9,748 were eligible for the free or reduced price lunch program in the latest report year. This represents 44.9% of public school students, which is lower than the state average of 55.2%.

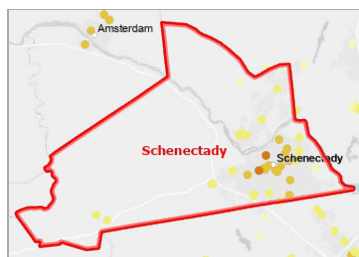
*Note: States with more than 80% records "not reported" are suppressed for all geographic areas, including hospital service area, census tract, zip code, school district, county, state, etc.*

Report Area	Total Students	Students Eligible for Free or Reduced Price Lunch	Students Eligible for Free or Reduced Price Lunch, Percent
Schenectady County, NY	21,710	9,748	44.9%
New York	2,510,607	1,385,850	55.2%
United States	46,694,706	24,748,121	54.7%

Percentage of Students Eligible for Free or Reduced Price School Lunch



*Note: This indicator is compared to the state average.*  
*Data Source: National Center for Education Statistics, NCES - Common Core of Data, 2023-24.*



[View larger map](#)

Students Eligible for Free or Reduced-Price Lunch, NCES CCD 2023-24

- Over 90.0%
- 75.1 - 90.0%
- 50.1 - 75.0%
- 20.1 - 50.0%
- Under 20.1%
- Not Reported
- Schenectady County, NY

## Children Eligible for Free or Reduced Price Lunch by School Year, 2013-14 through 2022-23

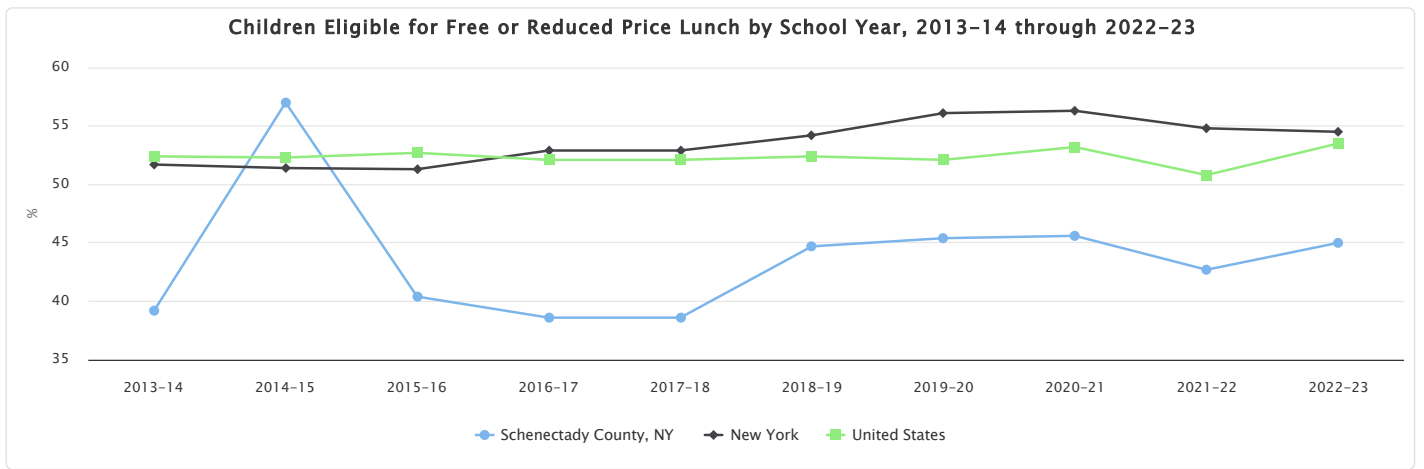
The table below shows local, state, and national trends in student free and reduced lunch eligibility by percent.

*Note: The states below have more than 80% public schools labeled as "not reported" in 2022-2023. For consistency, these states still have their values calculated with the limited records on all geographic levels (unless there is not a single record reported in the selected area). Use with caution when comparing to other years. This issue might occur in other states/years as well.*

*For 2022-2023, watch out for Delaware, District of Columbia, Massachusetts, Montana, Tennessee, West Virginia, American Samoa, and Guam.*

Report Area	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23
Schenectady County, NY	39.2%	57.0%	40.4%	38.6%	38.6%	44.7%	45.4%	45.6%	42.7%	45.0%
New York	51.7%	51.4%	51.3%	52.9%	52.9%	54.2%	56.1%	56.3%	54.8%	54.5%
United States	52.4%	52.3%	52.7%	52.1%	52.1%	52.4%	52.1%	53.2%	50.8%	53.5%

*Data Source: National Center for Education Statistics, NCES - Common Core of Data, 2023-24.*



## Children Eligible for Free or Reduced Price Lunch by Eligibility

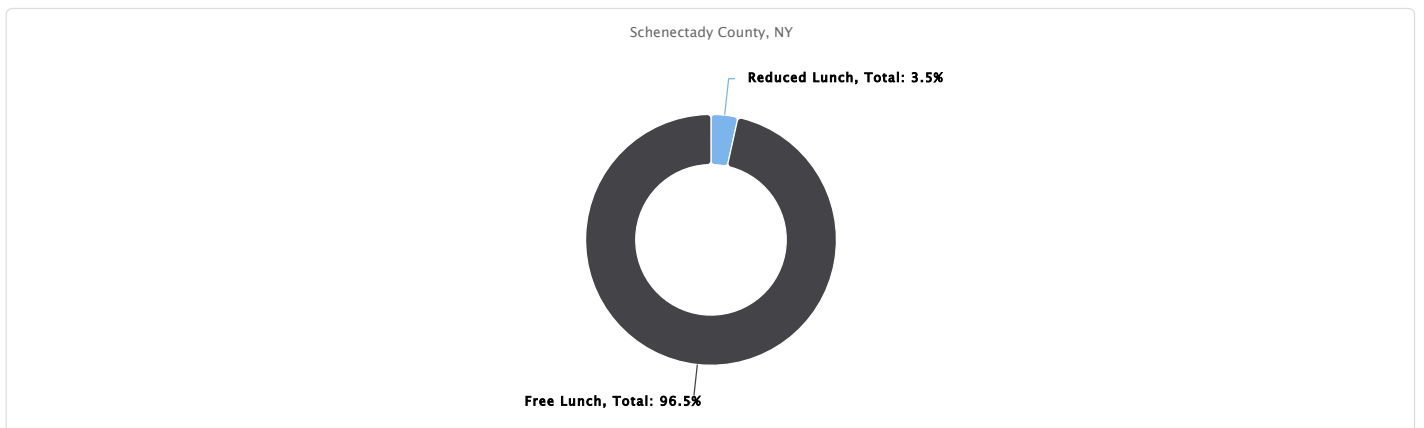
The table below displays the number and percentage of students eligible for free or reduced price lunch by income eligibility category. Percentages in the table below are out of the total student population.

*Note: States with more than 80% records labeled as "not reported" are suppressed for all geographic areas.*

Report Area	Free Lunch, Total	Free Lunch, Percent	Reduced Lunch, Total	Reduced Lunch, Percent
Schenectady County, NY	9,341	43.4%	336	1.6%
New York	1,295,737	51.7%	65,339	2.6%
United States	21,117,358	42.8%	2,275,791	4.6%

Data Source: National Center for Education Statistics, *NCES - Common Core of Data*, 2023-24.

The chart below displays the percentage of the students in each eligibility category out of the total number of students eligible for free or reduced price lunch. Of all the 9,677 students eligible for free or reduced price lunch, 96.5% are eligible for free lunch and 3.5% are eligible for reduced lunch.



## Poverty - Population Below 200% FPL

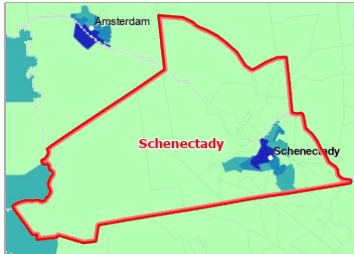
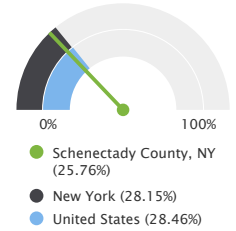
In the report area 25.76% or 40,043 individuals for whom poverty status is determined are living in households with income below 200% of the Federal Poverty Level (FPL). This indicator is relevant because poverty creates barriers to access including health services, healthy food, and other necessities that contribute to poor health status.

*Note: The total population measurements for poverty reports are lower than population totals for some other indicators, as poverty data collection does not include people in group quarters. See "Show more details" for more information.*

Report Area	Total Population	Population with Income Below 200% FPL	Population with Income Below 200% FPL, Percent
Schenectady County, NY	155,459	40,043	25.76%
New York	19,391,750	5,458,763	28.15%
United States	324,567,147	92,357,008	28.46%

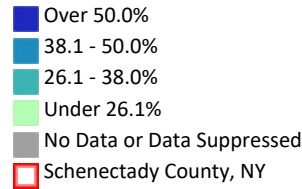
Note: This indicator is compared to the state average.  
Data Source: US Census Bureau, American Community Survey, 2019-23.

Percent Population with Income at or Below 200% FPL



[View larger map](#)

Population Below 200% Poverty Level, Percent by Tract, ACS 2019-23



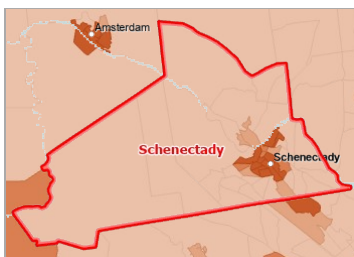
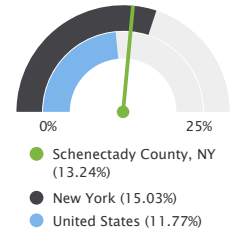
## SNAP Benefits - Households Receiving SNAP

In the report area, an estimate of 8,781 or 13.24% households receive Supplemental Nutrition Assistance Program (SNAP) benefits. The value for the report area is greater than the national average of 11.77%. This indicator is relevant because it assesses vulnerable populations which are more likely to have multiple health access, health status, and social support needs; when combined with poverty data, providers can use this measure to identify gaps in eligibility and enrollment.

Report Area	Total Households	Households Receiving SNAP Benefits	Percent Households Receiving SNAP Benefits
Schenectady County, NY	66,324	8,781	13.24%
New York	7,668,956	1,152,804	15.03%
United States	127,482,865	15,004,950	11.77%

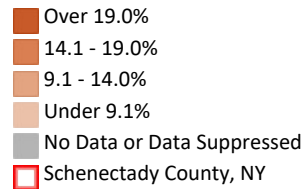
Note: This indicator is compared to the state average.  
Data Source: US Census Bureau, American Community Survey, 2019-23.

Percent Households Receiving SNAP Benefits



[View larger map](#)

Households Receiving SNAP Benefits, Percent by Tract, ACS 2019-23

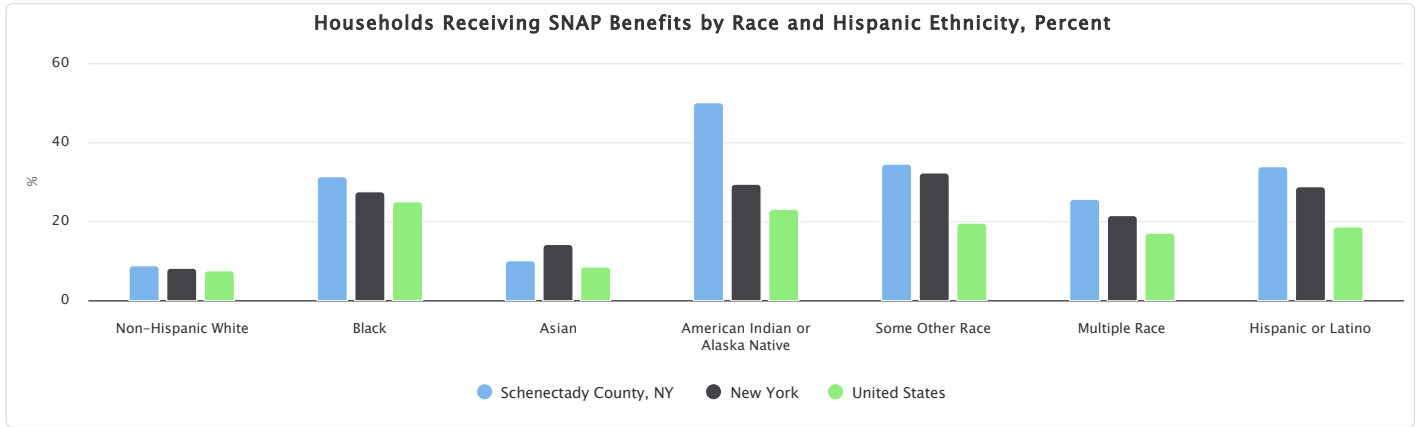


## Households Receiving SNAP Benefits by Race and Hispanic Ethnicity, Percent

This indicator reports the percent of households receiving SNAP benefits by race/ethnicity. The percentage values could be interpreted as, for example, "Of all the non-Hispanic white households within the report area, the proportion receiving SNAP benefits is (value)."

Report Area	Non-Hispanic White	Black	Asian	American Indian or Alaska Native	Some Other Race	Multiple Race	Hispanic or Latino
Schenectady County, NY	8.63%	31.34%	9.96%	50.00%	34.42%	25.59%	33.71%
New York	8.23%	27.40%	14.11%	29.52%	32.18%	21.40%	28.72%
United States	7.37%	24.91%	8.50%	23.07%	19.65%	16.98%	18.48%

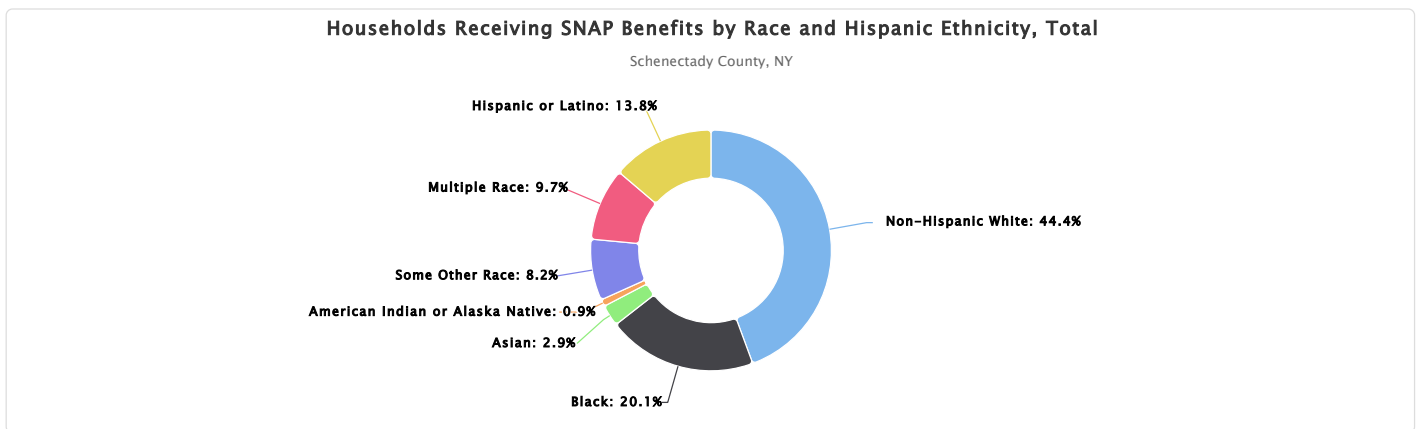
Data Source: US Census Bureau, American Community Survey, 2019-23.



### Households Receiving SNAP Benefits by Race and Hispanic Ethnicity, Total

Report Area	Non-Hispanic White	Black	Asian	American Indian or Alaska Native	Some Other Race	Multiple Race	Hispanic or Latino
Schenectady County, NY	4,387	1,985	284	93	814	961	1,362
New York	395,438	293,099	83,812	9,875	195,532	119,231	356,650
United States	6,468,113	3,875,780	559,050	215,034	1,225,877	1,746,414	3,385,618

Data Source: US Census Bureau, American Community Survey, 2019-23.



## Education

### Access - Head Start

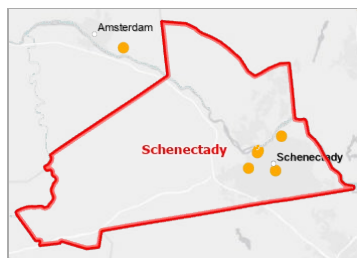
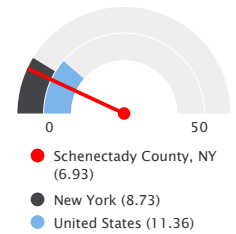
Head Start is a program designed to help children from birth to age five who come from families at or below poverty level. The program's goal is to help children become ready for kindergarten while also providing the needed requirements to thrive, including health care and food support.

This indicator reports the number and rate of Head Start program facilities per 10,000 children under age 5. Head Start facility data is acquired from the US Department of Health and Human Services (HHS) 2024 Head Start locator. Population data is from the 2020 US Decennial Census. The report area has a total of 6 Head Start programs with a rate of 6.93 per 10,000 children under 5 years old.

Report Area	Children Under Age 5	Total Head Start Programs	Head Start Programs, Rate (Per 10,000 Children Under Age 5)
Schenectady County, NY	8,657	6	<b>6.93</b>
New York	1,060,610	926	8.73
United States	18,515,341	21,035	11.36

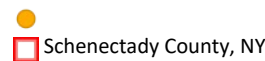
Note: This indicator is compared to the state average.  
Data Source: US Department of Health & Human Services, HRSA - Administration for Children and Families. 2025.

Head Start Programs Rate (Per 10,000 Children Under Age 5)



[View larger map](#)

Head Start Facilities, All Facilities, ACF 2024



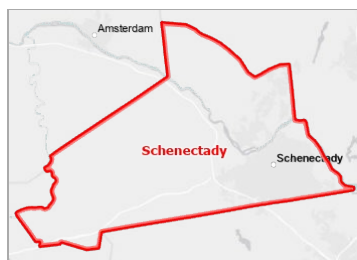
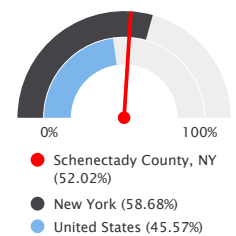
## Access - Preschool Enrollment (Children Age 3-4)

This indicator reports the percentage of the population age 3-4 that is enrolled in school. This indicator helps identify places where preschool opportunities are either abundant or lacking in the educational system.

Report Area	Population Age 3-4	Population Age 3-4 Enrolled in School	Population Age 3-4 Enrolled in School, Percent
Schenectady County, NY	4,166	2,167	<b>52.02%</b>
New York	457,401	268,403	58.68%
United States	7,932,435	3,615,142	45.57%

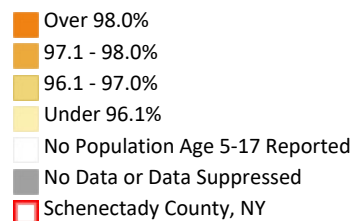
Note: This indicator is compared to the state average.  
Data Source: US Census Bureau, American Community Survey. 2019-23.

Percentage of Population Age 3-4 Enrolled in School



[View larger map](#)

Enrollment in School, Children (Age 3-4), Percent by Tract, ACS 2019-23

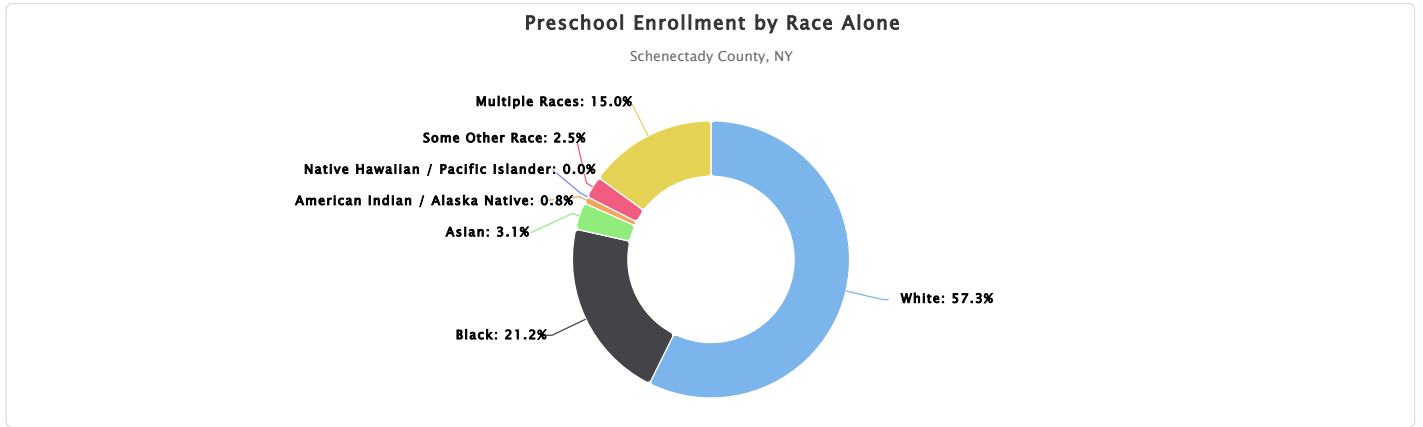


## Preschool Enrollment by Race Alone

This indicator reports the population age 3-4 enrolled in preschool of the report area by race alone.

Report Area	White	Black	Asian	American Indian / Alaska Native	Native Hawaiian / Pacific Islander	Some Other Race	Multiple Races
Schenectady County, NY	1,531	566	84	22	0	68	400
New York	148,671	44,786	24,746	1,489	30	27,593	41,291
United States	2,682,935	612,967	239,797	39,325	6,217	274,724	760,724

Data Source: US Census Bureau, American Community Survey, 2019-23.

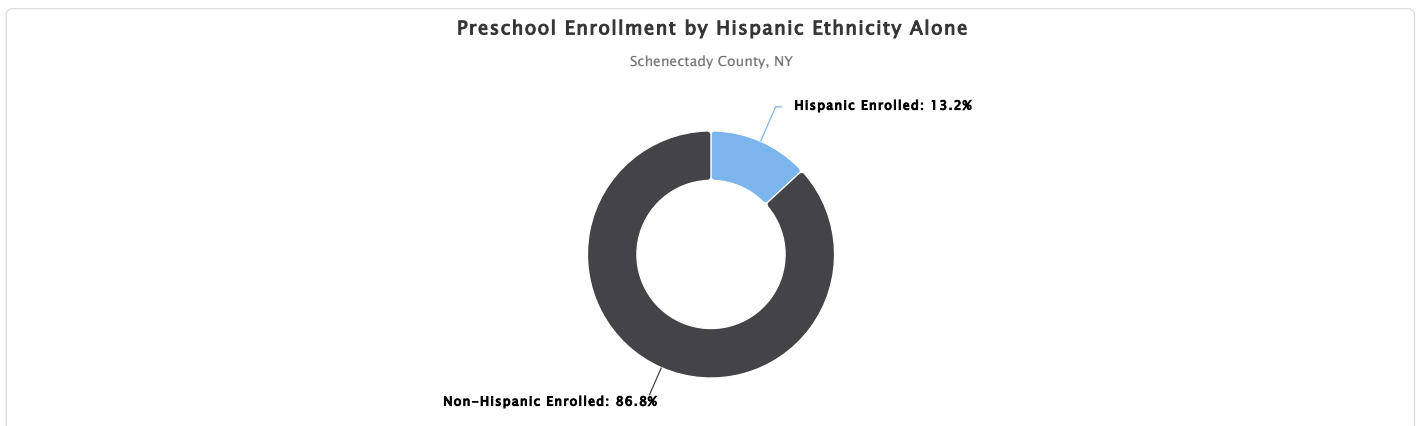


### Preschool Enrollment by Hispanic Ethnicity Alone

This indicator reports the population age 3-4 enrolled in preschool of the report area by Hispanic ethnicity alone. Of all age 3-4 enrolled in preschool in the report area, 285 or 13.15% are Hispanic or Latino while 1,882 or 86.85% are non-Hispanic.

Report Area	Total Enrolled in Preschool	Hispanic Enrolled	Hispanic Enrolled, Percent	Non-Hispanic Enrolled	Non-Hispanic Enrolled, Percent
Schenectady County, NY	2,167	285	13.15%	1,882	86.85%
New York	268,403	69,404	25.86%	198,999	74.14%
United States	3,615,142	1,012,510	28.01%	2,602,632	71.99%

Data Source: US Census Bureau, American Community Survey, 2019-23.

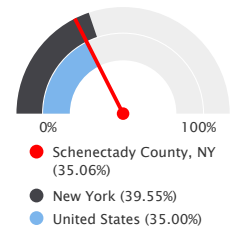


### Attainment - Bachelor's Degree or Higher

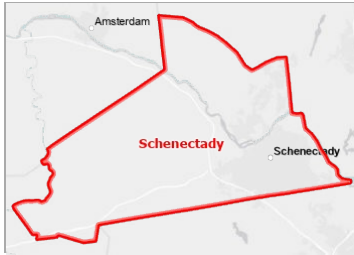
35.06% of the population aged 25 and older, or 38,542 have obtained a Bachelor's level degree or higher. This indicator is relevant because educational attainment has been linked to positive health outcomes.

Report Area	Total Population Age 25+	Population Age 25+ with Bachelor's Degree or Higher	Population Age 25+ with Bachelor's Degree or Higher, Percent
Schenectady County, NY	109,935	38,542	<b>35.06%</b>
New York	13,996,138	5,535,503	39.55%
United States	228,434,661	79,954,302	35.00%

Population Age 25+ with Bachelor's Degree or Higher, Percent

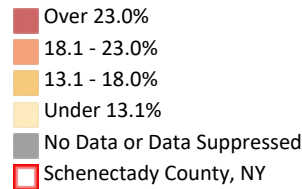


Note: This indicator is compared to the state average.  
Data Source: US Census Bureau, American Community Survey, 2019-23.



[View larger map](#)

Population with a Bachelor's Degree or Higher, Percent by Tract, ACS 2019-23

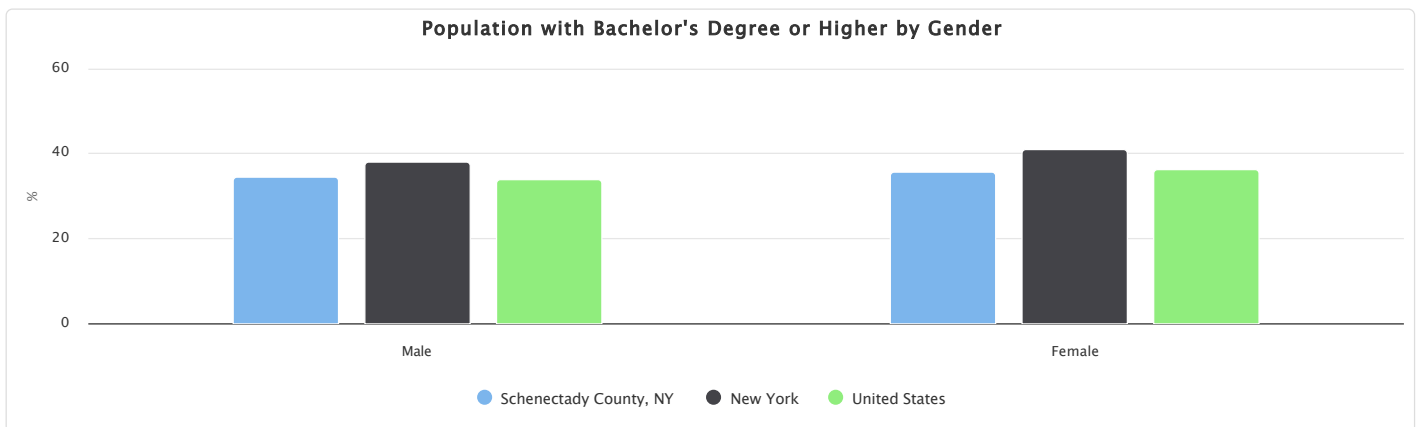


## Population with Bachelor's Degree or Higher by Gender

This indicator reports the population age 25+ with a bachelor's degree or higher education level by gender. The percentage values could be interpreted as, for example, "Of all the males age 25+ within the report area, the percentage with a bachelor's degree or higher is (value)."

Report Area	Male	Female	Male, Percent	Female, Percent
Schenectady County, NY	18,199	20,343	34.47%	35.60%
New York	2,555,938	2,979,565	38.06%	40.92%
United States	37,748,511	42,205,791	33.89%	36.06%

Data Source: US Census Bureau, American Community Survey, 2019-23.

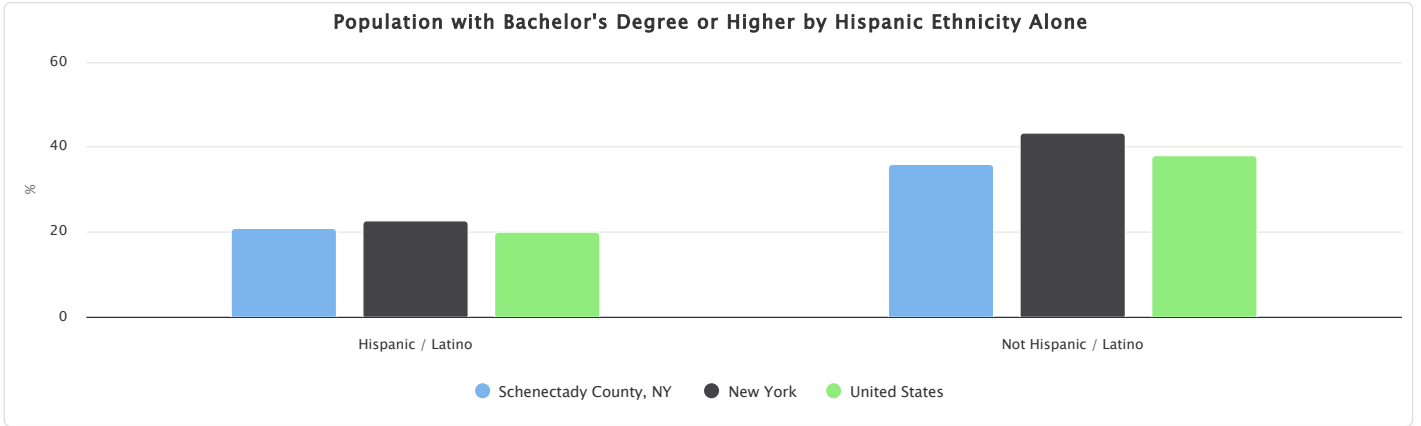


## Population with Bachelor's Degree or Higher by Hispanic Ethnicity Alone

This indicator reports the total and percentage of population age 25+ with a bachelor's degree or higher education level by Hispanic ethnicity alone. The percentage values could be interpreted as, for example, "Of all the Hispanic population age 25+ within the report area, the percentage with a bachelor's degree or higher is (value)."

Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Schenectady County, NY	1,403	37,139	20.75%	36.00%
New York	558,295	4,977,208	22.56%	43.20%
United States	7,328,269	72,626,033	19.86%	37.92%

Data Source: US Census Bureau, American Community Survey, 2019-23.



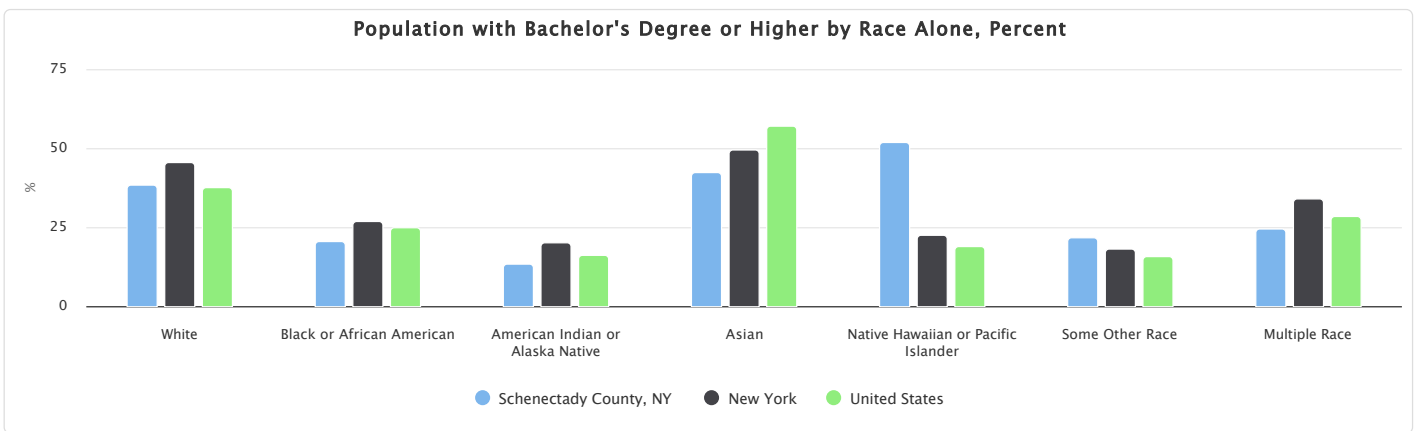
### Population with Bachelor's Degree or Higher by Race Alone, Percent

This indicator reports the percentage of population age 25+ with a bachelor's degree or higher education level by race alone in the report area.

The percentage values could be interpreted as, for example, "Of all the white population age 25+ in the report area, the percentage with a bachelor's degree or higher is (value)."

Report Area	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	38.19%	20.49%	13.27%	42.19%	51.85%	21.46%	24.25%
New York	45.32%	26.70%	20.11%	49.31%	22.46%	17.98%	34.06%
United States	37.67%	24.73%	16.22%	56.98%	18.95%	15.59%	28.21%

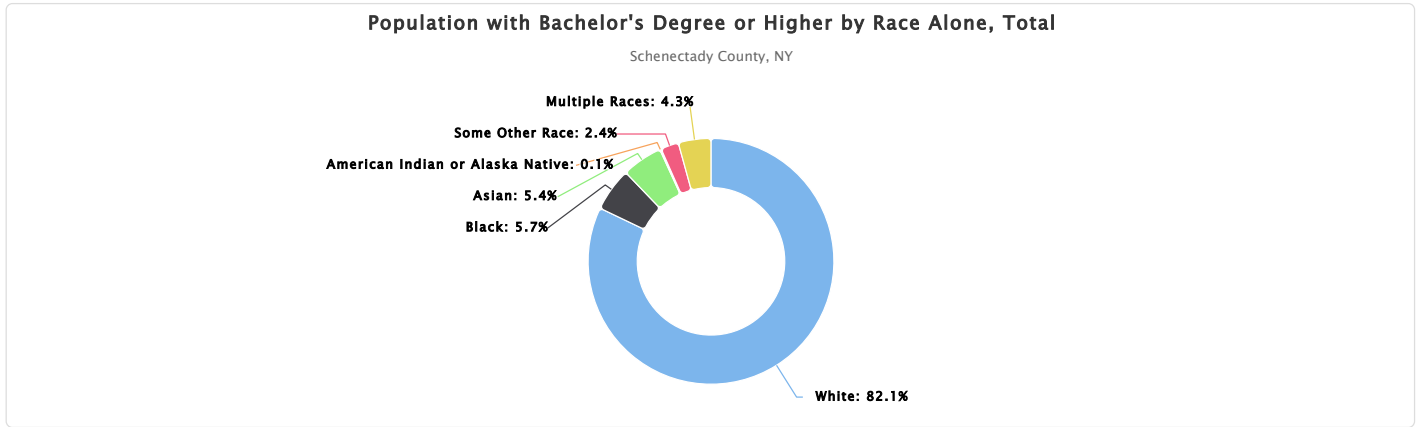
Data Source: US Census Bureau, American Community Survey, 2019-23.



### Population with Bachelor's Degree or Higher by Race Alone, Total

Report Area	White	Black	Asian	American Indian or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Races
Schenectady County, NY	31,642	2,203	2,064	45	28	907	1,653
New York	3,764,419	536,061	628,188	13,317	1,410	227,920	364,188
United States	57,354,788	6,661,826	7,920,294	296,862	76,357	2,090,459	5,553,716

Data Source: US Census Bureau, American Community Survey, 2019-23.

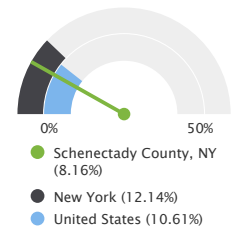


## Attainment - No High School Diploma

Within the report area there are 8,967 persons aged 25 and older without a high school diploma (or equivalency) or higher. This represents 8.16% of the total population aged 25 and older. This indicator is relevant because educational attainment is linked to positive health outcomes (Freudenberg & Ruglis, 2007).

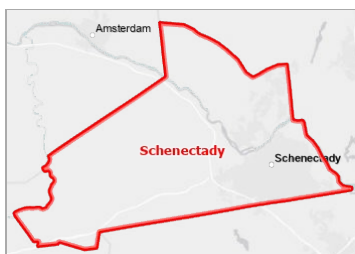
Report Area	Total Population Age 25+	Population Age 25+ with No High School Diploma	Population Age 25+ with No High School Diploma, Percent
Schenectady County, NY	109,935	8,967	8.16%
New York	13,996,138	1,698,537	12.14%
United States	228,434,661	24,230,217	10.61%

Population Age 25+ with No High School Diploma, Percent



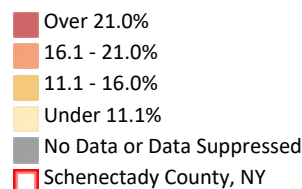
Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey, 2019-23.



[View larger map](#)

Population with No High School Diploma (Age 25+), Percent by Tract, ACS 2019-23



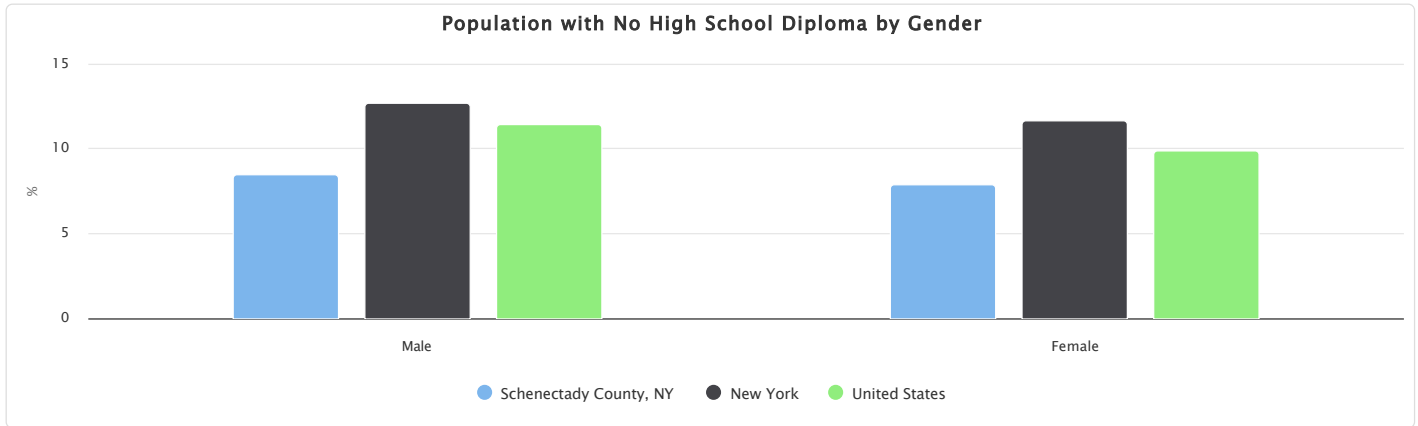
## Population with No High School Diploma by Gender

This indicator reports the population age 25+ with no high school diploma by gender.

The percentage values could be interpreted as, of all the males age 25+ within the report area, the percentage without a high school diploma is 8.49%; of all the females age 25+ within the report area, the percentage without a high school diploma is 7.85%.

Report Area	Male	Female	Male, Percent	Female, Percent
Schenectady County, NY	4,483	4,484	8.49%	7.85%
New York	851,752	846,785	12.68%	11.63%
United States	12,672,705	11,557,512	11.38%	9.87%

Data Source: US Census Bureau, American Community Survey, 2019-23.



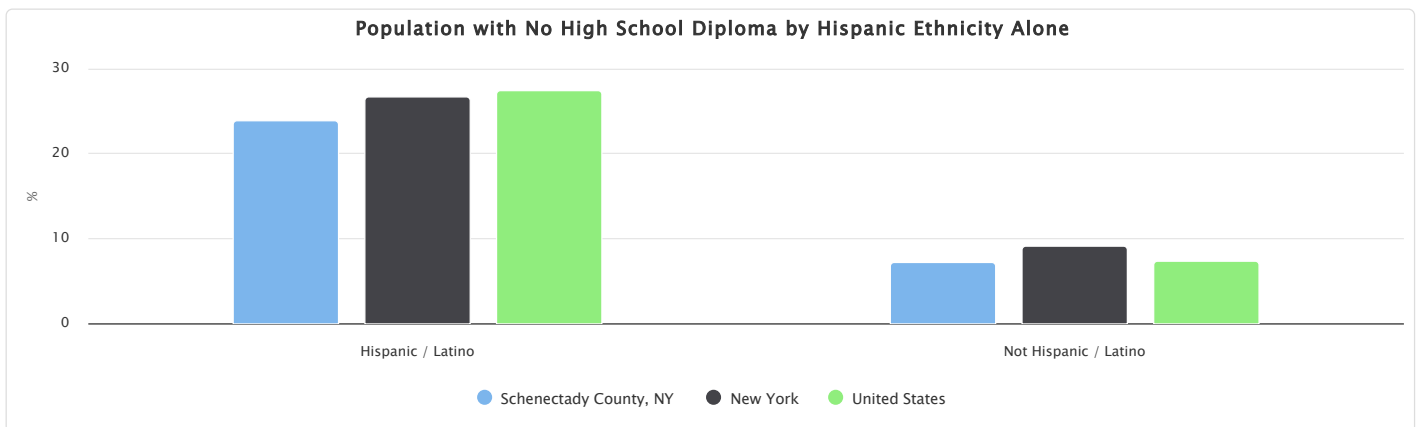
### Population with No High School Diploma by Hispanic Ethnicity Alone

This indicator reports the population age 25+ with no high school diploma by Hispanic ethnicity alone.

The percentage values could be interpreted as, of all the Hispanic population age 25+ within the report area, the percentage without a high school diploma is 23.83%; of all the non-Hispanic population age 25+ within the report area, the percentage without a high school diploma is 7.13%.

Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Schenectady County, NY	1,611	7,356	23.83%	7.13%
New York	658,816	1,039,721	26.62%	9.02%
United States	10,132,918	14,097,299	27.46%	7.36%

Data Source: US Census Bureau, American Community Survey, 2019-23.



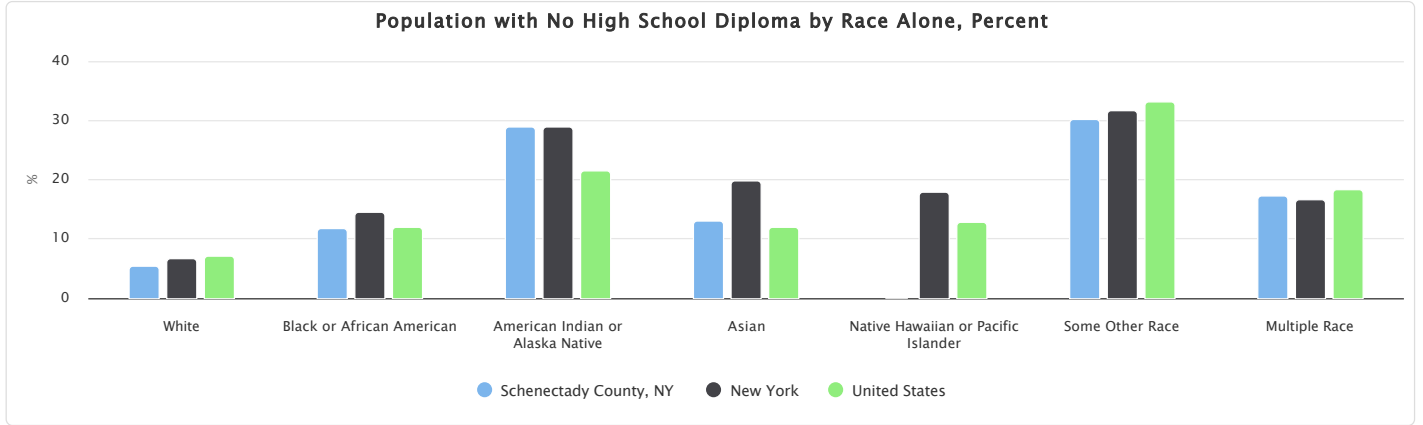
### Population with No High School Diploma by Race Alone, Percent

This indicator reports the percentage of population age 25+ with no high school diploma by race alone in the report area.

The percentage values could be interpreted as, for example, "Of all the white population age 25+ in the report area, the percentage with no high school diploma is (value)."

Report Area	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Race
Schenectady County, NY	5.45%	11.78%	28.91%	13.02%	0.00%	30.12%	17.33%
New York	6.67%	14.60%	28.80%	19.86%	17.86%	31.55%	16.64%
United States	7.12%	11.94%	21.51%	11.97%	12.73%	33.21%	18.36%

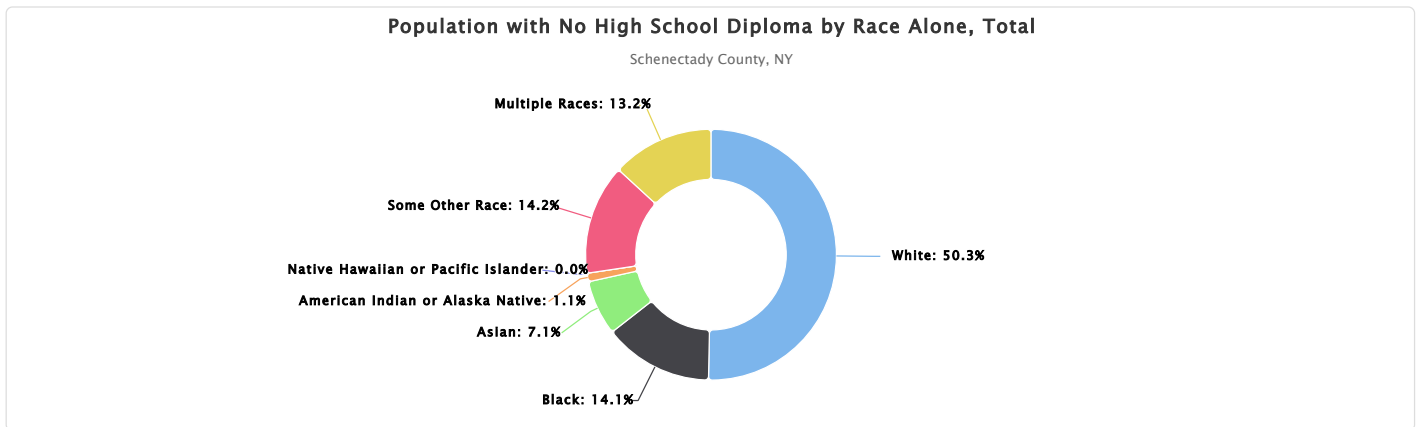
Data Source: US Census Bureau, American Community Survey, 2019-23.



### Population with No High School Diploma by Race Alone, Total

Report Area	White	Black	Asian	American Indian or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Races
Schenectady County, NY	4,512	1,266	637	98	0	1,273	1,181
New York	554,319	293,169	253,021	19,073	1,121	399,921	177,913
United States	10,836,488	3,217,325	1,664,267	393,606	51,272	4,453,551	3,613,708

Data Source: US Census Bureau, American Community Survey, 2019-23.



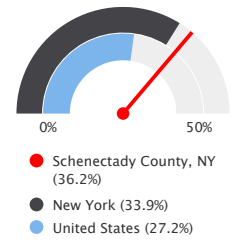
### Chronic Absenteeism

This indicator reports the rate of chronic absenteeism (students absent 10% or more school days during the school year 2022-2023). In the report area 36.2% or 7,786 children were chronically absent during the 2022-23 school year.

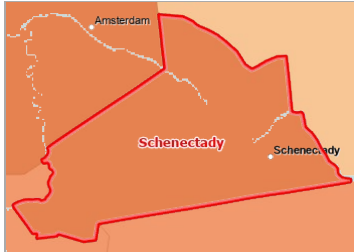
*Note: Since the data are protected by adding or subtracting one student for cell sizes less than or equal to four and random data swapping for cell sizes less than or equal to three, the instances of zero to five might indicate true values or recoded data. Interpret with caution.*

Report Area	Students Enrolled	Number Chronically Absent	Chronic Absence Rate
Schenectady County, NY	21,515	7,786	<b>36.2%</b>
New York	2,504,666	849,829	33.9%
United States	48,897,134	13,321,279	27.2%

Chronic Absence Rate

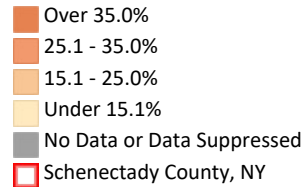


Note: This indicator is compared to the state average.  
 Data Source: US Department of Education, [ED Data Express](#). Additional data analysis by [CARES](#). 2022-2023.



[View larger map](#)

Chronic Absenteeism, Children Enrolled in Public Schools, Percent by County, Ed Data Express 2022-23



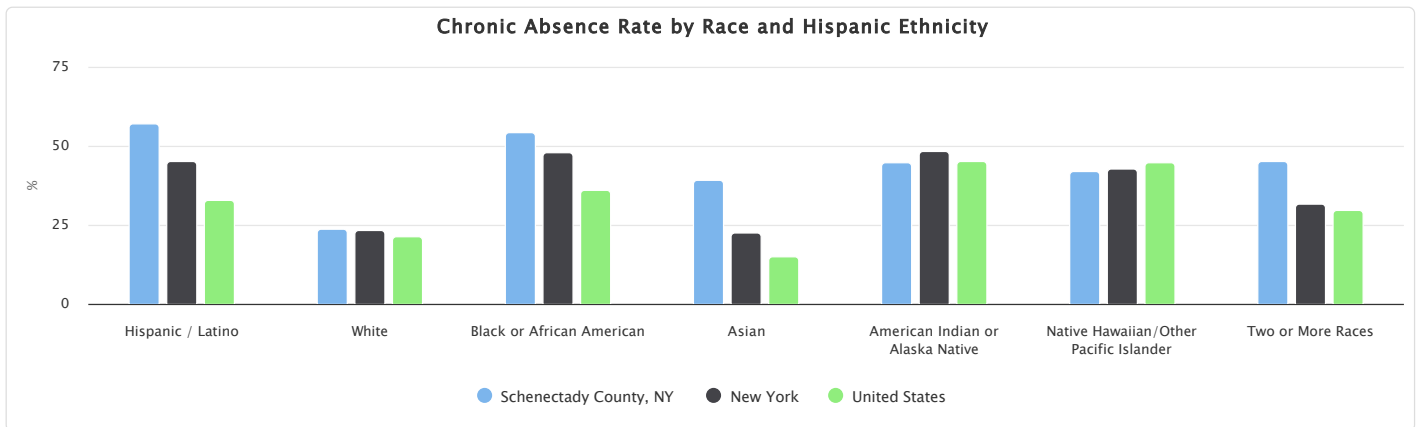
### Chronic Absence Rate by Race and Hispanic Ethnicity

This indicator reports the rate of chronic absenteeism (students absent 10% or more school days during the school year 2022-2023).

Note: The instances of zero to five might indicate true values or recoded data. Interpret with caution.

Report Area	Hispanic / Latino	White	Black or African American	Asian	American Indian or Alaska Native	Native Hawaiian/Other Pacific Islander	Two or More Races
Schenectady County, NY	57.0%	23.7%	54.3%	39.1%	44.6%	41.8%	45.2%
New York	45.0%	23.2%	47.9%	22.4%	48.3%	42.8%	31.7%
United States	32.9%	21.4%	36.0%	14.7%	44.9%	44.6%	29.5%

Data Source: US Department of Education, [ED Data Express](#). Additional data analysis by [CARES](#). 2022-2023.



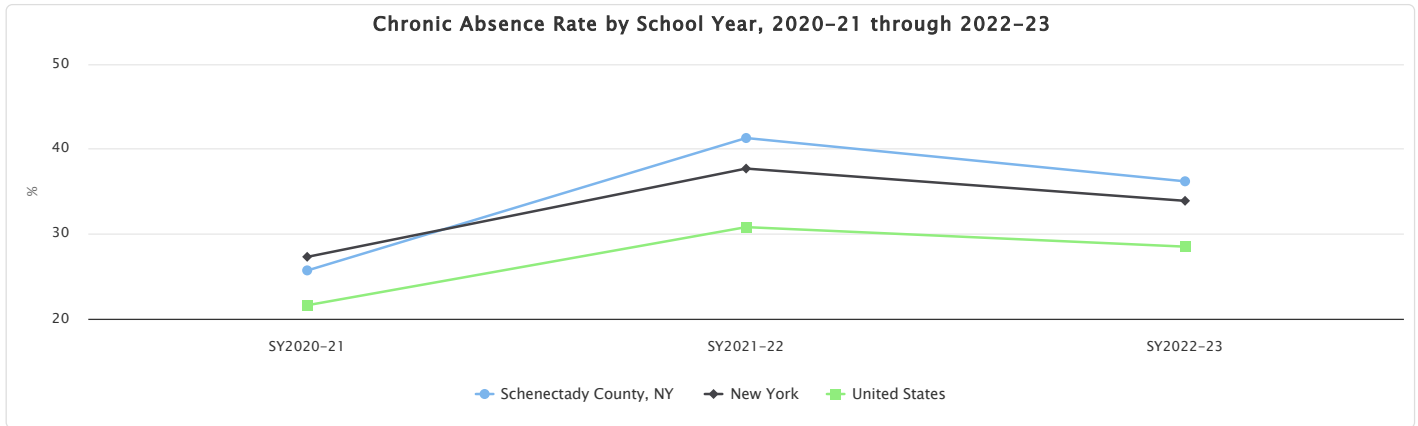
### Chronic Absence Rate by School Year, 2020-21 through 2022-23

This indicator reports the rate of chronic absenteeism (students absent 10% or more school days) by school year.

Note: The instances of zero to five might indicate true values or recoded data. Interpret with caution.

Report Area	SY2020-21	SY2021-22	SY2022-23
Schenectady County, NY	25.7%	41.3%	36.2%
New York	27.3%	37.7%	33.9%
United States	21.6%	30.8%	28.5%

Data Source: US Department of Education, [ED Data Express](#). Additional data analysis by CARES. 2022-2023.



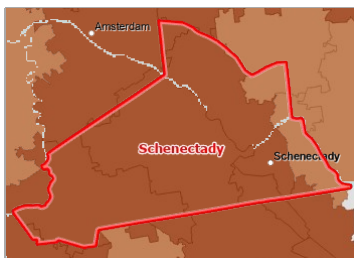
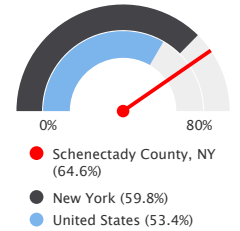
## Proficiency - Student Reading Proficiency (4th Grade)

Information about student performance on the 4th grade Reading/Language Arts portion of the state-specific standardized tests is shown in the table below. Of the 1,570 students tested, 35.4% 4th graders performed at or above the “proficient” level, while 64.6% tested below the “proficient” level, which is worse than the statewide average of 59.8%, according to the latest data.

Report Area	Students with Valid Test Scores	Students Scoring 'Proficient' or Better, Percent	Students Scoring 'Not Proficient' or Worse, Percent
Schenectady County, NY	1,570	35.4%	<b>64.6%</b>
New York	91,896	40.3%	59.8%
United States	3,352,180	46.7%	53.4%

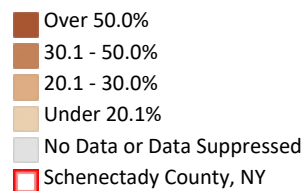
Note: This indicator is compared to the state average.  
Data Source: US Department of Education, [ED Data Express](#). Additional data analysis by CARES. 2021-22.

Students Scoring 'Not Proficient' or Worse, Percent



[View larger map](#)

Language Arts Test Scores, Grade 4, Percent Not Proficient by School District (Elementary), Ed Data Express 2021-22



## Social Support & Community Context

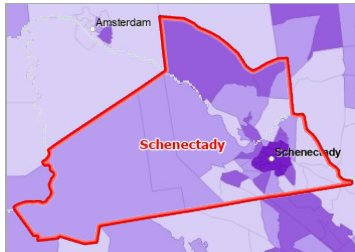
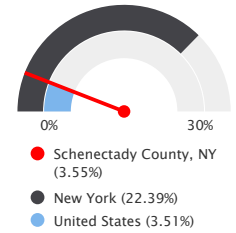
### Commuter Travel Patterns - Public Transportation

This indicator reports the percentage of population using public transportation as their primary means of commuting to work. Public transportation includes buses or trolley buses, streetcars or trolley cars, subway or elevated rails, and ferryboats.

Report Area	Total Population Employed Age 16+	Population Using Public Transit for Commute to Work	Percent Population Using Public Transit for Commute to Work
Schenectady County, NY	74,961	2,660	3.55%
New York	9,350,213	2,093,588	22.39%
United States	157,645,183	5,528,841	3.51%

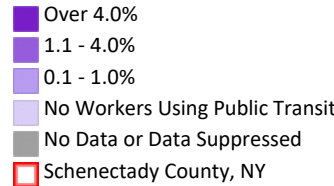
Note: This indicator is compared to the state average.  
Data Source: US Census Bureau, American Community Survey, 2019-23.

Percent Population Using Public Transit for Commute to Work



[View larger map](#)

Workers Traveling to Work Using Public Transit, Percent by Tract, ACS 2019-23



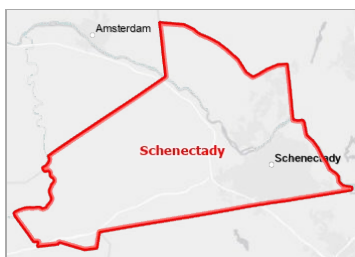
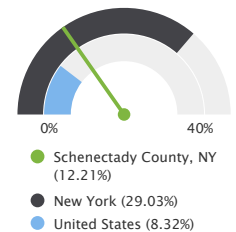
## Households with No Motor Vehicle

This indicator reports the number and percentage of households with no motor vehicle based on the latest 5-year American Community Survey estimates. Of the 66,324 total households in the report area, 8,101 or 12.21% are without a motor vehicle.

Report Area	Total Occupied Households	Households with No Motor Vehicle	Households with No Motor Vehicle, Percent
Schenectady County, NY	66,324	8,101	12.21%
New York	7,668,956	2,226,323	29.03%
United States	127,482,865	10,602,826	8.32%

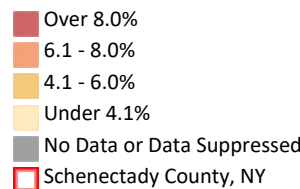
Note: This indicator is compared to the state average.  
Data Source: US Census Bureau, American Community Survey, 2019-23.

Percentage of Households with No Motor Vehicle



[View larger map](#)

Households with No Vehicle, Percent by Tract, ACS 2019-23



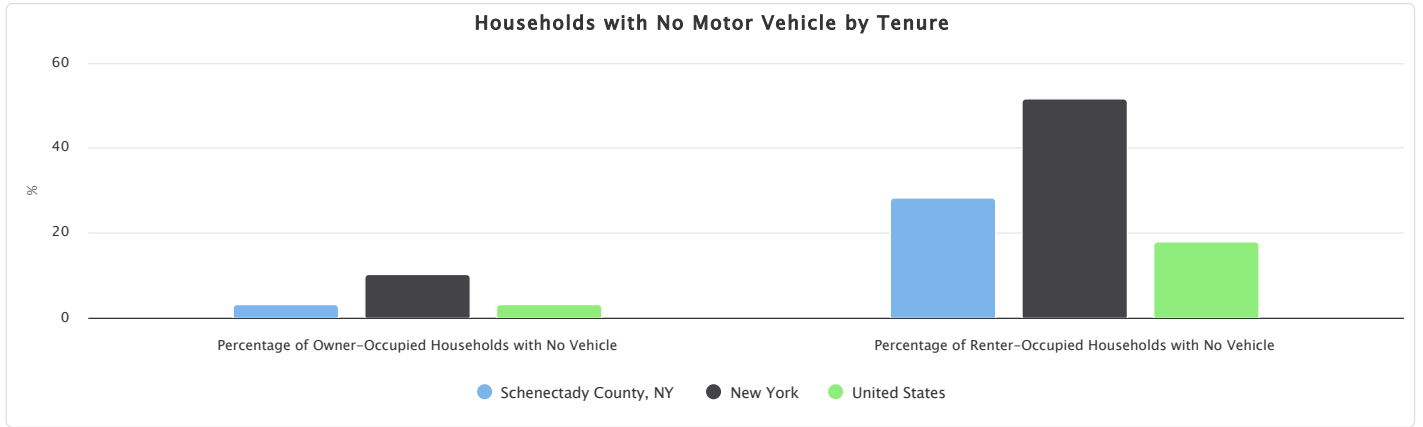
## Households with No Motor Vehicle by Tenure

This indicator reports the total and percentage of households with no vehicle by tenure.

These numbers in the following table could be interpreted as (take the first two columns as an example), "Within the report area, there are a total of (value) owner-occupied households with no vehicle. This accounts for (value) of all the owner-occupied households."

Report Area	Owner-Occupied Households	Owner-Occupied Households, Percent	Renter-Occupied Households	Renter-Occupied Households, Percent
Schenectady County, NY	1,331	3.14%	6,770	28.21%
New York	418,606	10.05%	1,807,717	51.59%
United States	2,636,344	3.18%	7,966,482	17.87%

Data Source: US Census Bureau, American Community Survey, 2019-23.

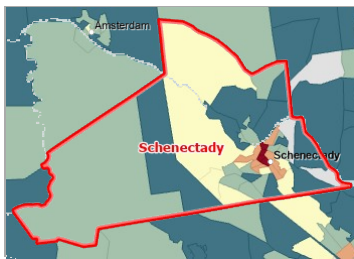
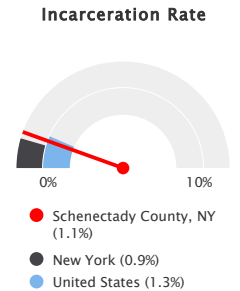


## Incarceration Rate

The Opportunity Atlas estimates the percentage of individuals born in each census tract who were incarcerated at the time of the 2010 Census. According to the Atlas data, 1.1% of the report area population were incarcerated. The incarceration rate in the report area is higher than the state average of 0.9%.

Report Area	Total Population (2010)	Incarceration Rate
Schenectady County, NY	154,727	1.1%
New York	19,378,102	0.9%
United States	312,444,060	1.3%

Note: This indicator is compared to the state average.  
Data Source: Opportunity Insights, 2018.



[View larger map](#)

### Incarceration Rate (2010), Total by Tract, Opportunity Insights 2018

- No Data or No Incarcerations
- 0.01% - 0.50%
- 0.51% - 1.00%
- 1.01% - 2.00%
- 2.01% - 5.00%
- Over 5.00%
- Schenectady County, NY

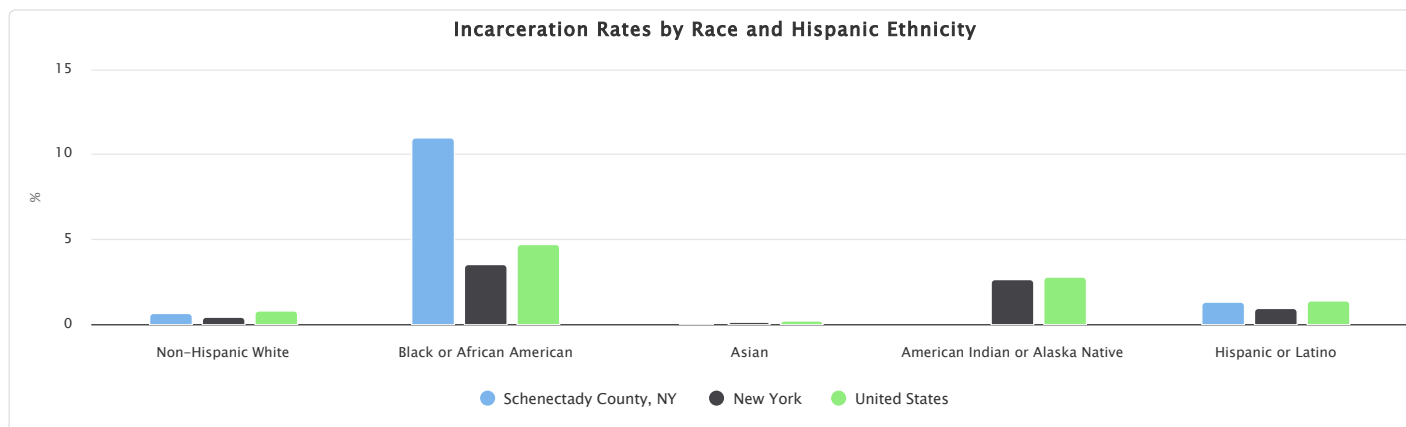
## Incarceration Rates by Race and Hispanic Ethnicity

The table and chart below display estimated incarceration rates (2010) by race and Hispanic ethnicity from the 2018 Opportunity Insights Atlas.

The percentage values could be interpreted as, for example, "Of all the non-Hispanic white population within the report area, the incarceration rate is (value)."

Report Area	Non-Hispanic White	Black or African American	Asian	American Indian or Alaska Native	Hispanic or Latino
Schenectady County, NY	0.6%	11.0%	0.0%	No data	1.3%
New York	0.4%	3.5%	0.1%	2.6%	0.9%
United States	0.8%	4.7%	0.2%	2.8%	1.4%

Data Source: *Opportunity Insights*. 2018.



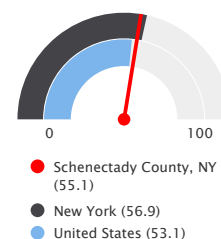
## Opportunity Index

This indicator reports the Opportunity Index score for the report area. The Opportunity Index includes indicators within four dimensions of community well-being: Economy; Education; Health; and Community. The overall score combines sixteen underlying indicators for states, and fourteen for counties. The Opportunity Index score has a potential range of 0 (indicating no opportunity) to 100 (indicating maximum opportunity).

Report Area	Total Population	Opportunity Index Score
Schenectady County, NY	154,972	<b>55.1</b>
New York	19,641,589	56.9
United States	323,071,342	53.1

Note: This indicator is compared to the state average.  
Data Source: *Opportunity Nation*. 2018.

Opportunity Index Score

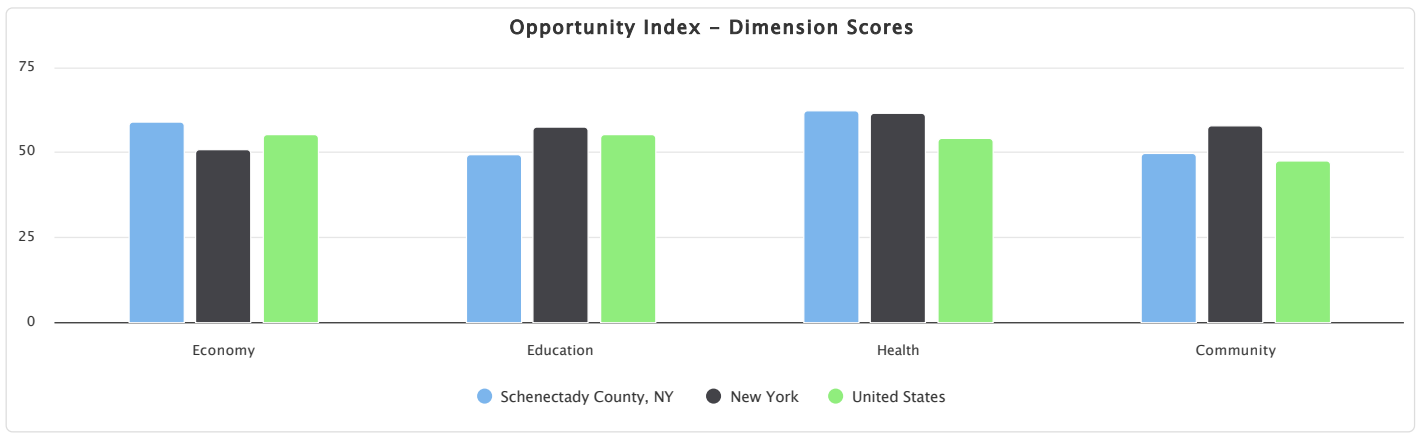


## Opportunity Index - Dimension Scores

This indicator reports the index scores for each of the four dimensions that make up the Opportunity Index. Each dimension is in turn composed of three to seven indicators that measure opportunity. Index scores have a potential range of 0 (indicating no opportunity) to 100 (indicating maximum opportunity).

Report Area	Economy	Education	Health	Community
Schenectady County, NY	58.8	49.5	62.3	49.7
New York	50.8	57.5	61.4	57.9
United States	55.4	55.2	54.0	47.6

Data Source: *Opportunity Nation*. 2018.



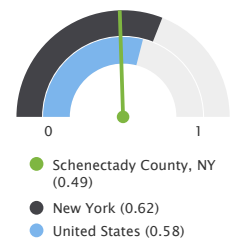
## Social Vulnerability Index

The degree to which a community exhibits certain social conditions, including high poverty, low percentage of vehicle access, or crowded households, may affect that community’s ability to prevent human suffering and financial loss in the event of disaster. These factors describe a community’s social vulnerability.

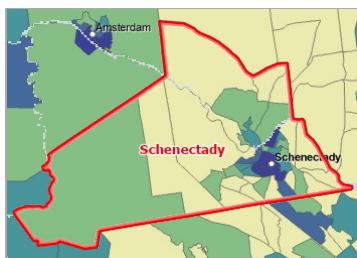
The social vulnerability index is a measure of the degree of social vulnerability in counties and neighborhoods across the United States, where a higher score indicates higher vulnerability. The report area has a social vulnerability index score of 0.49, which is less than the state average of 0.62.

Report Area	Total Population	Socioeconomic Theme Score	Household Composition Theme Score	Minority Status Theme Score	Housing & Transportation Theme Score	Social Vulnerability Index Score
Schenectady County, NY	159,447	0.40	0.17	0.66	0.74	<b>0.49</b>
New York	19,994,379	0.55	0.36	0.76	0.79	0.62
United States	331,097,593	0.54	0.47	0.72	0.63	0.58

Social Vulnerability Index Score

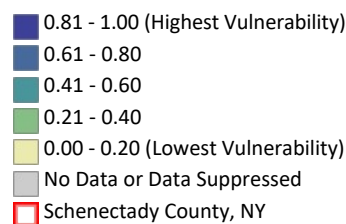


Note: This indicator is compared to the state average.  
Data Source: Centers for Disease Control and Prevention and the National Center for Health Statistics, CDC - GRASP, 2022.



[View larger map](#)

Social Vulnerability Index by Tract, CDC 2022



## Population Percentages by Tiered Social Vulnerability Index

The degree to which a community exhibits certain social conditions, including high poverty, low percentage of vehicle access, or crowded households, may affect that community’s ability to prevent human suffering and financial loss in the event of disaster. These factors describe a community’s social vulnerability.

Report Area	Least Disadvantaged	Moderately Disadvantaged	Highly Disadvantaged	Most Disadvantaged
Schenectady County, NY	4.56%	31.81%	34.17%	29.46%
New York	3.50%	30.05%	33.07%	33.38%
United States	14.19%	22.98%	27.82%	35.01%

Data Source: Centers for Disease Control and Prevention and the National Center for Health Statistics, CDC - GRASP, 2022.

## Teen Births

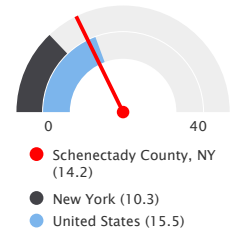
This indicator reports the seven-year average number of births per 1,000 female population age 15-19. Data were from the National Center for Health Statistics - Natality files (2017-2023) and are used for the 2025 County Health Rankings.

In the report area, of the 33,853 total female population age 15-19, the teen birth rate is 14.2 per 1,000, which is greater than the state's teen birth rate of 10.3.

Note: Data are suppressed for counties with fewer than 10 teen births in the time frame.

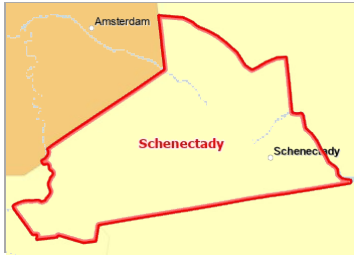
Report Area	Female Population Age 15-19	Teen Births, Rate per 1,000 Female Population Age 15-19
Schenectady County, NY	33,853	14.2
New York	4,095,085	10.3
United States	73,099,680	15.5

Teen Birth Rate Per 1,000 Female Population, Ages 15-19



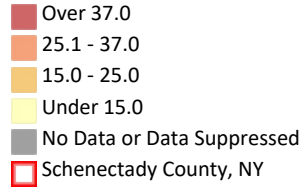
Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via County Health Rankings, 2017-2023.



[View larger map](#)

Teen Births, Rate Per 1,000 Females Age 15-19 by County, CDC NVSS 2017-2023

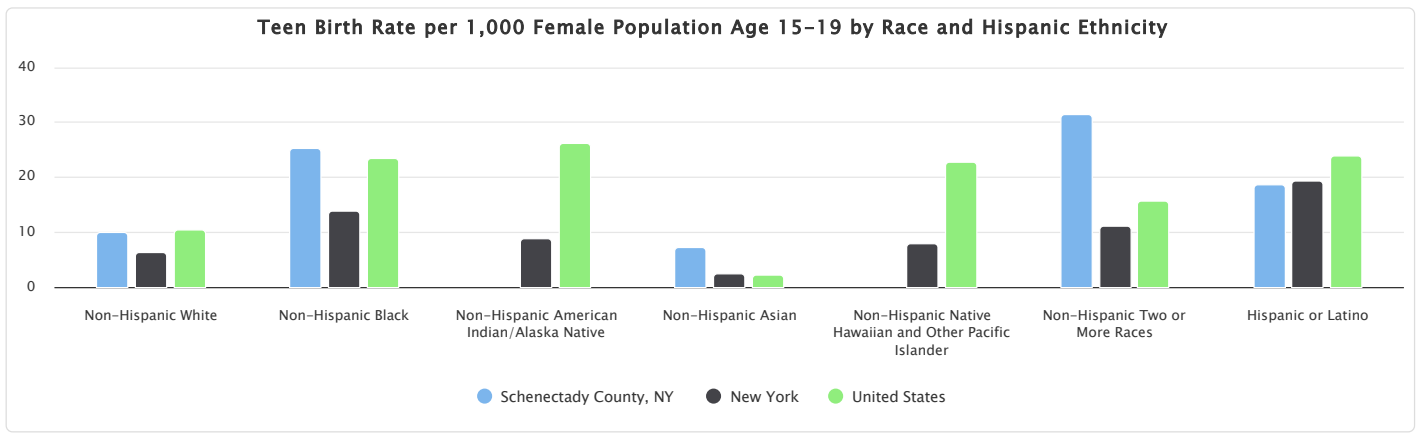


## Teen Birth Rate per 1,000 Female Population Age 15-19 by Race and Hispanic Ethnicity

This indicator reports the 2017-2023 seven-year average teen birth rate per 1,000 female population age 15-19 by race and Hispanic ethnicity.

Report Area	Non-Hispanic White	Non-Hispanic Black	Non-Hispanic American Indian/Alaska Native	Non-Hispanic Asian	Non-Hispanic Native Hawaiian and Other Pacific Islander	Non-Hispanic Two or More Races	Hispanic or Latino
Schenectady County, NY	10.0	25.3	No data	7.1	No data	31.5	18.7
New York	6.2	13.9	8.7	2.4	7.9	11.1	19.3
United States	10.5	23.5	26.1	2.2	22.7	15.6	23.8

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via County Health Rankings, 2017-2023.

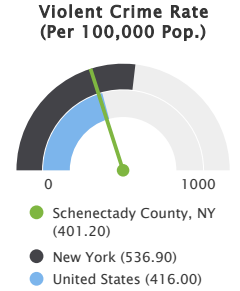


## Violent Crime

Violent crime includes homicide, rape, robbery, and aggravated assault.

Within the report area, the 2015-2017 three-year total of reported violent crimes was 1,862, which equates to an annual rate of 401.20 crimes per 100,000 people, lower than the statewide rate of 536.90.

Report Area	Total Population	Violent Crimes, 3-year Total	Violent Crimes, Annual Rate (Per 100,000 Pop.)
Schenectady County, NY	154,668	1,862	401.20
New York	60,110,802	968,353	536.90
United States	366,886,849	4,579,031	416.00



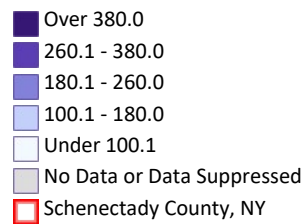
Note: This indicator is compared to the state average.

Data Source: Federal Bureau of Investigation, *FBI Uniform Crime Reports*. Additional analysis by the *National Archive of Criminal Justice Data*. Accessed via the *Inter-university Consortium for Political and Social Research*, 2015-2017.



[View larger map](#)

### Violent Crimes, All, Rate (Per 100,000 Pop.) by County, FBI UCR 2015-2017



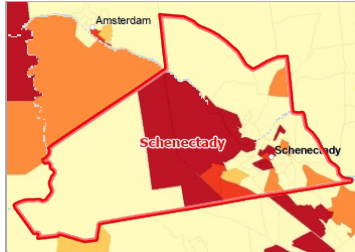
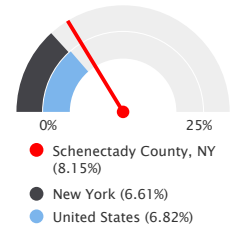
## Young People Not in School and Not Working

This indicator reports the percentage of youth age 16-19 who are not currently enrolled in school and who are not employed. The report area has a total population of 8,600 between the ages, of which 701 are not in school and not employed.

Report Area	Population Age 16-19	Population Age 16-19 Not in School and Not Employed	Population Age 16-19 Not in School and Not Employed, Percent
Schenectady County, NY	8,600	701	<b>8.15%</b>
New York	982,228	64,880	6.61%
United States	17,415,920	1,187,439	6.82%

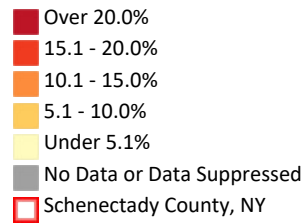
Note: This indicator is compared to the state average.  
Data Source: US Census Bureau, American Community Survey, 2019-23.

Population Age 16-19 Not in School and Not Employed, Percent



[View larger map](#)

Youths Not Enrolled in School and Not Employed, Percent by Tract, ACS 2019-23



## Neighborhood & Physical Environment

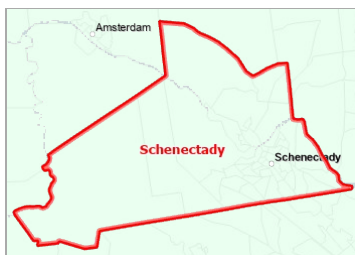
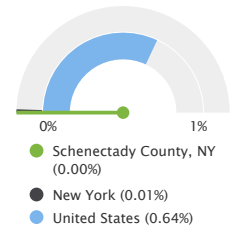
### Air Quality - Particulate Matter 2.5

This indicator reports the percentage of days with particulate matter 2.5 levels above the National Ambient Air Quality Standard (35 micrograms per cubic meter) per year, calculated using data collected by monitoring stations and modeled to include counties where no monitoring stations occur. This indicator is relevant because poor air quality contributes to respiratory issues and overall poor health.

Report Area	Total Population	Average Daily Ambient Particulate Matter 2.5	Number of Days Exceeding NAAQS Standards	Percentage of Days Exceeding Standards, Crude Average	Percentage of Days Exceeding Standards, Pop. Adjusted Average
Schenectady County, NY	158,061	8.00	0.00	0.00%	<b>0.00%</b>
New York	20,201,249	7.69	0.00	0.01%	0.01%
United States	330,251,614	9.19	2.00	0.59%	0.64%

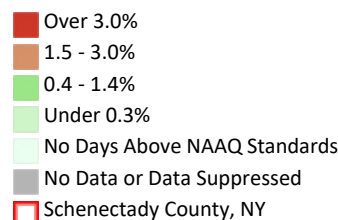
Note: This indicator is compared to the state average.  
Data Source: Centers for Disease Control and Prevention, CDC - National Environmental Public Health Tracking Network, 2020.

percentage of Days Exceeding Standards, Pop. Adjusted Average



[View larger map](#)

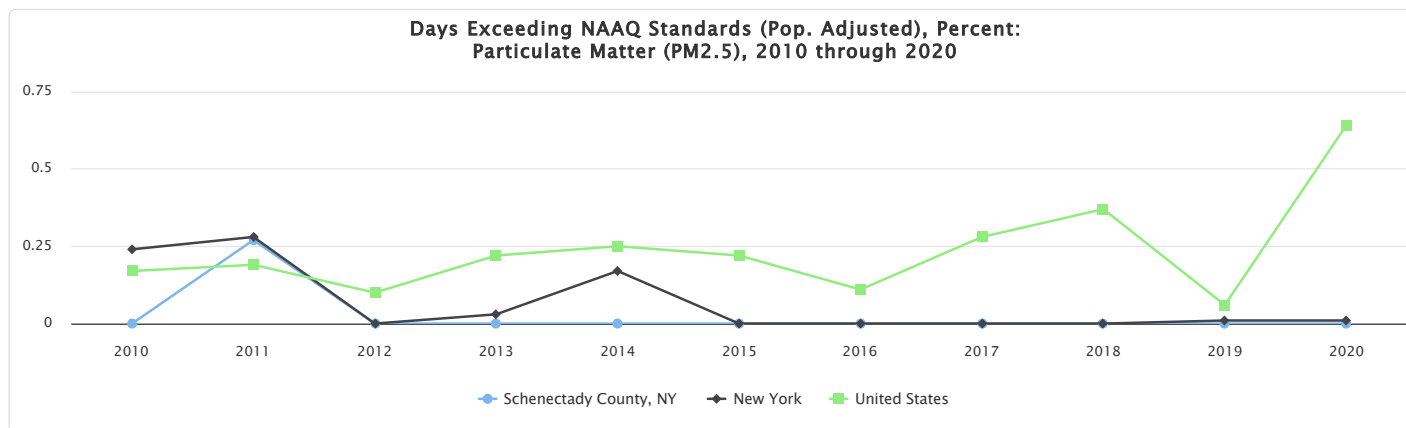
Fine Particulate Matter Levels (PM 2.5), Percentage of Days Above NAAQ Standards by Tract, NEPHTN 2020



## Days Exceeding NAAQ Standards (Pop. Adjusted), Percent: Particulate Matter (PM2.5), 2010 through 2020

Report Area	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Schenectady County, NY	0.00	0.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
New York	0.24	0.28	0.00	0.03	0.17	0.00	0.00	0.00	0.00	0.01	0.01
United States	0.17	0.19	0.10	0.22	0.25	0.22	0.11	0.28	0.37	0.06	0.64

Data Source: Centers for Disease Control and Prevention, CDC - National Environmental Public Health Tracking Network. 2020.

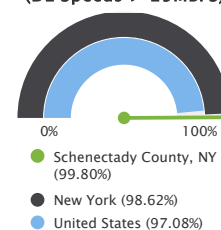


## Built Environment - Broadband Access

This indicator reports the percentage of population with access to high-speed internet. Data are based on the reported service area of providers offering download speeds of 25 MBPS or more and upload speeds of 3 MBPS or more. These data represent both wireline and fixed/terrestrial wireless internet providers. Cellular internet providers are not included.

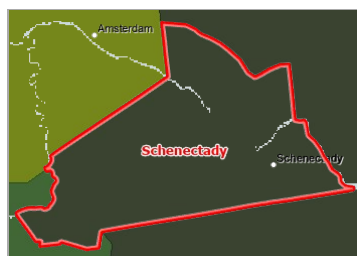
Report Area	Total Number of Broadband Serviceable Locations	Access to DL Speeds >= 25MBPS and UL Speeds >= 3 MBPS	Access to DL Speeds >= 100MBPS and UL Speeds >= 20 MBPS
Schenectady County, NY	52,891	99.80%	99.64%
New York	4,697,196	98.62%	98.09%
United States	116,414,099	97.08%	94.70%

percentage of Population with access to Broadband Internet (DL Speeds > 25MBPS)



Note: This indicator is compared to the state average.

Data Source: FCC FABRIC Data. Additional data analysis by CARES. June, 2025.



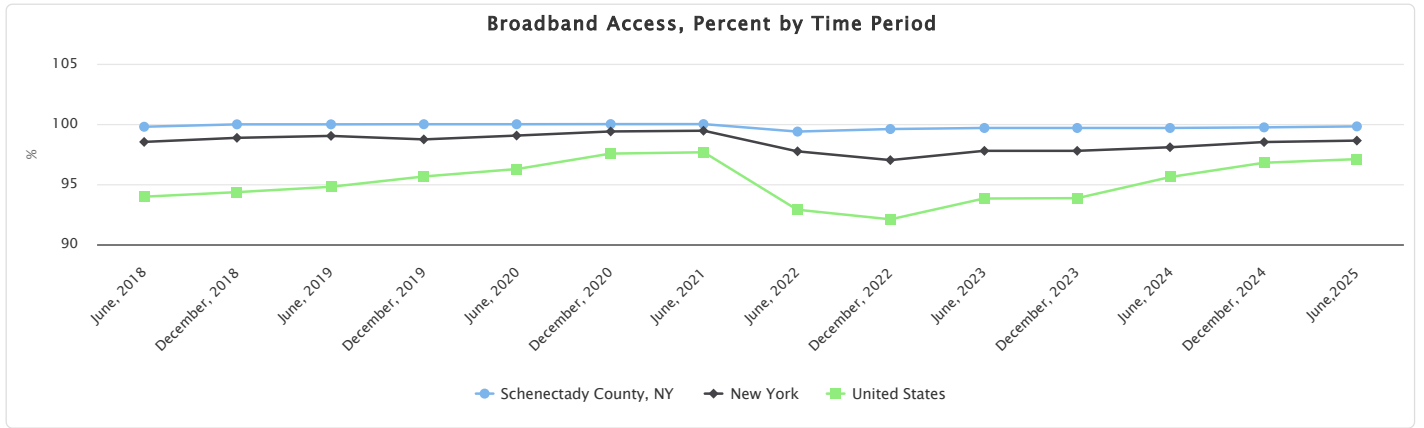
[View larger map](#)

### Broadband Access - FABRIC Locations, 25/3+ MBPS, Percent by County, FCC June, 2025

- Over 98.0%
- 95.0 - 98.0%
- 90.0 - 94.9%
- 50.0 - 89.9%
- Under 50.0%
- Schenectady County, NY

## Broadband Access, Percent by Time Period

The table below displays temporal trends in high-speed internet availability as the percent of the population with access to broadband in the indicated area. Because the FCC switched from the 477 data to the location based Fabric between June 2021 and June 2022, comparison between years should be done with caution.

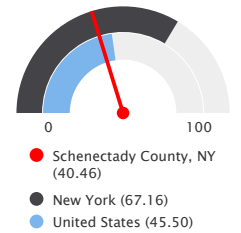


## Built Environment - Park Access

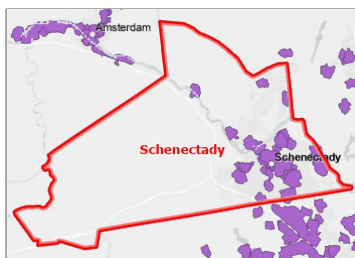
This indicator displays the number of people who live within a 10-minute walk from a park

Report Area	Total Population (2020)	Population Within a 10-Minute Walk	Percent of Population Within a 10-Minute Walk
Schenectady County, NY	158,061	63,949	<b>40.46</b>
New York	20,201,249	13,567,653	67.16
United States	334,735,155	152,294,403	45.50

Percent of Population Within 10-Minute Walk

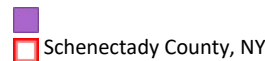


Note: This indicator is compared to the state average.  
Data Source: Trust for Public Land, 2025.



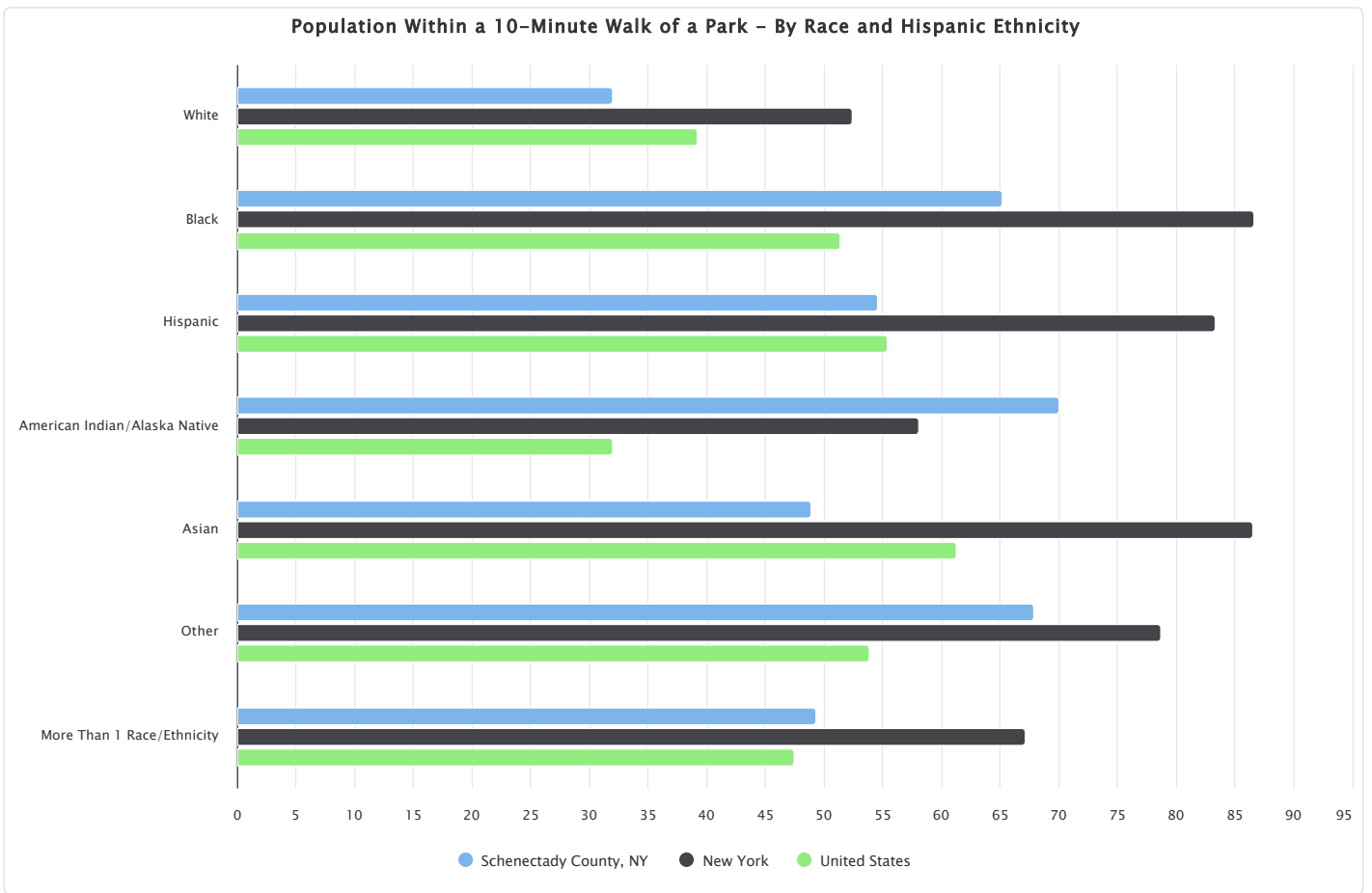
[View larger map](#)

ParkServe 10-Minute Walk Service Area, Trust for Public Land 2025



## Population Within a 10-Minute Walk of a Park - By Race and Hispanic Ethnicity

This chart shows the proportion of each race/ethnicity within a 10-minute walk of a park to the total population of each race/ethnicity in the report area.

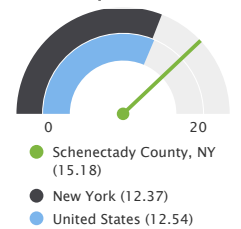


## Built Environment - Recreation and Fitness Facility Access

Access to recreation and fitness facilities encourages physical activity and other healthy behaviors. The report area includes 24 establishments primarily engaged in operating fitness and recreational sports facilities featuring exercise and other active physical fitness conditioning or recreational sports activities, such as swimming, skating, or racquet sports.

Report Area	Total Population (2020)	Number of Establishments	Establishments, Rate per 100,000 Population
Schenectady County, NY	158,061	24	<b>15.18</b>
New York	20,201,333	2,498	12.37
United States	331,449,275	41,556	12.54

Recreation and Fitness Facilities, Rate per 100,000 Population

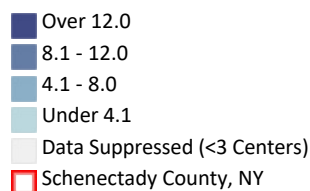


Note: This indicator is compared to the state average.  
Data Source: US Census Bureau, *County Business Patterns*. Additional data analysis by CARES, 2023.



[View larger map](#)

Recreation and Fitness Facilities, Rate (Per 100,000 Pop.) by County, CBP 2023

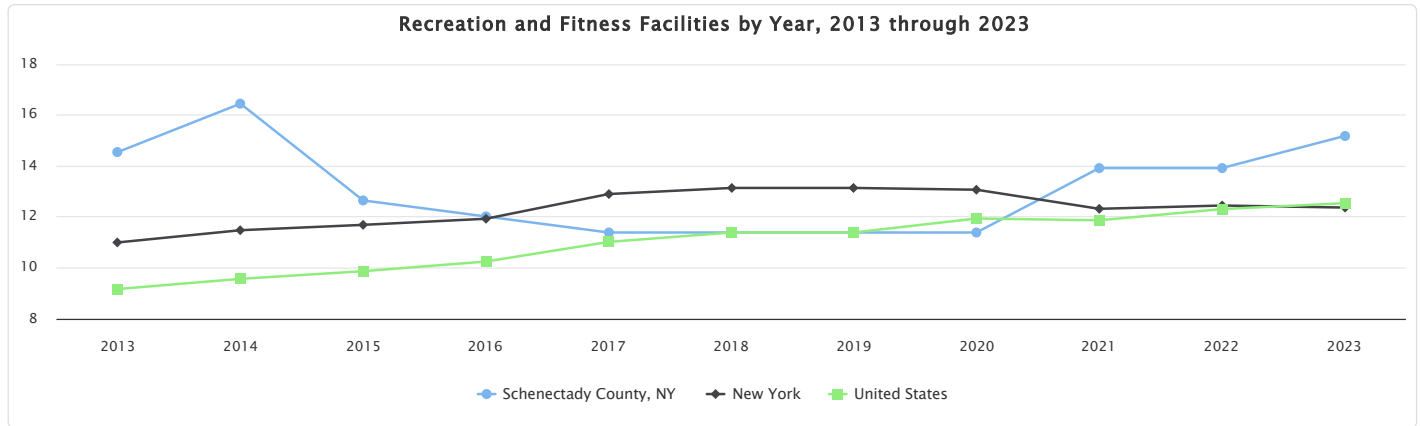


## Recreation and Fitness Facilities by Year, 2013 through 2023

This indicator presents the annual rate of recreation and fitness facilities per 100,000 people from 2010 to 2023, using data from the U.S. Census Bureau's County Business Patterns (CBP). It highlights access to physical activity and wellness spaces across communities over time.

Report Area	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Schenectady County, NY	14.55	16.45	12.65	12.02	11.39	11.39	11.39	11.39	13.92	13.92	15.18
New York	11	11.48	11.69	11.93	12.9	13.14	13.14	13.07	12.32	12.45	12.37
United States	9.17	9.57	9.87	10.25	11.02	11.39	11.39	11.94	11.87	12.31	12.54

Data Source: US Census Bureau, *County Business Patterns*. Additional data analysis by CARES, 2023.



### Built Environment - Social Associations

This indicator reports the number of social associations per 100,000 population. Associations include membership organizations such as civic organizations, bowling centers, golf clubs, fitness centers, sports organizations, political organizations, labor organizations, business organizations, and professional organizations.

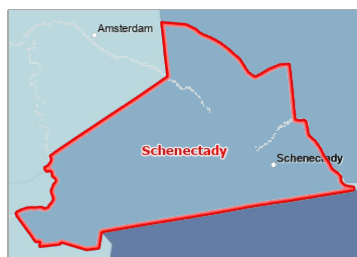
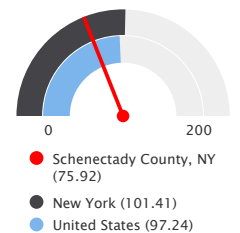
Note: Counts of establishments < 3 are suppressed.

Report Area	Total Population (2020)	Number of Establishments	Establishments, Rate per 100,000 Population
Schenectady County, NY	158,061	120	<b>75.92</b>
New York	20,201,333	20,487	101.41
United States	331,449,275	322,317	97.24

Note: This indicator is compared to the state average.

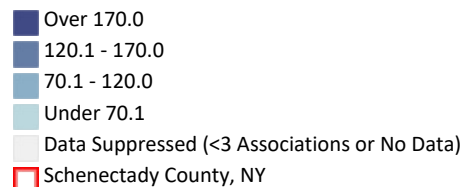
Data Source: US Census Bureau, *County Business Patterns*. Additional data analysis by CARES, 2022.

Membership Associations, Rate per 100,000 Population



[View larger map](#)

Social Associations, Rate (Per 100,000 Pop.) by County, CBP 2023

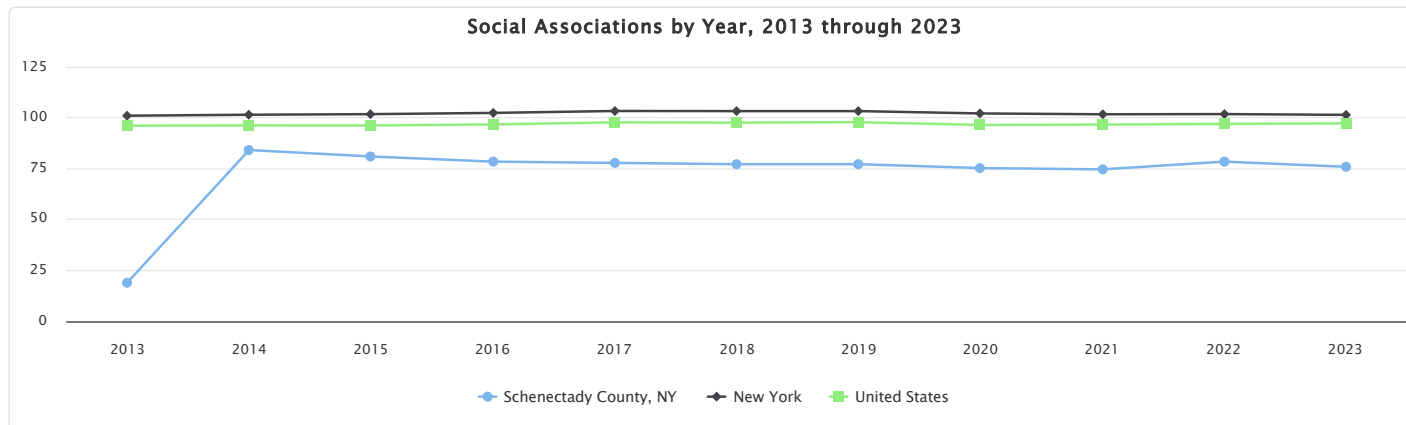


### Social Associations by Year, 2013 through 2023

This indicator presents the annual rate of social associations per 100,000 people from 2013 to 2023, based on data from the U.S. Census Bureau’s County Business Patterns (CBP). It captures the presence of civic, social, and community organizations, reflecting opportunities for social engagement and community connection over time.

Report Area	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Schenectady County, NY	18.98	84.14	80.98	78.45	77.82	77.19	77.19	75.29	74.65	78.45	75.92
New York	101	101.47	101.76	102.37	103.31	103.26	103.26	102.11	101.7	101.79	101.41
United States	96.1	96.22	96.18	96.71	97.74	97.61	97.83	96.45	96.64	96.98	97.24

Data Source: US Census Bureau, [County Business Patterns](#). Additional data analysis by CARES, 2022.

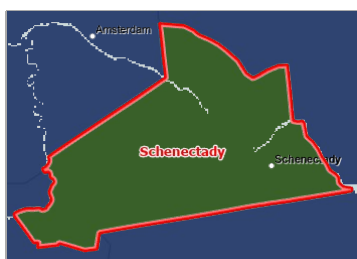


## Drinking Water Safety

This indicator reports presence or absence of one or more health-based violations in drinking water within community water systems that serve the community. The data for this indicator are obtained from the 2025 County Health Rankings, which utilizes figures from the 2023 Safe Drinking Water Information System (SDWIS).

Report Area	Estimated Total Population	Presence of Health-Based Drinking Water Violation
Schenectady County, NY	124,352	No
New York	15,822,448	Yes
United States	259,740,526	Yes

Data Source: University of Wisconsin Population Health Institute, [County Health Rankings](#). Data accessed from the 2025 County Health Rankings 2023.



[View larger map](#)

### Drinking Water Violations, Z-Score by County, County Health Rankings 2025

- Over 0.66 (Worse)
- 0.11 - 0.66
- 0.32 - 0.10
- Under -0.32 (Better)
- No Data or Data Suppressed
- Schenectady County, NY

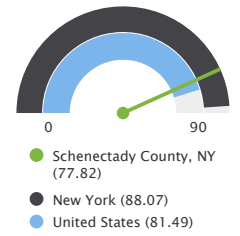
## Food Environment - Fast Food Restaurants

This indicator reports the number of fast food restaurants per 100,000 population. The prevalence of fast food restaurants provides a measure of both access to healthy food and environmental influences on dietary behaviors. Fast food restaurants are defined as limited-service establishments primarily engaged in providing food services (except snack and nonalcoholic beverage bars) where patrons generally order or select items and pay before eating.

Note: Counts of establishments < 3 are suppressed.

Report Area	Total Population (2020)	Number of Establishments	Establishments, Rate per 100,000 Population
Schenectady County, NY	158,061	123	77.82
New York	20,201,333	17,791	88.07
United States	331,449,275	270,088	81.49

Fast Food Restaurants, Rate per 100,000 Population

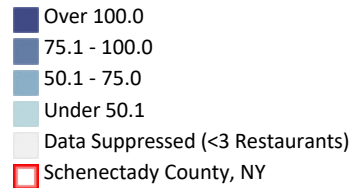


Note: This indicator is compared to the state average.  
 Data Source: US Census Bureau, County Business Patterns. Additional data analysis by CARES, 2023.



[View larger map](#)

Fast Food Restaurants, Rate (Per 100,000 Pop.) by County, CBP 2023

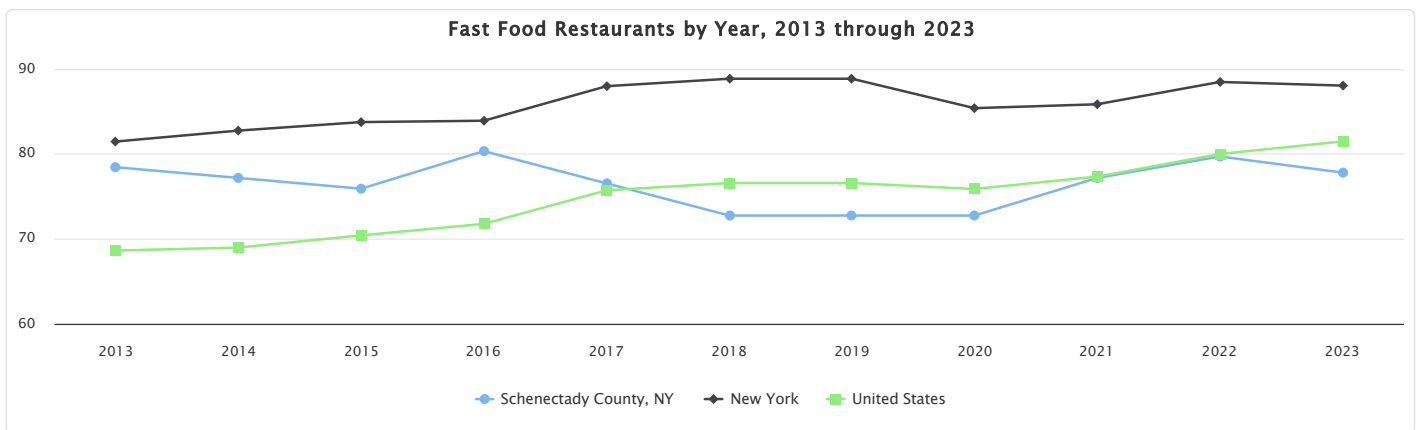


## Fast Food Restaurants by Year, 2013 through 2023

This indicator tracks the annual rate of fast food restaurants per 100,000 people from 2013 to 2023. It provides insights into the availability and growth of quick-service dining options across communities over time.

Report Area	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Schenectady County, NY	78.45	77.19	75.92	80.35	76.55	72.76	72.76	72.76	77.19	79.72	77.82
New York	81.48	82.77	83.77	83.93	88	88.88	88.88	85.41	85.87	88.5	88.07
United States	68.63	68.99	70.42	71.78	75.73	76.59	76.59	75.89	77.35	80.01	81.49

Data Source: US Census Bureau, County Business Patterns. Additional data analysis by CARES, 2023.

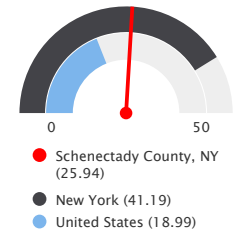


## Food Environment - Grocery Stores and Supermarkets

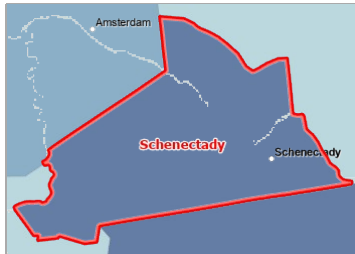
Healthy dietary behaviors are supported by access to healthy foods, and Grocery Stores are a major provider of these foods. There are 41 grocery establishments in the report area, a rate of 25.94 per 100,000 population. Grocery stores are defined as supermarkets and smaller grocery stores primarily engaged in retailing a general line of food, such as canned and frozen foods; fresh fruits and vegetables; and fresh and prepared meats, fish, and poultry. Delicatessen-type establishments are also included. Convenience stores and large general merchandise stores that also retail food, such as supercenters and warehouse club stores, are excluded.

Report Area	Total Population (2020)	Number of Establishments	Establishments, Rate per 100,000 Population
Schenectady County, NY	158,061	41	<b>25.94</b>
New York	20,201,333	8,320	41.19
United States	331,449,275	62,947	18.99

Grocery Stores, Rate per 100,000 Population

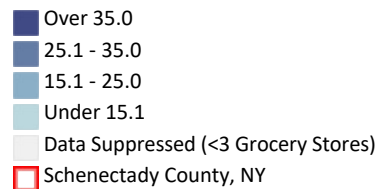


Note: This indicator is compared to the state average.  
Data Source: US Census Bureau, *County Business Patterns*. Additional data analysis by CARES, 2023.



[View larger map](#)

Grocery Stores and Supermarkets, Rate (Per 100,000 Pop.) by County, CBP 2023

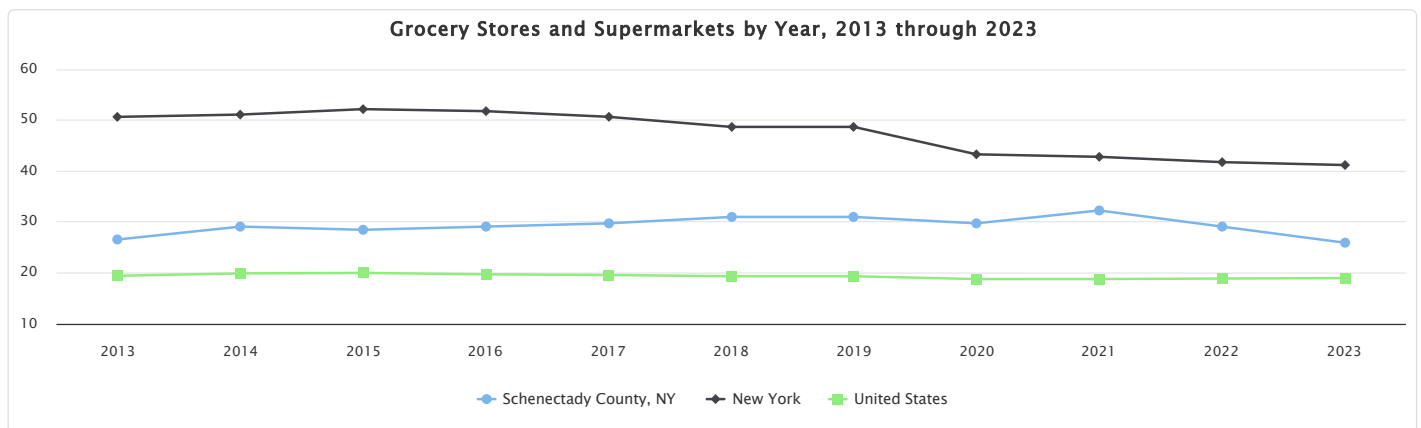


## Grocery Stores and Supermarkets by Year, 2013 through 2023

This indicator shows the rate of grocery stores and supermarkets per 100,000 population by year from 2010 to 2023, based on County Business Patterns data. It reflects access to food retail outlets and trends in local food infrastructure over time

Report Area	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Schenectady County, NY	26.57	29.1	28.47	29.1	29.74	31	31	29.74	32.27	29.1	25.94
New York	50.65	51.1	52.17	51.77	50.66	48.68	48.68	43.29	42.8	41.76	41.19
United States	19.44	19.91	20	19.73	19.59	19.35	19.35	18.79	18.8	18.9	18.99

Data Source: US Census Bureau, *County Business Patterns*. Additional data analysis by CARES, 2023.



## Food Environment - Low Income & Low Food Access

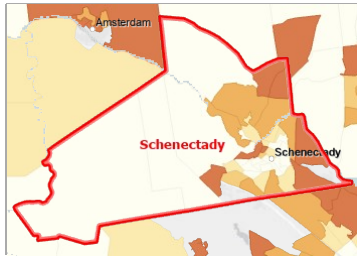
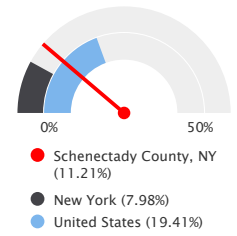
This indicator reports the percentage of the low income population with low food access. Low food access is defined as living more than 1 mile (urban) or 10 miles (rural) from the nearest supermarket, supercenter, or large grocery store. Data are from the April 2021 *Food Access Research Atlas* dataset. This indicator is relevant because it highlights populations and geographies facing food insecurity.

11.21% of the low-income population in the report area have low food access. The total low-income population in the report area with low food access is 4,613.

Report Area	Total Population	Low Income Population	Low Income Population with Low Food Access	Percent Low Income Population with Low Food Access
Schenectady County, NY	154,727	41,151	4,613	<b>11.21%</b>
New York	19,378,102	5,788,309	462,046	7.98%
United States	308,745,538	97,055,825	18,834,033	19.41%

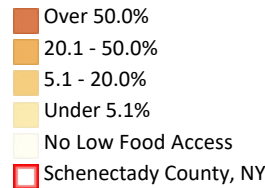
Note: This indicator is compared to the state average.  
 Data Source: US Department of Agriculture, Economic Research Service, *USDA - Food Access Research Atlas*. 2019.

Percent Low Income Population with Low Food Access



[View larger map](#)

Population with Limited Food Access, Low Income, Percent by Tract, USDA - FARA 2019



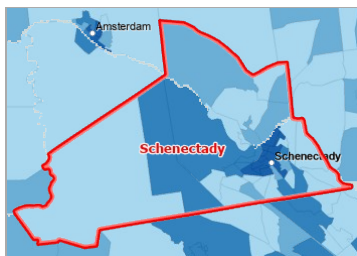
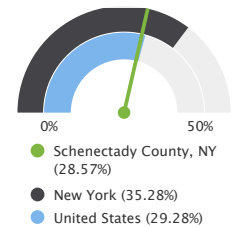
## Housing Costs - Cost Burden (30%)

This indicator reports the percentage of the households where housing costs are 30% or more of total household income. This indicator provides information on the cost of monthly housing expenses for owners and renters. The information offers a measure of housing affordability and excessive shelter costs. The data also serve to aid in the development of housing programs to meet the needs of people at different economic levels. Of the 66,324 total households in the report area, 18,946 or 28.57% of the population live in cost burdened households.

Report Area	Total Households	Cost-Burdened Households	Cost-Burdened Households, Percent
Schenectady County, NY	66,324	18,946	<b>28.57%</b>
New York	7,668,956	2,705,255	35.28%
United States	127,482,865	37,330,839	29.28%

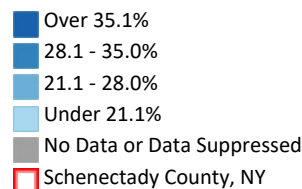
Note: This indicator is compared to the state average.  
 Data Source: US Census Bureau, *American Community Survey*. 2019-23.

Percentage of Households where Housing Costs Exceed 30% of Income



[View larger map](#)

Cost Burdened Households (Housing Costs Exceed 30% of Household Income), Percent by Tract, ACS 2019-23



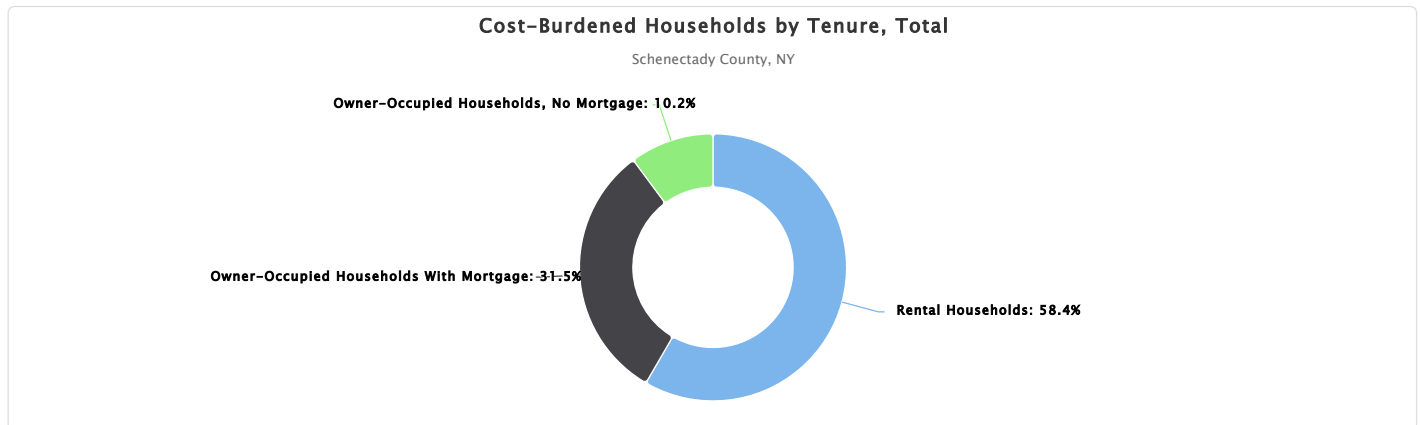
## Cost-Burdened Households by Tenure, Total

These data show the number of households that spend more than 30% of the household income on housing costs. In the report area, there were 18,946 cost burdened households according to the U.S. Census Bureau American Community Survey (ACS) 2019-2023 5-year estimates. The data for this indicator is only reported for households where household housing costs and income

earned was identified in the American Community Survey.

Report Area	Cost-Burdened Households	Cost-Burdened Rental Households	Cost-Burdened Owner-Occupied Households w/ Mortgage	Cost-Burdened Owner-Occupied Households w/o Mortgage
Schenectady County, NY	18,946	11,789	6,354	2,055
New York	2,705,255	1,706,073	792,682	329,546
United States	37,330,839	20,909,407	13,886,916	4,391,728

Data Source: US Census Bureau, American Community Survey, 2019-23.

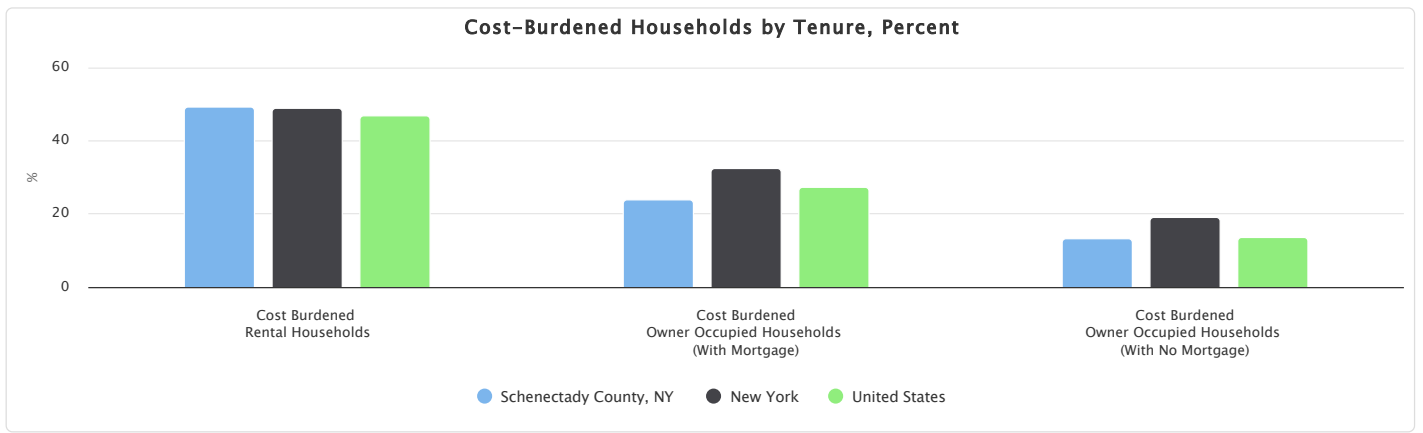


### Cost-Burdened Households by Tenure, Percent

These data show the percentage of households by tenure that are cost burdened. Cost burdened rental households (those that spent more than 30% of the household income on rental costs) represented 49.13% of all of the rental households in the report area, according to the U.S. Census Bureau American Community Survey (ACS) 2019-2023 5-year estimates. The data for this indicator is only reported for households where tenure, household housing costs, and income earned was identified in the American Community Survey.

Report Area	Rental Households	Rental Households Cost-Burdened, Percent	Owner-Occupied Households w/ Mortgage	Owner-Occupied Households w/ Mortgage Cost-Burdened, Percent	Owner-Occupied Households w/o Mortgage	Owner-Occupied Households w/o Mortgage Cost-Burdened, Percent
Schenectady County, NY	23,997	49.13%	26,811	23.70%	15,516	13.24%
New York	3,504,163	48.69%	2,436,230	32.54%	1,728,563	19.06%
United States	44,590,828	46.89%	50,718,449	27.38%	32,173,588	13.65%

Data Source: US Census Bureau, American Community Survey, 2019-23.

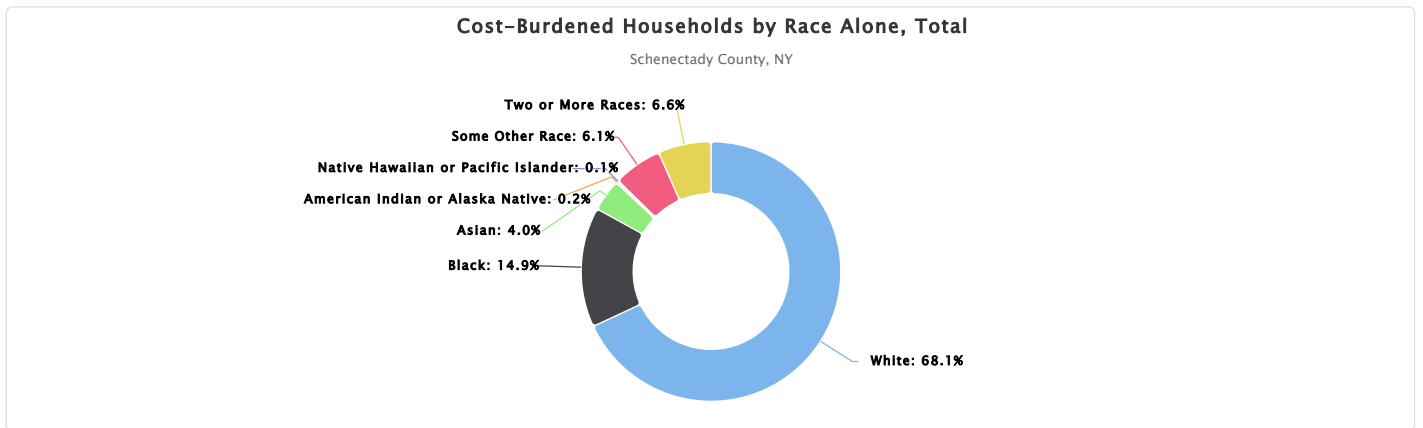


## Cost-Burdened Households by Race Alone, Total

This indicator reports the number of cost-burdened households (i.e., those that spend more than 30% of their household income on housing costs) by the householder's race alone, without considering respondents' ethnicity. The data for this indicator is only reported for households where household housing costs, income earned, and race was identified in the 2019-23 American Community Survey.

Report Area	White	Black	Asian	American Indian or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race	Two or More Races
Schenectady County, NY	12,895	2,829	757	40	28	1,148	1,249
New York	1,436,564	484,103	238,457	14,770	1,562	303,571	226,228
United States	22,465,807	6,393,544	1,974,714	286,541	67,283	2,530,433	3,612,517

Data Source: US Census Bureau, American Community Survey, 2019-23.

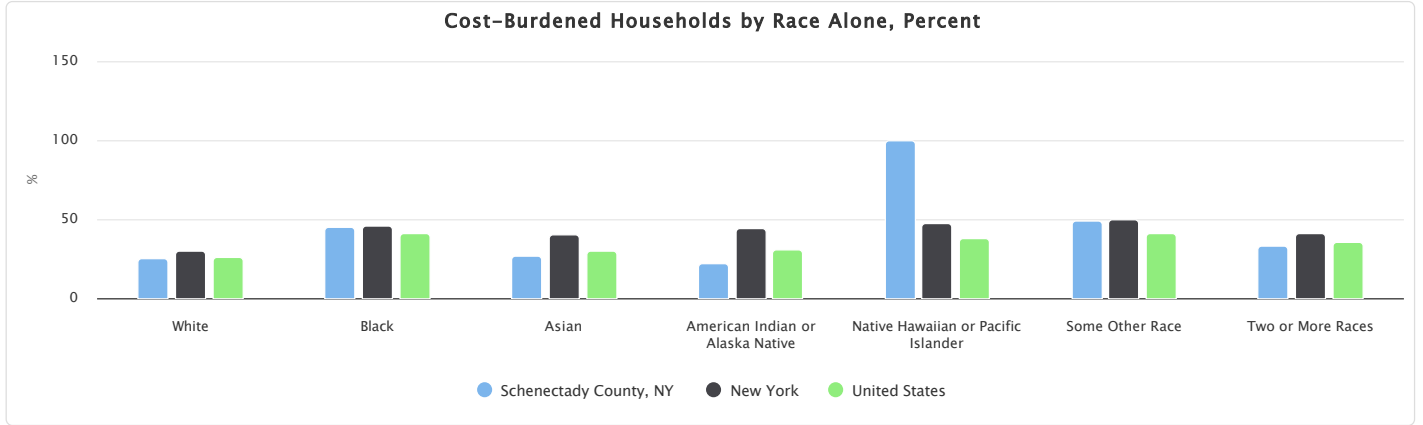


## Cost-Burdened Households by Race Alone, Percent

This indicator reports the percentage of cost-burdened households (i.e., those that spend more than 30% of their household income on housing costs) by the householder's race alone, without considering respondents' ethnicity. The percentage values could be interpreted as, for example, "Of all occupied housing units with a white alone householder within the report area, the proportion whose housing costs exceed 30% of their household income in the past 12 months is (value)." Note that data are only reported for households where household housing costs, income earned, and race was identified in the 2019-23 American Community Survey.

Report Area	White	Black	Asian	American Indian or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race	Two or More Races
Schenectady County, NY	25.38%	44.66%	26.56%	21.51%	100.00%	48.54%	33.25%
New York	29.91%	45.25%	40.15%	44.15%	47.43%	49.95%	40.60%
United States	25.61%	41.10%	30.02%	30.74%	37.97%	40.56%	35.13%

Data Source: US Census Bureau, American Community Survey, 2019-23.



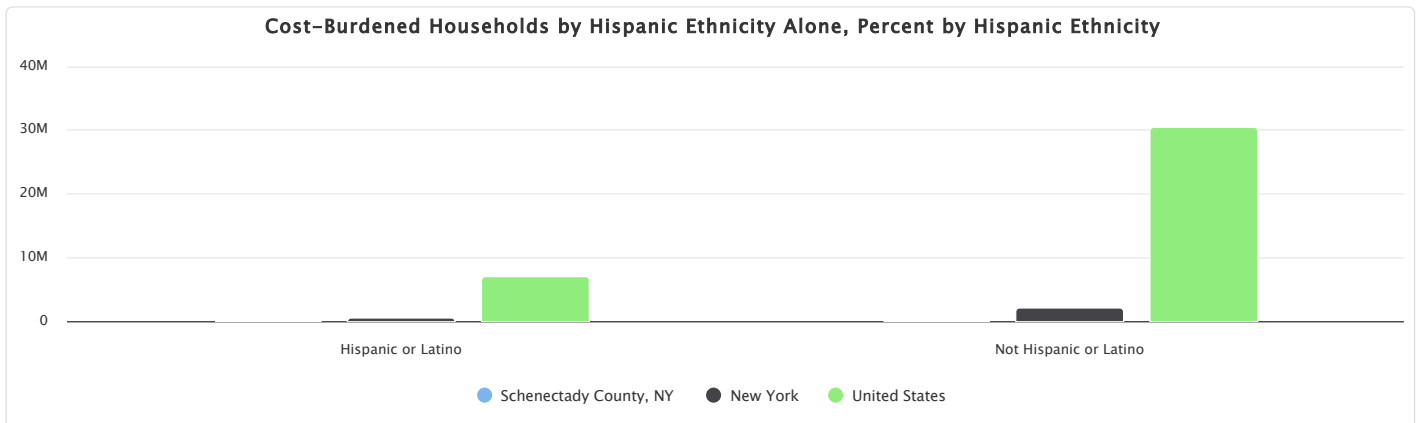
### Cost-Burdened Households by Hispanic Ethnicity Alone, Percent by Hispanic Ethnicity

This indicator reports the percentage of households that spend more than 30% of their household income on housing costs by Hispanic ethnicity alone during 2019-2023, according to the American Community Survey (ACS). Note that the data for this indicator are only reported for households where housing costs, income earned, and ethnicity were identified in the American Community Survey.

Within the report area, there were 1,712 cost-burdened households of Hispanic or Latino origin, representing 42.38% of the Hispanic or Latino households. There were 17,234 cost-burdened households of non-Hispanic or Latino origin in the report area, representing 27.67% of the total non-Hispanic households.

Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Schenectady County, NY	1,712	17,234	42.38%	27.67%
New York	582,076	2,123,179	46.87%	33.04%
United States	6,921,852	30,408,987	37.78%	27.86%

Data Source: US Census Bureau, American Community Survey, 2019-23.



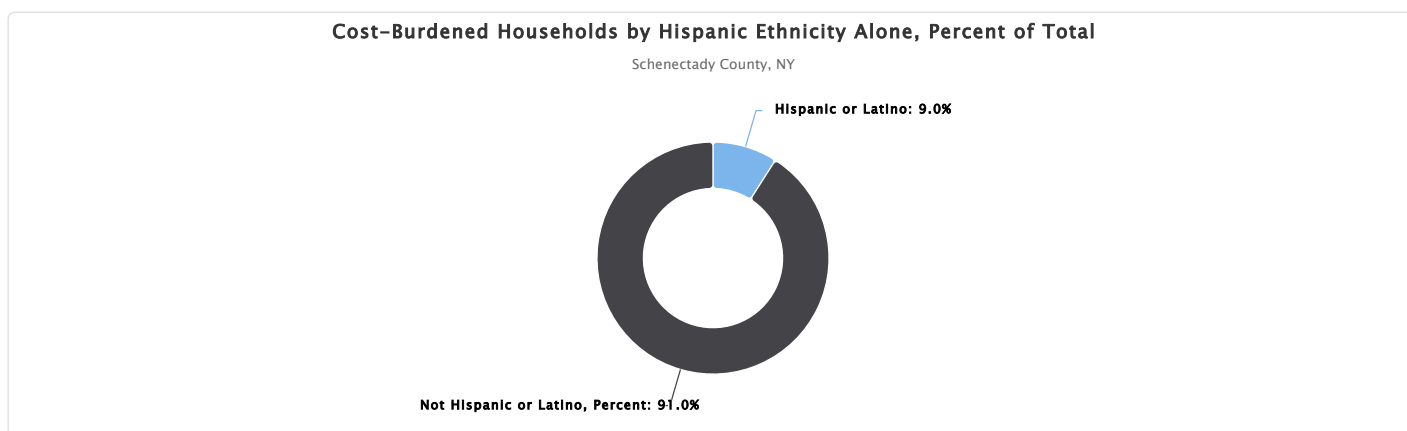
## Cost-Burdened Households by Hispanic Ethnicity Alone, Percent of Total

This indicator reports the percentage of households that spend more than 30% of their household income on housing costs by Hispanic ethnicity alone during 2019-2023, according to the American Community Survey (ACS). Note that the data for this indicator are only reported for households where housing costs, income earned, and ethnicity were identified in the American Community Survey.

Within the report area, there were 1,712 cost-burdened households of Hispanic or Latino origin, representing 9.04% of the total cost-burdened households. There were 17,234 cost-burdened households of non-Hispanic or Latino origin in the report area, representing 90.96% of the total cost-burdened households.

Report Area	Hispanic or Latino	Not Hispanic or Latino	Hispanic or Latino, Percent	Not Hispanic or Latino, Percent
Schenectady County, NY	1,712	17,234	9.04%	90.96%
New York	582,076	2,123,179	21.52%	78.48%
United States	6,921,852	30,408,987	18.54%	81.46%

Data Source: US Census Bureau, American Community Survey, 2019-23.



## Housing Quality - Overcrowding

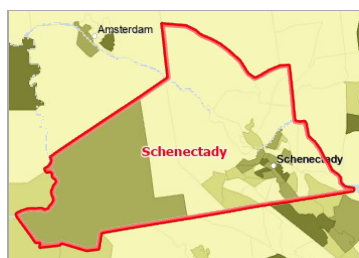
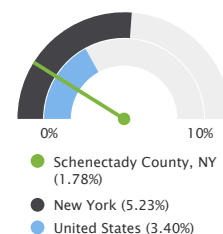
This indicator reports data on overcrowded housing from the latest 5-year American Community Survey. The Census Bureau has no official definition of crowded units, but this report considers units with more than one occupant per room to be crowded.

Report Area	Total Occupied Housing Units	Overcrowded Housing Units	Percentage of Housing Units Overcrowded
Schenectady County, NY	66,324	1,182	1.78%
New York	7,668,956	400,943	5.23%
United States	127,482,865	4,335,284	3.40%

Note: This indicator is compared to the state average.

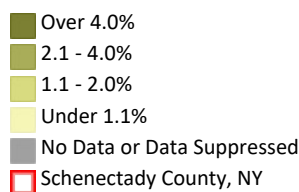
Data Source: US Census Bureau, American Community Survey, 2019-23.

Percentage of Housing Units Overcrowded



[View larger map](#)

Overcrowded Housing (Over 1 Person/Room), Percent by Tract, ACS 2019-23

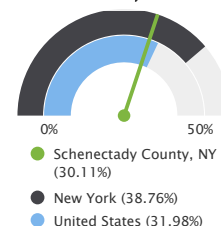


## Housing Quality - Substandard Housing

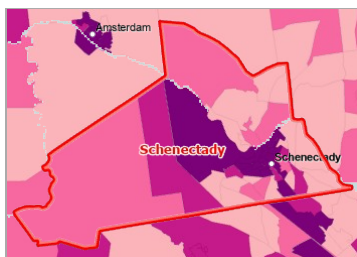
This indicator reports the number and percentage of owner- and renter-occupied housing units having at least one of the following conditions: 1) lacking complete plumbing facilities, 2) lacking complete kitchen facilities, 3) with 1 or more occupants per room, 4) selected monthly owner costs as a percentage of household income greater than 30%, and 5) gross rent as a percentage of household income greater than 30%. Selected conditions provide information in assessing the quality of the housing inventory and its occupants. This data is used to easily identify homes where the quality of living and housing can be considered substandard. Of the 66,324 total occupied housing units in the report area, 19,972 or 30.11% have one or more substandard conditions.

Report Area	Total Occupied Housing Units	Occupied Housing Units with One or More Substandard Conditions	Occupied Housing Units with One or More Substandard Conditions, Percent
Schenectady County, NY	66,324	19,972	<b>30.11%</b>
New York	7,668,956	2,972,221	38.76%
United States	127,482,865	40,765,129	31.98%

Occupied Housing Units with One or More Substandard Conditions, Percent

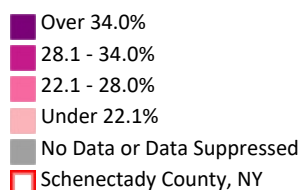


Note: This indicator is compared to the state average.  
Data Source: US Census Bureau, American Community Survey, 2019-23.



[View larger map](#)

Substandard Housing Units, Percent of Total by Tract, ACS 2019-23



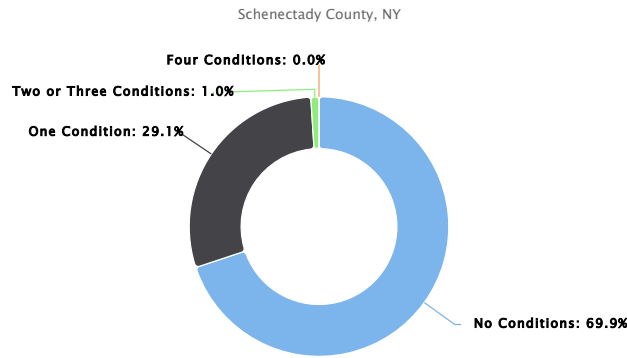
## Substandard Housing: Number of Substandard Conditions Present, Percentage of Total Occupied Housing Units

This indicator reports the percentage of total occupied housing units by number of substandard conditions.

Report Area	No Conditions	One Condition	Two or Three Conditions	Four Conditions
Schenectady County, NY	69.89%	29.10%	1.01%	0.00%
New York	61.24%	36.01%	2.74%	0.01%
United States	68.02%	30.18%	1.79%	0.01%

Data Source: US Census Bureau, American Community Survey, 2019-23.

### Substandard Housing: Number of Substandard Conditions Present, Percentage of Total Occupied Housing Units

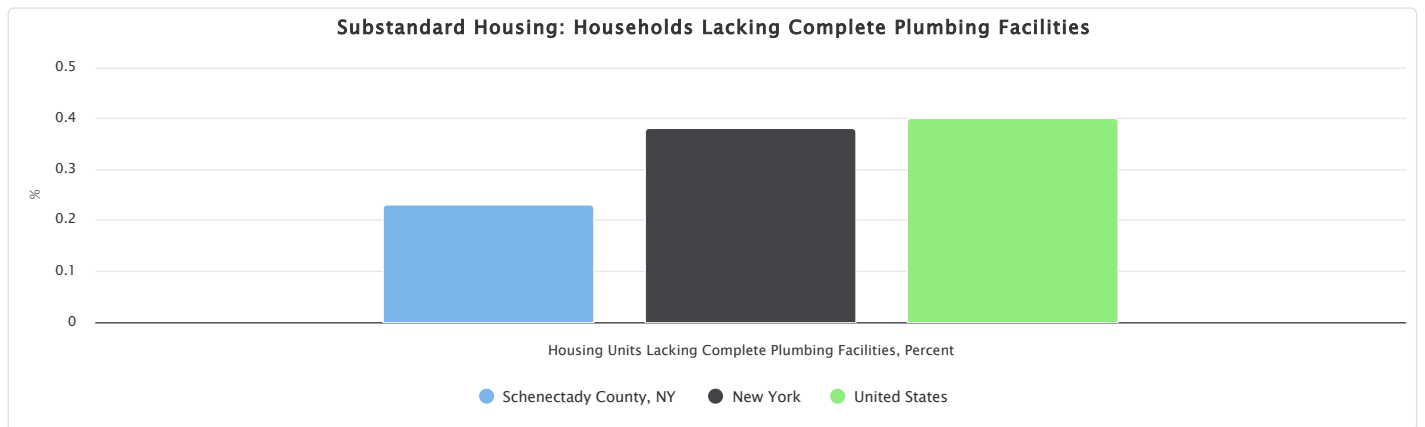


### Substandard Housing: Households Lacking Complete Plumbing Facilities

Complete plumbing facilities include: (a) hot and cold running water, (b) a flush toilet, and (c) a bathtub or shower. All three facilities must be located inside the house, apartment, or mobile home, but not necessarily in the same room. Housing units are classified as lacking complete plumbing facilities when any of the three facilities is not present.

Report Area	Occupied Housing Units	Housing Units Lacking Complete Plumbing Facilities	Housing Units Lacking Complete Plumbing Facilities, Percent
Schenectady County, NY	66,324	150	0.23%
New York	7,668,956	29,449	0.38%
United States	127,482,865	504,720	0.40%

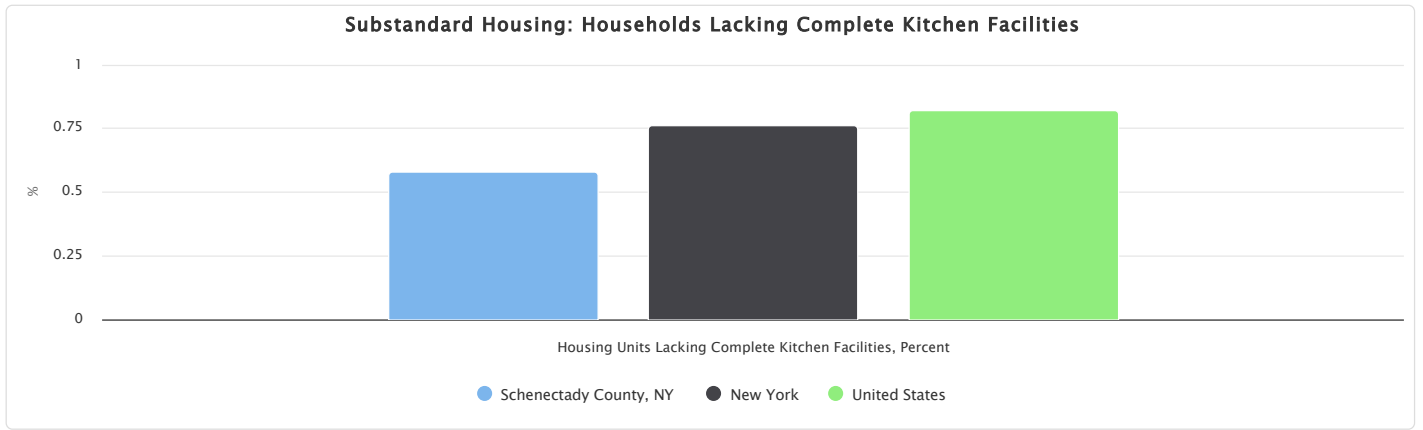
Data Source: US Census Bureau, American Community Survey, 2019-23.



### Substandard Housing: Households Lacking Complete Kitchen Facilities

A unit has complete kitchen facilities when it has all three of the following facilities: (a) a sink with a faucet, (b) a stove or range, and (c) a refrigerator. All kitchen facilities must be located in the house, apartment, or mobile home, but they need not be in the same room. A housing unit having only a microwave or portable heating equipment such as a hot plate or camping stove should not be considered as having complete kitchen facilities. An icebox is not considered to be a refrigerator.

Report Area	Occupied Housing Units	Housing Units Lacking Complete Kitchen Facilities	Housing Units Lacking Complete Kitchen Facilities, Percent
Schenectady County, NY	66,324	382	0.58%
New York	7,668,956	58,574	0.76%
United States	127,482,865	1,041,438	0.82%

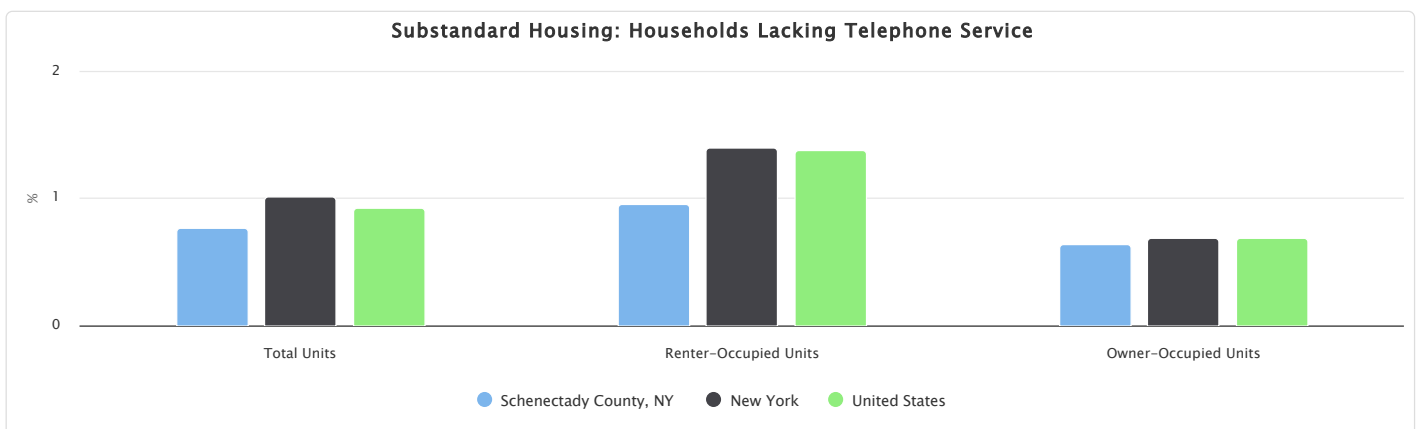


### Substandard Housing: Households Lacking Telephone Service

A telephone must be in working order and service available in the house, apartment, or mobile home that allows the respondent to both make and receive calls. Households that have cell-phones (no land-line) are counted as having telephone service available. Households whose service has been discontinued for nonpayment or other reasons are not counted as having telephone service available.

Report Area	Housing Units Lacking Telephone Service	Housing Units Lacking Telephone Service (%)	Owner-Occupied Units Lacking Telephone Service	Owner-Occupied Units Lacking Telephone Service (%)	Renter-Occupied Units Lacking Telephone Service	Renter-Occupied Units Lacking Telephone Service (%)
Schenectady County, NY	502	0.76%	273	0.64%	229	0.95%
New York	77,153	1.01%	28,318	0.68%	48,835	1.39%
United States	1,170,528	0.92%	561,820	0.68%	608,708	1.37%

Data Source: US Census Bureau, American Community Survey, 2019-23.



### Tenure - Owner-Occupied Housing

Tenure provides a measurement of home ownership, which has served as an indicator of the nation’s economy for decades. This data covers all occupied housing units, which are classified as either owner occupied or renter occupied. These data are used to aid in the distribution of funds for programs such as those involving mortgage insurance, rental housing, and national defense housing. Data on tenure allows planners to evaluate the overall viability of housing markets and to assess the stability of neighborhoods. The data also serve in understanding the characteristics of owner occupied and renter occupied units to aid

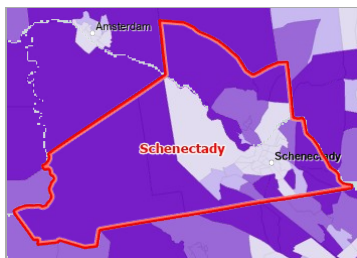
builders, mortgage lenders, planning officials, government agencies, etc., in the planning of housing programs and services.

## Owner-Occupied Housing

A housing unit is owner-occupied if the owner or co-owner lives in the unit, even if it is mortgaged or not fully paid for. The unit also is considered owned with a mortgage if it is built on leased land and there is a mortgage on the unit. Mobile homes occupied by owners with installment loan balances also are included in this category.

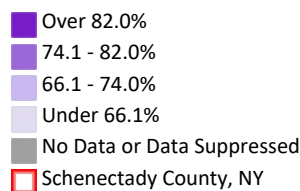
Report Area	Total Occupied Housing Units	Owner-Occupied Housing Units	Percent Owner-Occupied Housing Units
Schenectady County, NY	66,324	42,327	63.82%
New York	7,668,956	4,164,793	54.31%
United States	127,482,865	82,892,037	65.02%

Data Source: US Census Bureau, American Community Survey, 2019-23.



[View larger map](#)

Owner-Occupied Housing Units, Percent by Tract, ACS 2019-23



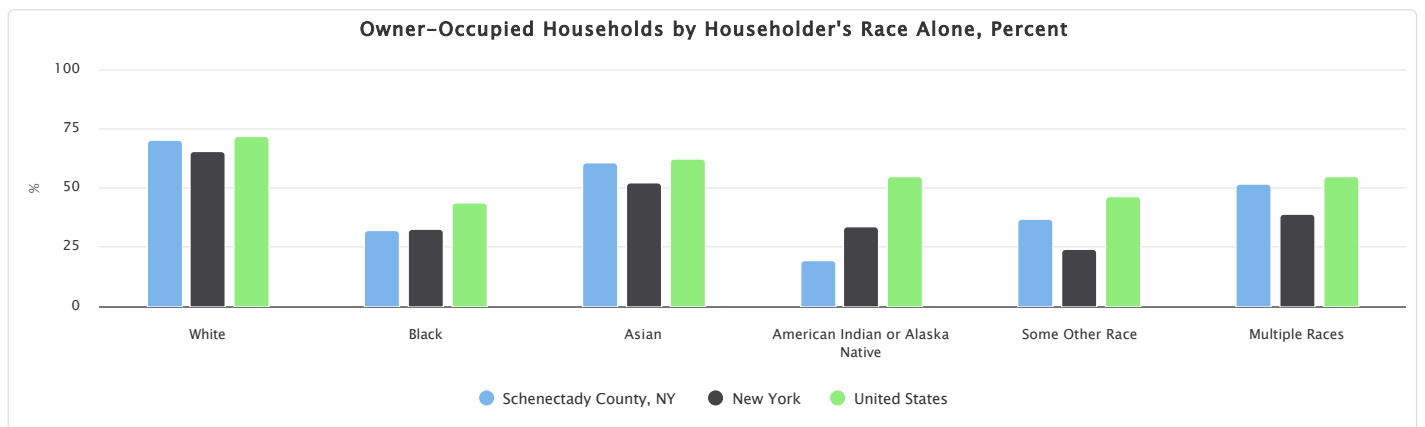
## Owner-Occupied Households by Householder's Race Alone, Percent

This indicator reports the percentage of owner-occupied households by householder's race alone.

The percentage values could be interpreted as, for example, "Of all the housing units with a white householder within the report area, the percentage of owner-occupied households is (value)."

Report Area	White	Black	Asian	American Indian or Alaska Native	Some Other Race	Multiple Races
Schenectady County, NY	70.33%	32.19%	60.42%	19.35%	36.66%	51.44%
New York	65.17%	32.66%	52.00%	33.52%	24.31%	38.76%
United States	71.71%	43.60%	62.35%	54.77%	46.21%	54.85%

Data Source: US Census Bureau, American Community Survey, 2019-23.

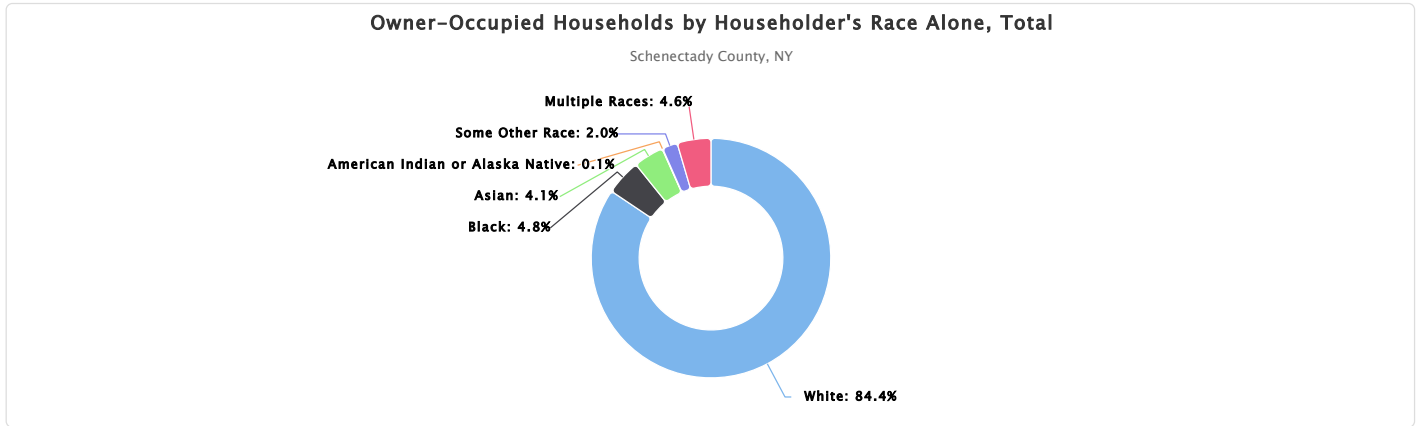


## Owner-Occupied Households by Householder's Race Alone, Total

This indicator reports the total count of owner-occupied households by householder's race alone.

Report Area	White	Black	Asian	American Indian or Alaska Native	Some Other Race	Multiple Races
Schenectady County, NY	35,731	2,039	1,722	36	867	1,932
New York	3,130,461	349,388	308,804	11,212	147,752	216,006
United States	62,899,230	6,782,072	4,100,873	510,579	2,883,070	5,639,929

Data Source: US Census Bureau, American Community Survey, 2019-23.

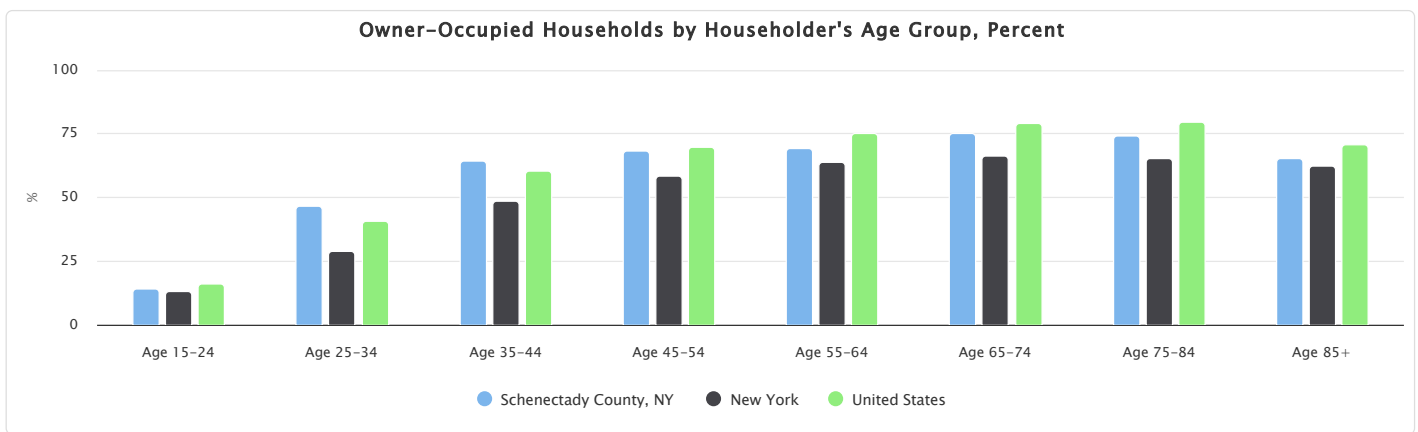


### Owner-Occupied Households by Householder's Age Group, Percent

This indicator reports the percentage of owner-occupied households by householder's age group. The percentage values could be interpreted as, for example, "Of all the housing units with a householder aged 15-24 within the report area, the percentage of owner-occupied households is (value)."

Report Area	Age 15-24	Age 25-34	Age 35-44	Age 45-54	Age 55-64	Age 65-74	Age 75-84	Age 85+
Schenectady County, NY	14.26%	46.63%	64.23%	68.33%	69.15%	75.00%	74.17%	65.48%
New York	12.90%	29.00%	48.58%	58.28%	63.79%	66.35%	65.35%	62.35%
United States	16.10%	40.84%	60.58%	69.47%	75.09%	79.16%	79.50%	70.93%

Data Source: US Census Bureau, American Community Survey, 2019-23.

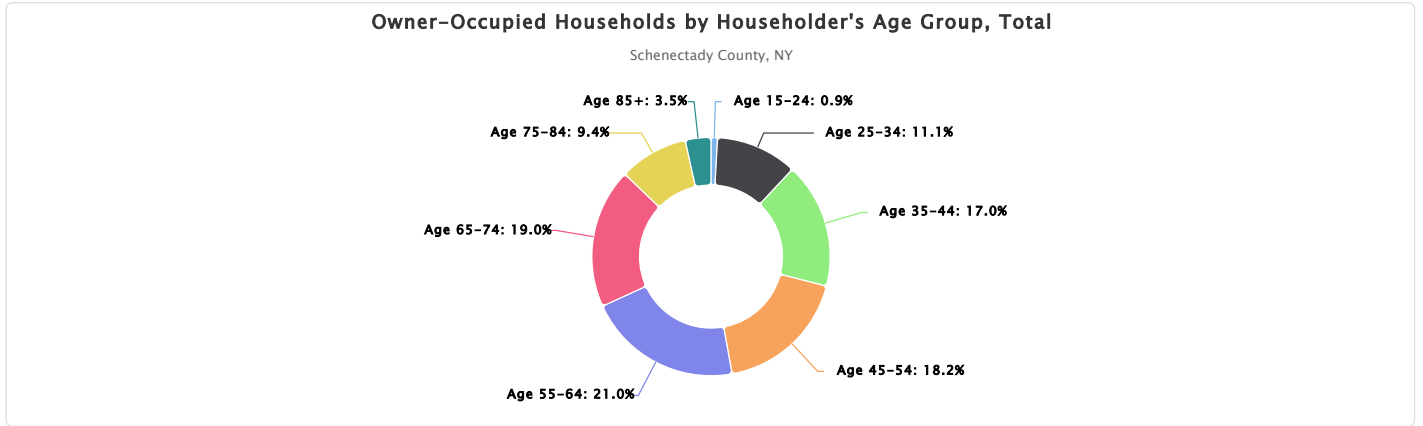


### Owner-Occupied Households by Householder's Age Group, Total

This indicator reports the total count of owner-occupied households by householder's age group.

Report Area	Age 15-24	Age 25-34	Age 35-44	Age 45-54	Age 55-64	Age 65-74	Age 75-84	Age 85+
Schenectady County, NY	375	4,680	7,216	7,695	8,890	8,035	3,968	1,468
New York	26,667	323,729	626,959	792,223	984,172	818,610	417,199	175,234
United States	763,343	7,950,972	13,497,818	15,410,995	18,285,898	16,015,654	8,125,312	2,842,045

Data Source: US Census Bureau, American Community Survey, 2019-23.



## Tenure - Renter-Occupied Housing

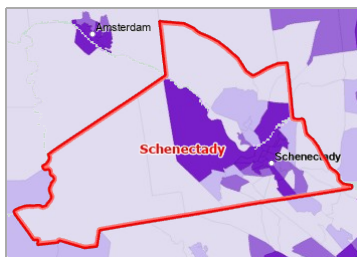
Tenure provides a measurement of home ownership, which has served as an indicator of the nation's economy for decades. This data covers all occupied housing units, which are classified as either owner occupied or renter occupied. These data are used to aid in the distribution of funds for programs such as those involving mortgage insurance, rental housing, and national defense housing. Data on tenure allows planners to evaluate the overall viability of housing markets and to assess the stability of neighborhoods. The data also serve in understanding the characteristics of owner occupied and renter occupied units to aid builders, mortgage lenders, planning officials, government agencies, etc., in the planning of housing programs and services.

### Renter-Occupied Housing

All occupied housing units that are not owner occupied, whether they are rented or occupied without payment of rent, are classified as renter occupied.

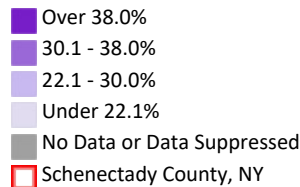
Report Area	Total Occupied Housing Units	Renter-Occupied Housing Units	Percent Renter-Occupied Housing Units
Schenectady County, NY	66,324	23,997	36.18%
New York	7,668,956	3,504,163	45.69%
United States	127,482,865	44,590,828	34.98%

Data Source: US Census Bureau, American Community Survey, 2019-23.



[View larger map](#)

### Renter-Occupied Housing Units, Percent by Tract, ACS 2019-23



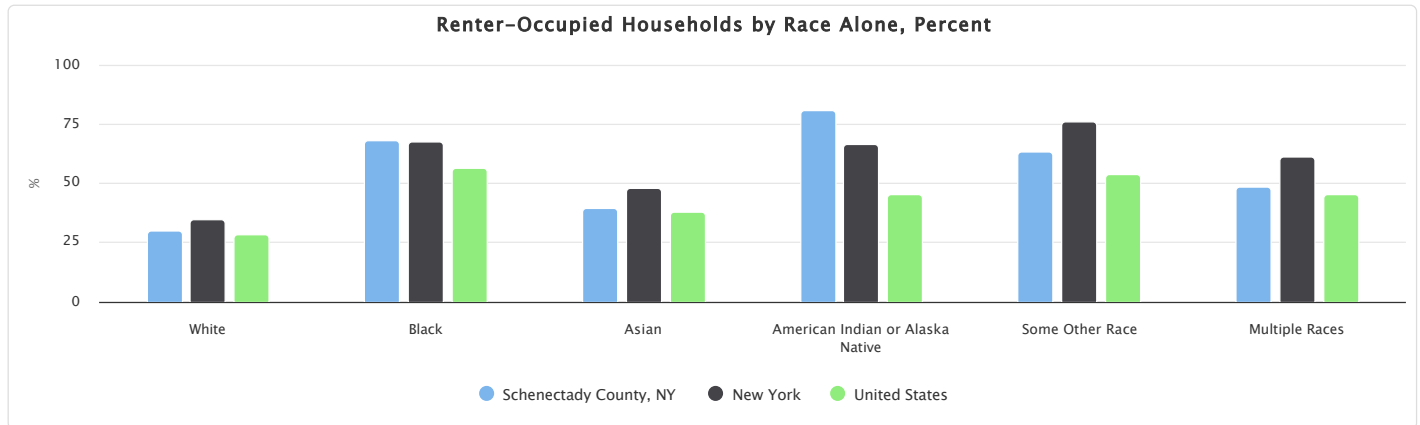
## Renter-Occupied Households by Race Alone, Percent

This indicator reports the percentage of renter-occupied households by race alone.

The percentage values could be interpreted as, for example, "Of all the households with white residents within the report area, the percentage of renter-occupied households is (value)."

Report Area	White	Black	Asian	American Indian or Alaska Native	Some Other Race	Multiple Races
Schenectady County, NY	29.67%	67.81%	39.58%	80.65%	63.34%	48.56%
New York	34.83%	67.34%	48.00%	66.48%	75.69%	61.24%
United States	28.29%	56.40%	37.65%	45.23%	53.79%	45.15%

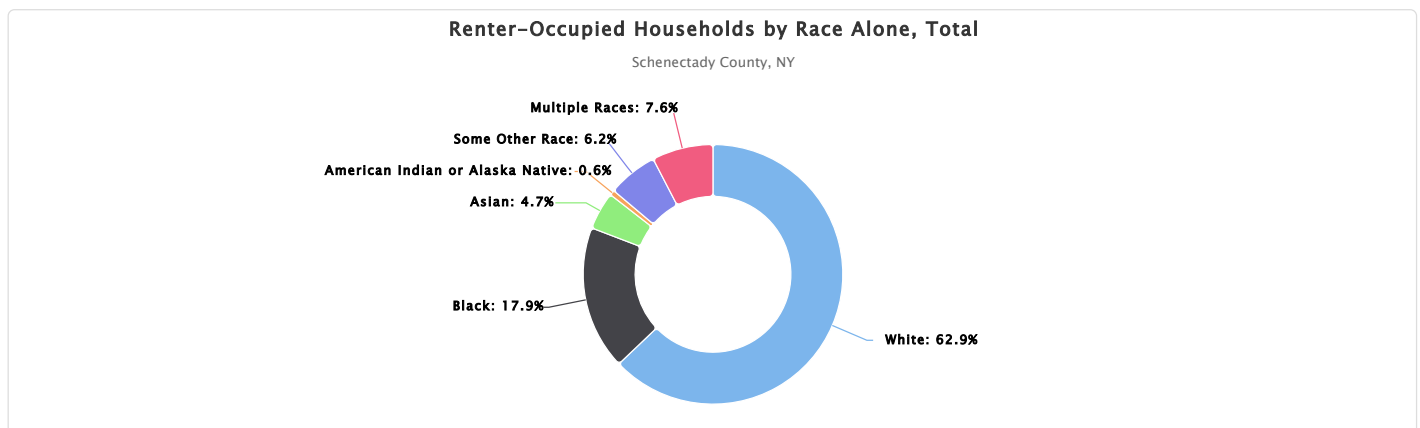
Data Source: US Census Bureau, American Community Survey, 2019-23.



### Renter-Occupied Households by Race Alone, Total

Report Area	White	Black	Asian	American Indian or Alaska Native	Some Other Race	Multiple Races
Schenectady County, NY	15,074	4,295	1,128	150	1,498	1,824
New York	1,673,061	720,502	285,047	22,239	459,960	341,231
United States	24,817,846	8,774,870	2,476,100	421,620	3,356,307	4,643,158

Data Source: US Census Bureau, American Community Survey, 2019-23.



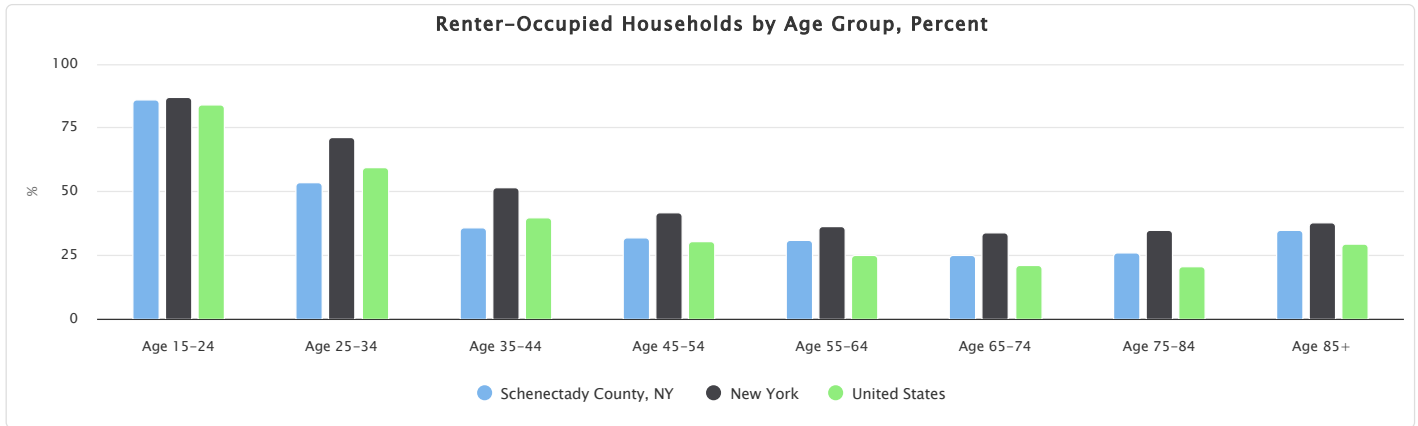
### Renter-Occupied Households by Age Group, Percent

This indicator reports the percentage of renter-occupied households by age group.

The percentage values could be interpreted as, for example, "Of all the households with residents age 25-34 within the report area, the percentage of renter-occupied households is (value)."

Report Area	Age 15-24	Age 25-34	Age 35-44	Age 45-54	Age 55-64	Age 65-74	Age 75-84	Age 85+
Schenectady County, NY	85.74%	53.37%	35.77%	31.67%	30.85%	25.00%	25.83%	34.52%
New York	87.10%	71.00%	51.42%	41.72%	36.21%	33.65%	34.65%	37.65%
United States	83.90%	59.16%	39.42%	30.53%	24.91%	20.84%	20.50%	29.07%

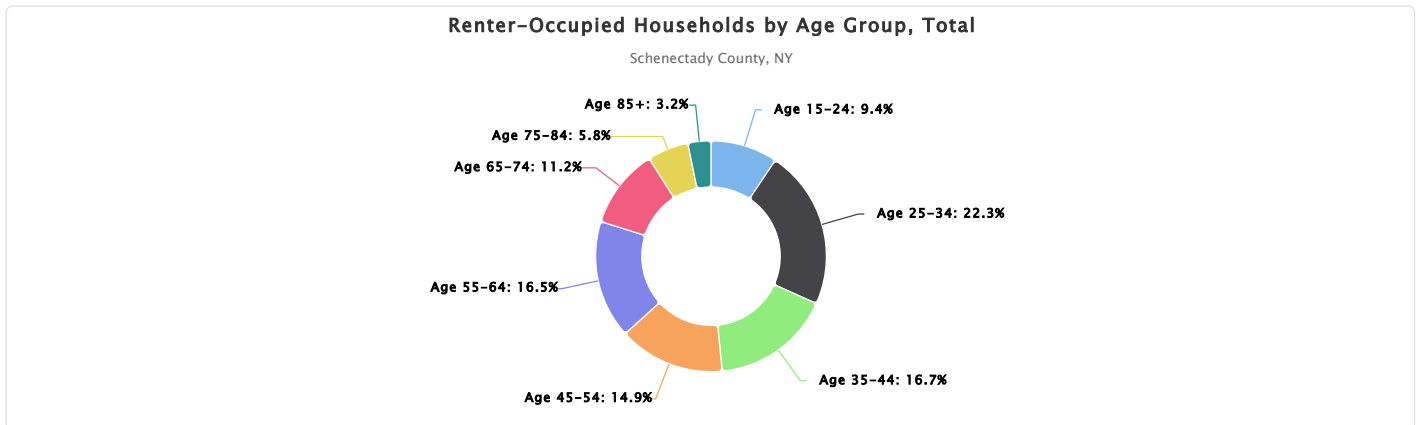
Data Source: US Census Bureau, American Community Survey, 2019-23.



### Renter-Occupied Households by Age Group, Total

Report Area	Age 15-24	Age 25-34	Age 35-44	Age 45-54	Age 55-64	Age 65-74	Age 75-84	Age 85+
Schenectady County, NY	2,255	5,357	4,018	3,566	3,967	2,678	1,382	774
New York	179,994	792,550	663,555	567,126	558,736	415,212	221,191	105,799
United States	3,977,057	11,517,516	8,781,707	6,771,875	6,065,919	4,216,918	2,095,129	1,164,707

Data Source: US Census Bureau, American Community Survey, 2019-23.



## Health Outcomes & Behaviors

### 30-Day Hospital Readmissions

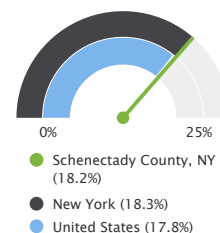
This indicator reports the number and rate of 30-day hospital readmissions among Fee-for-Service (FFS) Medicare beneficiaries. Hospital readmissions are unplanned visits to an acute care hospital within 30 days after discharge from a hospitalization. Patients may have unplanned readmissions for any reason, however readmissions within 30 days are often related to the care received in the hospital, whereas readmissions over a longer time period have more to do with other complicating illnesses, patients' own behavior, or care provided to patients after hospital discharge<sup>1</sup>.

In the latest reporting period there were 30,437 FFS Medicare beneficiaries in the report area. 379, or 18.2% of hospitalizations

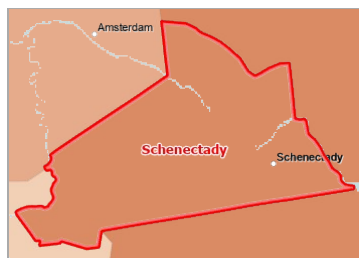
resulted in a 30-day hospital readmission. The rate of readmissions in the report area was lower than the state rate of 18.3% during the same time period.

Report Area	Medicare FFS Beneficiaries	30-Day Hospital Readmissions	30-Day Hospital Readmissions, Rate
Schenectady County, NY	30,437	379	18.2%
New York	3,435,250	65,519	18.3%
United States	60,257,800	1,065,930	17.8%

30-Day Hospital Readmissions, Rate (%) by County, CMS 2023

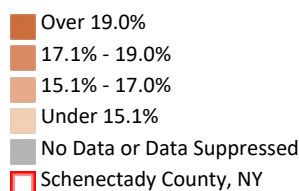


Note: This indicator is compared to the state average.  
Data Source: Centers for Medicare and Medicaid Services, CMS - Geographic Variation Public Use File . 2023.



[View larger map](#)

30-Day Hospital Readmissions, Rate (%) by County, CMS 2023

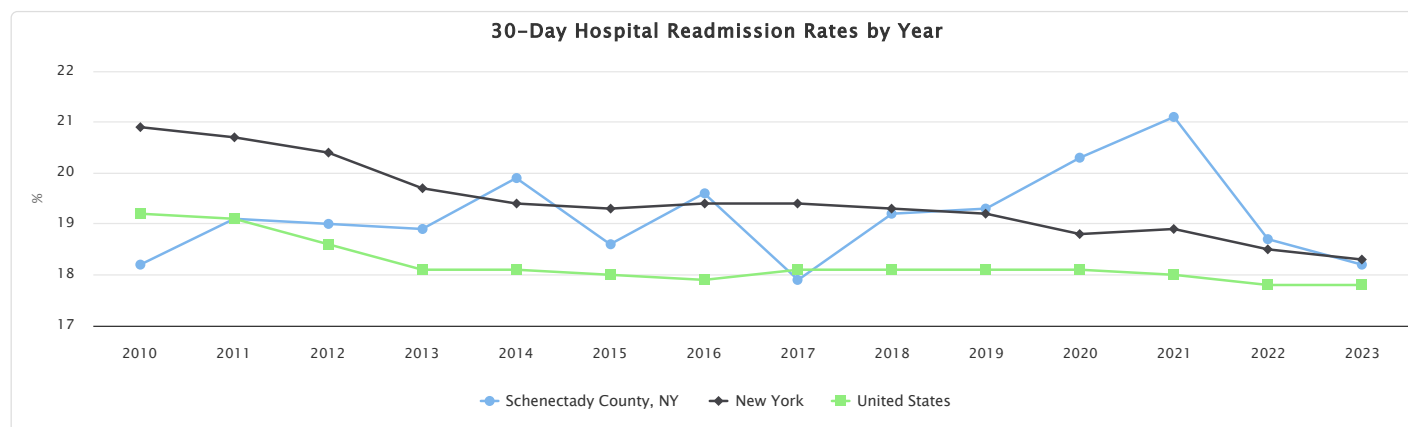


### 30-Day Hospital Readmission Rates by Year

The table below displays local, state, and national trends in 30-day hospital readmission rates among FFS Medicare beneficiaries.

Report Area	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Schenectady County, NY	18.2%	19.1%	19.0%	18.9%	19.9%	18.6%	19.6%	17.9%	19.2%	19.3%	20.3%	21.1%	18.7%	18.2%
New York	20.9%	20.7%	20.4%	19.7%	19.4%	19.3%	19.4%	19.4%	19.3%	19.2%	18.8%	18.9%	18.5%	18.3%
United States	19.2%	19.1%	18.6%	18.1%	18.1%	18.0%	17.9%	18.1%	18.1%	18.1%	18.1%	18.0%	17.8%	17.8%

Data Source: Centers for Medicare and Medicaid Services, CMS - Geographic Variation Public Use File . 2023.



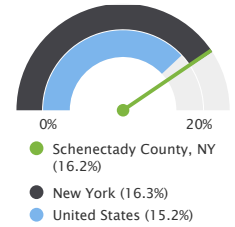
### Binge Drinking

This indicator reports the percentage of adults age 18 and older who reported having five or more drinks (men) or four or more drinks (women) on an occasion in the past 30 days.

Within the report area 16.2% of adults age 18+ reported having four or more drinks in the last month.

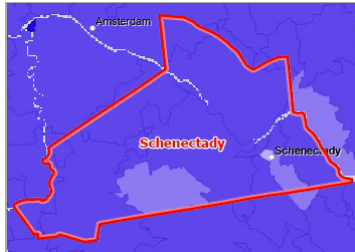
Report Area	Total Population	Adults Age 18+ Binge Drinking in the Past 30 Days (Crude)	Adults Age 18+ Binge Drinking in the Past 30 Days (Age-Adjusted)
Schenectady County, NY	159,902	16.2%	17.6%
New York	19,571,216	16.3%	17.7%
United States	334,914,895	15.2%	16.6%

percentage of Adults Age 18+ Binge Drinking in the Past 30 Days



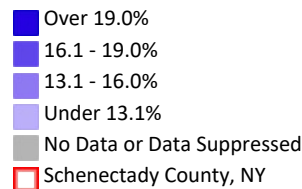
Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.



[View larger map](#)

Binge Drinking, Percent of Adults Age 18+ by ZCTA, CDC BRFSS PLACES Project 2023

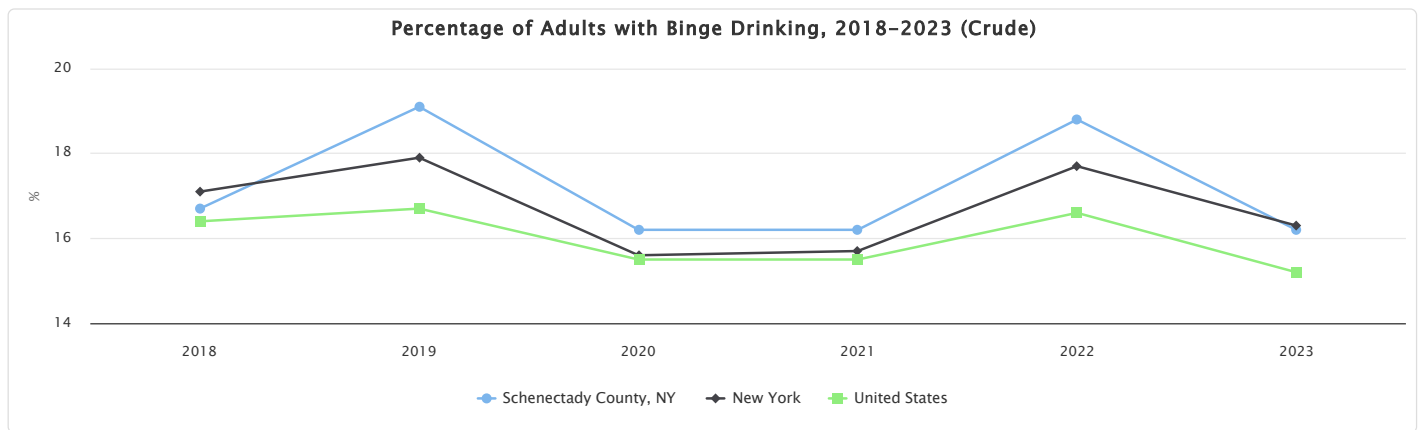


## Percentage of Adults with Binge Drinking, 2018-2023 (Crude)

The table and chart below display annual trends in the percentage of adults age 18+ who report binge drinking.

Report Area	2018	2019	2020	2021	2022	2023
Schenectady County, NY	16.7%	19.1%	16.2%	16.2%	18.8%	16.2%
New York	17.1%	17.9%	15.6%	15.7%	17.7%	16.3%
United States	16.4%	16.7%	15.5%	15.5%	16.6%	15.2%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.

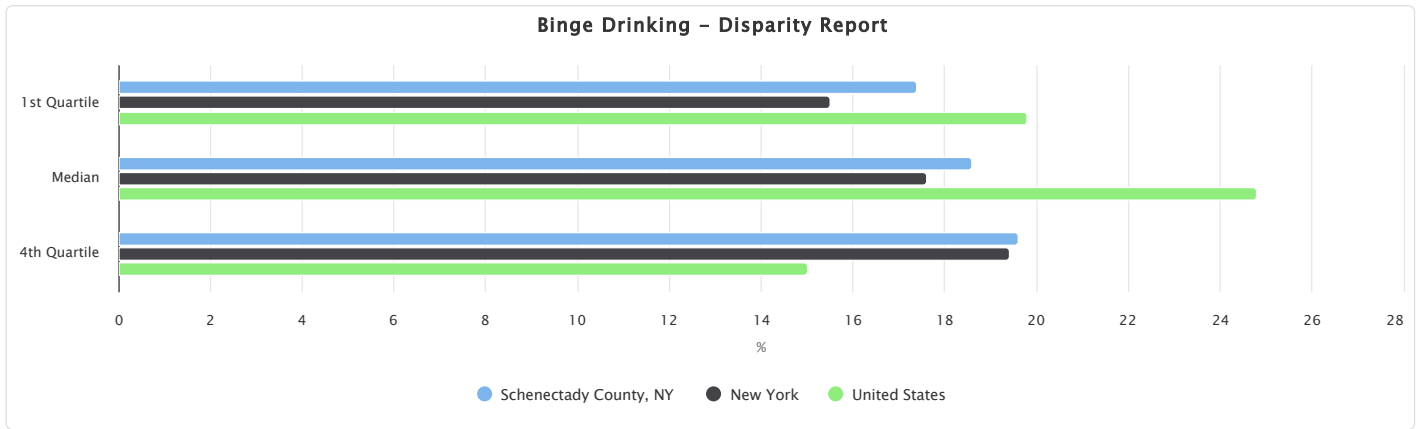


## Binge Drinking - Disparity Report

The table and chart below display the median and interquartile ranges for census tract values related to the indicator.

Report Area	1st Quartile	Median	4th Quartile
Schenectady County, NY	17.40%	18.60%	19.60%
New York	15.50%	17.60%	19.40%
United States	19.80%	24.80%	15.00%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.



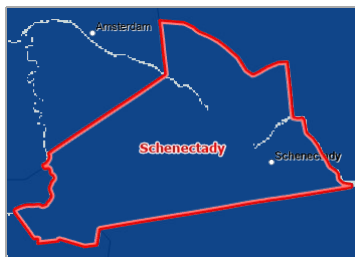
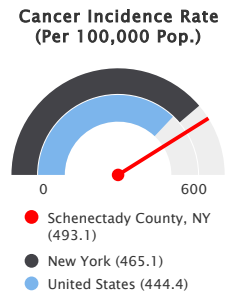
## Cancer Incidence - All Sites

This indicator reports the age adjusted incidence rate (cases per 100,000 population per year) of cancer (all sites) adjusted to 2000 U.S. standard population age groups (Under age 1, 1-4, 5-9, ..., 80-84, 85 and older).

Within the report area, there were 1,000 new cases of cancer reported. This means there is a rate of 493.1 for every 100,000 total population.

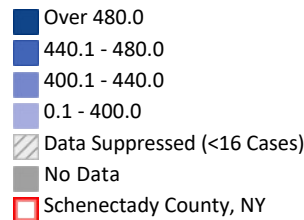
Report Area	Estimated Total Population	New Cases (Annual Average)	Cancer Incidence Rate (Per 100,000 Population)
Schenectady County, NY	202,798	1,000	<b>493.1</b>
New York	25,023,865	116,386	465.1
United States	392,542,529	1,744,459	444.4

Note: This indicator is compared to the state average.  
Data Source: State Cancer Profiles, 2017-21.



[View larger map](#)

### Cancer (All Sites), Incidence Rate (Per 100,000 Pop.) by County, State Cancer Profiles 2017-21

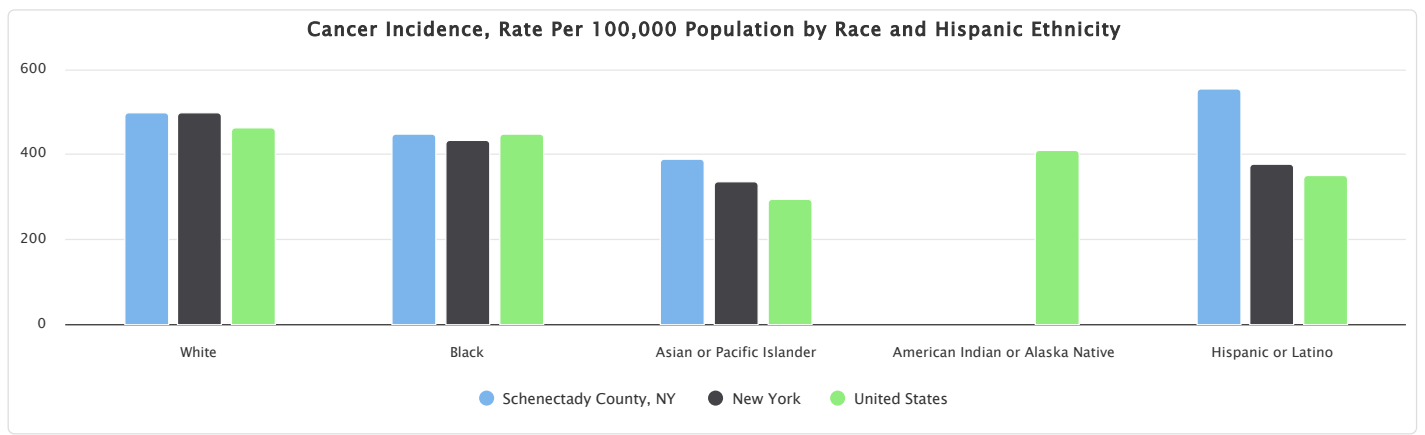


## Cancer Incidence, Rate Per 100,000 Population by Race and Hispanic Ethnicity

This indicator reports the age-adjusted cancer incidence rate per 100,000 people for the 5-year period 2017-2021 by race and by Hispanic origin.

Report Area	White	Black	Asian or Pacific Islander	American Indian or Alaska Native	Hispanic or Latino
Schenectady County, NY	497.1	447.5	387.3	No data	553.6
New York	498.7	433.5	336.5	No data	378.1
United States	463.1	447.9	292.9	408.9	350

Data Source: State Cancer Profiles, 2017-21.



## Cancer Incidence (Average Annual New Cases) by Race and Hispanic Ethnicity

This indicator reports the average annual number of new cases of cancer for the 5-year period 2017-2021 by race and by Hispanic origin.

Report Area	White	Black	Asian or Pacific Islander	American Indian or Alaska Native	Hispanic or Latino
Schenectady County, NY	858	67	30	No data	37
New York	80,165	14,897	6,804	No data	13,113
United States	1,300,948	191,594	62,826	11,028	155,866

Data Source: State Cancer Profiles. 2017-21.

## Top Five Most Commonly Diagnosed Cancers

The table below shows counts and age-adjusted incidence rates of the five most common newly diagnosed cancers by site for the 5-year period 2017-2021.

Area Name	Cancer Site	New Cases (Annual Average)	Cancer Incidence Rate (Per 100,000 Population)
Schenectady County, New York	1 - All Cancer Sites (All Stages^), 2017-2021	1,000	493.1
Schenectady County, New York	2 - Breast (All Stages^), 2017-2021	146	141.4
Schenectady County, New York	3 - Lung & Bronchus (All Stages^), 2017-2021	144	67.4
Schenectady County, New York	4 - Prostate (All Stages^), 2017-2021	127	126.5
Schenectady County, New York	5 - Colon & Rectum (All Stages^), 2017-2021	63	32.8
New York	1 - Breast (All Stages^), 2017-2021	17,074	134.1
New York	2 - Prostate (All Stages^), 2017-2021	16,267	131.2
New York	3 - Lung & Bronchus (All Stages^), 2017-2021	13,922	53.5
New York	4 - Colon & Rectum (All Stages^), 2017-2021	8,808	35.7
New York	5 - Bladder (All Stages^), 2017-2021	5,368	20.8
US	1 - Breast (All Stages^), 2017-2021	258,398	129.8
US	2 - Prostate (All Stages^), 2017-2021	224,883	113.2
US	3 - Lung & Bronchus (All Stages^), 2017-2021	216,523	53.1
US	4 - Colon & Rectum (All Stages^), 2017-2021	140,088	36.4
US	5 - Melanoma of the Skin (All Stages^), 2017-2021	86,630	22.7

Data Source: State Cancer Profiles. 2017-21.

## Cancer Incidence - Breast

This indicator reports the age adjusted incidence rate (cases per 100,000 population per year) of females with breast cancer

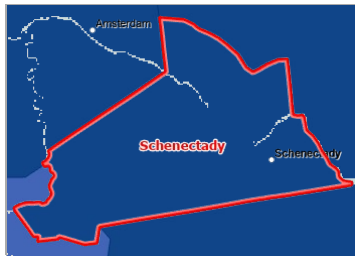
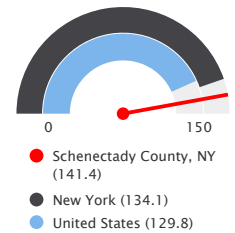
adjusted to 2000 U.S. standard population age groups (Under Age 1, 1-4, 5-9, ..., 80-84, 85 and older).

Within the report area, there were 146 new cases of breast cancer. This means there is a rate of 141.4 for every 100,000 females.

Report Area	Estimated Total Population (Female)	New Cases (Annual Average)	Cancer Incidence Rate (Per 100,000 Females)
Schenectady County, NY	103,253	146	<b>141.4</b>
New York	12,732,289	17,074	134.1
United States	199,073,959	258,398	129.8

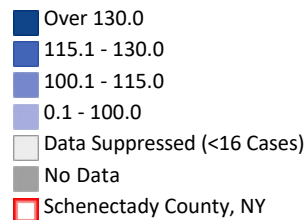
Note: This indicator is compared to the state average.  
Data Source: State Cancer Profiles. 2017-21.

Breast Cancer Incidence Rate (Per 100,000 Females)



[View larger map](#)

Breast Cancer, Incidence Rate (Per 100,000 Females) by County, State Cancer Profiles 2017-21



## Cancer Incidence - Colon and Rectum

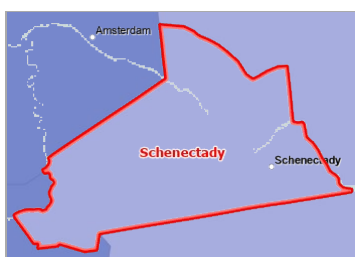
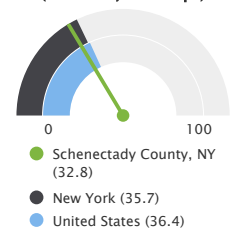
This indicator reports the age adjusted incidence rate (cases per 100,000 population per year) of colon and rectum cancer adjusted to 2000 U.S. standard population age groups (Under age 1, 1-4, 5-9, ..., 80-84, 85 and older).

Within the report area, there were 63 new cases of colon and rectum cancer. This means there is a rate of 32.8 for every 100,000 total population.

Report Area	Estimated Total Population	New Cases (Annual Average)	Cancer Incidence Rate (Per 100,000 Population)
Schenectady County, NY	192,073	63	<b>32.8</b>
New York	24,672,268	8,808	35.7
United States	384,857,142	140,088	36.4

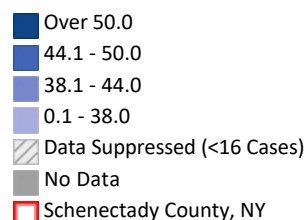
Note: This indicator is compared to the state average.  
Data Source: State Cancer Profiles. 2017-21.

Colon and Rectum Cancer Incidence Rate (Per 100,000 Pop.)



[View larger map](#)

Colon and Rectum Cancer, Incidence Rate (Per 100,000 Pop.) by County, State Cancer Profiles 2017-21

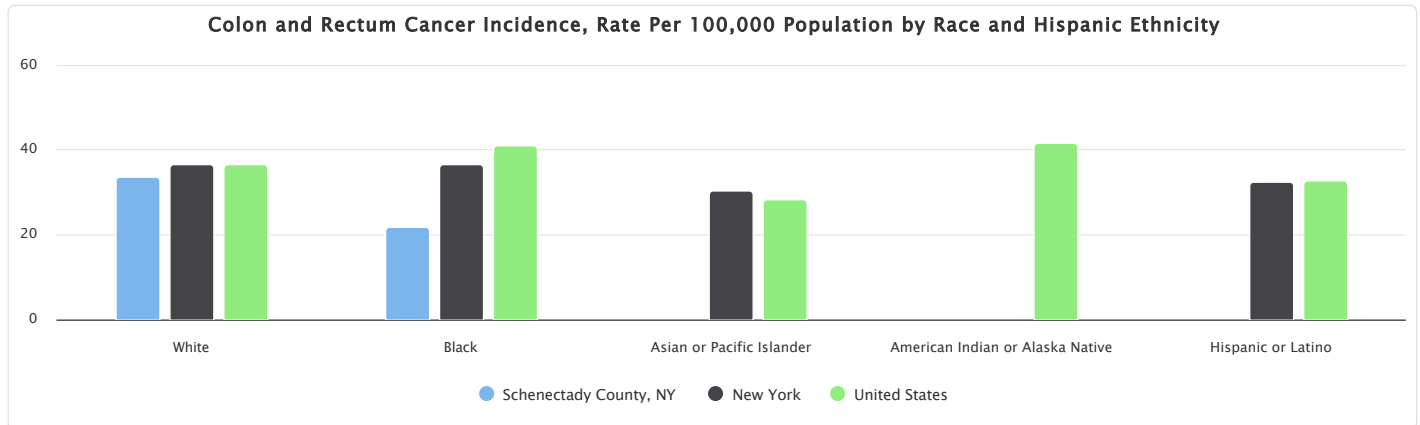


## Colon and Rectum Cancer Incidence, Rate Per 100,000 Population by Race and Hispanic Ethnicity

This indicator reports the age-adjusted colon and rectum cancer incidence rate per 100,000 people for the 5-year period 2017-2021 by race and by Hispanic origin.

Report Area	White	Black	Asian or Pacific Islander	American Indian or Alaska Native	Hispanic or Latino
Schenectady County, NY	33.4	21.8	Suppressed	No data	Suppressed
New York	36.4	36.6	30.2	No data	32.3
United States	36.5	41	28.3	41.4	32.8

Data Source: State Cancer Profiles. 2017-21.



### Colon and Rectum Cancer Incidence (Average Annual New Cases) by Race and Hispanic Ethnicity

This indicator reports the average annual number of new cases of colon and rectum cancer for the 5-year period 2017-2021 by race and by Hispanic origin.

Report Area	White	Black	Asian or Pacific Islander	American Indian or Alaska Native	Hispanic or Latino
Schenectady County, NY	53	3	Suppressed	No data	Suppressed
New York	5,769	1,231	607	No data	1,107
United States	100,065	17,107	6,039	1,103	14,483

Data Source: State Cancer Profiles. 2017-21.

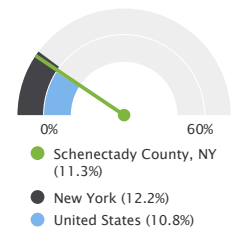
### Chronic Conditions - Alzheimer's Disease (Medicare Population)

This indicator reports the number and percentage of Medicare Fee-for-Service population with Alzheimer's Disease. Data are based upon Medicare administrative enrollment and claims data for Medicare beneficiaries enrolled in the Fee-for-Service program.

Within the report area, there were 1,517 beneficiaries with Alzheimer's Disease based on administrative claims data in the latest report year. This represents 11.3% of the total Medicare Fee-for-Service beneficiaries.

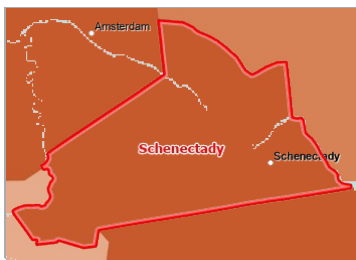
Report Area	Total Medicare Fee-for-Service Beneficiaries	Beneficiaries with Alzheimer's Disease	Beneficiaries with Alzheimer's Disease, Percent
Schenectady County, NY	13,473	1,517	11.3%
New York	1,755,635	214,783	12.2%
United States	33,499,472	3,610,640	10.8%

Percentage of Medicare beneficiaries with Alzheimer's Disease



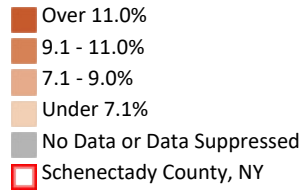
Note: This indicator is compared to the state average.

Data Source: Centers for Medicare & Medicaid Services, Centers for Medicare & Medicaid Services - Chronic Conditions. 2018.



[View larger map](#)

### Beneficiaries with Alzheimer's Disease, Percent by County, CMS 2018

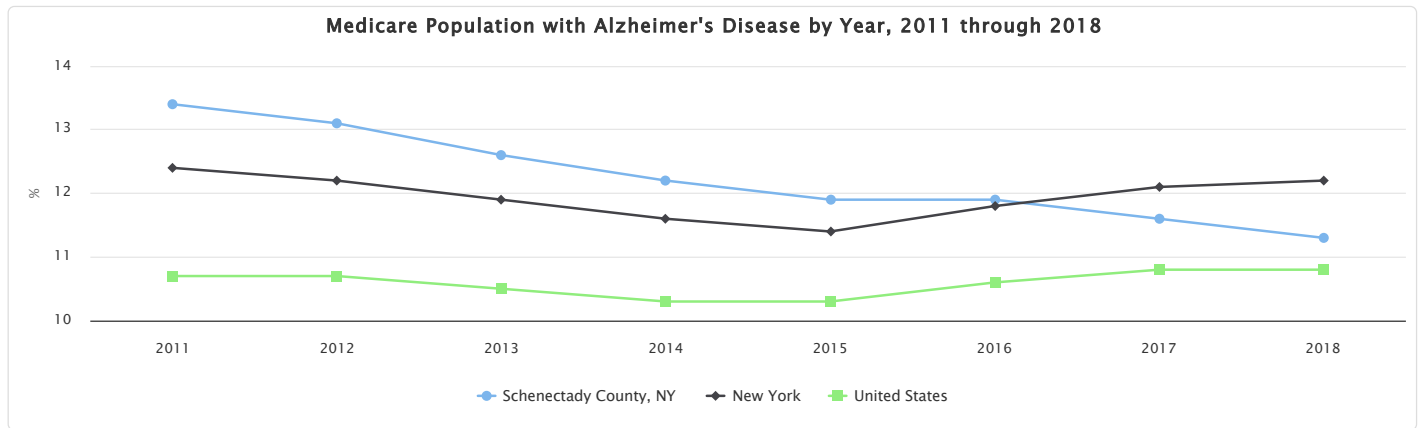


## Medicare Population with Alzheimer's Disease by Year, 2011 through 2018

This indicator reports the percentage of the Medicare Fee-for-Service population with Alzheimer's Disease over time.

Report Area	2011	2012	2013	2014	2015	2016	2017	2018
Schenectady County, NY	13.4%	13.1%	12.6%	12.2%	11.9%	11.9%	11.6%	11.3%
New York	12.4%	12.2%	11.9%	11.6%	11.4%	11.8%	12.1%	12.2%
United States	10.7%	10.7%	10.5%	10.3%	10.3%	10.6%	10.8%	10.8%

Data Source: Centers for Medicare & Medicaid Services, [Centers for Medicare & Medicaid Services - Chronic Conditions](#). 2018.



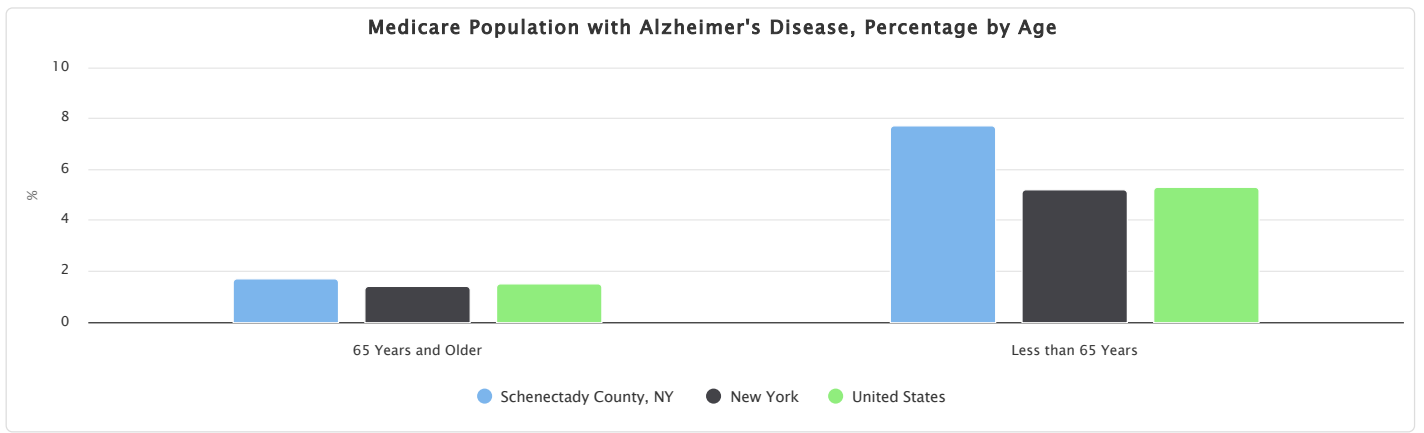
## Medicare Population with Alzheimer's Disease, Percentage by Age

This indicator reports the prevalence of Alzheimer Disease among Medicare beneficiaries by age.

The percentage values could be interpreted as, for example, "Of all the Medicare beneficiaries age 65 years and older within the report area, the proportion with Alzheimer's Disease is (value)."

Report Area	65 Years and Older	Less than 65 Years
Schenectady County, NY	1.7%	7.7%
New York	1.4%	5.2%
United States	1.5%	5.3%

Data Source: Centers for Medicare & Medicaid Services, [Centers for Medicare & Medicaid Services - Chronic Conditions](#). 2018.



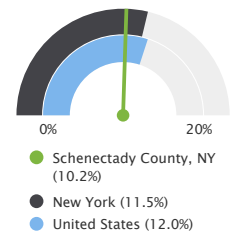
## Chronic Conditions - Diabetes (Adult)

This indicator reports the percentage of adults age 18 and older who reported ever been told by a doctor, nurse, or other health professional that they have diabetes other than diabetes during pregnancy.

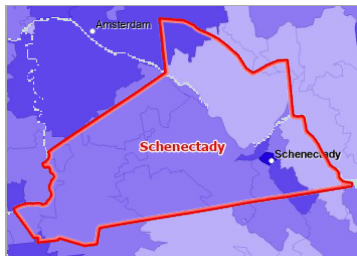
Within the report area there are 10.2% adults age 18 and older with diabetes.

Report Area	Total Population	Adults Age 18+ Ever Diagnosed with Diabetes (Crude)	Adults Age 18+ Ever Diagnosed with Diabetes (Age-Adjusted)
Schenectady County, NY	159,902	10.2%	8.9%
New York	19,571,216	11.5%	10.0%
United States	334,914,895	12.0%	10.3%

percentage of Adults Age 18+ Ever Diagnosed with Diabetes

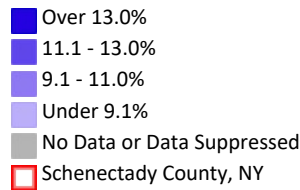


Note: This indicator is compared to the state average.  
Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.



[View larger map](#)

Diabetes, Prevalence Among Adults Age 18+ by ZCTA, CDC BRFSS PLACES Project 2023

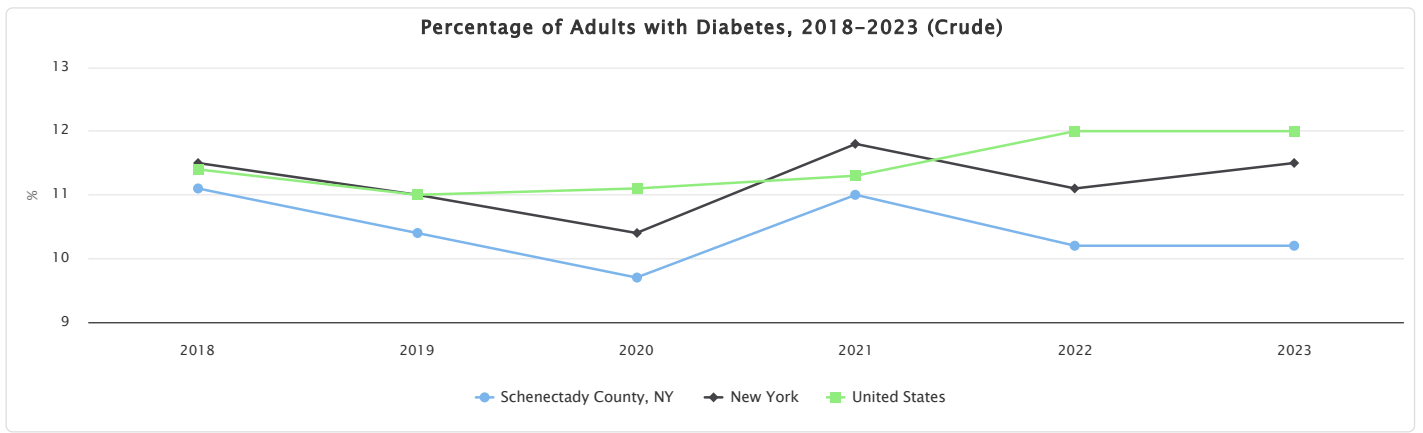


## Percentage of Adults with Diabetes, 2018-2023 (Crude)

The table and chart below display annual trends in the percentage of adults age 18+ who have ever been diagnosed with diabetes.

Report Area	2018	2019	2020	2021	2022	2023
Schenectady County, NY	11.1%	10.4%	9.7%	11.0%	10.2%	10.2%
New York	11.5%	11.0%	10.4%	11.8%	11.1%	11.5%
United States	11.4%	11.0%	11.1%	11.3%	12.0%	12.0%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.



## Chronic Conditions - Heart Disease (Medicare Population)

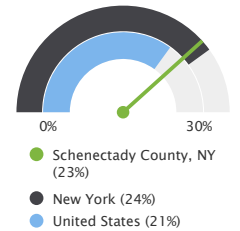
This indicator reports the unsmoothed, age-adjusted rate of ischemic heart disease prevalence for the Medicare Fee-For-Service (FFS) population for the year 2023. Data were sourced from the CMS Mapping Medicare Disparities (MMD) tool.

### Note:

- Data are suppressed when the total population is less than 11.
- Rates are shown as zero when the count is less than 3.

Report Area	FFS Beneficiaries	Ischemic Heart Disease Prevalence, Total	Ischemic Heart Disease Prevalence, Percent
Schenectady County, NY	10,452	2,404	23%
New York	1,548,280	371,587	24%
United States	28,408,800	5,965,848	21%

Ischemic Heart Disease Prevalence, Percent



Note: This indicator is compared to the state average.  
Data Source: Centers for Medicare and Medicaid Services, Mapping Medicare Disparities Tool, 2023.

## Ischemic Heart Disease Prevalence by Gender

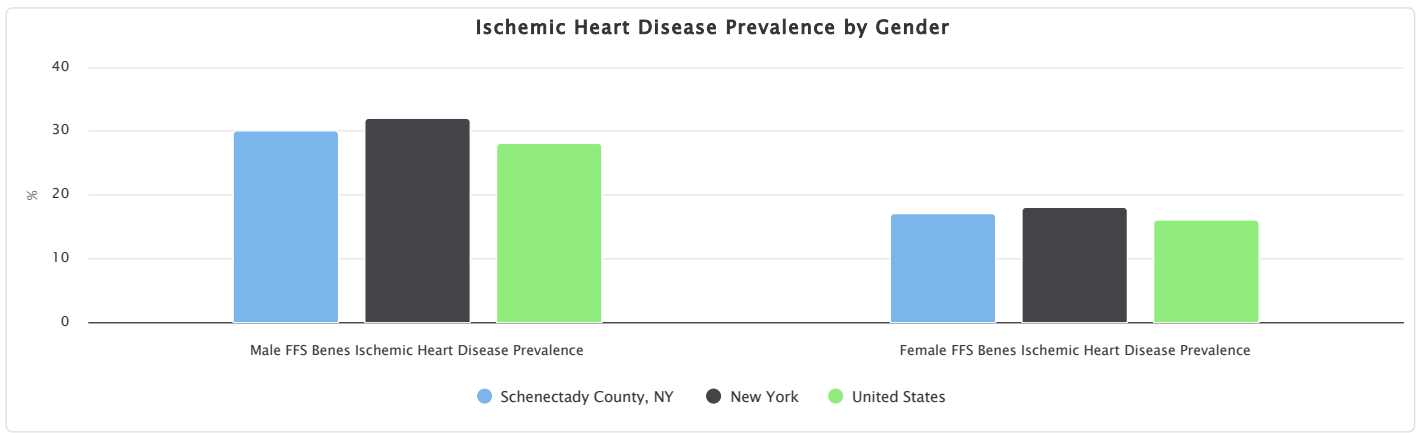
This indicator reports the unsmoothed age-adjusted rate of ischemic heart disease prevalence by gender for Medicare FFS population in 2023.

### Note:

1. Data are suppressed when the total population is less than 11.
2. Rates are shown as zero when the count is less than 3.

Report Area	Male FFS Benes	Female FFS Benes	Male FFS Benes Ischemic Heart Disease Prevalence, Percent	Female FFS Benes Ischemic Heart Disease Prevalence, Percent
Schenectady County, NY	4,833	5,619	30%	17%
New York	686,972	861,308	32%	18%
United States	12,894,754	15,514,046	28%	16%

Data Source: Centers for Medicare and Medicaid Services, Mapping Medicare Disparities Tool, 2023.



## Ischemic Heart Disease Prevalence by Race and Hispanic Ethnicity

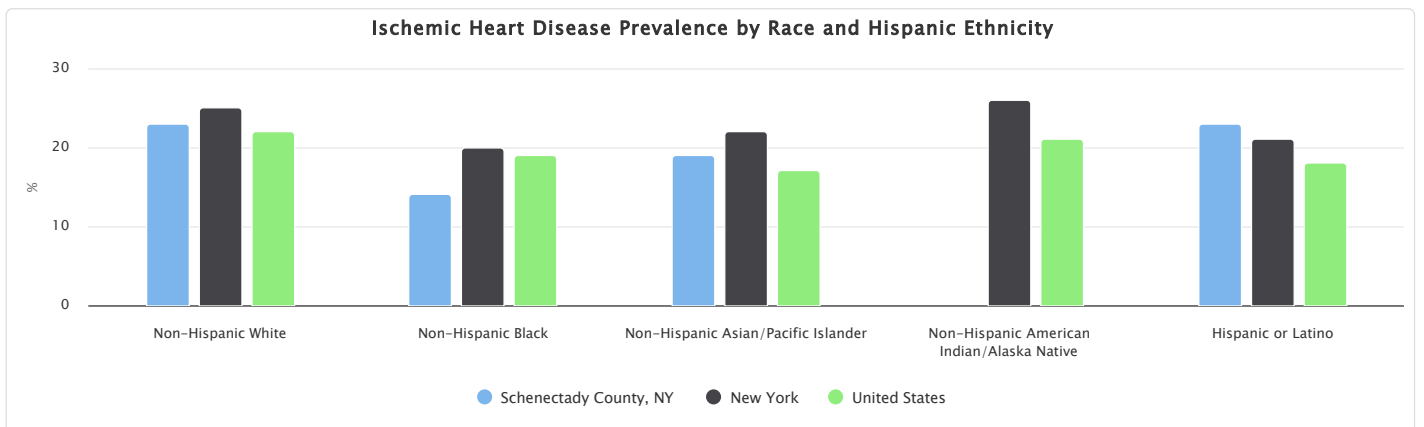
This indicator reports the unsmoothed age-adjusted rate of ischemic heart disease prevalence by race and Hispanic ethnicity for Medicare FFS population in 2023.

**Note:**

1. Data are suppressed when the total population is less than 11.
2. Rates are shown as zero when the count is less than 3.

Report Area	Non-Hispanic White	Non-Hispanic Black	Non-Hispanic Asian/Pacific Islander	Non-Hispanic American Indian/Alaska Native	Hispanic or Latino
Schenectady County, NY	23%	14%	19%	No data	23%
New York	25%	20%	22%	26%	21%
United States	22%	19%	17%	21%	18%

Data Source: Centers for Medicare and Medicaid Services, [Mapping Medicare Disparities Tool](#), 2023.



## Ischemic Heart Disease Prevalence by Dual Eligibility Status

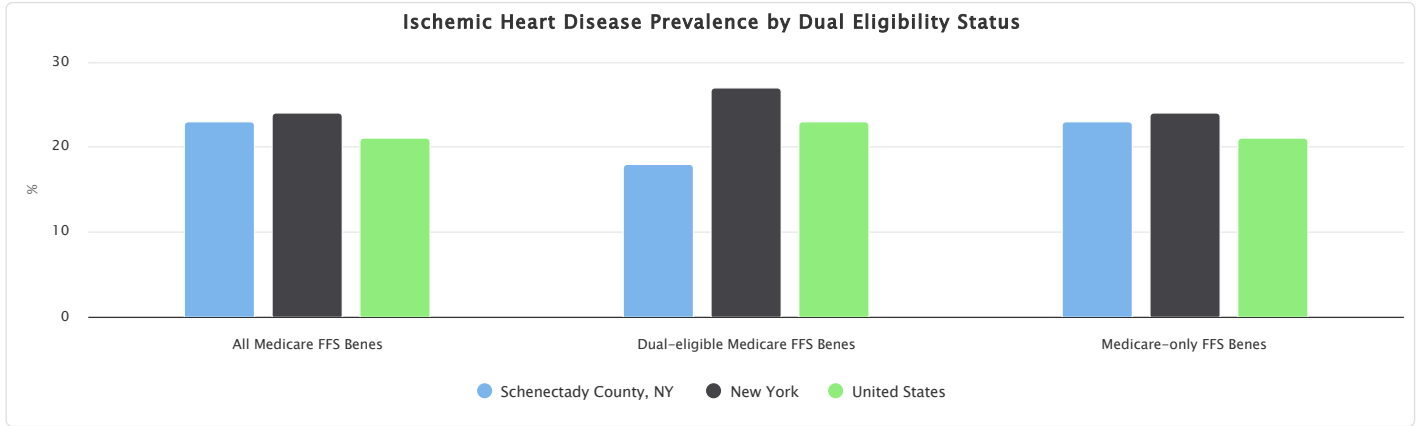
This indicator reports the unsmoothed age-adjusted rate of ischemic heart disease prevalence by dual eligibility status for Medicare FFS population in 2023.

**Note:**

1. Data are suppressed when the total population is less than 11.
2. Rates are shown as zero when the count is less than 3.

Report Area	All Medicare FFS Benes	Dual-eligible Medicare FFS Benes	Medicare-only FFS Benes
Schenectady County, NY	23%	18%	23%
New York	24%	27%	24%
United States	21%	23%	21%

Data Source: Centers for Medicare and Medicaid Services, [Mapping Medicare Disparities Tool](#). 2023.



### Chronic Conditions - Obesity (Adult)

This indicator reports the percentage of adults age 18 and older who are obese, defined as having a body mass index (BMI) =30.0 kg/m<sup>2</sup>, calculated from self-reported weight and height.

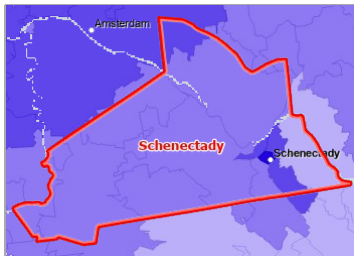
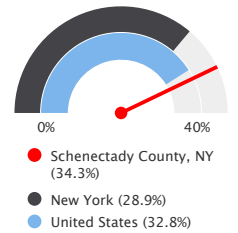
Within the report area there were 34.3% adults age 18 and older with obesity.

Report Area	Total Population	Adults Age 18+ with Obesity (Crude)	Adults Age 18+ with Obesity (Age-Adjusted)
Schenectady County, NY	159,902	<b>34.3%</b>	34.6%
New York	19,571,216	28.9%	29.0%
United States	334,914,895	32.8%	32.9%

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, [Behavioral Risk Factor Surveillance System](#). Accessed via the [PLACES Data Portal](#). 2023.

percentage of Adults Age 18+ with Obesity



[View larger map](#)

Obese (BMI >= 30), Prevalence Among Adults Age 18+ by ZCTA, CDC BRFSS PLACES Project 2023

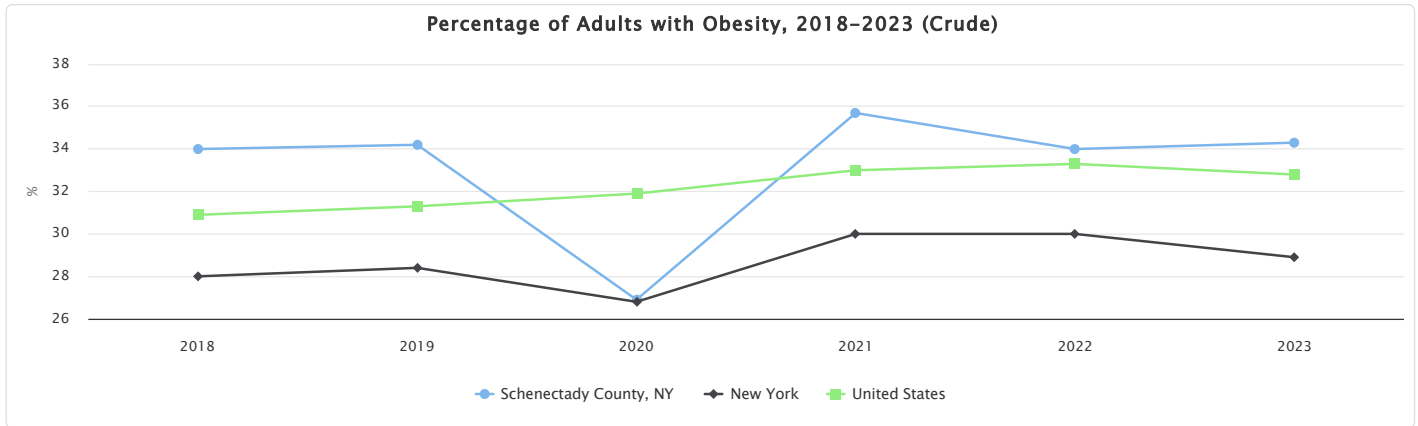
- Over 40.0%
- 35.1 - 40.0%
- 30.1 - 35.0%
- Under 30.1%
- No Data or Data Suppressed
- Schenectady County, NY

### Percentage of Adults with Obesity, 2018-2023 (Crude)

The table and chart below display annual trends in the percentage of adults age 18+ who are obese.

Report Area	2018	2019	2020	2021	2022	2023
Schenectady County, NY	34.0%	34.2%	26.9%	35.7%	34.0%	34.3%
New York	28.0%	28.4%	26.8%	30.0%	30.0%	28.9%
United States	30.9%	31.3%	31.9%	33.0%	33.3%	32.8%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.



## Chronic Obstructive Pulmonary Disease

This indicator reports the percentage of adults age 18 and older who reported ever having been told by a doctor, nurse, or other health professional that they had chronic obstructive pulmonary disease (COPD), emphysema, or chronic bronchitis.

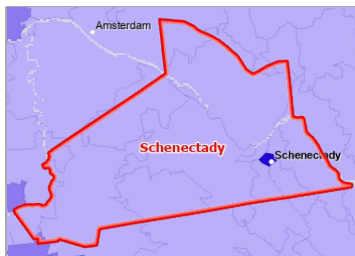
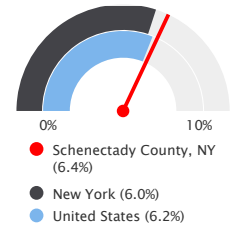
Within the report area, 6.4% of adults age 18 and older who reported having chronic obstructive pulmonary disease.

Report Area	Total Population	Adults Age 18+ Ever Diagnosed with COPD(Crude)	Adults Age 18+ with COPD (Age-Adjusted)
Schenectady County, NY	159,902	6.4%	5.6%
New York	19,571,216	6.0%	5.2%
United States	334,914,895	6.2%	5.3%

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.

percentage of Adults Age 18+ Ever Diagnosed with Chronic Lower Respiratory Disease



[View larger map](#)

Chronic Obstructive Pulmonary Disease, Percent of Adults Age 18+ by ZCTA, CDC BRFSS PLACES Project 2023

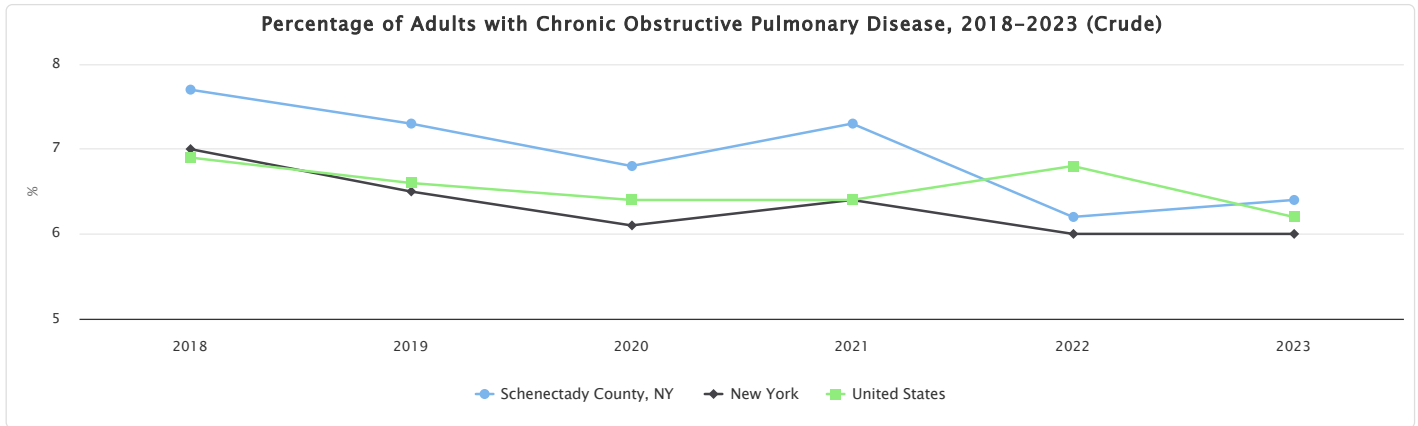
- Over 10.0%
- 9.1 - 10.0%
- 8.1 - 9.0%
- Under 8.1%
- No Data or Data Suppressed
- Schenectady County, NY

## Percentage of Adults with Chronic Obstructive Pulmonary Disease, 2018-2023 (Crude)

The table and chart below display annual trends in the percentage of adults age 18+ who have ever been diagnosed with chronic obstructive pulmonary disease (COPD).

Report Area	2018	2019	2020	2021	2022	2023
Schenectady County, NY	7.7%	7.3%	6.8%	7.3%	6.2%	6.4%
New York	7.0%	6.5%	6.1%	6.4%	6.0%	6.0%
United States	6.9%	6.6%	6.4%	6.4%	6.8%	6.2%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.



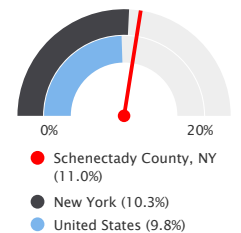
## Current Asthma

This indicator reports the percentage of adults age 18 and older who answered “yes” to both of the following questions: “Have you ever been told by a doctor, nurse, or other health professional that you have asthma?” and the question “Do you still have asthma?”

Within the report area, 11.0% of adults age 18+ reported having asthma.

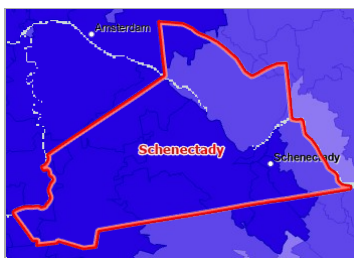
Report Area	Total Population	Adults Age 18+ with Asthma (Crude)	Adults Age 18+ with Asthma (Age-Adjusted)
Schenectady County, NY	159,902	<b>11.0%</b>	11.1%
New York	19,571,216	10.3%	10.4%
United States	334,914,895	9.8%	9.8%

percentage of Adults Age 18+ with Current Asthma



Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.



[View larger map](#)

Asthma, Prevalence Among Adults Age 18+ by ZCTA, CDC BRFSS PLACES Project 2023

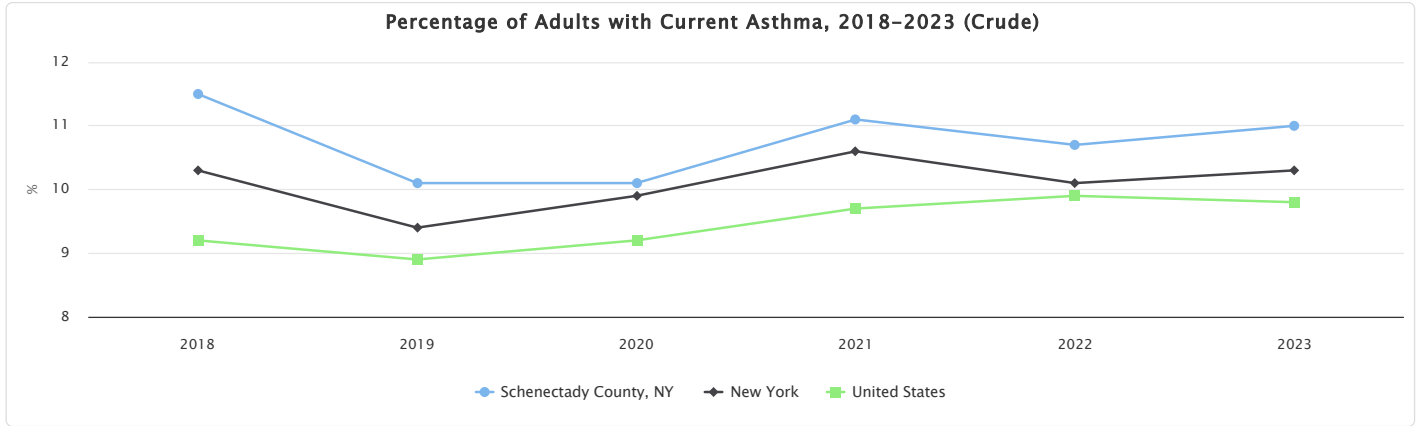
- Over 11.0%
- 10.1 - 11.0%
- 9.1 - 10.0%
- Under 9.1%
- No Data or Data Suppressed
- Schenectady County, NY

## Percentage of Adults with Current Asthma, 2018-2023 (Crude)

The table and chart below display annual trends in the percentage of adults age 18+ who have are currently diagnosed with asthma.

Report Area	2018	2019	2020	2021	2022	2023
Schenectady County, NY	11.5%	10.1%	10.1%	11.1%	10.7%	11.0%
New York	10.3%	9.4%	9.9%	10.6%	10.1%	10.3%
United States	9.2%	8.9%	9.2%	9.7%	9.9%	9.8%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.



## Depression

This indicator reports the percentage of adults age 18 and older who reported having been told by a doctor, nurse, or other health professional that they had depressive disorder.

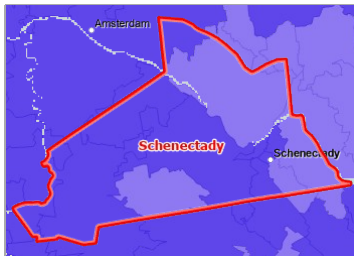
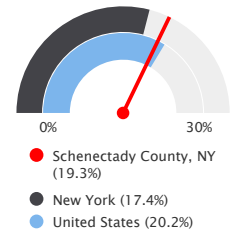
Within the report area, 19.3% of adults age 18 and older reported having depressive disorder.

Report Area	Total Population	Adults Age 18+ with Depression (Crude)	Adults Age 18+ with Depression (Age-Adjusted)
Schenectady County, NY	159,902	<b>19.3%</b>	19.9%
New York	19,571,216	17.4%	18.0%
United States	334,914,895	20.2%	20.7%

Note: This indicator is compared to the state average.

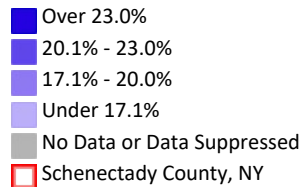
Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.

percentage of Adults Age 18+ with Depression



[View larger map](#)

Depression, Prevalence Among Adults Age 18+ by ZCTA, CDC BRFSS PLACES Project 2023

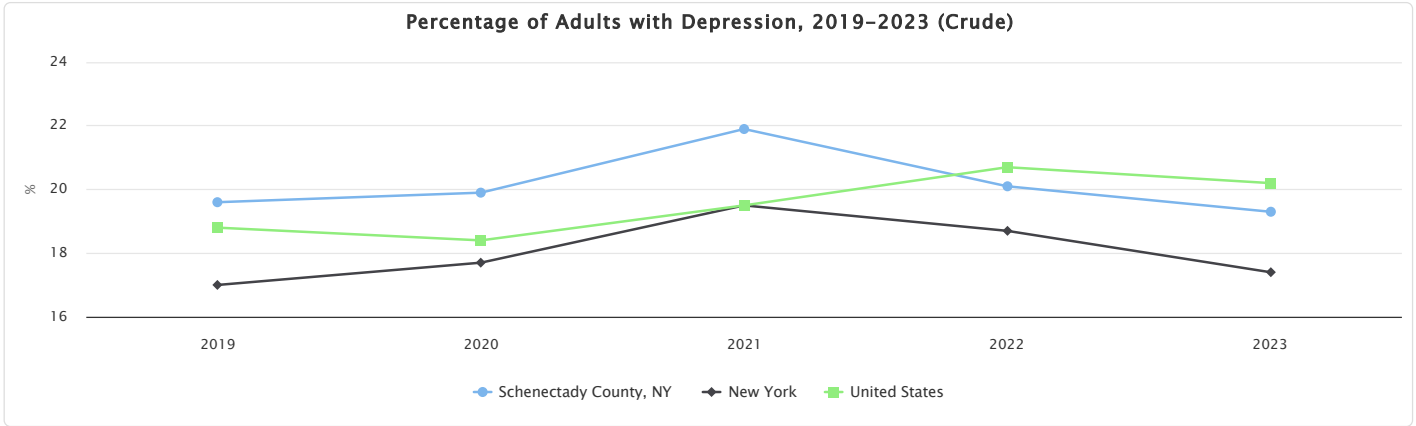


## Percentage of Adults with Depression, 2019-2023 (Crude)

The table and chart below display annual trends in the percentage of adults age 18+ who have ever been diagnosed with depression.

Report Area	2019	2020	2021	2022	2023
Schenectady County, NY	19.6%	19.9%	21.9%	20.1%	19.3%
New York	17.0%	17.7%	19.5%	18.7%	17.4%
United States	18.8%	18.4%	19.5%	20.7%	20.2%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.



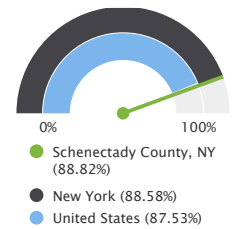
### Diabetes Management (Hemoglobin A1c Test)

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. Data is obtained from the Dartmouth Atlas Data - Selected Primary Care Access and Quality Measures (2008-2019). This indicator is relevant because engaging in preventive behaviors allows for early detection and treatment of health problems. This indicator can also highlight a lack of access to preventive care, a lack of health knowledge, insufficient provider outreach, and/or social barriers preventing utilization of services.

As of year 2019, 1,057 or 88.82% Medicare enrollees with diabetes have had an annual exam out of 1,190 Medicare enrollees with diabetes in the report area.

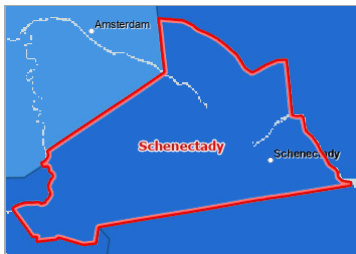
Report Area	Medicare Enrollees with Diabetes	Medicare Enrollees with Diabetes with Annual Exam	Medicare Enrollees with Diabetes with Annual Exam, Percent
Schenectady County, NY	1,190	1,057	88.82%
New York	162,543	143,983	88.58%
United States	6,792,740	5,945,988	87.53%

Percentage of Medicare Enrollees with Diabetes with Annual A1C Test



Note: This indicator is compared to the state average.

Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, Dartmouth Atlas of Health Care. 2019.



[View larger map](#)

Patients with Annual HA1C Test (Diabetes), Percent of Medicare Enrollees with Diabetes by County, Dartmouth Atlas 2019

- Over 95%
- 90.1 - 95%
- 85.1 - 90%
- 80.1 - 85%
- Under 80%
- No Data or Data Suppressed
- Schenectady County, NY

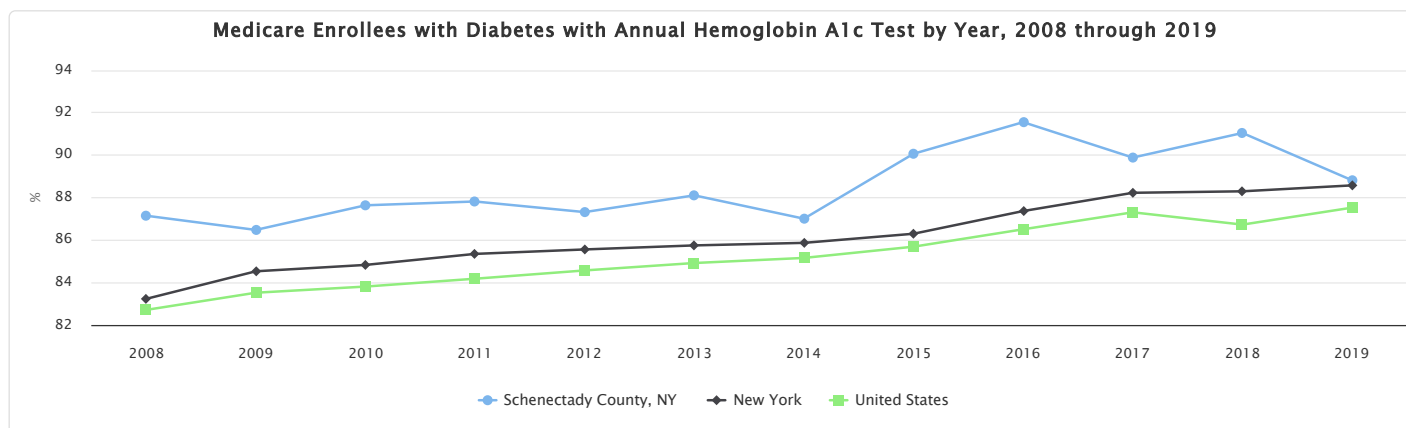
### Medicare Enrollees with Diabetes with Annual Hemoglobin A1c Test by Year, 2008 through 2019

This indicator reports the percentage of Medicare enrollees with diabetes who have annual Hemoglobin A1c Test from 2008 to 2019.

*Note: The Dartmouth Atlas Data team has noted substantial decreases in hemoglobin A1c testing in several HRRs in Montana and North Dakota between 2017 and 2018. A conclusive explanation cannot be established thus far for these changes, especially in smaller rural areas; caution should be used in interpreting longitudinal data for the measure.*

Report Area	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Schenectady County, NY	87.15%	86.48%	87.64%	87.82%	87.32%	88.11%	87.01%	90.07%	91.56%	89.89%	91.05%	88.82%
New York	83.23%	84.53%	84.83%	85.35%	85.56%	85.75%	85.87%	86.30%	87.37%	88.23%	88.30%	88.58%
United States	82.71%	83.52%	83.81%	84.18%	84.57%	84.92%	85.16%	85.69%	86.51%	87.31%	86.73%	87.53%

Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, *Dartmouth Atlas of Health Care*. 2019.



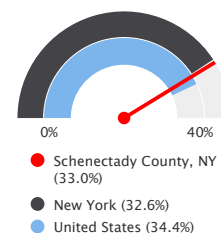
## High Blood Pressure

This indicator reports the percentage of adults age 18 and older who reported ever having been told by a doctor, nurse, or other health professional that they have high blood pressure (HTN). Women who were told high blood pressure only during pregnancy and those who were told they had borderline hypertension were not included.

Within the report area, 33.0% of adults age 18+ reported having high blood pressure.

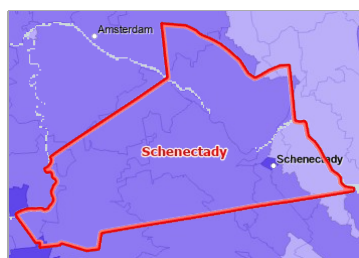
Report Area	Total Population	Adults Age 18+ with HTN (Crude)	Adults Age 18+ with HTN (Age-Adjusted)
Schenectady County, NY	159,902	<b>33.0%</b>	29.8%
New York	19,571,216	32.6%	29.2%
United States	334,914,895	34.4%	30.7%

percentage of Adults Age 18+ with High Blood Pressure



*Note: This indicator is compared to the state average.*

Data Source: Centers for Disease Control and Prevention, *Behavioral Risk Factor Surveillance System*. Accessed via the *PLACES Data Portal*. 2023.



[View larger map](#)

### High Blood Pressure, Prevalence Among Adults Age 18+ by ZCTA, CDC BRFS PLACES Project 2023

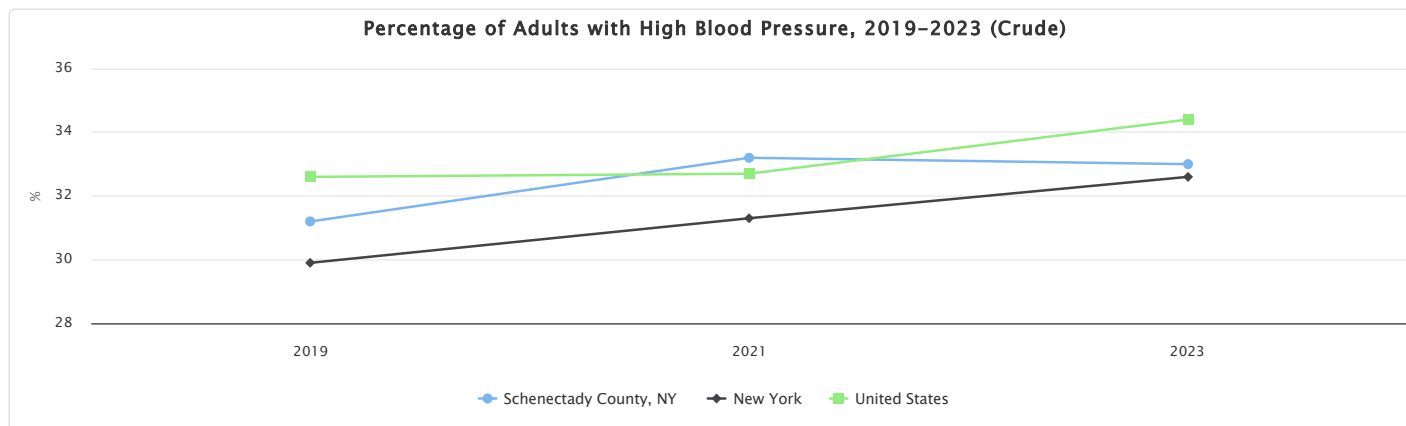
- Over 42.0%
- 37.1% - 42.0%
- 32.1% - 37.0%
- Under 32.1%
- No Data or Data Suppressed
- Schenectady County, NY

## Percentage of Adults with High Blood Pressure, 2019-2023 (Crude)

The table and chart below display annual trends in the percentage of adults age 18+ who have ever been diagnosed with high blood pressure.

Report Area	2019	2021	2023
Schenectady County, NY	31.2%	33.2%	33.0%
New York	29.9%	31.3%	32.6%
United States	32.6%	32.7%	34.4%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.



## HIV Prevalence

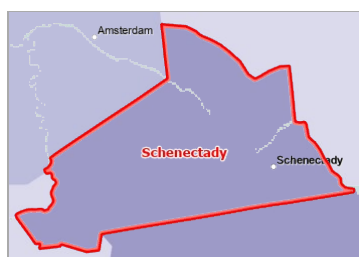
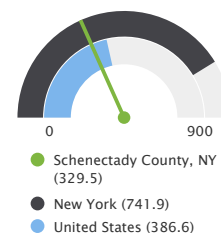
This indicator reports the prevalence of HIV in the report area as a rate per 100,000 population over age 13. The data reflect persons living with diagnosed HIV infection at the end of the latest reporting year, or persons living with infection ever classified as stage 3 (AIDS) at the end of the latest report year.

Report Area	Population Age 13+	Population with HIV / AIDS	Population with HIV / AIDS, Rate per 100,000 Pop.
Schenectady County, NY	135,973	448	329.5
New York	16,841,398	124,940	741.9
United States	282,494,087	1,092,023	386.6

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. 2022.

Population with HIV / AIDS, Rate per 100,000 Pop.



[View larger map](#)

HIV Prevalence, Rate (Per 100,000 Pop.) by County, CDC NCHHSTP 2022

- Over 300.0
- 150.1 - 300.0
- 100.0 - 150.0
- Under 100.0
- No Data or Data Suppressed
- Schenectady County, NY

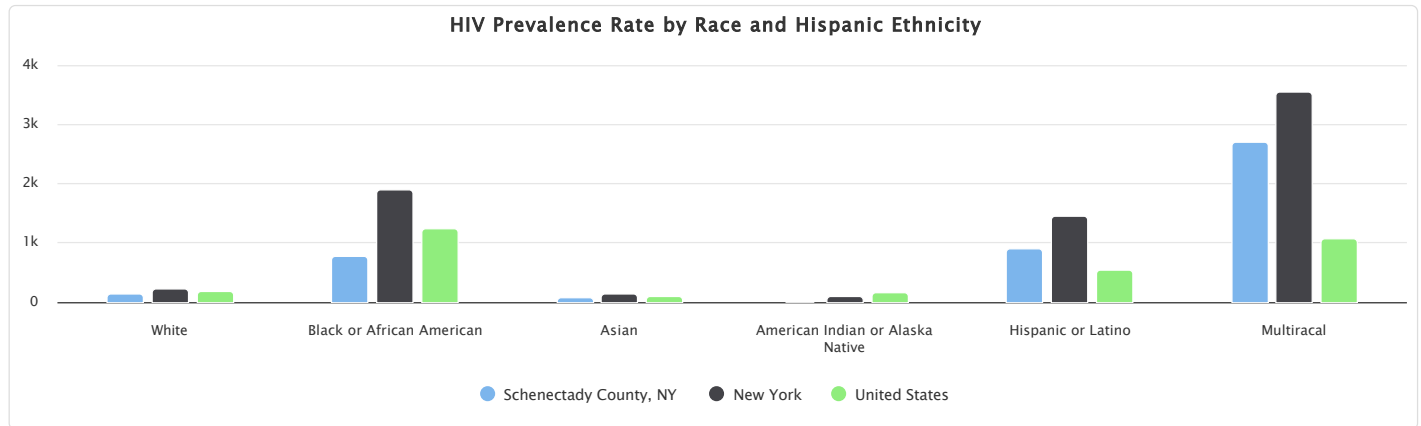
## HIV Prevalence Rate by Race and Hispanic Ethnicity

The table below displays trends in the prevalence rate for HIV/AIDS for the latest report year by population race and Hispanic

ethnicity.

Report Area	White	Black or African American	Asian	American Indian or Alaska Native	Hispanic or Latino	Multiracial
Schenectady County, NY	136.6	769.5	82.9	0.0	890.9	2,705.0
New York	228.3	1,896.5	143.6	90.4	1,452.4	3,534.7
United States	178.7	1,243.8	99.3	160.6	533.6	1,078.8

Data Source: Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. 2022.

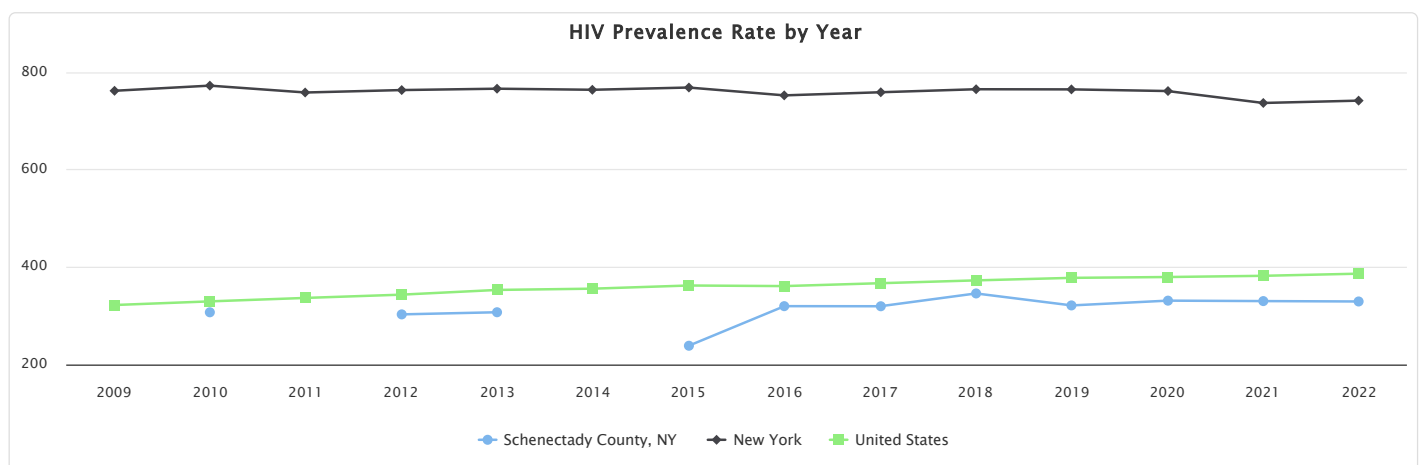


## HIV Prevalence Rate by Year

The table below displays trends in the prevalence rate for HIV/AIDS for years 2009 through 2022. Rates are expressed per 100,000 population age 13 and older.

Report Area	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
Schenectady County, NY	No data	307.3	No data	303.0	307.4	No data	238.6	319.9	319.7	346.0	321.4	331.2	330.3	329.5
New York	762.1	772.7	758.6	763.6	766.4	764.2	768.8	752.7	759.1	765.3	765.0	761.6	737.1	741.9
United States	322.2	329.7	336.8	343.5	353.2	355.8	362.3	361.1	367.0	372.8	378.0	379.7	382.2	386.6

Data Source: Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. 2022.



## Hospitalizations - Preventable Conditions

This indicator reports the unsmoothed, age-adjusted rate of Prevention Quality Overall Composite (PQI #90) among the Medicare Fee-For-Service (FFS) population for the year 2023. Data were sourced from the CMS Mapping Medicare Disparities (MMD) tool.

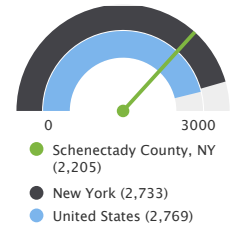
**Note:**

- Data are suppressed when the total population is less than 11.

- Rates are shown as zero when the count is less than 3.

Report Area	FFS Beneficiaries	Prevention Quality Overall Composite (PQI #90), Total	Prevention Quality Overall Composite (PQI #90), Rate per 100,000
Schenectady County, NY	10,452	230	2,205
New York	1,548,280	42,314	2,733
United States	28,408,800	786,640	2,769

Prevention Quality Overall Composite (PQI #90), Rate per 100,000



Note: This indicator is compared to the state average.  
Data Source: Centers for Medicare and Medicaid Services, Mapping Medicare Disparities Tool, 2023.

## Prevention Quality Overall Composite (PQI #90) by Gender

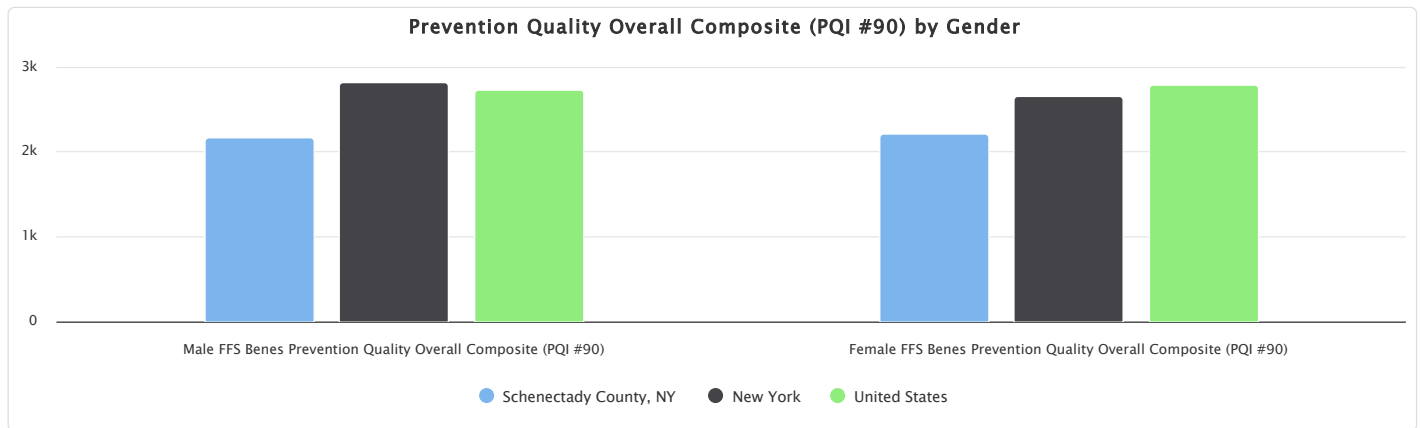
This indicator reports the unsmoothed age-adjusted rate of Prevention Quality Overall Composite (PQI #90) by gender for Medicare FFS population in 2023.

Note:

1. Data are suppressed when the total population is less than 11.
2. Rates are shown as zero when the count is less than 3.

Report Area	Male FFS Benes	Female FFS Benes	Male FFS Benes Prevention Quality Overall Composite (PQI #90), Rate per 100,000	Female FFS Benes Prevention Quality Overall Composite (PQI #90), Rate per 100,000
Schenectady County, NY	4,833	5,619	2,165	2,209
New York	686,972	861,308	2,810	2,659
United States	12,894,754	15,514,046	2,730	2,793

Data Source: Centers for Medicare and Medicaid Services, Mapping Medicare Disparities Tool, 2023.



## Prevention Quality Overall Composite (PQI #90) by Race and Hispanic Ethnicity

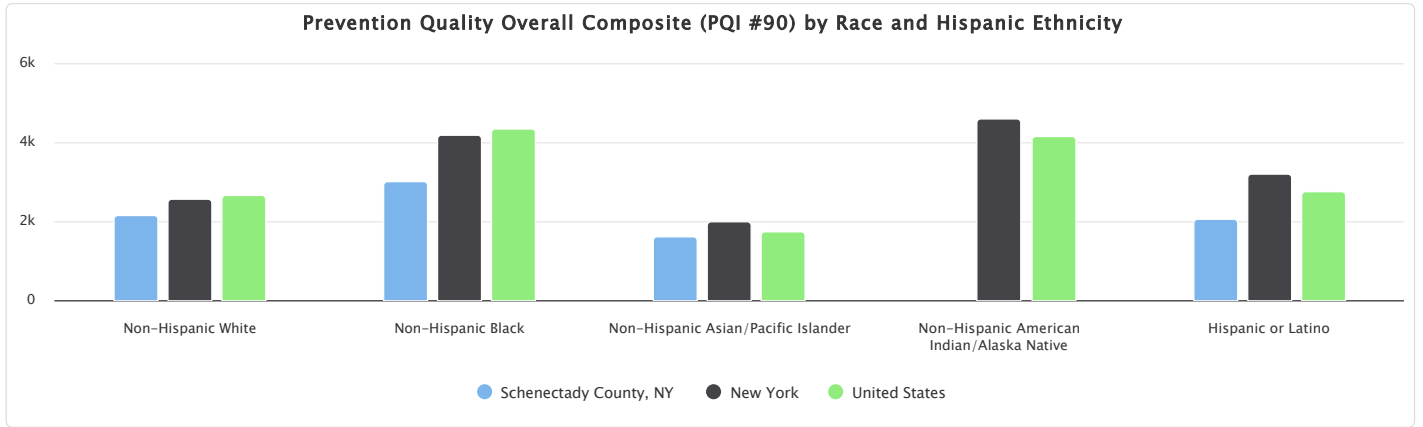
This indicator reports the unsmoothed age-adjusted rate of Prevention Quality Overall Composite (PQI #90) per 100,000 by race and Hispanic ethnicity for Medicare FFS population in 2023.

Note:

1. Data are suppressed when the total population is less than 11.
2. Rates are shown as zero when the count is less than 3.

Report Area	Non-Hispanic White	Non-Hispanic Black	Non-Hispanic Asian/Pacific Islander	Non-Hispanic American Indian/Alaska Native	Hispanic or Latino
Schenectady County, NY	2,129	2,995	1,603	No data	2,045
New York	2,542	4,182	1,970	4,594	3,194
United States	2,651	4,339	1,726	4,127	2,756

Data Source: Centers for Medicare and Medicaid Services, *Mapping Medicare Disparities Tool*. 2023.



## Lack of Prenatal Care

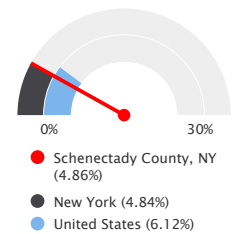
This indicator reports the percentage of women who did not obtain prenatal care until the 7th month (or later) of pregnancy or who didn't have any prenatal care, as of all who gave birth during the three year period from 2017 to 2019. This indicator is relevant because engaging in prenatal care decreases the likelihood of maternal and infant health risks. This indicator can also highlight a lack of access to preventive care, a lack of health knowledge, insufficient provider outreach, and/or social barriers preventing utilization of services.

Within the report area, of the total births of 5,452 during 2017 and 2019, births with late or no prenatal care was 265 or 4.86%. This is lower than the national average rate of 6.12%.

*Note: Data are suppressed for counties with population less than 100,000 or when the birth counts represent fewer than ten persons.*

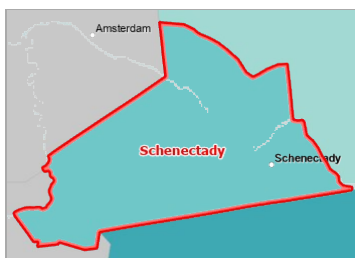
Report Area	Total Births	Births with Late/No Care	% of Births with Late/No Care
Schenectady County, NY	5,452	265	<b>4.86%</b>
New York	677,514	32,799	4.84%
United States	11,394,752	697,581	6.12%

percentage of Pregnant Wome with Late or No Prenatal Car



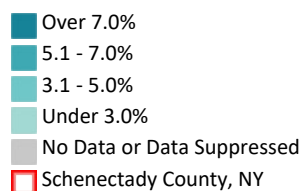
*Note: This indicator is compared to the state average.*

Data Source: Centers for Disease Control and Prevention, *CDC - National Vital Statistics System*. Accessed via *CDC WONDER*. Centers for Disease Control and Prevention, *Wide-Ranging Online Data for Epidemiologic Research*. 2017-19.



[View larger map](#)

## Mothers with Late or No Prenatal Care, Percent by County, CDC NVSS 2017-19

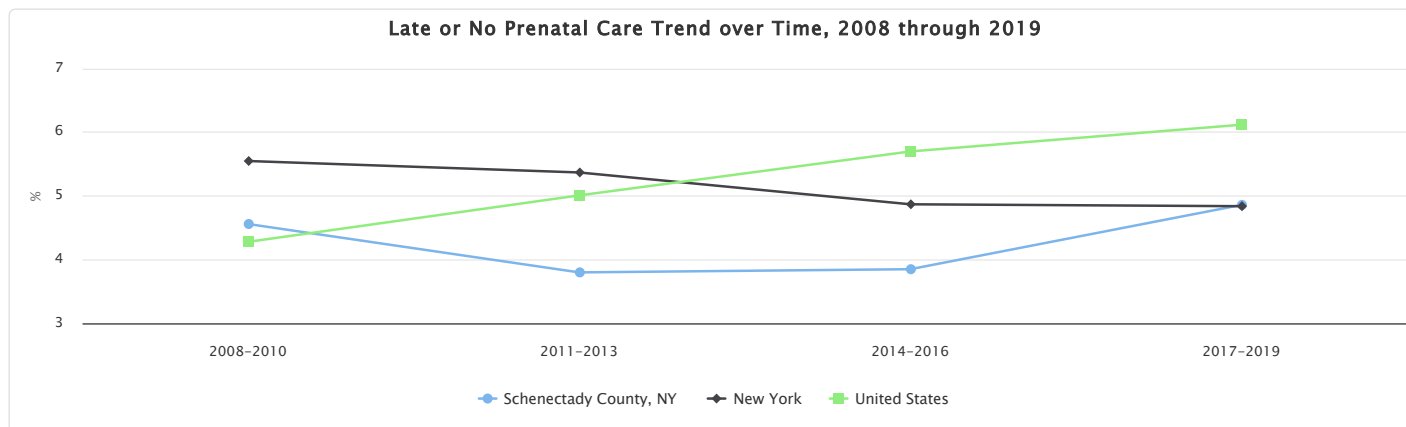


## Late or No Prenatal Care Trend over Time, 2008 through 2019

This indicator reports the 2008 to 2019 three-year period trend of the percentage of women who did not obtain prenatal care until the 7th month (or later) of pregnancy or who didn't have any prenatal care, as of all who gave birth during the relevant time period.

Report Area	2008-2010	2011-2013	2014-2016	2017-2019
Schenectady County, NY	4.56%	3.80%	3.85%	4.86%
New York	5.55%	5.37%	4.87%	4.84%
United States	4.28%	5.01%	5.70%	6.12%

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. Centers for Disease Control and Prevention, Wide-Ranging Online Data for Epidemiologic Research. 2017-19.



## Life Expectancy

This indicator reports the average life expectancy at birth (age-adjusted to 2000 standard). Data were from the National Center for Health Statistics - Mortality Files (2020-2022) and are used for the 2025 County Health Rankings.

Of the total 145,855 population in the report area, the average life expectancy during the 2020-22 three-year period is 77.1, which is lower than the statewide rate of 79.4.

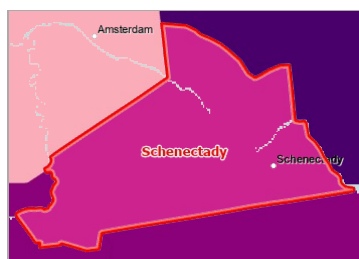
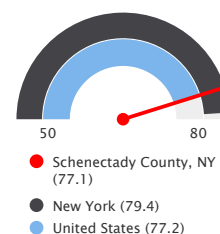
Note: Data are suppressed for counties with fewer than 5,000 population-years-at-risk in the time frame.

Report Area	Total Population	Life Expectancy at Birth (2020-22)
Schenectady County, NY	145,855	77.1
New York	18,139,415	79.4
United States	308,455,738	77.2

Note: This indicator is compared to the state average.

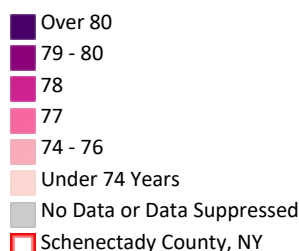
Data Source: University of Wisconsin Population Health Institute, County Health Rankings. 2020-2022.

Life Expectancy at Birth, 2020-22



[View larger map](#)

Life Expectancy, Years by County, CDC NVSS 2020-2022

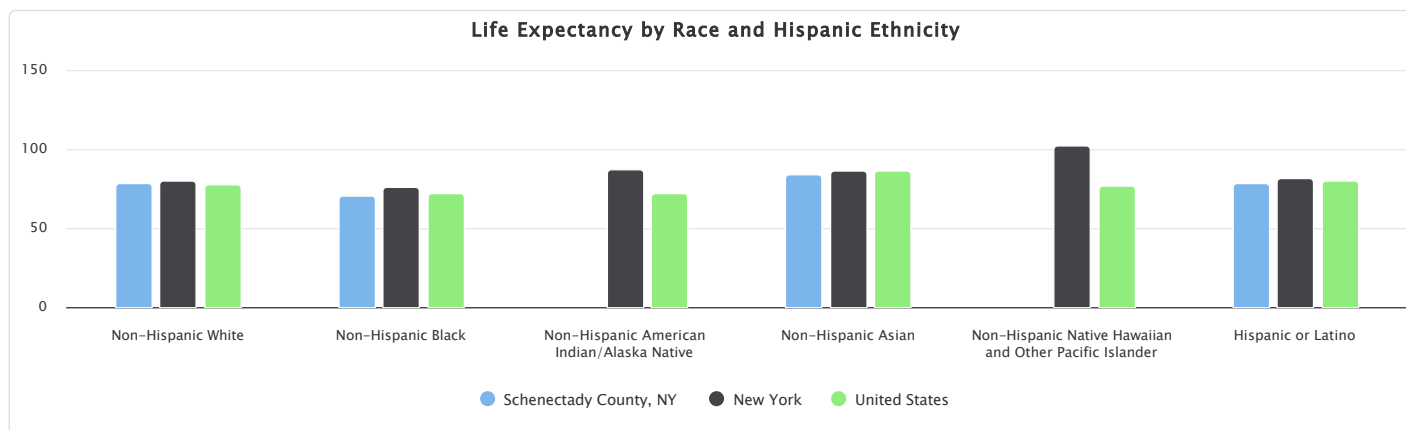


## Life Expectancy by Race and Hispanic Ethnicity

This indicator reports the 2020-2022 three-year average number of years a person can expect to live by race and Hispanic ethnicity.

Report Area	Non-Hispanic White	Non-Hispanic Black	Non-Hispanic American Indian/Alaska Native	Non-Hispanic Asian	Non-Hispanic Native Hawaiian and Other Pacific Islander	Hispanic or Latino
Schenectady County, NY	78.0	70.6	No data	84.1	No data	78.0
New York	79.6	75.4	87.1	86.2	101.6	81.0
United States	77.2	72.1	71.8	86.0	76.4	79.7

Data Source: University of Wisconsin Population Health Institute, [County Health Rankings](#). 2020-2022.



## Low Birth Weight

This indicator reports the percentage of live births where the infant weighed less than 2,500 grams (approximately 5 lbs., 8 oz.). These data are reported for a 7-year aggregated time period. Data were from the National Center for Health Statistics - Natality Files (2017-2023) and are used for the 2025 County Health Rankings.

Within the report area, there were 1,151 infants born with low birth weight. This represents 9.2% of the total live births.

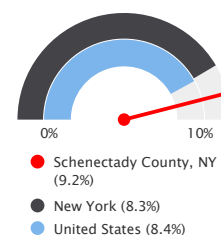
*Note: Data are suppressed for counties with fewer than 10 low birthweight births in the reporting period.*

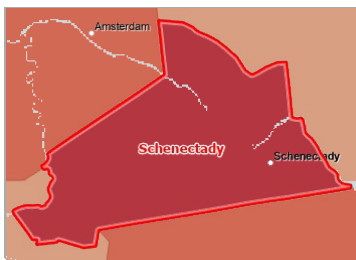
Report Area	Total Live Births	Low Birthweight Births	Low Birthweight Births, Percentage
Schenectady County, NY	12,554	1,151	9.2%
New York	1,506,167	124,445	8.3%
United States	25,914,651	2,176,957	8.4%

Note: This indicator is compared to the state average.

Data Source: University of Wisconsin Population Health Institute, [County Health Rankings](#). 2017-2023.

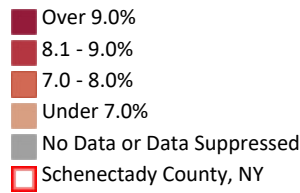
percentage of Infants with Low Birthweight: %





[View larger map](#)

### Low Birthweight, Percentage of Live Births by County, CDC NVSS 2017-2023

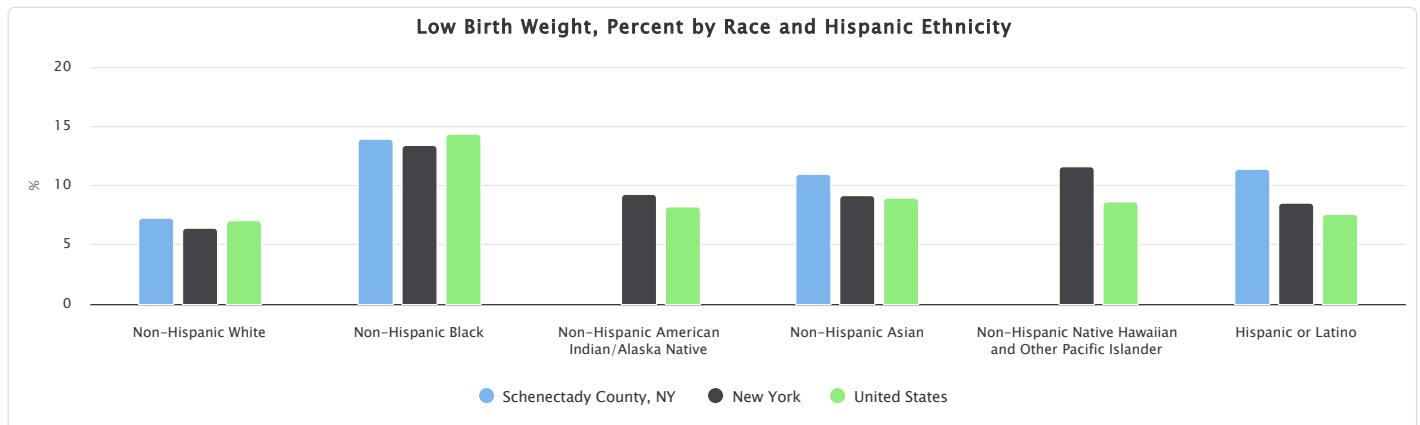


## Low Birth Weight, Percent by Race and Hispanic Ethnicity

This indicator reports the 2017-2023 seven-year average percentage of live births with low birthweight (< 2,500 grams) by race and by Hispanic origin.

Report Area	Non-Hispanic White	Non-Hispanic Black	Non-Hispanic American Indian/Alaska Native	Non-Hispanic Asian	Non-Hispanic Native Hawaiian and Other Pacific Islander	Hispanic or Latino
Schenectady County, NY	7.3%	13.9%	No data	10.9%	No data	11.4%
New York	6.4%	13.4%	9.3%	9.2%	11.6%	8.5%
United States	7.0%	14.3%	8.2%	8.9%	8.6%	7.6%

Data Source: University of Wisconsin Population Health Institute, [County Health Rankings](#), 2017-2023.



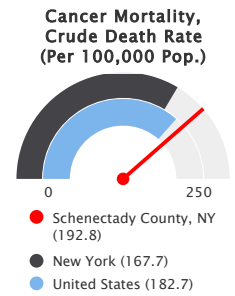
## Mortality - Cancer

This indicator reports the 2019-2023 five-year average rate of death due to malignant neoplasm (cancer) per 100,000 population. Figures are reported as crude rates. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because cancer is a leading cause of death in the United States.

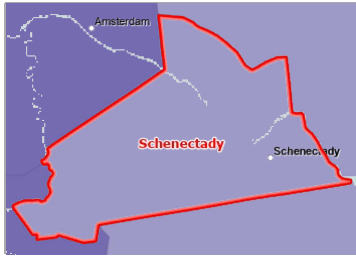
Within the report area, there are a total of 1,521 deaths due to cancer. This represents a crude death rate of 192.8 per every 100,000 total population.

*Note: Data are suppressed for counties with fewer than 20 deaths in the time frame.*

Report Area	Total Population, 2019-2023 Average	Five Year Total Deaths, 2019-2023 Total	Crude Death Rate (Per 100,000 Population)
Schenectady County, NY	157,748	1,521	<b>192.8</b>
New York	19,574,923	164,145	167.7
United States	331,563,969	3,028,887	182.7

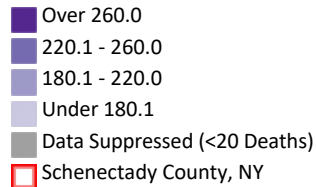


Note: This indicator is compared to the state average.  
 Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER, 2019-2023.



[View larger map](#)

Cancer Mortality, Crude Rate (Per 100,000 Pop.) by County, CDC NVSS 2019-23

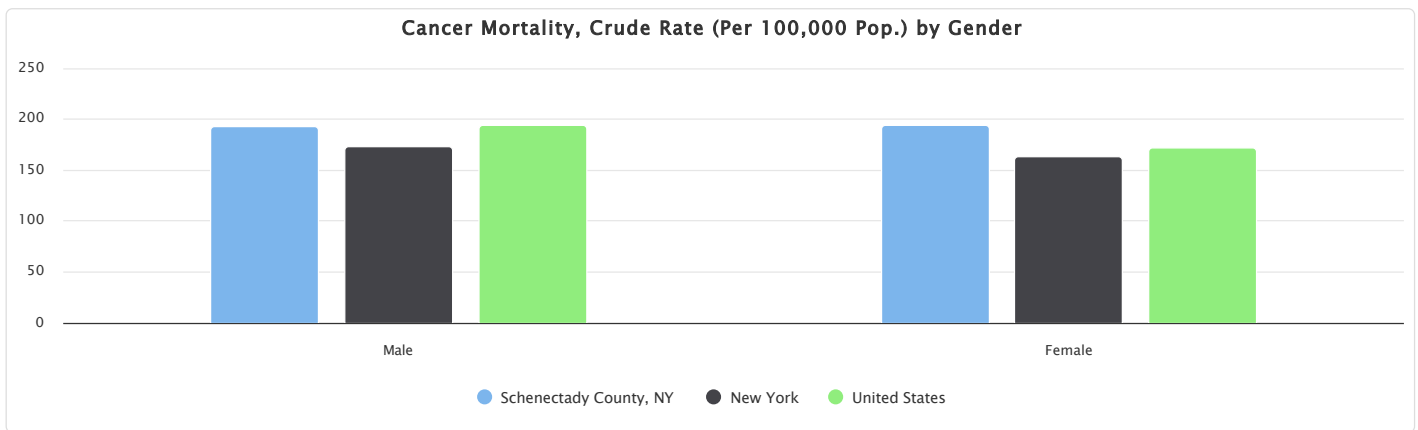


### Cancer Mortality, Crude Rate (Per 100,000 Pop.) by Gender

The table and chart below display crude mortality rates from deaths due to cancer for the 5-year period 2019-2023. Rates are calculated per 100,000 population and grouped by gender.

Report Area	Male	Female
Schenectady County, NY	192.2	193.5
New York	172.5	163.2
United States	194.5	171.2

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER, 2019-2023.

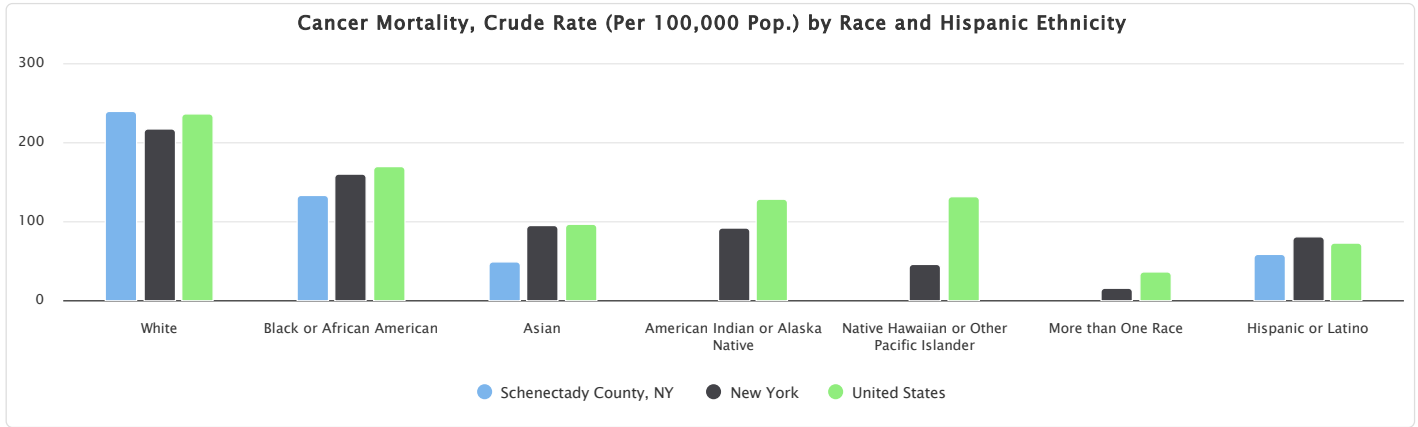


### Cancer Mortality, Crude Rate (Per 100,000 Pop.) by Race and Hispanic Ethnicity

The table and chart below display crude mortality rates from deaths due to cancer for the 5-year period 2019-2023. Rates are calculated per 100,000 population and grouped by combined race and Hispanic origin.

Report Area	White	Black or African American	Asian	American Indian or Alaska Native	Native Hawaiian or Other Pacific Islander	More than One Race	Hispanic or Latino
Schenectady County, NY	238.3	132.0	47.9	No data	Suppressed	Suppressed	58.1
New York	216.6	159.0	94.6	90.8	44.5	14.9	79.9
United States	235.5	168.9	96.2	127.8	131.3	35.1	72.7

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER, 2019-2023.

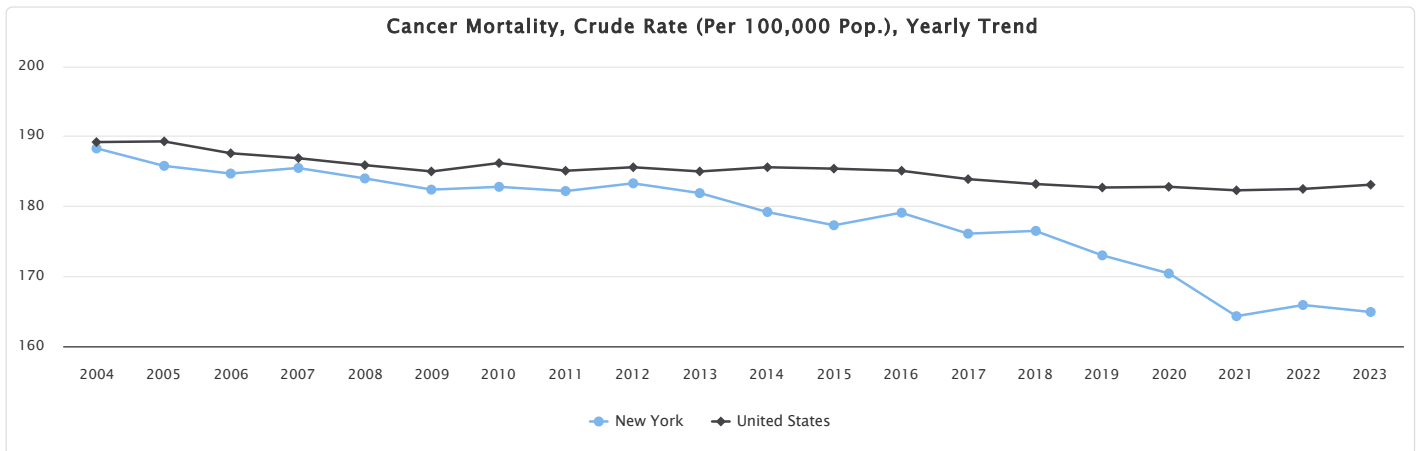


### Cancer Mortality, Crude Rate (Per 100,000 Pop.), Yearly Trend

The table below shows crude death rates due to cancer per 100,000 people over time. Yearly trend data is only available for states.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
New York	188.3	185.8	184.7	185.5	184.0	182.4	182.8	182.2	183.3	181.9	179.2	177.3	179.1	176.1	176.5	173.0	170.4	164.3	165.9	164.9
United States	189.2	189.3	187.6	186.9	185.9	185.0	186.2	185.1	185.6	185.0	185.6	185.4	185.1	183.9	183.2	182.7	182.8	182.3	182.5	183.1

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER, 2019-2023.



### Mortality - Coronary Heart Disease

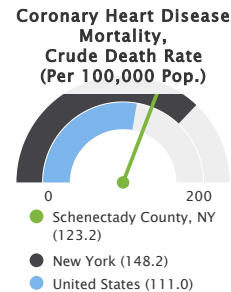
This indicator reports the 2019-2023 five-year average rate of death due to coronary heart disease (ICD10 Codes I20-I25) per 100,000 population. Figures are reported as crude rates. Rates are resummarized for report areas from county level data, only

where data is available. This indicator is relevant because coronary heart disease is a leading cause of death in the United States.

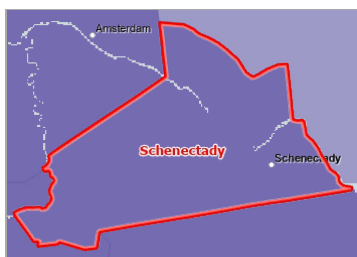
Within the report area, there are a total of 972 deaths due to coronary heart disease. This represents a crude death rate of 123.2 per every 100,000 total population.

*Note: Data are suppressed for counties with fewer than 20 deaths in the time frame.*

Report Area	Total Population, 2019-2023 Average	Five Year Total Deaths, 2019-2023 Total	Crude Death Rate (Per 100,000 Population)
Schenectady County, NY	157,748	972	123.2
New York	19,574,923	145,068	148.2
United States	331,563,969	1,840,172	111.0

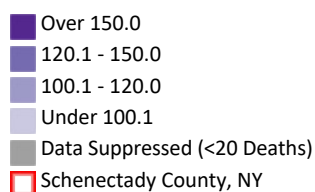


*Note: This indicator is compared to the state average.  
Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.*



[View larger map](#)

**Ischemic Heart Diseases Mortality, Crude Rate (Per 100,000 Pop.) by County, CDC NVSS 2019-23**

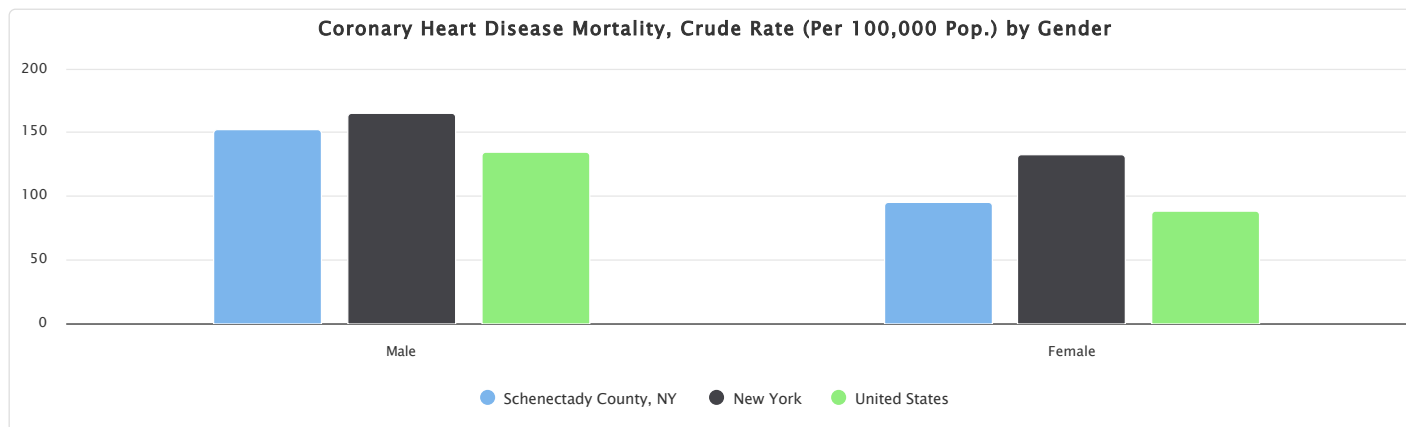


### Coronary Heart Disease Mortality, Crude Rate (Per 100,000 Pop.) by Gender

The table and chart below display crude mortality rates from deaths due to coronary heart disease for the 5-year period 2019-2023. Rates are calculated per 100,000 population and grouped by gender.

Report Area	Male	Female
Schenectady County, NY	152.1	95.5
New York	164.9	132.3
United States	134.7	87.8

*Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.*



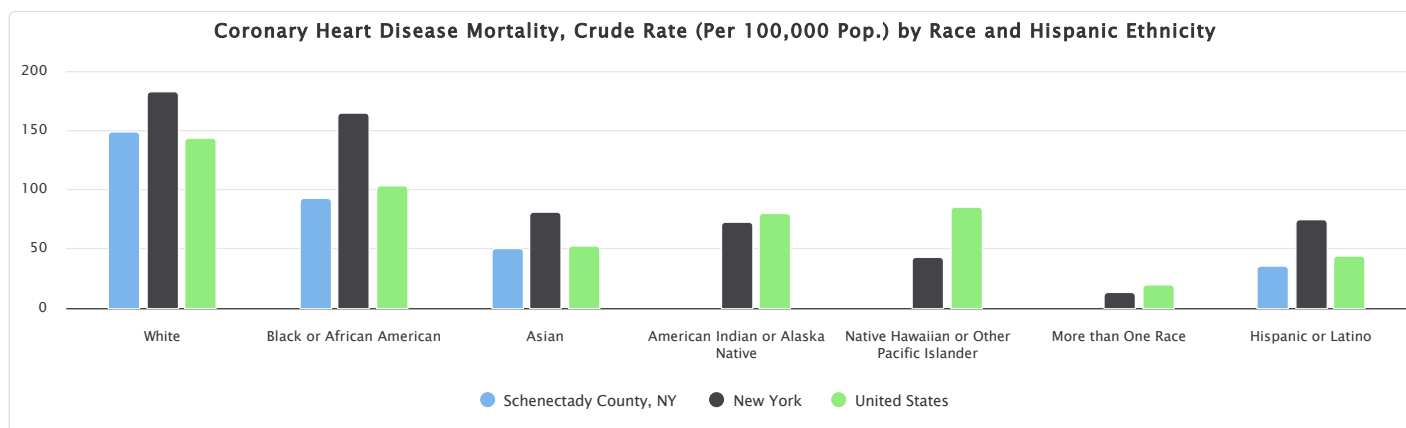
### Coronary Heart Disease Mortality, Crude Rate (Per 100,000 Pop.) by Race and Hispanic Ethnicity

The table and chart below display crude mortality rates from deaths due to coronary heart disease for the 5-year period 2019-

2023. Rates are calculated per 100,000 population and grouped by combined race and Hispanic origin.

Report Area	White	Black or African American	Asian	American Indian or Alaska Native	Native Hawaiian or Other Pacific Islander	More than One Race	Hispanic or Latino
Schenectady County, NY	149.0	93.1	50.3	No data	Suppressed	Suppressed	35.5
New York	182.2	165.0	80.9	72.7	42.4	13.4	75.1
United States	143.5	103.0	52.5	79.6	85.0	19.3	43.6

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.

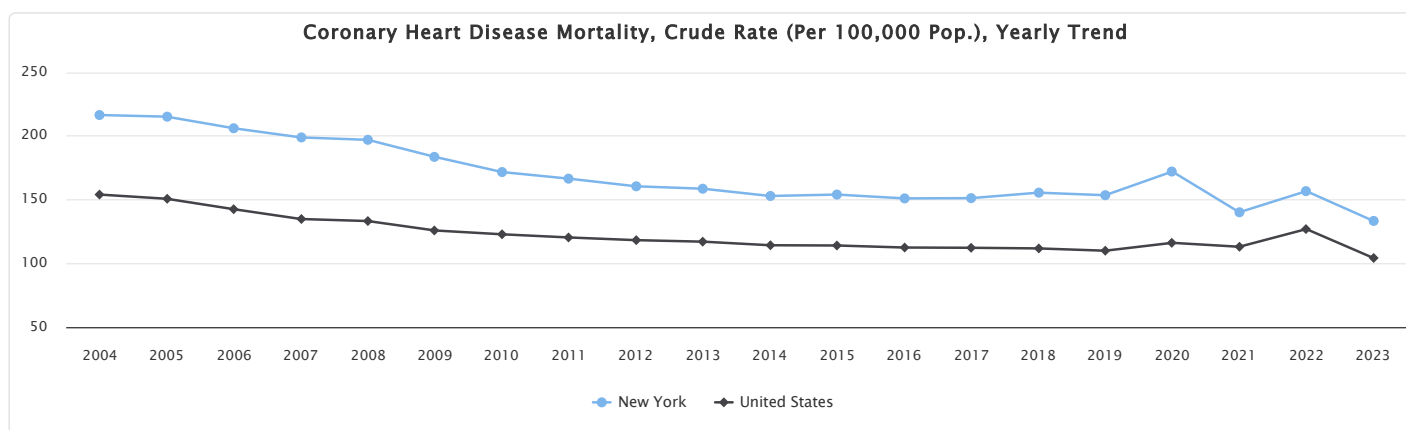


### Coronary Heart Disease Mortality, Crude Rate (Per 100,000 Pop.), Yearly Trend

This indicator reports crude rate of death due to coronary heart disease per 100,000 people over time. Yearly trend data is only available for states.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
New York	216.6	215.3	206.2	199.0	197.1	183.7	171.8	166.6	160.6	158.7	153.0	154.1	151.1	151.3	155.6	153.6	172.2	140.2	156.8	133.4
United States	154.1	150.8	142.6	134.9	133.3	125.9	122.9	120.4	118.3	117.1	114.3	114.1	112.5	112.3	111.8	110.0	116.2	113.1	127.0	104.3

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.



### Mortality - Deaths of Despair

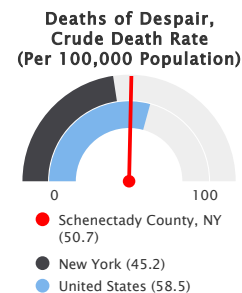
This indicator reports average rate of death due to intentional self-harm (suicide), alcohol-related disease, and drug overdose, also known as "deaths of despair", per 100,000 population. Figures are reported as crude rates. Rates are resummared for

report areas from county level data, only where data is available. This indicator is relevant because death of despair is an indicator of poor mental health.

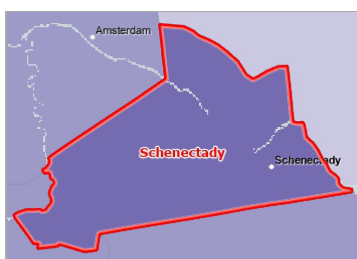
Within the report area, there were 400 deaths of despair. This represents a crude death rate of 50.7 per every 100,000 total population.

*Note: Data are suppressed for counties with fewer than 20 deaths in the time frame.*

Report Area	Total Population, 2019-2023 Average	Five Year Total Deaths, 2019-2023 Total	Crude Death Rate (Per 100,000 Population)
Schenectady County, NY	157,748	400	<b>50.7</b>
New York	19,574,923	44,231	45.2
United States	331,563,969	970,307	58.5

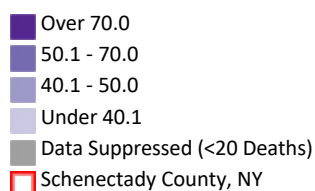


*Note: This indicator is compared to the state average.  
Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.*



[View larger map](#)

Deaths of Despair, Crude Rate (Per 100,000 Pop.) by County, CDC NVSS 2019-23

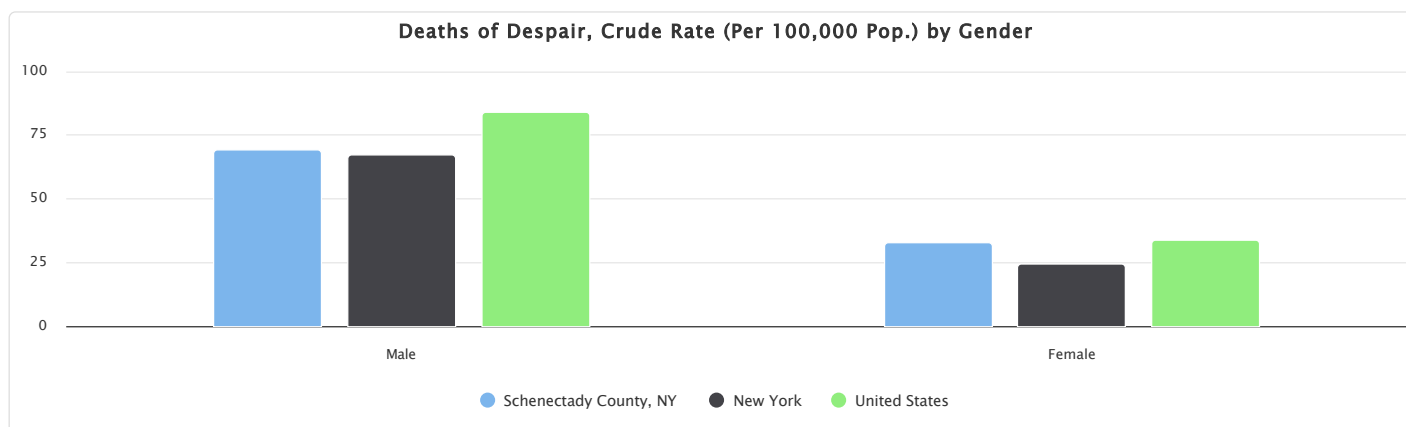


### Deaths of Despair, Crude Rate (Per 100,000 Pop.) by Gender

The table and chart below display crude mortality rates from deaths due to intentional self-harm (suicide), alcohol-related disease, and drug overdoses, also known as "deaths of despair" for the 5-year period 2019-2023. Rates are calculated per 100,000 population and grouped by gender.

Report Area	Male	Female
Schenectady County, NY	69.3	32.8
New York	67.1	24.3
United States	84.0	33.7

*Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.*

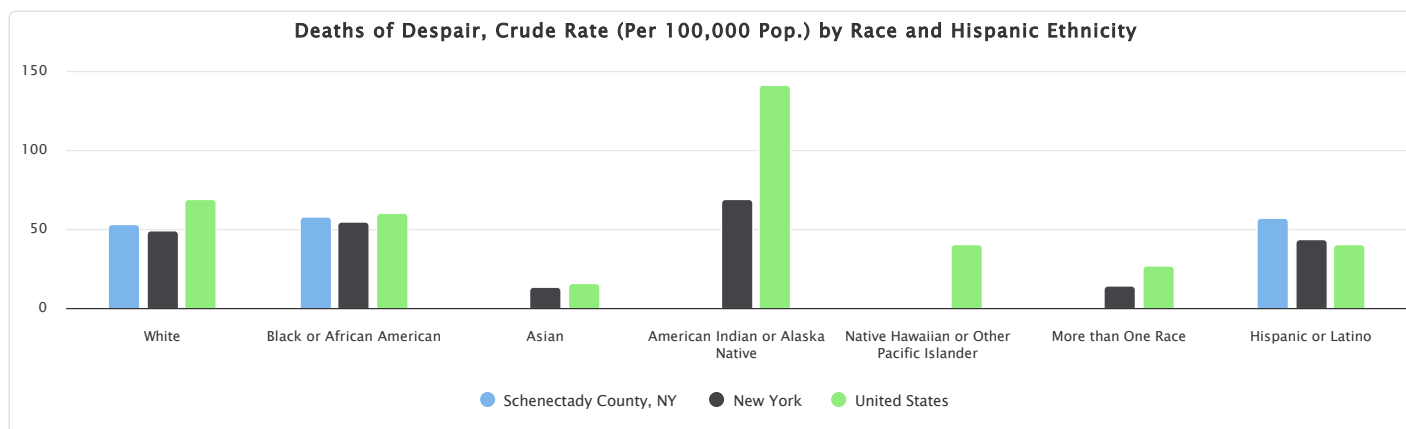


### Deaths of Despair, Crude Rate (Per 100,000 Pop.) by Race and Hispanic Ethnicity

The table and chart below display crude mortality rates from deaths due to intentional self-harm (suicide), alcohol-related disease, and drug overdoses, also known as "deaths of despair" for the 5-year period 2019-2023. Rates are calculated per 100,000 population and grouped by combined race and Hispanic origin.

Report Area	White	Black or African American	Asian	American Indian or Alaska Native	Native Hawaiian or Other Pacific Islander	More than One Race	Hispanic or Latino
Schenectady County, NY	52.9	57.4	No data	No data	No data	No data	56.5
New York	48.5	54.5	13.2	68.6	No data	13.6	43.2
United States	68.3	59.7	15.7	141.1	39.9	26.8	40.1

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.

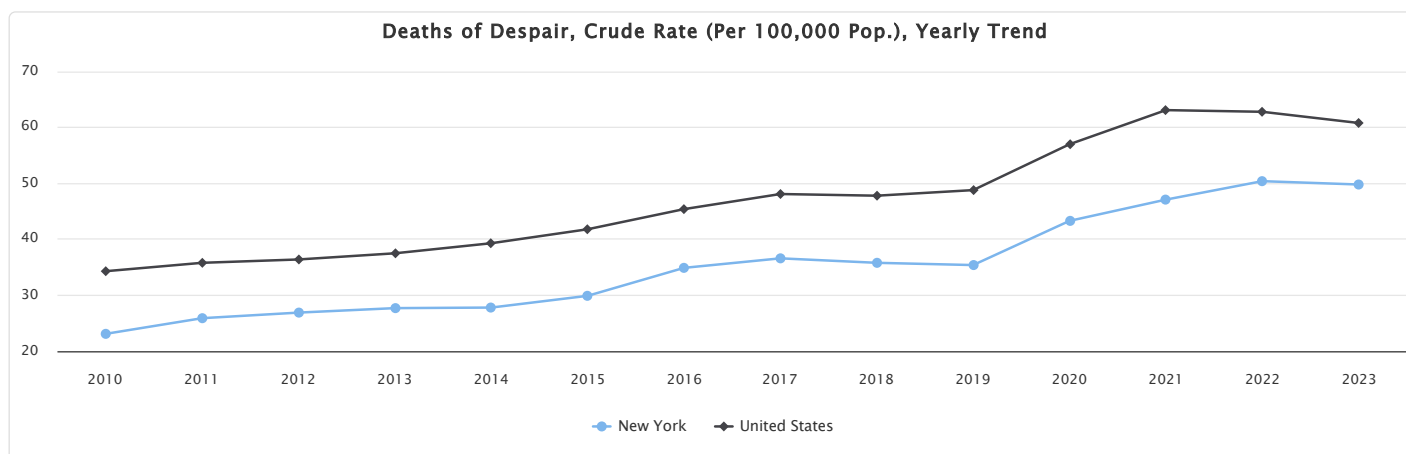


### Deaths of Despair, Crude Rate (Per 100,000 Pop.), Yearly Trend

The table below shows crude death rates due to intentional self-harm (suicide), alcohol-related disease, and drug overdoses, also known as "deaths of despair," per 100,000 population over time.

Report Area	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
New York	23.1	25.9	26.9	27.7	27.8	29.9	34.9	36.6	35.8	35.4	43.3	47.1	50.4	49.8
United States	34.3	35.8	36.4	37.5	39.3	41.8	45.4	48.1	47.8	48.8	57.0	63.1	62.8	60.8

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.



### Mortality - Drug Poisoning

This indicator reports the 2019-2023 five-year average rate of death due to poisoning (including drug overdose) per 100,000

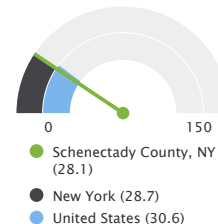
population. Figures are reported as crude rates. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because poisoning deaths, especially from drug overdose, are a national public health emergency.

Within the report area, there are a total of 222 deaths due to poisoning. This represents a crude death rate of 28.1 per every 100,000 total population.

*Note: Data are suppressed for counties with fewer than 20 deaths in the time frame.*

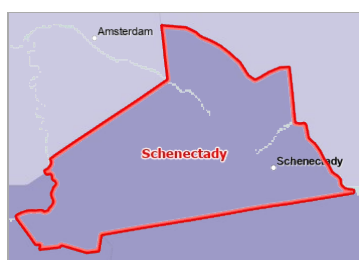
Report Area	Total Population, 2019-2023 Average	Five Year Total Deaths, 2019-2023 Total	Crude Death Rate (Per 100,000 Population)
Schenectady County, NY	157,748	222	28.1
New York	19,574,923	28,133	28.7
United States	331,563,969	506,909	30.6

Poisoning Mortality, Crude Death Rate (Per 100,000 Pop.)



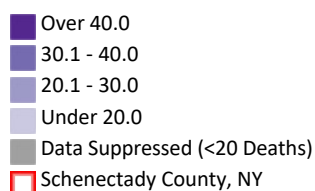
*Note: This indicator is compared to the state average.*

*Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.*



[View larger map](#)

Poisoning Mortality, Crude Rate (Per 100,000 Pop.) by County, CDC NVSS 2019-23

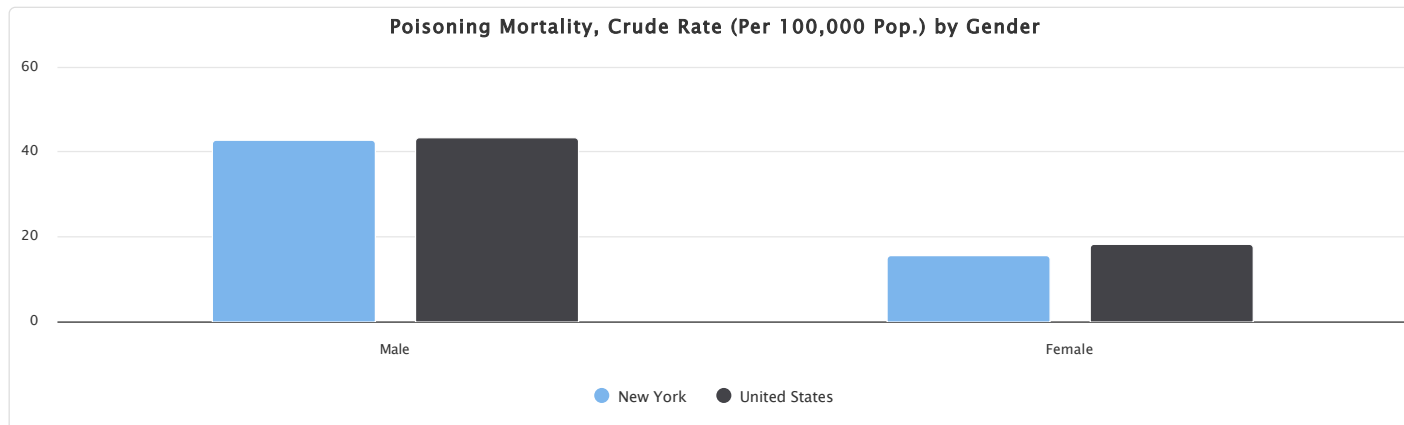


### Poisoning Mortality, Crude Rate (Per 100,000 Pop.) by Gender

The table and chart below display crude mortality rates from deaths due to poisoning (including drug poisoning) for the 5-year period 2019-2023. Rates are calculated per 100,000 population and grouped by gender.

Report Area	Male	Female
New York	42.8	15.4
United States	43.2	18.2

*Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.*

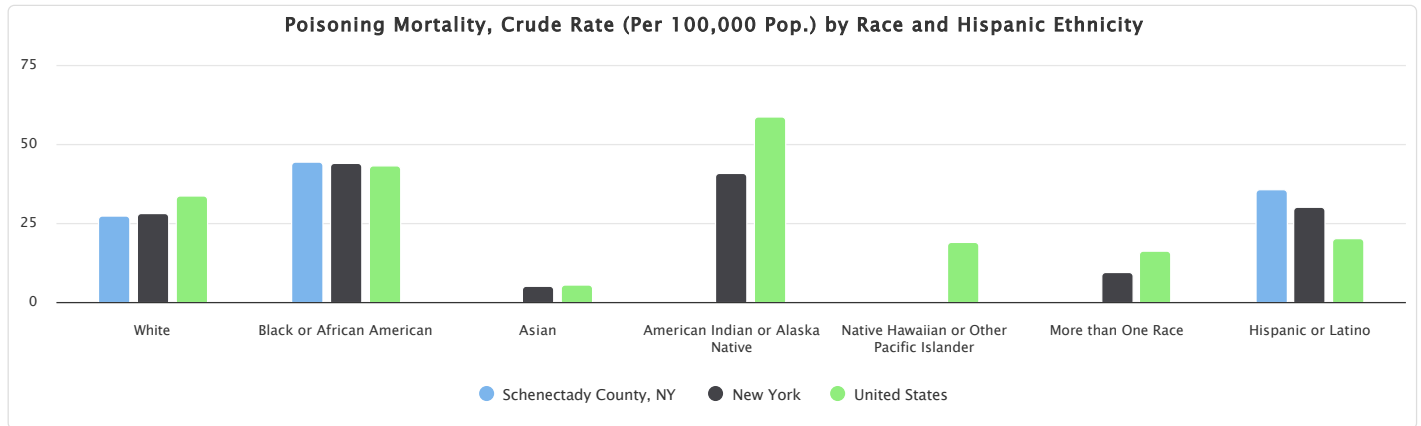


### Poisoning Mortality, Crude Rate (Per 100,000 Pop.) by Race and Hispanic Ethnicity

The table and chart below display crude mortality rates from deaths due to poisoning (including drug poisoning) for the 5-year period 2019-2023. Rates are calculated per 100,000 population and grouped by combined race and Hispanic origin.

Report Area	White	Black or African American	Asian	American Indian or Alaska Native	Native Hawaiian or Other Pacific Islander	More than One Race	Hispanic or Latino
Schenectady County, NY	27.0	44.4	No data	No data	No data	No data	35.5
New York	28.0	43.7	4.8	40.6	No data	9.5	30.1
United States	33.7	42.9	5.5	58.6	19.0	15.9	20.2

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.



## Mortality - Homicide

This indicator reports the 2019-2023 five-year average rate of death due to assault (homicide) per 100,000 population. Figures are reported as crude rates. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because homicide rate is a measure of poor community safety and is a leading cause of premature death.

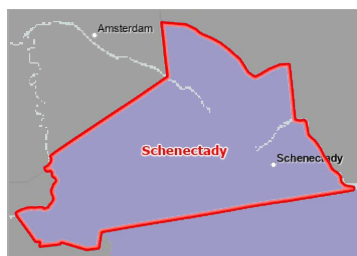
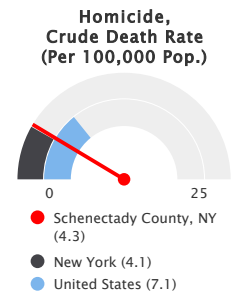
Within the report area, there are a total of 34 deaths due to homicide. This represents a crude death rate of 4.3 per every 100,000 total population.

Note: Data are suppressed for counties with fewer than 20 deaths in the time frame.

Report Area	Total Population, 2019-2023 Average	Five Year Total Deaths, 2019-2023 Total	Crude Death Rate (Per 100,000 Population)
Schenectady County, NY	157,748	34	4.3
New York	19,574,923	3,992	4.1
United States	331,563,969	117,427	7.1

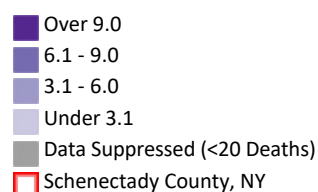
Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.



[View larger map](#)

### Homicide Mortality, Crude Rate (Per 100,000 Pop.) by County, CDC NVSS 2019-23

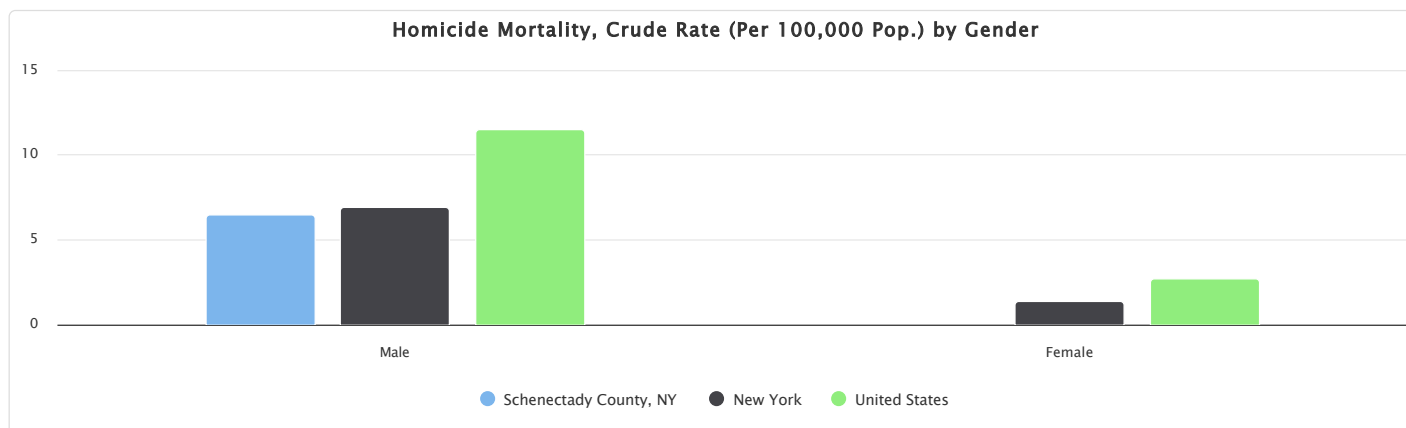


## Homicide Mortality, Crude Rate (Per 100,000 Pop.) by Gender

The table and chart below display crude mortality rates from deaths due to homicide for the 5-year period 2019-2023. Rates are calculated per 100,000 population and grouped by gender.

Report Area	Male	Female
Schenectady County, NY	6.5	No data
New York	6.9	1.4
United States	11.5	2.7

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.

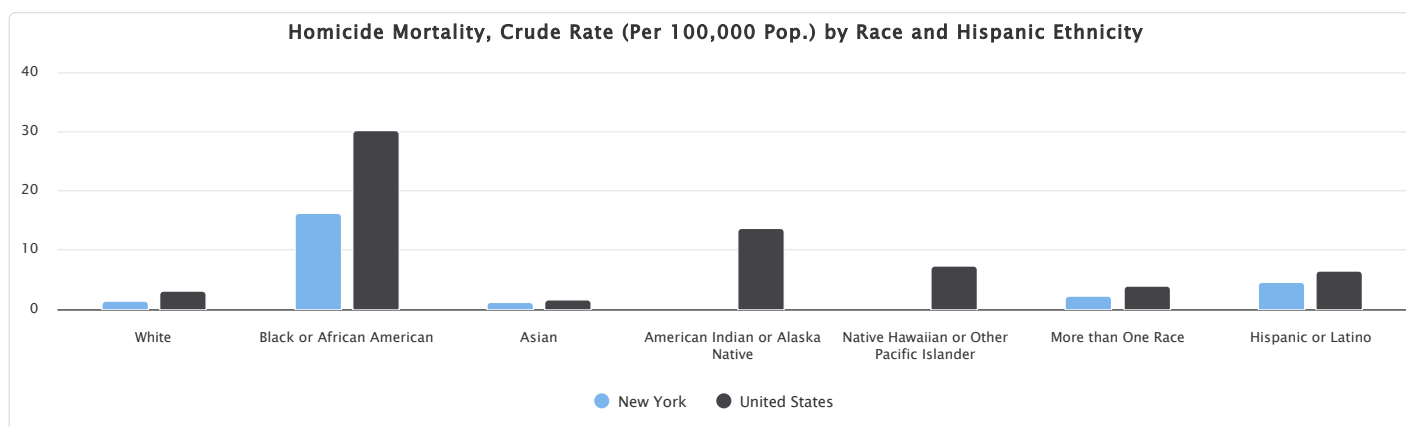


## Homicide Mortality, Crude Rate (Per 100,000 Pop.) by Race and Hispanic Ethnicity

The table and chart below display crude mortality rates from deaths due to homicide for the 5-year period 2019-2023. Rates are calculated per 100,000 population and grouped by combined race and Hispanic origin.

Report Area	White	Black or African American	Asian	American Indian or Alaska Native	Native Hawaiian or Other Pacific Islander	More than One Race	Hispanic or Latino
Schenectady County, NY	Suppressed	Suppressed	Suppressed	No data	Suppressed	Suppressed	Suppressed
New York	1.3	16.1	1.1	No data	Suppressed	2.3	4.6
United States	3.0	30.2	1.6	13.6	7.3	3.9	6.5

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.

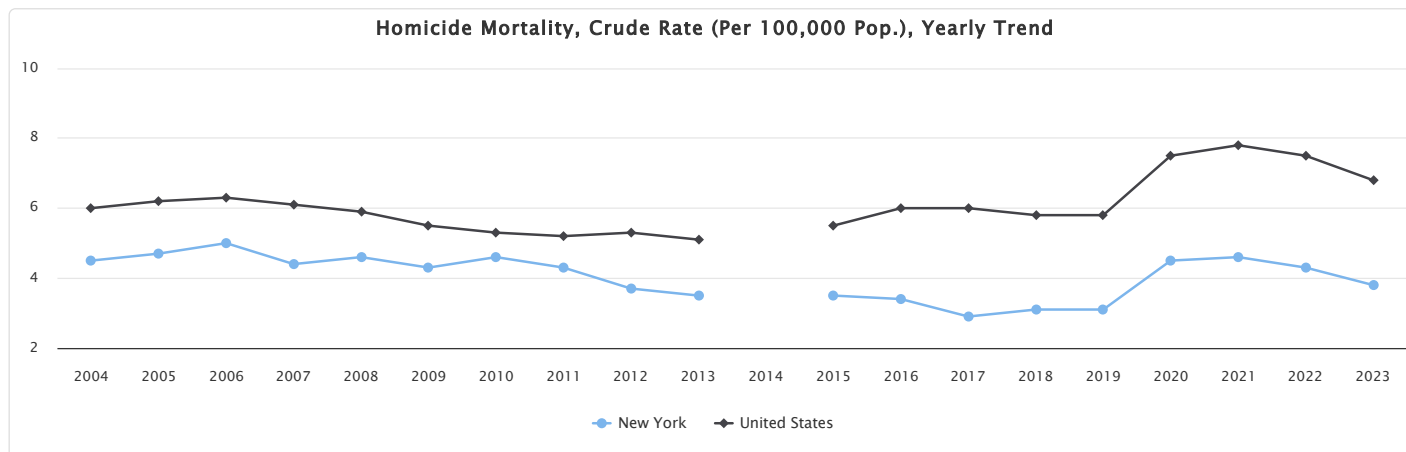


## Homicide Mortality, Crude Rate (Per 100,000 Pop.), Yearly Trend

This indicator reports the crude rate of death due to homicide per 100,000 people over time. Yearly trend data is only available for states.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
New York	4.5	4.7	5.0	4.4	4.6	4.3	4.6	4.3	3.7	3.5	No data	3.5	3.4	2.9	3.1	3.1	4.5	4.6	4.3	3.8
United States	6.0	6.2	6.3	6.1	5.9	5.5	5.3	5.2	5.3	5.1	No data	5.5	6.0	6.0	5.8	5.8	7.5	7.8	7.5	6.8

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER, 2019-2023.



## Mortality - Infant Mortality

This indicator reports information about infant mortality, which is defined as the number of all infant deaths (within 1 year) per 1,000 live births. Data were from the National Center for Health Statistics - Mortality Files (2016-2022) and are used for the 2025 County Health Rankings.

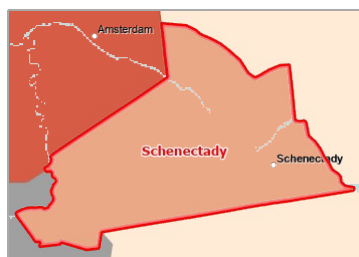
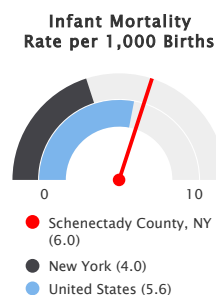
Within the report area, 80 infants died during the 2016-22 seven year period. This represents 6.0 deaths per 1,000 live births.

Note: Data are suppressed for counties with fewer than 20 infant deaths in the time frame.

Report Area	Number of Infant Deaths	Deaths per 1,000 Live Births
Schenectady County, NY	80	6.0
New York	6,628	4.0
United States	147,939	5.6

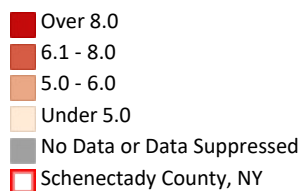
Note: This indicator is compared to the state average.

Data Source: University of Wisconsin Population Health Institute, County Health Rankings, 2016-2022.



[View larger map](#)

Infant Mortality, Rate per 1,000 Births by County, CDC NVSS 2016-2022

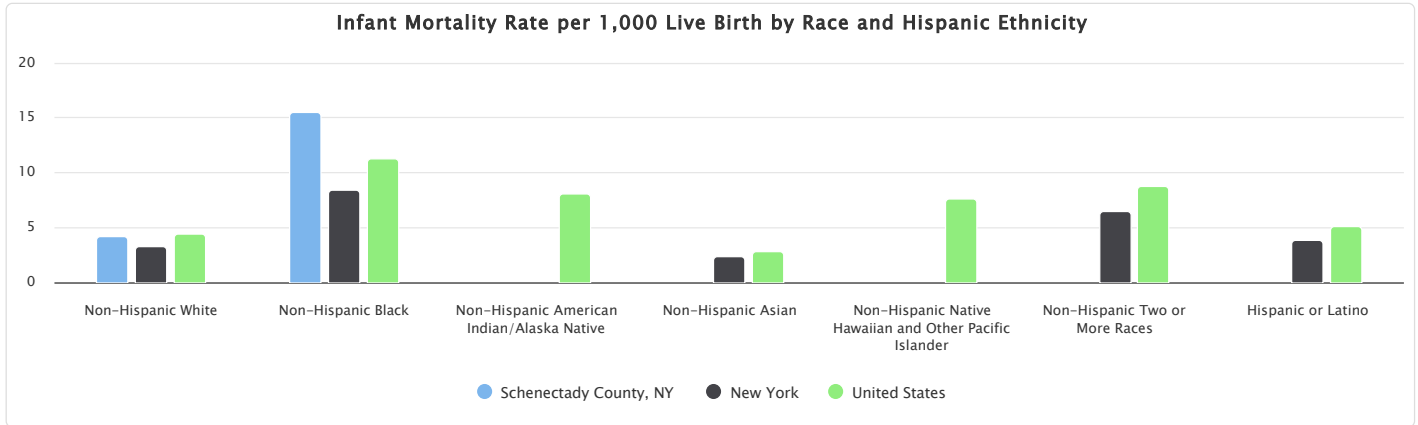


## Infant Mortality Rate per 1,000 Live Birth by Race and Hispanic Ethnicity

The indicator reports the 2016-2022 seven-year average infant mortality rates per 1,000 births by race and by Hispanic origin.

Report Area	Non-Hispanic White	Non-Hispanic Black	Non-Hispanic American Indian/Alaska Native	Non-Hispanic Asian	Non-Hispanic Native Hawaiian and Other Pacific Islander	Non-Hispanic Two or More Races	Hispanic or Latino
Schenectady County, NY	4.2	15.5	No data	No data	No data	No data	No data
New York	3.3	8.4	No data	2.3	No data	6.5	3.8
United States	4.4	11.3	8.1	2.8	7.6	8.7	5.1

Data Source: University of Wisconsin Population Health Institute, *County Health Rankings*, 2016-2022.



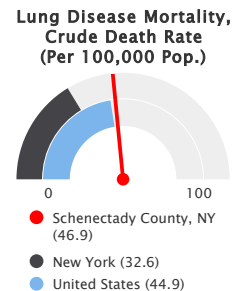
## Mortality - Lung Disease

This indicator reports the 2019-2023 five-year average rate of death due to chronic lower respiratory disease per 100,000 population. Figures are reported as crude rates. Rates are resummared for report areas from county level data, only where data is available. This indicator is relevant because lung disease is a leading cause of death in the United States.

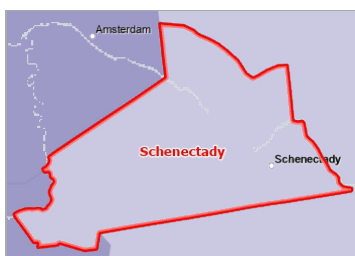
Within the report area, there are a total of 370 deaths due to lung disease. This represents a crude death rate of 46.9 per every 100,000 total population.

*Note: Data are suppressed for counties with fewer than 20 deaths in the time frame.*

Report Area	Total Population, 2019-2023 Average	Five Year Total Deaths, 2019-2023 Total	Crude Death Rate (Per 100,000 Population)
Schenectady County, NY	157,748	370	<b>46.9</b>
New York	19,574,923	31,896	32.6
United States	331,563,969	744,717	44.9

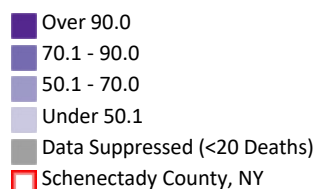


*Note: This indicator is compared to the state average.*  
 Data Source: Centers for Disease Control and Prevention, *CDC - National Vital Statistics System*. Accessed via *CDC WONDER*, 2019-2023.



[View larger map](#)

### Lung Disease Mortality, Crude Rate (Per 100,000 Pop.) by County, CDC NVSS 2019-23

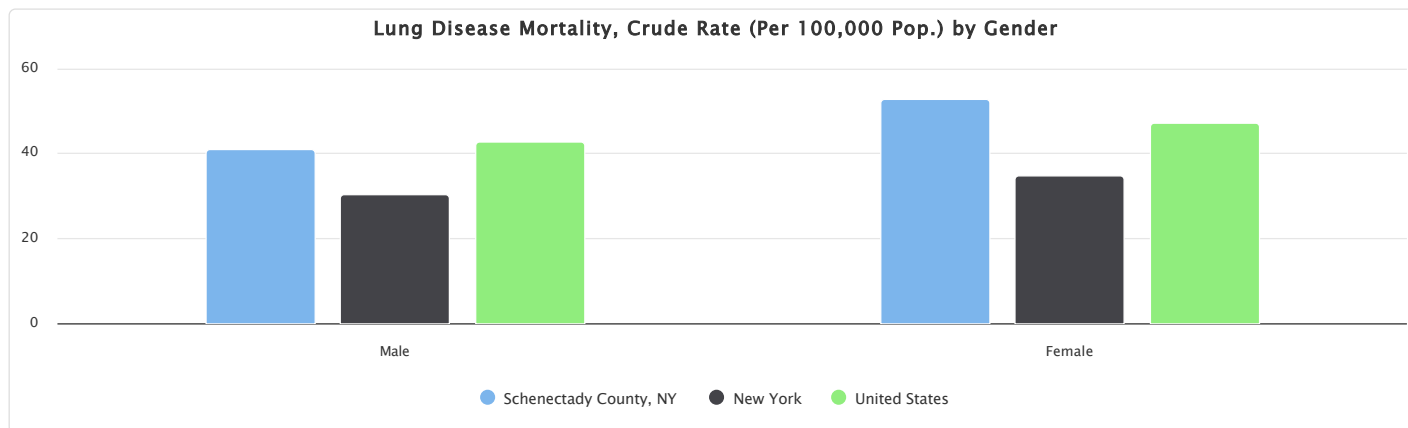


## Lung Disease Mortality, Crude Rate (Per 100,000 Pop.) by Gender

The table and chart below display crude mortality rates from deaths due to lung disease for the 5-year period 2019-2023. Rates are calculated per 100,000 population and grouped by gender.

Report Area	Male	Female
Schenectady County, NY	40.9	52.7
New York	30.3	34.8
United States	42.8	47.0

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER, 2019-2023.

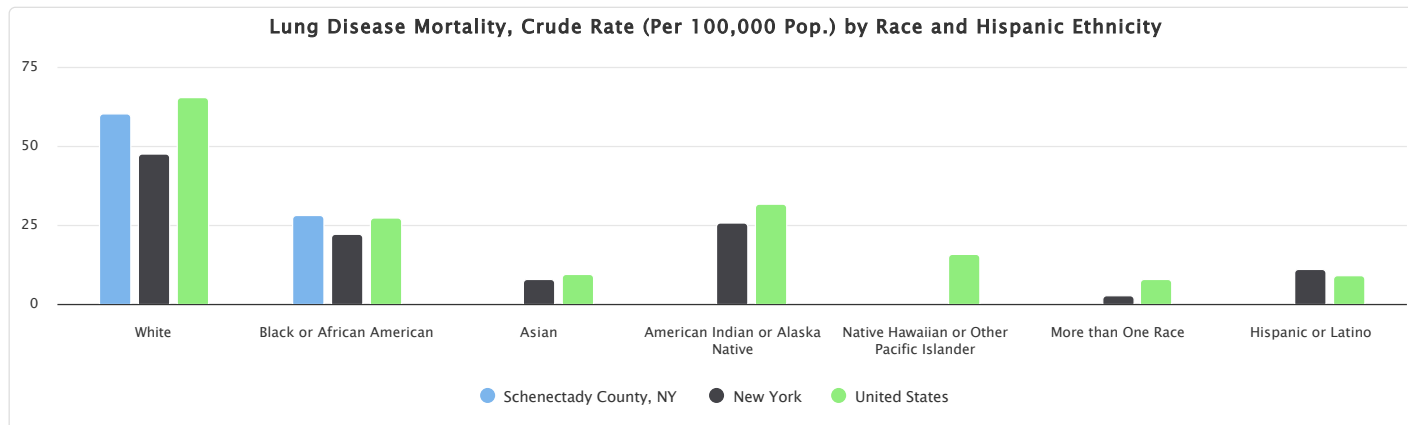


## Lung Disease Mortality, Crude Rate (Per 100,000 Pop.) by Race and Hispanic Ethnicity

The table and chart below display crude mortality rates from deaths due to lung disease for the 5-year period 2019-2023. Rates are calculated per 100,000 population and grouped by combined race and Hispanic origin.

Report Area	White	Black or African American	Asian	American Indian or Alaska Native	Native Hawaiian or Other Pacific Islander	More than One Race	Hispanic or Latino
Schenectady County, NY	60.0	28.1	Suppressed	No data	Suppressed	Suppressed	Suppressed
New York	47.6	22.1	7.9	25.6	Suppressed	2.7	11.1
United States	65.2	27.3	9.3	31.7	15.7	7.8	9.1

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER, 2019-2023.

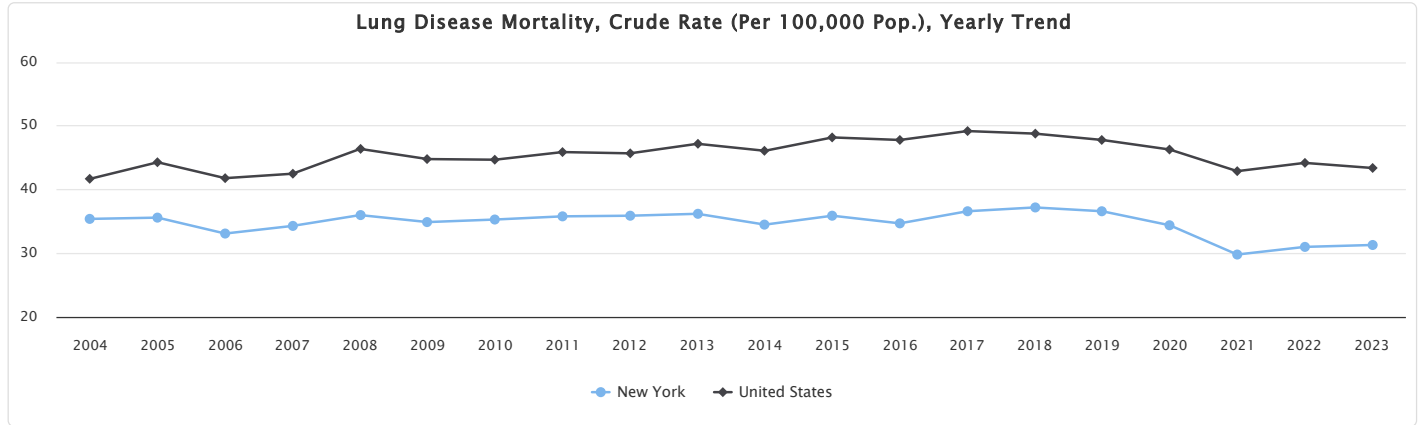


## Lung Disease Mortality, Crude Rate (Per 100,000 Pop.), Yearly Trend

This indicator reports the crude rate of death due to lung disease per 100,000 people over time. Yearly trend data is only available for states.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
New York	35.4	35.6	33.1	34.3	36.0	34.9	35.3	35.8	35.9	36.2	34.5	35.9	34.7	36.6	37.2	36.6	34.4	29.8	31.0	31.3
United States	41.7	44.3	41.8	42.5	46.4	44.8	44.7	45.9	45.7	47.2	46.1	48.2	47.8	49.2	48.8	47.8	46.3	42.9	44.2	43.4

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.



## Mortality - Motor Vehicle Crash

This indicator reports the 2019-2023 five-year average rate of death due to motor vehicle crash per 100,000 population, which include collisions with another motor vehicle, a nonmotorist, a fixed object, and a non-fixed object, an overturn, and any other non-collision. Figures are reported as crude rates. This indicator is relevant because motor vehicle crash deaths are preventable and they are a cause of premature death.

Within the report area, there are a total of 55 deaths due to motor vehicle crash. This represents a crude death rate of 7.0 per every 100,000 total population. Fatality counts are based on the decedent's residence and not the location of the crash.

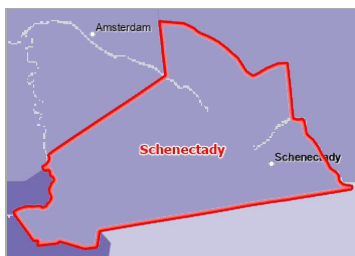
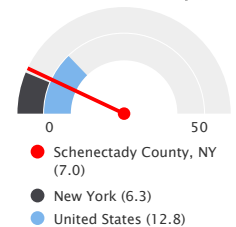
Note: Data are suppressed for counties with fewer than 20 deaths in the time frame.

Report Area	Total Population, 2019-2023 Average	Five Year Total Deaths, 2019-2023 Total	Crude Death Rate (Per 100,000 Population)
Schenectady County, NY	157,748	55	7.0
New York	19,574,923	6,122	6.3
United States	331,563,969	211,504	12.8

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.

Motor Vehicle Crash Mortality Crude Death Rate (Per 100,000 Pop.)



[View larger map](#)

Motor Vehicle Crash Mortality, Crude Rate (Per 100,000 Pop.) by County, CDC NVSS 2019-23

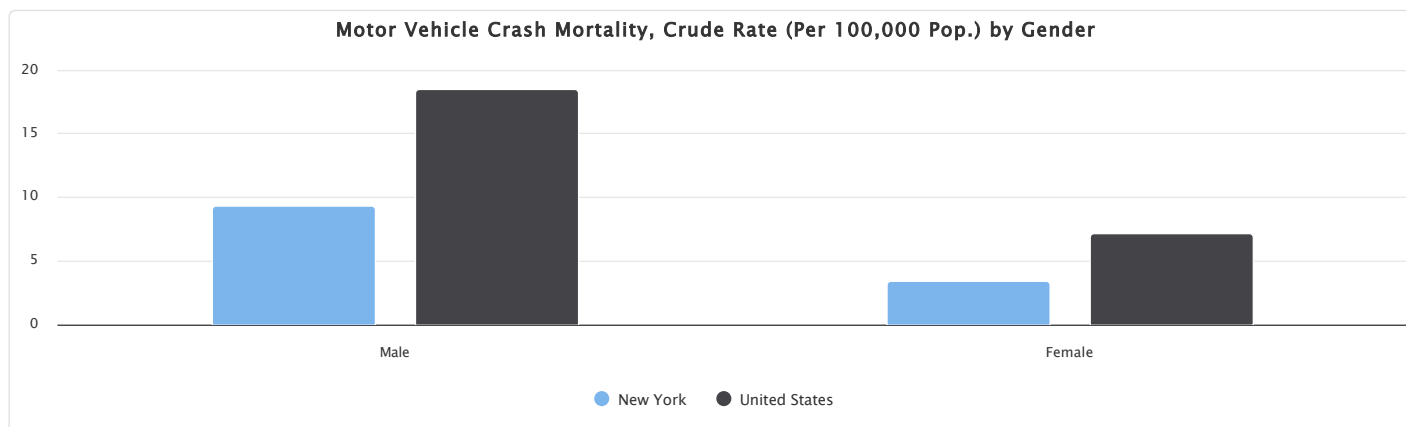
- Over 20.0
- 12.1 - 20.0
- 6.1 - 12.0
- Under 6.1
- Data Suppressed (<20 Deaths)
- Schenectady County, NY

## Motor Vehicle Crash Mortality, Crude Rate (Per 100,000 Pop.) by Gender

The table and chart below display crude mortality rates from deaths due to motor vehicle crash for the 5-year period 2019-2023. Rates are calculated per 100,000 population and grouped by gender.

Report Area	Male	Female
New York	9.3	3.4
United States	18.5	7.1

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.

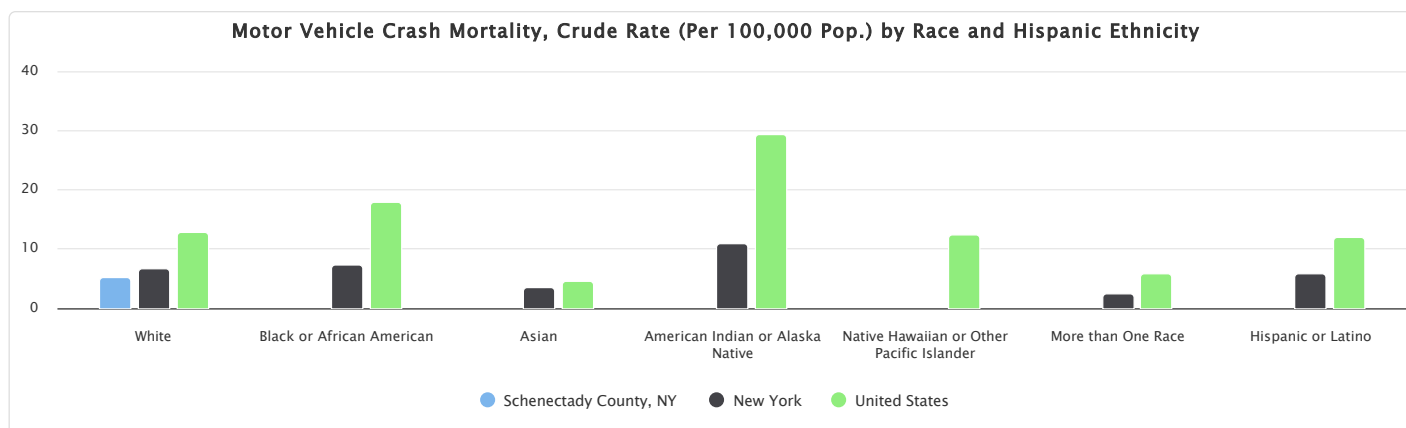


## Motor Vehicle Crash Mortality, Crude Rate (Per 100,000 Pop.) by Race and Hispanic Ethnicity

The table and chart below display crude mortality rates from deaths due to motor vehicle crash for the 5-year period 2019-2023. Rates are calculated per 100,000 population and grouped by combined race and Hispanic origin.

Report Area	White	Black or African American	Asian	American Indian or Alaska Native	Native Hawaiian or Other Pacific Islander	More than One Race	Hispanic or Latino
Schenectady County, NY	5.2	No data	No data	No data	No data	No data	No data
New York	6.7	7.2	3.5	10.9	No data	2.5	5.8
United States	12.8	17.9	4.5	29.4	12.4	5.9	11.9

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.

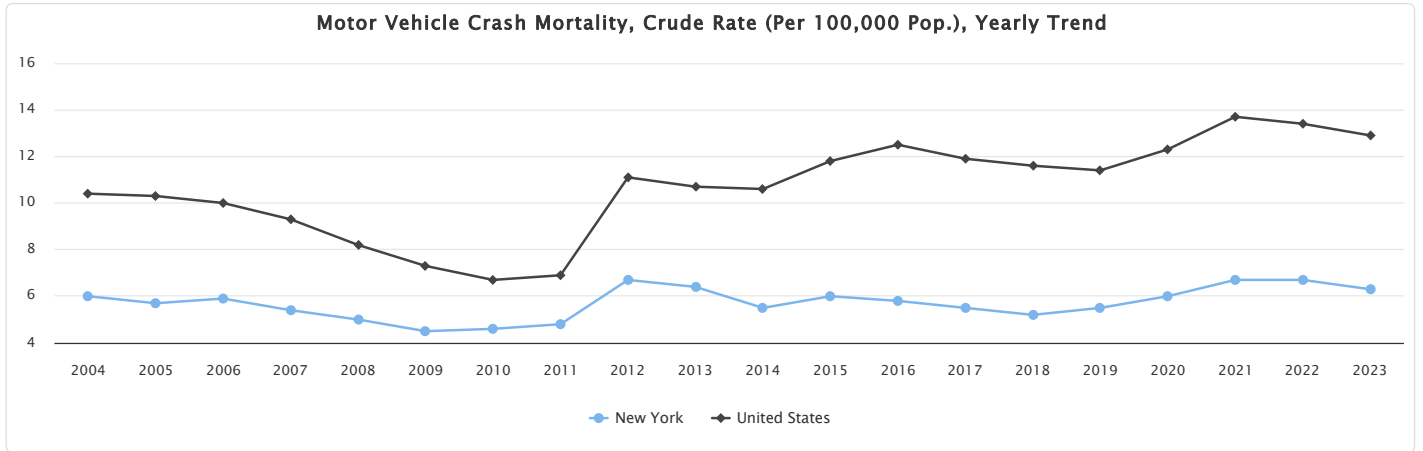


## Motor Vehicle Crash Mortality, Crude Rate (Per 100,000 Pop.), Yearly Trend

The table below shows crude death rates due to motor vehicle crash per 100,000 people over time. Yearly trend data is only available for states.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
New York	6.0	5.7	5.9	5.4	5.0	4.5	4.6	4.8	6.7	6.4	5.5	6.0	5.8	5.5	5.2	5.5	6.0	6.7	6.7	6.3
United States	10.4	10.3	10.0	9.3	8.2	7.3	6.7	6.9	11.1	10.7	10.6	11.8	12.5	11.9	11.6	11.4	12.3	13.7	13.4	12.9

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER, 2019-2023.



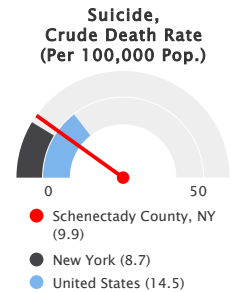
### Mortality - Suicide

This indicator reports the 2019-2023 five-year average rate of death due to intentional self-harm (suicide) per 100,000 population. Figures are reported as crude rates. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because suicide is an indicator of poor mental health.

Within the report area, there are a total of 78 deaths due to suicide. This represents a crude death rate of 9.9 per every 100,000 total population.

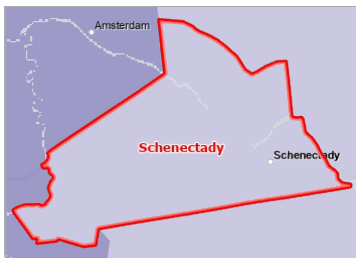
Note: Data are suppressed for counties with fewer than 20 deaths in the time frame.

Report Area	Total Population, 2019-2023 Average	Five Year Total Deaths, 2019-2023 Total	Crude Death Rate (Per 100,000 Population)
Schenectady County, NY	157,748	78	9.9
New York	19,574,923	8,489	8.7
United States	331,563,969	240,465	14.5



Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER, 2019-2023.



[View larger map](#)

### Suicide Mortality, Crude Rate (Per 100,000 Pop.) by County, CDC NVSS 2019-23

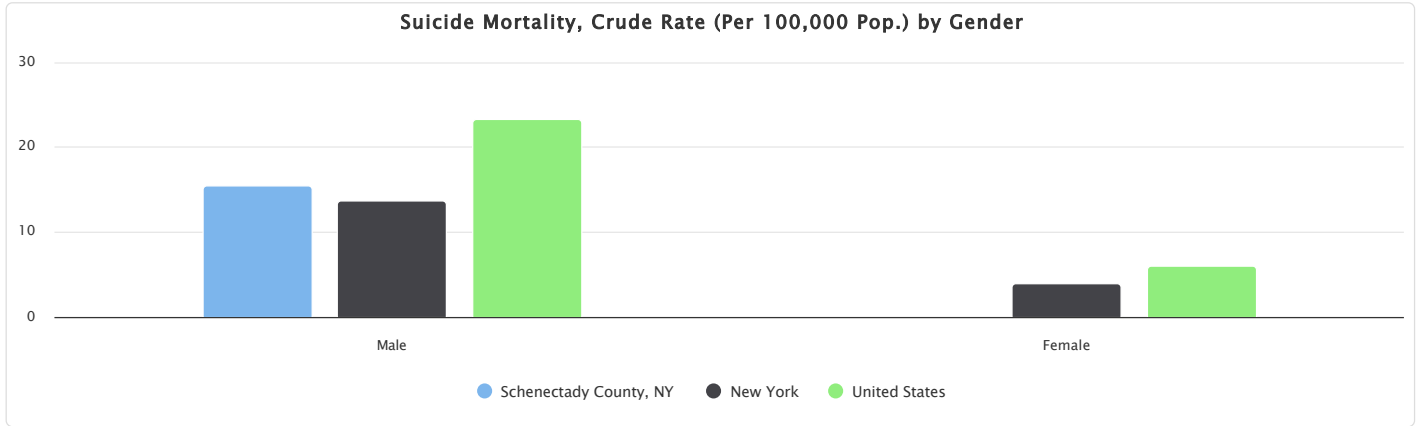
- Over 20.0
- 16.1 - 20.0
- 12.1 - 16.0
- Under 12.1
- Data Suppressed (<20 Deaths)
- Schenectady County, NY

### Suicide Mortality, Crude Rate (Per 100,000 Pop.) by Gender

The table and chart below display crude mortality rates from deaths due to intentional self-harm (suicide) for the 5-year period 2019-2023. Rates are calculated per 100,000 population and grouped by gender.

Report Area	Male	Female
Schenectady County, NY	15.5	No data
New York	13.7	3.9
United States	23.3	6.0

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.

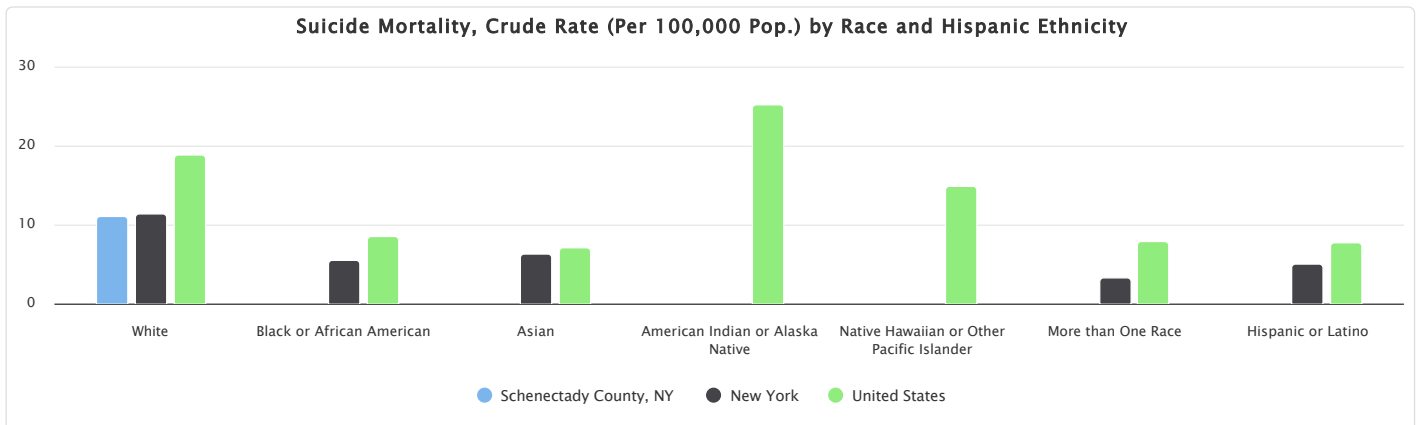


### Suicide Mortality, Crude Rate (Per 100,000 Pop.) by Race and Hispanic Ethnicity

The table and chart below display crude mortality rates from deaths due to intentional self-harm (suicide) for the 5-year period 2019-2023. Rates are calculated per 100,000 population and grouped by combined race and Hispanic origin.

Report Area	White	Black or African American	Asian	American Indian or Alaska Native	Native Hawaiian or Other Pacific Islander	More than One Race	Hispanic or Latino
Schenectady County, NY	11.1	No data	No data	No data	No data	No data	No data
New York	11.4	5.4	6.2	No data	No data	3.3	5.0
United States	18.8	8.5	7.0	25.1	14.8	7.9	7.7

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.

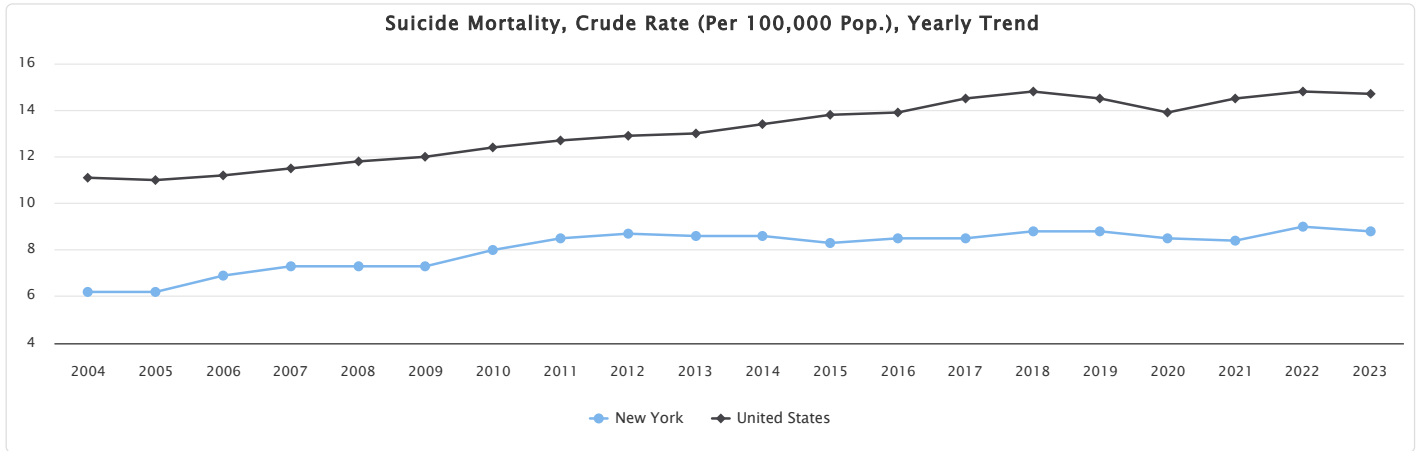


### Suicide Mortality, Crude Rate (Per 100,000 Pop.), Yearly Trend

This indicator reports the crude rate of death due to suicide per 100,000 people over time. Yearly trend data is only available for states.

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
New York	6.2	6.2	6.9	7.3	7.3	7.3	8.0	8.5	8.7	8.6	8.6	8.3	8.5	8.5	8.8	8.8	8.5	8.4	9.0	8.8
United States	11.1	11.0	11.2	11.5	11.8	12.0	12.4	12.7	12.9	13.0	13.4	13.8	13.9	14.5	14.8	14.5	13.9	14.5	14.8	14.7

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER, 2019-2023.



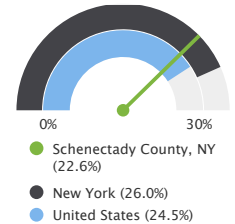
## Physical Activity

This indicator reports the percentage of adults age 18 and older who answered “no” to the following question: “During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?”

Within the report area 22.6% of adults age 18+ reported having no leisure-time physical activity last month.

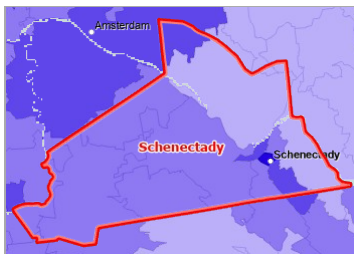
Report Area	Total Population	Adults Age 18+ with No Leisure-Time Physical Activity (Crude)	Adults Age 18+ with No Leisure-Time Physical Activity (Age-Adjusted)
Schenectady County, NY	159,902	22.6%	21.9%
New York	19,571,216	26.0%	25.1%
United States	334,914,895	24.5%	23.7%

percentage of Adults Age 18+ with No Leisure-Time Physical Activity



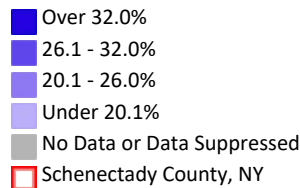
Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal, 2023.



[View larger map](#)

No Leisure-Time Physical Activity, Percent of Adults Age 18+ by ZCTA, CDC BRFSS PLACES Project 2023

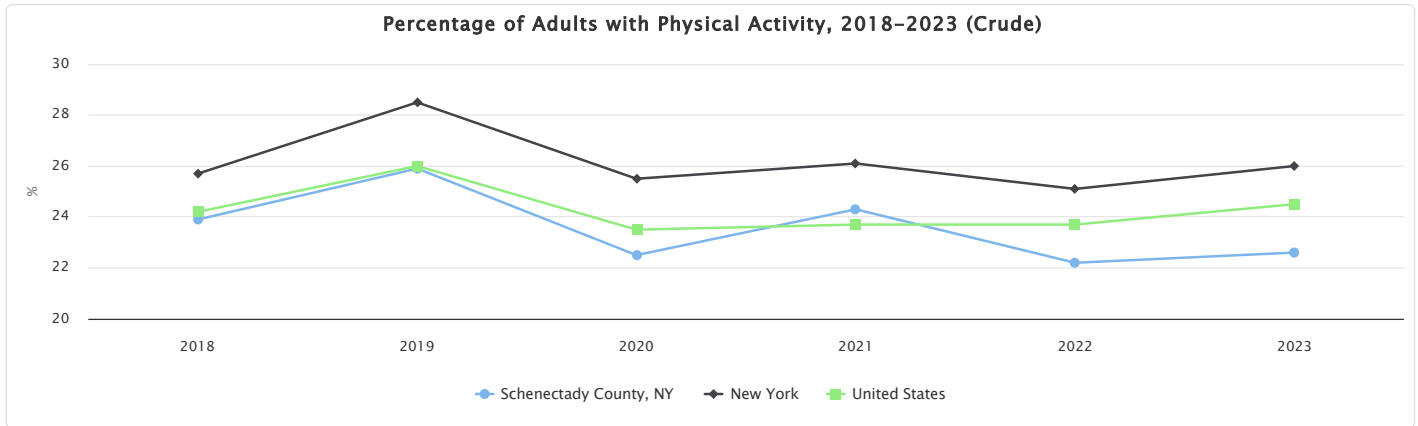


## Percentage of Adults with Physical Activity, 2018-2023 (Crude)

The table and chart below display annual trends in the percentage of adults age 18+ who report no leisure time physical activity.

Report Area	2018	2019	2020	2021	2022	2023
Schenectady County, NY	23.9%	25.9%	22.5%	24.3%	22.2%	22.6%
New York	25.7%	28.5%	25.5%	26.1%	25.1%	26.0%
United States	24.2%	26.0%	23.5%	23.7%	23.7%	24.5%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.



## Poor Mental Health

This indicator reports the percentage of adults age 18 and older who reported 14 or more days during the past 30 days during which their mental health was not good.

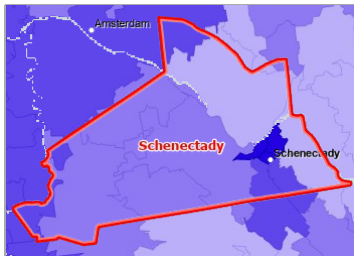
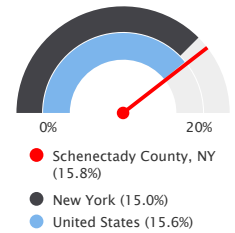
Within the report area, 15.8% of adults 18 and older reported having poor mental health in the past month.

Report Area	Total Population	Adults Age 18+ with Poor Mental Health (Crude)	Adults Age 18+ with Poor Mental Health (Age-Adjusted)
Schenectady County, NY	159,902	<b>15.8%</b>	16.6%
New York	19,571,216	15.0%	15.9%
United States	334,914,895	15.6%	16.3%

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.

percentage of Adults Age 18+ with Poor Mental Health



[View larger map](#)

Frequent Mental Distress, Prevalence Among Adults Age 18+ by ZCTA, CDC BRFSS PLACES Project 2023

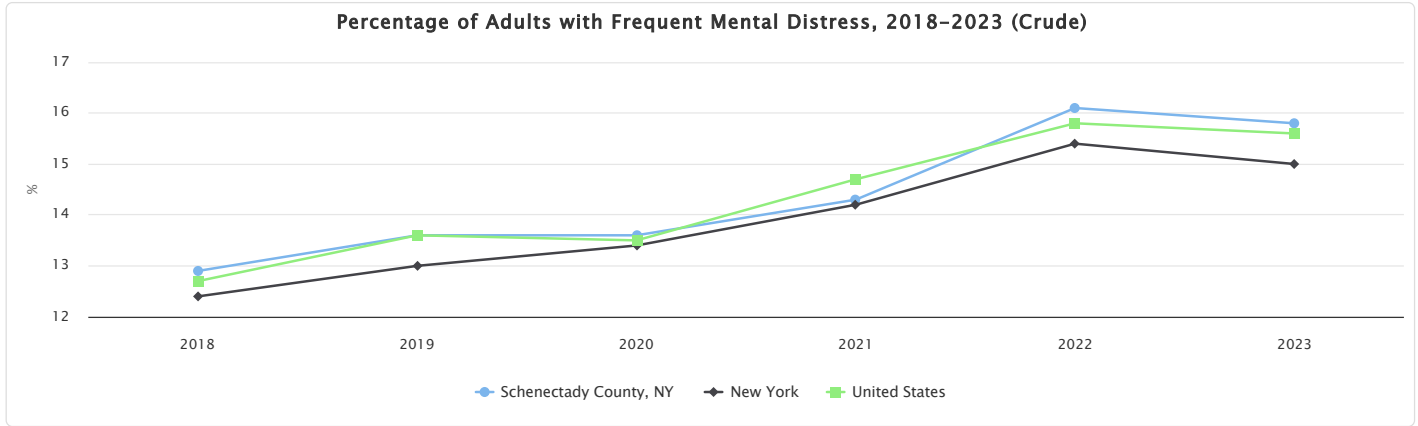
- Over 18.0%
- 16.1 - 18.0%
- 14.1 - 16.0%
- Under 14.1%
- No Data or Data Suppressed
- Schenectady County, NY

## Percentage of Adults with Frequent Mental Distress, 2018-2023 (Crude)

The table and chart below display annual trends in the percentage of adults age 18+ whose report frequent mental distress.

Report Area	2018	2019	2020	2021	2022	2023
Schenectady County, NY	12.9%	13.6%	13.6%	14.3%	16.1%	15.8%
New York	12.4%	13.0%	13.4%	14.2%	15.4%	15.0%
United States	12.7%	13.6%	13.5%	14.7%	15.8%	15.6%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.



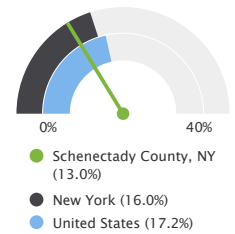
## Poor or Fair Health

This indicator reports the percentage of adults age 18 and older who self-report having poor or fair health (age-adjusted to the 2000 standard). Data were from the 2022 Behavioral Risk Factor Surveillance System (BRFSS) annual survey and are used for the 2025 County Health Rankings. This indicator is relevant because it is a measure of general poor health status.

Within the report area there are 16,166 persons aged 18 and older who self-report having poor or fair health. This represents 13.0% of the total population aged 18 and older, which is less than the state rate of 16.0%.

Report Area	Population Age 18+	Adults with Poor or Fair Health	Percentage of Adults with Poor or Fair Health
Schenectady County, NY	124,352	16,166	13.0%
New York	15,822,448	2,531,592	16.0%
United States	259,740,526	44,669,865	17.2%

percentage of Adults with Fair or Poor Health



Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via County Health Rankings. 2022.



[View larger map](#)

### Poor or Fair Health, Z-Score by County, County Health Rankings 2025

- Over 0.66 (Worse)
- 0.11 - 0.66
- 0.32 - 0.10
- Under -0.32 (Better)
- No Data or Data Suppressed
- Schenectady County, NY

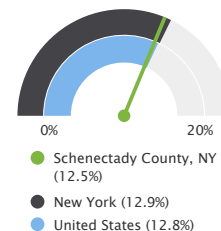
## Poor Physical Health Days

This indicator reports the percentage of adults age 18 and older who reported 14 or more days during the past 30 days during which their physical health was not good.

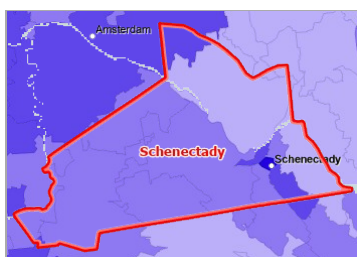
Within the report area, 12.5% of adults 18 and older reported having poor physical health in the past month.

Report Area	Total Population	Adults Age 18+ with Poor Physical Health (Crude)	Adults Age 18+ with Poor Physical Health (Age-Adjusted)
Schenectady County, NY	159,902	12.5%	11.9%
New York	19,571,216	12.9%	12.1%
United States	334,914,895	12.8%	12.1%

percentage of Adults Age 18+ with Poor Physical Health



Note: This indicator is compared to the state average.  
Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.



[View larger map](#)

Poor Physical Health, Percent of Adults Age 18+ by ZCTA, CDC BRSS PLACES Project 2023

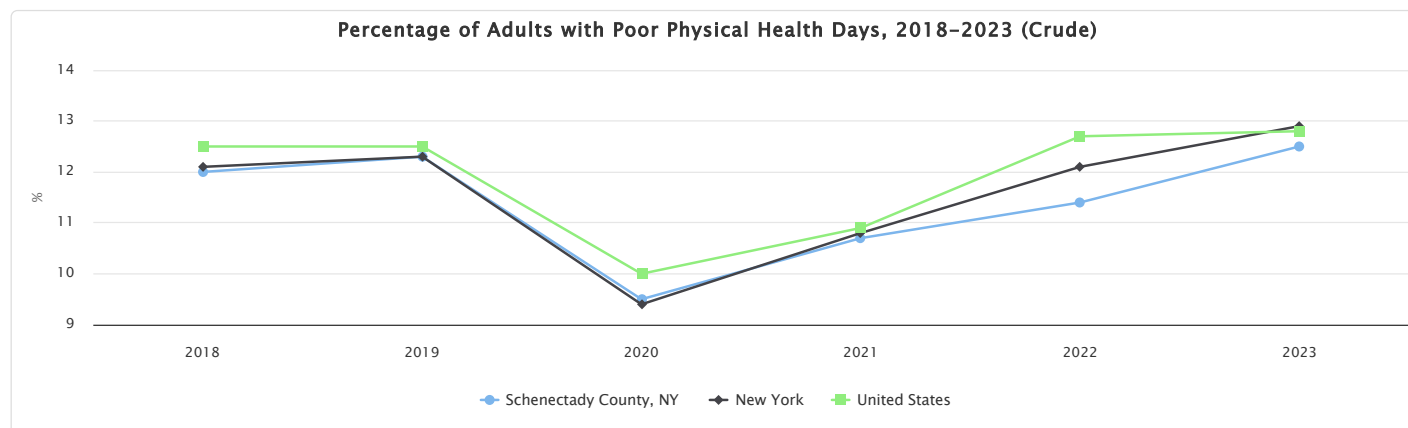
- Over 30.0%
- 25.1 - 30.0%
- 20.0 - 25.0%
- Under 20.0%
- No Data or Data Suppressed
- Schenectady County, NY

## Percentage of Adults with Poor Physical Health Days, 2018-2023 (Crude)

The table and chart below display annual trends in the percentage of adults age 18+ whose report frequent physical distress.

Report Area	2018	2019	2020	2021	2022	2023
Schenectady County, NY	12.0%	12.3%	9.5%	10.7%	11.4%	12.5%
New York	12.1%	12.3%	9.4%	10.8%	12.1%	12.9%
United States	12.5%	12.5%	10.0%	10.9%	12.7%	12.8%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.



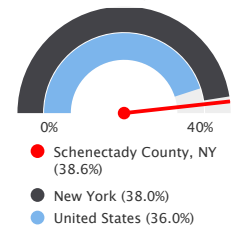
## Sleep

This indicator reports the percentage of adults age 18 and older who report usually getting insufficient sleep (<7 hours for those aged ≥18 years, on average, during a 24-hour period).

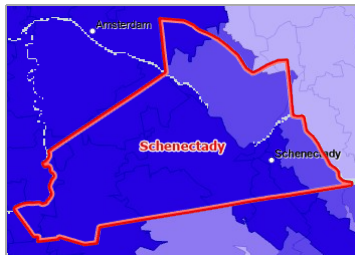
Within the report area there are 38.6% adults age 18+ sleeping less than 7 hours on average of the total population of the total population age 18+.

Report Area	Total Population (2020)	Adults Age 18+ Sleeping Less Than 7 Hours on Average (Crude)	Adults Age 18+ Sleeping Less Than 7 Hours on Average (Age-Adjusted)
Schenectady County, NY	160,093	<b>38.6%</b>	39.6%
New York	19,677,151	38.0%	38.9%
United States	333,287,557	36.0%	36.8%

percentage of Adults Age 18+ sleeping Less Than 7 Hours on Average

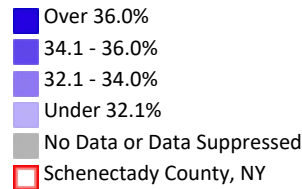


Note: This indicator is compared to the state average.  
 Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2022.



[View larger map](#)

Inadequate Sleep Habits, Percent of Adults Age 18+ by ZCTA, CDC BRFSS PLACES Project 2022

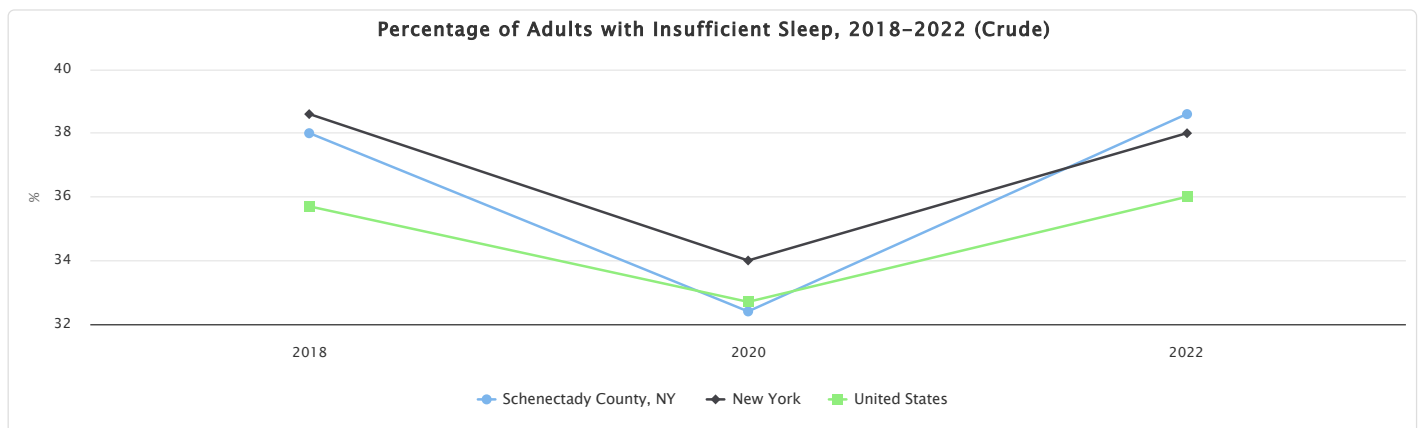


## Percentage of Adults with Insufficient Sleep, 2018-2022 (Crude)

The table and chart below display annual trends in the percentage of adults age 18+ who report having insufficient sleep.

Report Area	2018	2020	2022
Schenectady County, NY	38.0%	32.4%	38.6%
New York	38.6%	34.0%	38.0%
United States	35.7%	32.7%	36.0%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2022.



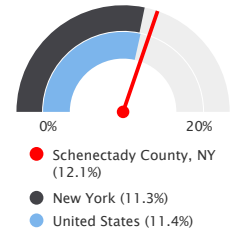
## Tobacco - Tobacco Use

This indicator reports the percentage of adults age 18 and older who reported having smoked at least 100 cigarettes in their lifetime and currently smoke every day or some days.

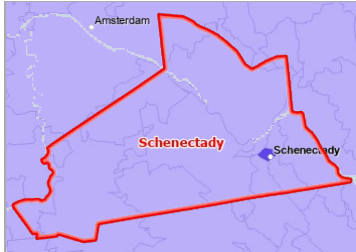
Within the report area 12.1% of adults age 18+ reported having smoked and currently smoking.

Report Area	Total Population	Adults Age 18+ as Current Smokers (Crude)	Adults Age 18+ as Current Smokers (Age-Adjusted)
Schenectady County, NY	159,902	<b>12.1%</b>	12.5%
New York	19,571,216	11.3%	11.6%
United States	334,914,895	11.4%	11.6%

percentage of Adults Age 18+ who are Current Smokers



Note: This indicator is compared to the state average.  
 Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.



[View larger map](#)

Current Smokers, Adult, Percent of Adults Age 18+ by ZCTA, CDC BRFSS PLACES Project 2023

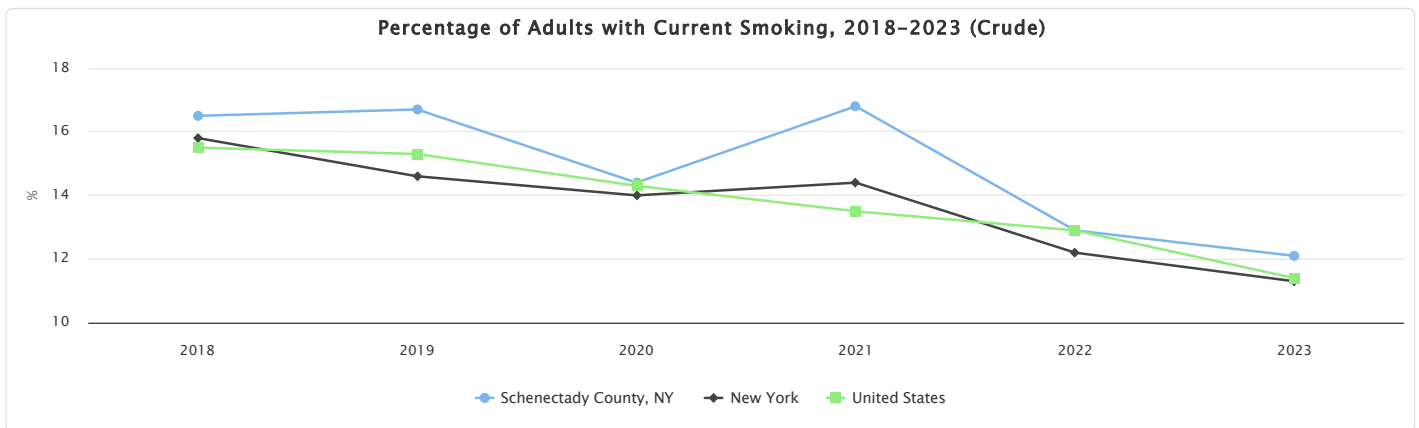
- Over 23.0%
- 20.1 - 23.0%
- 17.1 - 20.0%
- Under 17.1%
- No Data or Data Suppressed
- Schenectady County, NY

### Percentage of Adults with Current Smoking, 2018-2023 (Crude)

The table and chart below display annual trends in the percentage of adults age 18+ who report that they currently smoke cigarettes.

Report Area	2018	2019	2020	2021	2022	2023
Schenectady County, NY	16.5%	16.7%	14.4%	16.8%	12.9%	12.1%
New York	15.8%	14.6%	14.0%	14.4%	12.2%	11.3%
United States	15.5%	15.3%	14.3%	13.5%	12.9%	11.4%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2023.



<https://trinityhealthdatahub.org>, 1/5/2026