Issue Profile: Oral Health Care

Prevention Agenda Bucket: Health Care Access and Quality

Issue Statement:

Livingston County residents are showing poorer dental/oral health outcomes due to the shortage of providers in rural areas and service gaps for residents with low socioeconomic status.

Community Status Assessment:

Overall negative trends in oral health care access and utilization

- Dentist-to-population ratio: 1,980:1 (↑10%; NYS avg: 1,200:1; much worse than target)
- Adults with dental visit in past year: 69.9% (↓11%)
- Medicaid enrollees (2–20) with any dental visit: 41.3% (↓7%)
- Medicaid enrollees (all ages) with a dental visit: 26.7% (↓13%)
- Medicaid enrollees (all ages) with a preventive visit: 22.7% (↓15%)
- Children (2–20) in government insurance with any dental visit: 48.1% (↓22%)
- Medicaid enrollees (2–20) with preventive dental visit: 38.7% (↓7%)

Assets and Resources:

- Department of Health
- Access to Dental Care Coalition
- Department of Social Services
- Existing transportation services
  - Regional Transit System
- Urgent Care
- Dental offices
- Be Well in Livingston
- Genesee Valley Health Partnership
- Hospital and medical centers
- County campuses
- Finger Lakes Community Health
- Economic Development

Community Partner Assessment:

- 4 of 12 partners are directly involved in chronic disease prevention and control efforts

Community Context Assessment:

- Recent dental clinic closures have made access more difficult—particularly for Medicaid recipients and low-income families.
- Residents report challenges finding dental providers who accept Medicaid or are taking new patients
- Long wait times and the need to travel outside the county for care are common.
- Cost and lack of insurance acceptance remain major barriers, especially for families and older adults.
- Poor oral health is strongly linked to chronic disease and overall well-being; unmet dental needs can negatively impact both physical and mental health.

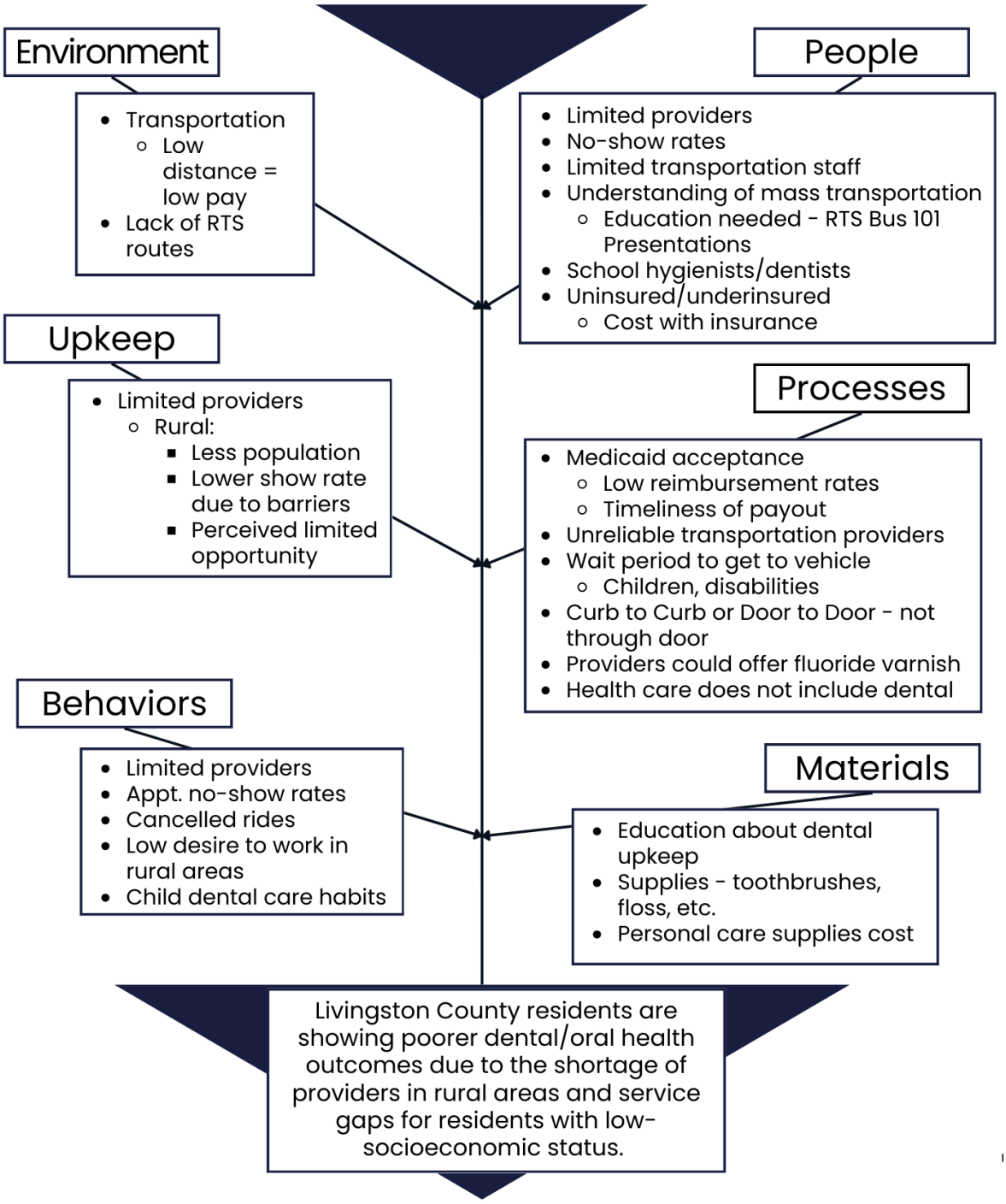
Equity Considerations:

- Low Socioeconomic Status:
  - Medicaid acceptance
    - No dental providers in Livingston County
  - Cost of care
  - Cost of insurance
  - Lack of paid time off for medical care
- Mobility Challenged
  - Need to travel out of county for services
  - Acceptance of insurance at local offices
  - Inability to consistently attend appointments can lead to discharge

Issue Profile: Oral Health Care

Prevention Agenda Bucket: Health Care Access and Quality

Root Cause Analysis:



Potential Solutions and Impact:

- CDC Partner Promotion of Strategies to Advance Oral Health:
  - Evidence-Based Preventive Services in School
    - Sealant and fluoride programs
  - Community water fluoridation
  - Oral health surveillance to describe trends
  - Oral health program assessment
  - Support for medical-dental integration efforts
- County Health Rankings & Roadmaps:
  - Federally qualified health centers/community health centers
  - Financial incentives for health professionals serving underserved areas
  - Community water fluoridation

Issue Profile: Depression/Anxiety and Stress

Prevention Agenda Bucket: Social and Community Context

Issue Statement:

In Livingston County, mental wellness outcomes are trending negatively due to disproportionate effects of limited access, location, and lack of trusted services. Limited access disproportionately affects marginalized communities, particularly for youth and those with limited network access, leading to poorer health outcomes.

Community Status Assessment:

- Frequent poor mental health: 18% of adults
  - (↑29%; NYS avg: 16%).
- Depression: 24.9% of adults
  - (↑27%; NYS avg: 18.7%).
- Mental health provider ratio: 640:1
  - vs. NYS: 260:1

Community Context Assessment:

- Limited Provider Availability: There is a shortage of mental health providers, with long wait times. Few accept Medicaid or are not accepting new patients. Need for mental health providers for young people.
- High Turnover: Frequent turnover among providers makes it difficult for individuals to build trust and avoid repeatedly retelling their personal experiences.
- Transportation Barriers: Access to mental health services is especially limited in rural areas due to lack of transportation.

Community Partner Assessment:

- Partner Focus Areas (out of 12):
  - Anxiety/stress (6)
  - Depression (6)
  - ACEs (5)

Equity Considerations:

- Low Socioeconomic Status:
  - Medicaid acceptance
- Mobility Challenged
  - Transportation barriers for those who do not want telehealth

Potential Solutions and Impact:

- Healthy People 2030
  - Screening for depression/anxiety in children/adolescents and adults
  - Prevention for Perinatal Depression:
    - Counseling for people at higher risk (history or symptoms of depression, risk factors, partner violence, etc.)
- 2019-24 NYS Prevention Agenda
  - Strengthen economic supports, household financial security, housing
  - Strengthen resources for families and caregivers
  - Guided self-help interventions
- County Health Rankings & Roadmaps:
  - Mental Health First Aid
  - Mobile Health for Mental Health

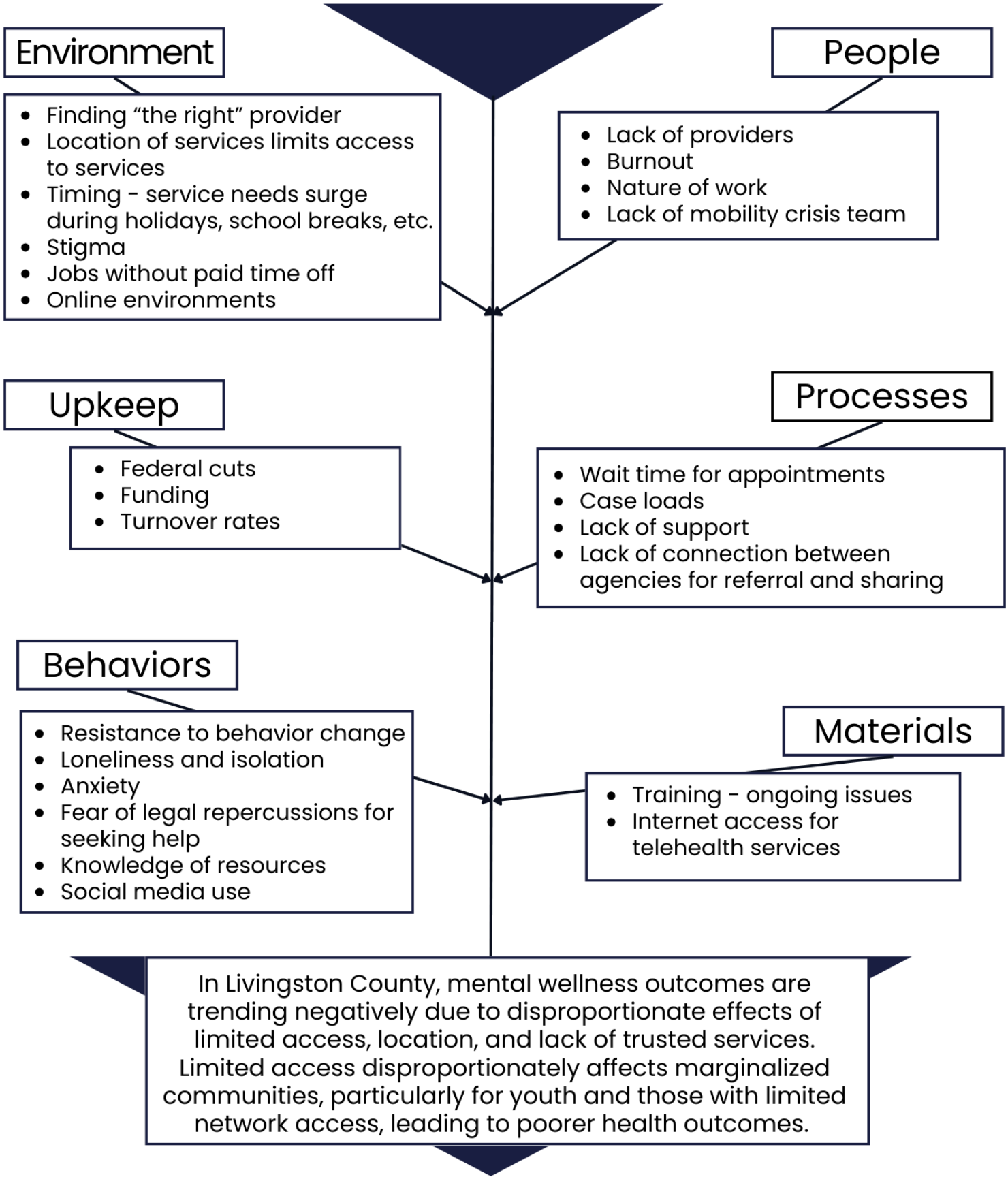
Assets and Resources:

- Department of Health
- Be Well in Livingston
- Senior meal sites
- Law Enforcement
- American Legion
- Mental Health Association
- Dwyer Program
- Genesee Valley Health Partnership
- Clubs (Lions, Rotary, sports etc.)
- Suicide Prevention Task Force
- Finger Lakes Community Center
- Schools
- VFA
- Churches
- Parks
- Senior clubs
- Green space
- GLOW Out!
- CASA Trinity

Issue Profile: Depression/Anxiety and Stress

Prevention Agenda Bucket: Social and Community Context

Root Cause Analysis:



Issue Profile: Primary Prevention, Substance Misuse, and Overdose Prevention

Prevention Agenda Bucket: Social and Community Context

Issue Statement:

Livingston County substance use outcomes are improving in some areas and worsening in others, based on community-level data. Issues like stigma, access to treatment services, and disproportionate effects on vulnerable populations contribute to higher rates of substance misuse and addiction, especially for those with Adverse Childhood Experiences (ACEs) and other mental health issues.

Community Status Assessment:

- Opioid overdose deaths: 22.3/100,000 (↑829%; NYS: 27).
- All overdose deaths: 24.5/100,000 (↑433%).
- Adult binge/heavy drinking: 23% (3% above NYS)

Equity Considerations:

- Low Socioeconomic Status:
  - At higher risk of chronic pain
  - Less likely to seek care
- Mobility Challenged
  - Transportation barriers

Potential Solutions and Impact:

- 2019-24 NYS Prevention Agenda
  - Prevent underage drinking and excessing alcohol consumption by adults
    - Integrate trauma-informed approached into prevention programs
    - Screening, Brief Intervention and Referral to Treatment (SBIRT)
  - Prevent opioid and substance misuse deaths
    - Availability of medication assisted treatment (MAT) and Naloxone
    - Safe disposal sites and take-back days

Community Partner Assessment:

- Partner Focus Areas (out of 12):
  - Anxiety/stress (6)
  - Depression (6)
  - Substance use/overdose (5)
  - Tobacco/alcohol use (5)
  - ACEs (5)

Community Context Assessment:

- Transportation Barriers: Access to substance use services is especially limited in rural areas due to lack of transportation.
- Substance Use Concerns:
  - Ongoing opioid crisis.
  - Community calls for increased access to Narcan, CPR training, harm reduction efforts, and local support groups.
- Community Priorities:
  - Expand treatment options and improve speed of access to care.
  - Provide more education and support for youth, especially in school settings.

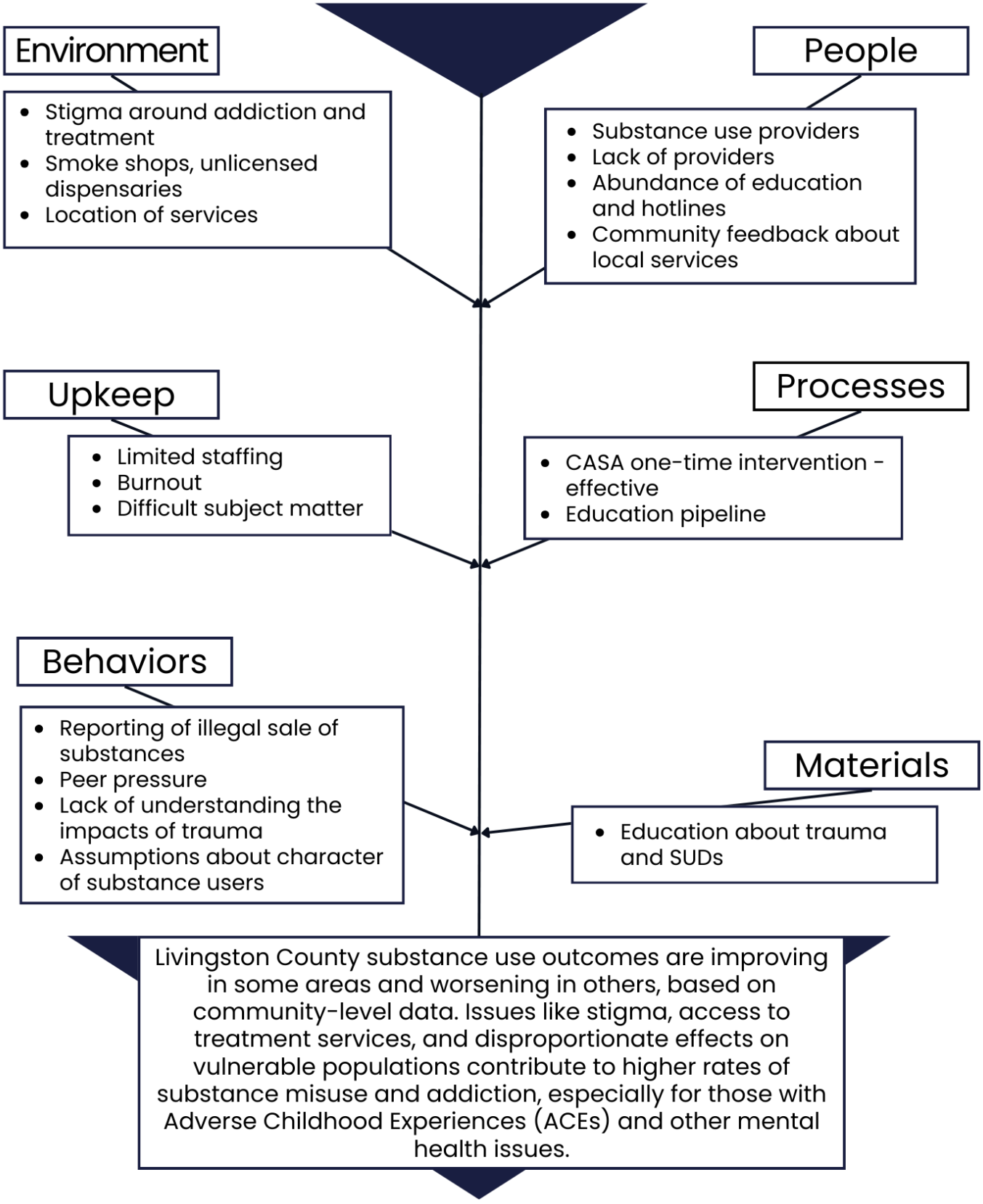
Assets and Resources:

- Department of Health
- Be Well in Livingston
- Genesee Valley Health Partnership
- Law Enforcement
- Dwyer Program
- Arc GLOW
- Correctional facilities
- Urgent care
- Veteran's Association
- Finger Lakes Community Health

Issue Profile: Primary Prevention, Substance Misuse, and Overdose Prevention

Prevention Agenda Bucket: Social and Community Context

Root Cause Analysis:



Issue Profile: Suicide

Prevention Agenda Bucket: Social and Community Context

Issue Statement:

Higher rates of suicide are present in rural areas due to shortages of providers, longer wait times, geographic barriers, fear of anonymity, and increased access to firearms. Suicide mortality is higher among men, and veterans are a significant vulnerable population in Livingston County.

Community Status Assessment:

- Frequent poor mental health: 18% of adults
  - (↑29%; NYS avg: 16%).
- Depression: 24.9% of adults
  - (↑27%; NYS avg: 18.7%).
- Mental health provider ratio: 640:1
  - vs. NYS: 260:1
- Suicide 13/100,000 (↑18%),

Community Partner Assessment:

- Partner Focus Areas (out of 12):
  - Anxiety/stress (6)
  - Depression (6)
  - ACEs (5)
  - Suicide (5)

Equity Considerations:

- People with Adverse Childhood Experiences
- Low socio-economic status
- Older adults
  - Social isolation

Community Context Assessment:

- Limited Provider Availability: There is a shortage of mental health providers, with long wait times. Few accept Medicaid or are open to new patients. Need for mental health providers for young people.
- High Turnover: Frequent turnover among providers makes it difficult for individuals to build trust and avoid repeatedly retelling their personal experiences.
- Transportation Barriers: Access to mental health services is especially limited in rural areas due to lack of transportation.

Potential Solutions and Impact:

- Healthy People 2030
  - School-based risk awareness programs
  - Alcohol outlet density restrictions
  - Mental health benefits legislation
- 2019-24 NYS Prevention Agenda and **CDC**
  - **Strengthen economic supports, household financial security, housing**
  - **Strengthen access to and delivery of care**
  - **Create protective environments:**
    - **Reduce lethal means**
    - Trauma-informed approaches
    - Reduce excessive alcohol use
  - Identify and support people at risk, **promote connection**

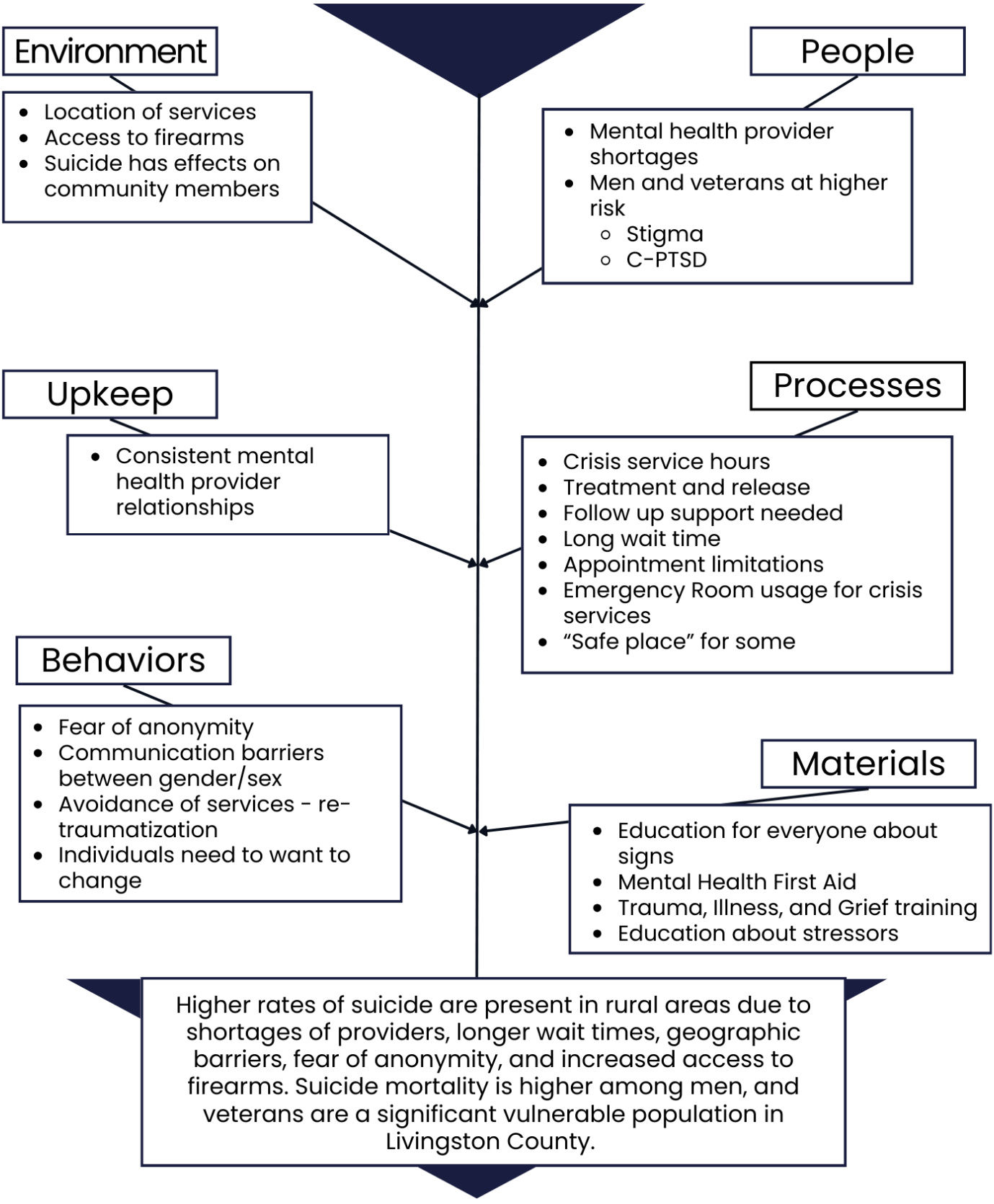
Assets and Resources:

- Department of Health
- Be Well in Livingston
- Law Enforcement
- American Legion
- Mental Health Association
- Genesee Valley Health Partnership
- Suicide Prevention Task Force
- Finger Lakes Community Center
- Dwyer Program
- Schools
- VFA
- Senior clubs
- GLOW Out!

Issue Profile: Depression/Anxiety and Stress

Prevention Agenda Bucket: Social and Community Context

Root Cause Analysis:



Issue Profile: Poverty/Housing Stability and Affordability/Nutrition Security

Prevention Agenda Bucket: Economic Stability

Issue Statement:

Poverty rates for vulnerable populations in Livingston County, such as older adults (65+) and low-income families, are trending poorly due to increased cost of living, such as housing, healthy foods, and utilities.

Community Context Assessment:

- Nutrition & Food Access:
  - Limited access to affordable, healthy foods.
  - Need for more grocery stores, healthier food options in pantries, and better nutrition education (including in schools).
  - Healthy food is often too expensive.
  - Need to get word out what is nutritional when on low budget.
- Food Insecurity:
  - Food pantries play a critical role but are not always sufficient or easily accessible.
  - Transportation is a major barrier to food access and other essential services.
- Financial Insecurity:
  - Rising living costs have increased reliance on social supports.
  - Many struggle to afford medical/dental care, prescriptions, and to navigate complex assistance systems.
  - Residents find services like DSS intimidating or difficult to access.
- Housing Instability:
  - Rising housing costs disproportionately affect low-income individuals.

Community Status Assessment:

- Poverty: Overall population poverty at 11.6% (↓14%; NYS: 13.7%)
  - Senior poverty (65+) experiencing rising poverty (6.9%, ↑17%)
  - Child poverty at 12% (↓25%)
- Nutrition Security: 4% of low-income residents do not live close to a grocery store (just above NYS: 2%)
- Perceived food security among low-income adults is 60.5% (above NYS: 58.4%).
- Healthy Eating:
  - Only 49% of adults eat fruit daily (↓9%)
  - 56.5% eat vegetables daily (↓2%)
  - Sugary drink consumption remains high among low-income adults.
- Housing: 10% of households spend 50%+ of income on housing, signaling cost burden concerns.

Community Partner Assessment:

- Partner Focus Areas (out of 12):
  - Poverty (5)
  - Unemployment (3)
  - Nutrition security (5)
  - Housing stability and affordability (6)

Issue Profile: Poverty/Housing Stability and Affordability/Nutrition Security

Prevention Agenda Bucket: Economic Stability

Issue Statement:

Poverty rates for vulnerable populations in Livingston County, such as older adults (65+) and low-income families, are trending poorly due to increased cost of living, such as housing, healthy foods, and utilities.

Assets and Resources:

- Libraries/cooling centers
- Churches
- CORE Learning Center
- Center for Sexual Health and Wellness
- Schools
- Senior meal sites
- Nursing homes
- Catholic Charities
- Department of Health
- Department of Social Services
- Cornell Cooperative Extension
- Food pantries
- Foodlink
- Chamber of Commerce
- Regional Transit System
- Chances and Changes
- Jemison Place
- Clubs (Lions, Rotary, etc.)
- Access to Dental Care Coalition
- Be Well in Livingston
- Genesee Valley Health Partnership
- Transportation work group
- Partners for Progress
- Greater Nunda Action Partnership
- Geneseo Parish Outreach
- Community gardens
- Finger Lakes Community Center
- Farmers markets

Equity Considerations:

- Limited access to affordable, healthy foods, especially in rural and underserved areas
- Low socioeconomic status:
  - Cost of healthy food
  - Housing costs
- Persists among older adults, low-income families, and residents in isolated areas
- Transportation to grocery stores

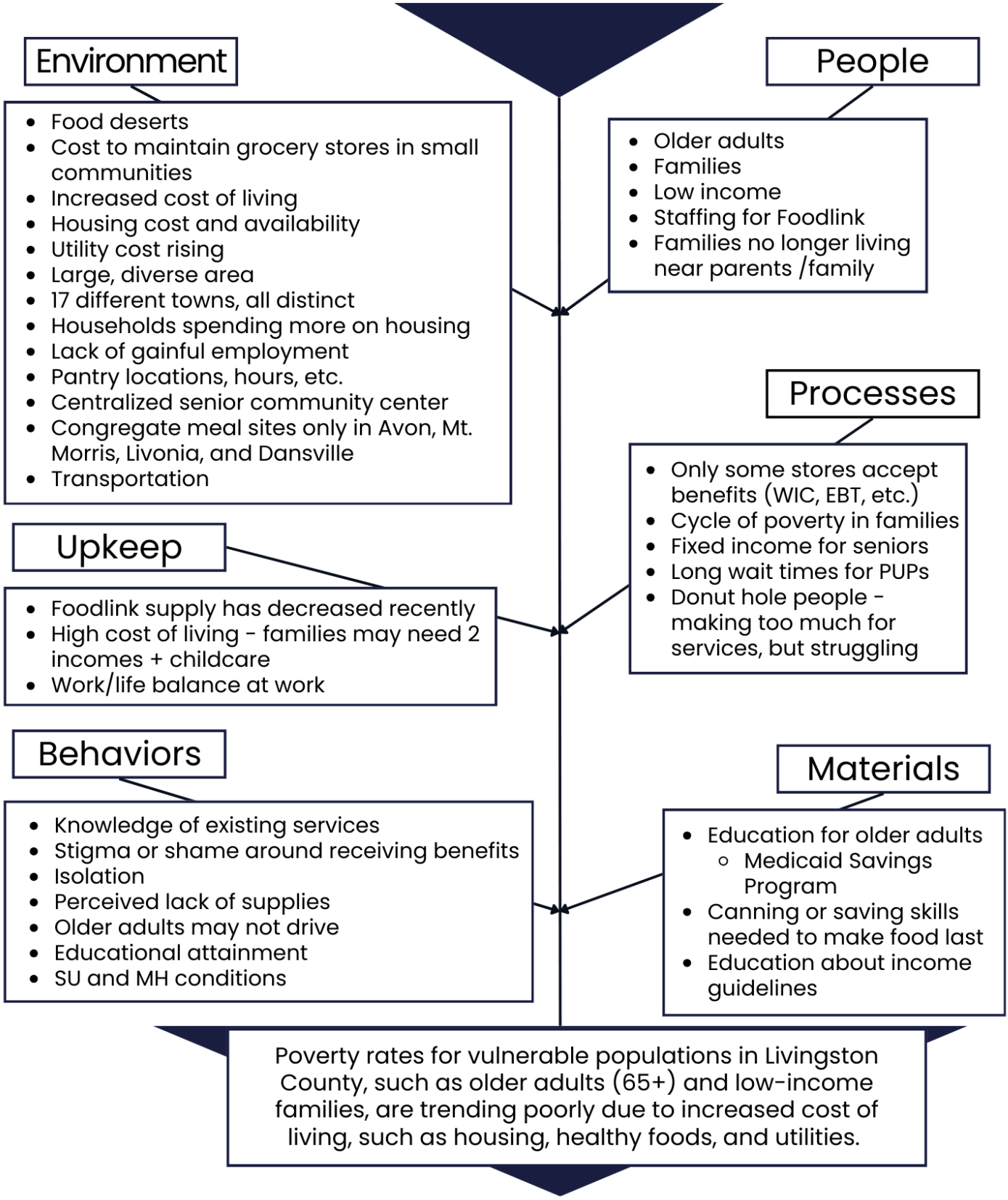
Potential Solutions and Impact:

- Poverty:
  - County Health Rankings & Roadmaps:
    - School breakfast programs
    - Transitional and subsidized jobs
- Housing Stability and Affordability:
  - County Health Rankings & Roadmaps:
    - Housing First programming
    - Housing rehabilitation loan & grant programs
- Nutrition Security:
  - 2019-24 NYS Prevention Agenda:
    - Policy and practices to reduce (over)consumption of sugary drinks
    - Quality nutrition and physical activity in early learning and child care settings
    - Worksite nutrition and physical activity programs
    - Multi-component school-based obesity prevention interventions

Issue Profile: Poverty/Housing Stability and Affordability/Nutrition Security

Prevention Agenda Bucket: Economic Stability

Root Cause Analysis:



Issue Profile: Preventive Services for Chronic Disease Prevention and Control

Prevention Agenda Bucket: Health Care Access and Quality, Health Insurance Coverage and Access to Care

Issue Statement:

Marginalized populations in Livingston County experience higher rates of chronic disease due to greater impact by social determinants of health and barriers such as socioeconomic status and transportation.

Community Status Assessment:

- Mammography (women 50–74): 79% (↑ 5%).
- Medicare mammography: 51% (↑ 4%).
- Colorectal screening: 62% (↓ 7%).
- Diabetes testing (45+): 61.6% (↓ 6%)
  - (↑ 98%) for low-income adults: 75.4%).
- Higher than NYS (excl NYC) rates of chronic disease mortality
- Leading causes of death: cancer, heart disease and Alzheimer's and other dementias.
- Adult obesity: 37.8% (even higher in low-income groups)
- Provider shortages: primary care ratio 2,200:1
  - (vs. NYS 1,240:1).

Community Context Assessment:

- Provider Shortages: Many residents report difficulty finding providers, especially for screenings and specialty care.
- Limited Access to Preventive Screenings: Long wait times are common; some must travel out of county for services.
- Barriers to Care: Cost, lack of insurance coverage or provider acceptance, and limited transportation options make it difficult to access needed care.
- Additional Challenges: Scheduling difficulties, lack of care navigation support, and limited comfort with technology—especially among seniors—hinder access.
- Disabled Residents: Transportation and mobility challenges create further barriers, particularly for those with disabilities.
- Community Resources: While libraries, parks, and local support organizations are valued, they are not sufficient to close existing gaps in preventive care access.

Community Partner Assessment:

- 4 of 12 partners are directly involved in chronic disease prevention and control efforts

Equity Considerations:

- Low socioeconomic status
  - Higher rates of adult obesity
  - Medicare screening
  - Transportation out of county for services
  - Un/underinsured
- Older Adults:
  - Online scheduling, telehealth issues
- Mobility Challenged
  - Extra transportation needs

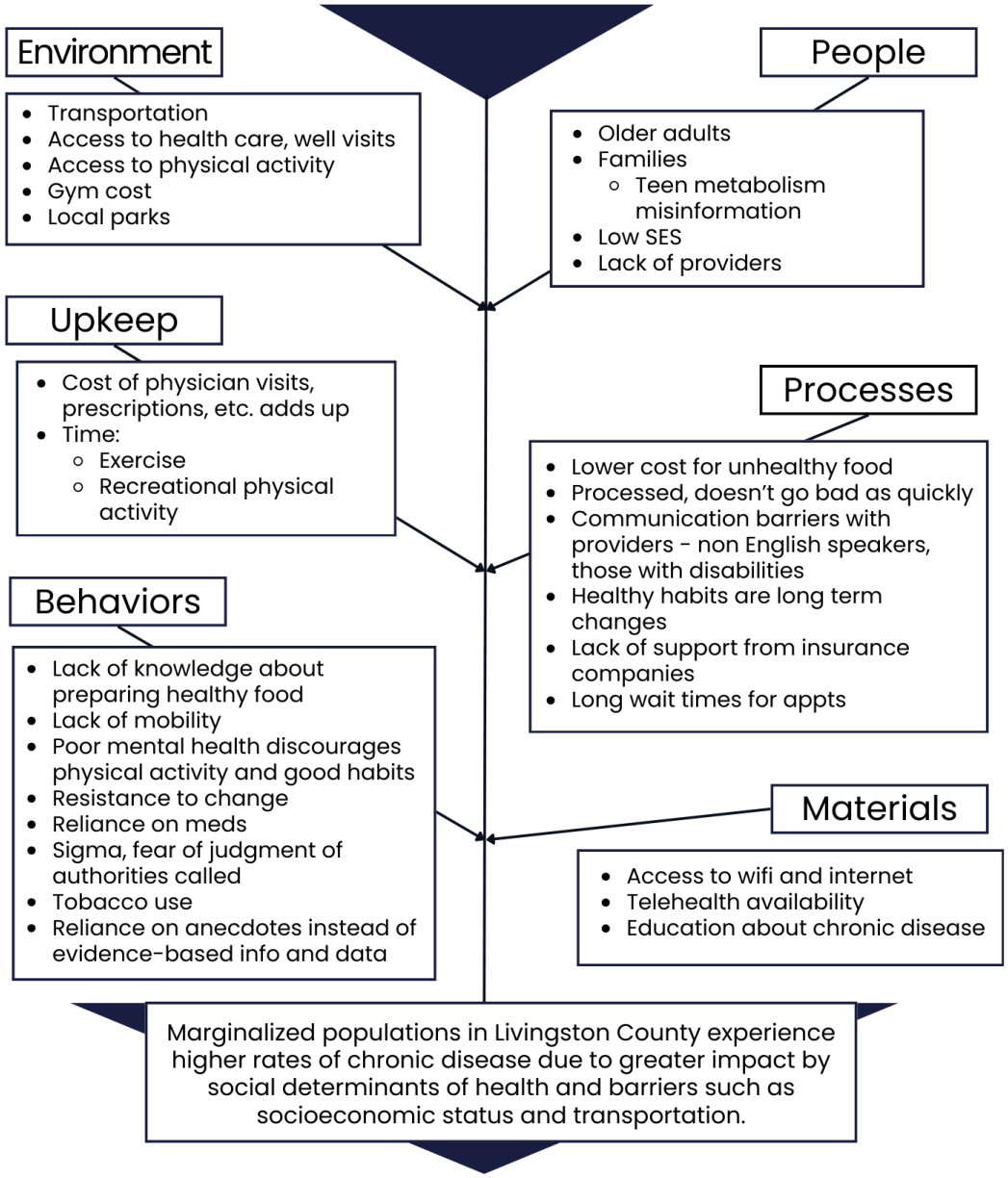
Assets and Resources:

- Department of Health
- Be Well in Livingston
- Senior meal sites
- Cornell Cooperative Extension
- Farms
- Food pantries
- Foodink
- Primary care offices
- Cancer support services networks and groups
- Genesee Valley Health Partnership

Issue Profile: Preventive Services for Chronic Disease Prevention and Control

Prevention Agenda Bucket: Health Care Access and Quality, Health Insurance Coverage and Access to Care

Root Cause Analysis:



Assets and Resources (cont.):

- Dental offices
- Gardening clubs
- Partners for Progress
- Greater Nunda Action Partnership
- Gyms
- Parks and trails
- YMCA
- Nunda Pickle Ball courts
- Golf courses
- Yoga, dance, gymnastics studios
- Finger Lakes Community Center
- Playgrounds
- Farmers markets
- Restaurants

Potential Solutions and Impact:

- County Health Rankings & Roadmaps:
  - Chronic disease management programs and self-management programs
- Healthy People 2030:
  - Tobacco Control
  - Building Healthy Families
  - Breast Cancer Screening
  - Worksite Obesity programs
  - Obesity Intervention in Schools
  - Behavioral Interventions in Adults
- 2019-24 NYS Prevention Agenda
  - Patient screening reminders
  - Group education or media
  - Remove structural barriers to screening
    - Flexible clinic hours, non-clinic settings, translation, transportation, etc.
  - Promote a team-based approach to care
  - Expand access to self-management