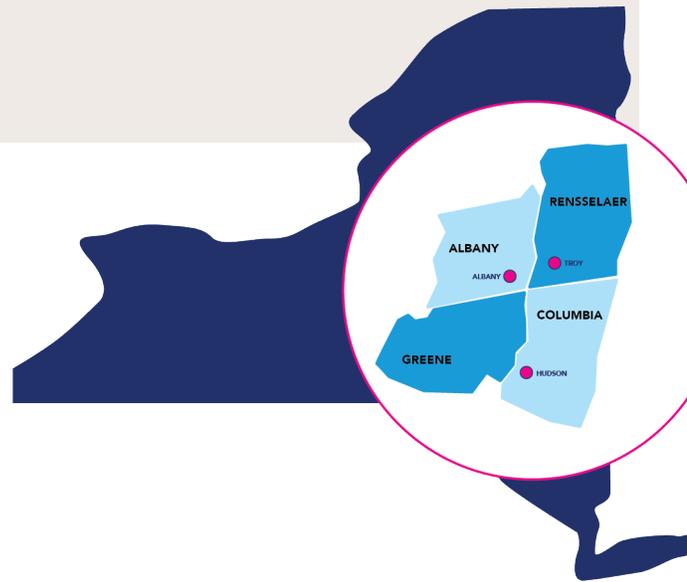


# COMMUNITY NEEDS ASSESSMENT 2022

Data, Trends, and Health Outcomes  
for Upper Hudson Planned  
Parenthood's Service Area

Albany, Columbia, Greene, and  
Rensselaer Counties



Upper Hudson Planned Parenthood

# COMMUNITY NEEDS ASSESSMENT

Upper Hudson Planned Parenthood

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## Community Needs Assessment 2022

A Community Needs Assessment (CNA) has been given many definitions. For this purpose, it is defined as a systematic process for determining and addressing needs or “gaps” between current conditions and desired conditions or “wants.” The discrepancy between the current condition and wanted condition must be measured to appropriately identify the need.<sup>1</sup>

For comprehensive purposes, this CNA will also include components identified in Community Identification, which is a formative evaluation process to collect important information and learn from the perspective community itself about:<sup>2</sup>

- perception of community risk and risk behaviors
- barriers that exist to changing behaviors
- knowledge of services and gaps in those services
- knowledge and attitudes about UHPP programs and services

## Community Needs Assessment Objectives

- Identify and develop a clear understanding of the target population
- Identify specific health risks
- Establish a presence in the community
- Learn what risk reduction messages, methods, and materials are appropriate for this population
- Develop a plan for accessing at-risk members of the target population
- Elicit support and cooperation from other agencies

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<sup>1</sup>The United Way of America (1982)

<sup>2</sup>Community Promise HIP Project



• Eating

• Drugs + Me

• Class down

• Online safety

• Self-care

• hands-on activities → discuss

• States of change

## CNA Components

### **Investigate Existing Data**

**It provides an overview of our target population**

- Race/Ethnicity
- Economy
- Pregnancy/Birth Rate
- HIV/STI Prevalence

### **Conduct Internal Staff interviews**

**Additional experts on target population**

- what are some risk behaviors
- what are influencing factors
- what are the barriers to services

### **Conduct External Source Interviews (Stakeholders/Providers)**

**Additional experts on target population**

- what are some risk behaviors
- what are influencing factors
- what are the barriers to services

### **Focus Groups (Parent/Youth)**

**Moderate discussions on a particular topic or issue, local services being accessed and barriers/supports**



## Introduction

As part of an annual evaluation of community health status and needs, Upper Hudson Planned Parenthood (UHPP) conducts a biennial community needs assessment. Through this process, we collect data, analyze trends in regional demographics and health outcomes, and solicit input from patients and community partners to help define and shape service delivery for our health care, education, and outreach initiatives. UHPP's 2022 Community Needs Assessment includes the most current census data, New York State Department of Health information and statistics, as well as program and patient data from UHPP.

It is important to note that 2020-2022 year to date the UHPP service area, its patients, private businesses, school, and community-based organizations are still recovering from the impact of COVID-19. Therefore, the 2022 Needs Assessment will reflect these unique influences the pandemic had on the region.

Inequities in the proposed priority communities reflect disproportionate amounts of poverty, access to education, services, and increased sexual risk-taking behavior. Additionally, in all racial and ethnic groups, clear cut health disparities continue to exist between non-Hispanic Whites their non-Hispanic Black and Latino peers.

This assessment will define current family planning service needs throughout our four-county service area and will provide a foundation for determining program success, as well as shape all long-term and strategic planning.



## Description of Service Area Including Population Changes

Upper Hudson Planned Parenthood provides reproductive health care services in four counties located in Upstate New York; they are part of a larger geographic area known collectively as the Capital Region. This area is characterized by several small cities and their surrounding suburban economic zones, as well as larger rural areas.



The UHPP service area includes Albany, Columbia, Greene, and Rensselaer counties, spanning over 2,457 square miles and accounting for roughly 5% of the total geographic area in New York State. Our three health centers are strategically located in the cities of Albany, Hudson, and Troy and within zip code areas demonstrated to be at the highest need for family planning services and highest ASHNI<sup>3</sup> score. The entire UHPP service area is linked through several major routes of transportation and is easily accessible from the New York State Thruway.



In August 2020, UHPP relocated its Troy Health center to 120 Hoosick St, Troy, NY. The Opalka Center for Reproductive Health and Education is in the former Peebles department store in the Hudson River Commons Plaza. The center houses a reception area and waiting area, eight patient rooms, recovery room, one wellness counseling office, and shared teen space and community room. The center is conveniently located with ample parking and on a bus line.

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<sup>3</sup>ASHNI is an indicator, calculated at the ZIP code level, to provide a single, multidimensional measure related to adolescent pregnancy and STDs.

## Race and Origin

According to the most recent census data <sup>4</sup> (2021), our four counties contain an estimated 584,252 people. Changes are spread across the service area with Columbia and Greene Counties having the largest percent of population increase.

Columbia County	Greene County	Albany County	Rensselaer County
.3%	1.2%	-.4%	-.6%

Across the service area, about 85% of residents identify as white and this percentage has continued to hold steady since 2016. Percentages of residents identifying as racial minorities has held steady as well; the most recent data demonstrates a 1% increase of residents identifying as Hispanic or Latino, and 3% identifying as two or more races. Notable is the increase of residents identifying as foreign born,<sup>5</sup> which increased from 1.2% to 7%. Although the UHPP service area is predominately white, our patient population is 48% non-white which reflects a greater level of racial and ethnic diversity.

RACE AND HISPANIC ORIGIN <sup>6</sup>	Average Percentage Across Service Area 2021	Average UHPP Patient Demographic
Black or African American	8%	31%
American Indian and Alaska Native <sup>***</sup>	--	1%
Asian	3%	4%
Native Hawaiian and Other Pacific Islander <sup>***</sup>	--%	1%
Two or more races	3%	11%
Hispanic or Latino	6%	--
Foreign born persons <sup>7</sup>	7%	--

## Economy

According to the most recent data available from census.gov as of July 2021, Upper Hudson Planned Parenthood's service area has a regional median income of \$66,252. This is \$2,000 higher than the median income for the United States, and shows an increase of nearly \$5,500 from the last needs assessment. Approximately 11.3% of the residents in the UHPP service area live at or below the federal poverty level (FPL). Overall, this percentage has been trending downward since tracking began in 2016.

Counties	2017	2019	2021
Albany County	12%	12%	12.1%
Columbia County	11.4%	11.9%	10.2%
Greene County	15.9%	13.2%	11.5%
Rensselaer County	12.5%	12%	10.8%

Within the Capital Region, roughly 15.3% of all youth under age 18 are living at or below the federal poverty level; this is a decrease from 16.5%. When reviewing income across race, ethnicity and all counties, white and Asian-identified households make comparable amounts but nearly double what Black or African American families are making.

According to Medicaid.gov, as of May 2022 6,605,610 New Yorkers are enrolled in Medicaid. This is a decrease of 1,110,237 from 2020. Approximately 568,434 New Yorkers are enrolled in CHIP—a decrease of 57,150. There are 2,467,008 children enrolled in Medicaid and CHIP.<sup>8</sup> Of the total number of New Yorkers enrolled in Medicaid, 154,150 of these enrollees reside in UHPP services areas. This is an increase of about 50,000 in the last two years. Albany County accounted for about 50% of the total, Rensselaer County about 30%, and Columbia/Greene Counties, 20%.<sup>9</sup>

<sup>4</sup> <https://www.census.gov/quickfacts/fact/table/columbiacountynewyork,greenecountynewyork,albanycountynewyork,rensselaercountynewyork,US/PST045221>

<sup>5</sup> The foreign-born population includes anyone who was not a U.S. citizen or a U.S. national at birth. This includes respondents who indicated they were a U.S. citizen by naturalization or not a U.S. citizen.

<sup>6</sup> Races with \*\*\* indicate less than 1%

<sup>7</sup> The foreign-born population includes anyone who was not a U.S. citizen or a U.S. national at birth. This includes respondents who indicated they were a U.S. citizen by naturalization or not a U.S. citizen.

<sup>8</sup> <https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-enrollment-data/report-highlights/index.html>

<sup>9</sup> [https://www.health.ny.gov/health\\_care/medicaid/enrollment/](https://www.health.ny.gov/health_care/medicaid/enrollment/)

## Upper Hudson Planned Parenthood Patient Data

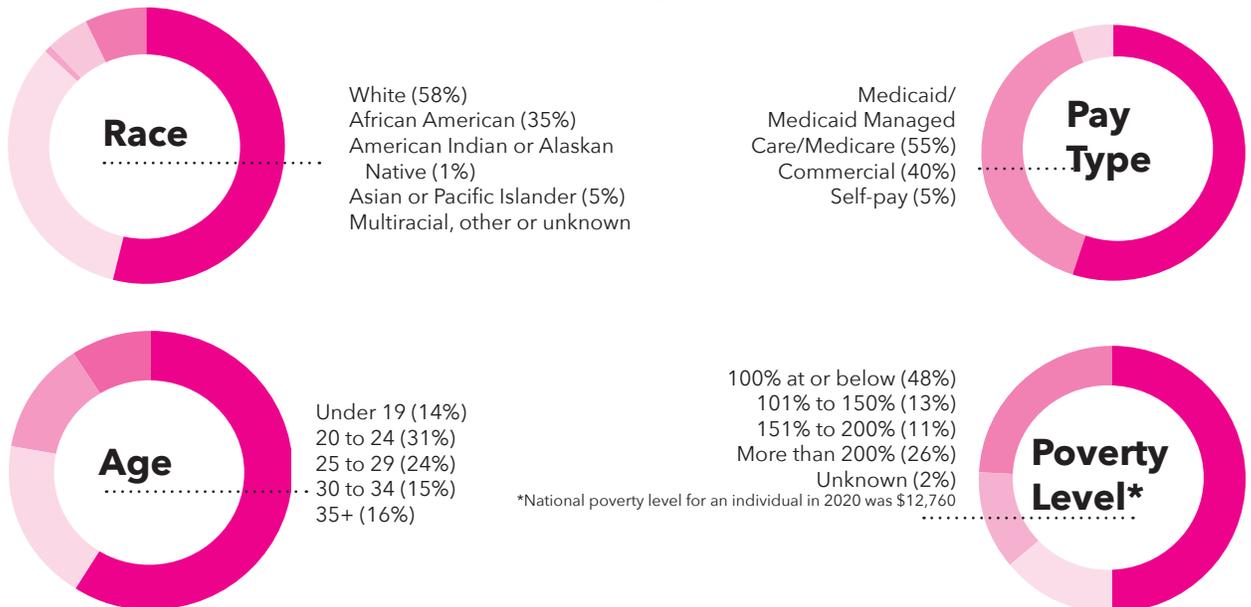
In 2021, UHPP had a total of 15,449 patient visits; this is an increase of 1,269 from 2019. UHPP offers a wide range of comprehensive family planning services including: birth control information and supplies, STI testing and treatment, HIV testing and counselling, GYN exams (including pap smears), breast exams, cervical cancer screenings and treatment (including colposcopy, cryosurgery, and LEEP), HPV vaccines, pregnancy testing and options counselling, emergency contraception, and abortion services.

Since the last community needs assessment was conducted, UHPP has continued to grow our Wellness Counseling program. Through these services, patients are screened for depression/anxiety, substance abuse, personal safety, and a variety of other social determinants of health. When indicated, patients are then paired with a counselor to provide talk therapy and to assist them in accessing other care. UHPP's two Behavioral Health Managers provided 1,267 counseling sessions, and 15,451 patients were screened for depression and anxiety.

In 2021, 20,841 tests/treatments for STIs were provided to UHPP patients, including 3,628 HIV tests which—an increase of 1,513 from 2019—resulting in 551 STIs being diagnosed, enabling people to get treatment and learn preventions strategies. Additionally, 1,614 pap tests and breast exams were performed; this is almost double from the previous assessment.

The majority of UHPP patients seen in 2021 were persons of reproductive age. Roughly 24% of our patients were between the ages of 25-39, and 42% were 25 years or younger. Much like the greater geographic service area, UHPP's patient population comes from a diverse range of economic backgrounds and utilizes several different insurance and/or payment options to obtain family planning services. In 2019, 39% of patients used some form of commercial health insurance, and 56% utilized Medicaid/Medicaid Managed Care/Medicare.

### 2021 Patient Demographics



## Family Planning Needs

Nearly half of all residents within the UHPP service area identify as female<sup>10</sup> and roughly 112,739 of those residents are females of childbearing age. These numbers remained stable since the last needs assessment.

### Female Population Among Childbearing Ages by County, New York State in 2017<sup>11</sup>

Age	Albany	Rensselaer	Columbia	Greene	Totals
15-19	11,331	4,792	1,400	1,025	18,548
20-24	16,158	4,886	1,345	1,061	23,450
25-29	10,784	5,535	1,671	1,284	19,274
30-34	9,581	5,683	1,567	1,296	18,127
35-39	9,590	5,116	1,624	1,192	17,572
40-44	8,384	4,574	1,583	1,227	15,768
45+	8,669	4,813	1,827	1,460	16,769

## Pregnancy Rates

The average pregnancy rate for all women living within the UHPP service area is consistently lower than the New York State and the national pregnancy rates. As of 2019, the New York State pregnancy rate for all women is 79.1 per 1,000. This is relatively unchanged from the previous assessment. The average pregnancy rate in the UHPP service area is lower at 64 per 1,000. This is also relatively unchanged from the previous assessment. While the rates vary slightly among each county, there is not a wide discrepancy in rates across the service area, and all rates demonstrate a downward trend. In 2019, Albany County had a pregnancy rate of 64.4, Columbia County had 61.2, Greene County had 60.1, and Rensselaer had 71.5. In 2017, Albany County had a pregnancy rate of 64.4, Columbia County had 61.2, Greene County had 60.1, and Rensselaer had 71.5.<sup>12</sup>

## Teen Pregnancy Rate

At an average rate of 21.35 per 1,000 females aged 15-19, UHPP's service area has a teen pregnancy rate lower than NYS (23.2). However, this is an increase from an average of 17.9 reported in the last assessment. The most notable increases are in Greene and Rensselaer Counties, which went from a rate of 8.3 to 17.6 and from 16.7 to 27.1 respectively. (Albany: 20.0, Columbia: 20.7, Greene: 17.6, and Rensselaer: 27.1).<sup>13</sup>

However, looking only at county wide rates for teen pregnancy can fail to adequately convey the true community burden of teen pregnancy. When looking at zip code based perinatal data, it quickly becomes clear that within the UHPP service area lays several areas at exceptionally high risk for teen pregnancy. All three of UHPP's health centers are in zip code areas with the highest teen pregnancy and birth rates within their respective counties.<sup>14</sup>

When compared to data in the 2020 assessment, Troy and Albany are both demonstrating a decrease in teen pregnancy.

Location of UHPP health center	Teen Pregnancy Rate per 1,000 females (15-19)	County Wide Teen Pregnancy Rate
Albany (12206)	76.5	20.0
Troy (12180)	24.4	27.1
Hudson (12534)	data unavailable	20.7

<sup>10</sup> <https://www.census.gov/quickfacts/fact/table/columbiacountynewyork,greenecountynewyork,albanycountynewyork,US/PST045221>

<sup>11</sup> [https://www.health.ny.gov/statistics/vital\\_statistics/2019/table01a.htm](https://www.health.ny.gov/statistics/vital_statistics/2019/table01a.htm)

<sup>12</sup> [https://www.health.ny.gov/statistics/vital\\_statistics/2019/table27.htm](https://www.health.ny.gov/statistics/vital_statistics/2019/table27.htm)

<sup>13</sup> [https://www.health.ny.gov/statistics/vital\\_statistics/2019/table30.htm](https://www.health.ny.gov/statistics/vital_statistics/2019/table30.htm)

<sup>14</sup> <http://www.health.ny.gov/statistics/chac/perinatal/county/2014-2016>

## Prenatal Care & Low Birth Weight

Upper Hudson Planned Parenthood's service area demonstrates the associated negative health outcomes related to access to prenatal care and subsequently lower birth weight among infants. Additionally, the lack of economic opportunities and access to services and education exacerbate health inequalities between races. This information remains relatively unchanged.

Within the UHPP service area, approximately 7418 total pregnancies occurred in 2019.<sup>15</sup>

The first chart below demonstrates the percentage of women who received late to no prenatal care, broken down by the mother's age. The second chart is the same data broken down by race. Noted are higher trends of teens 15-19 receiving late to no care as well as Black and Hispanic women.

### Age.<sup>16</sup>

County	15-17	18-19	20-24	25-34	35+
<b>Albany</b>	34.6	17.4	8.8	5.3	3.2
<b>Columbia</b>	16.7	0	7.7	3.9	5.4
<b>Greene</b>	0	18.2	9.5	5.2	11.3
<b>Rensselaer</b>	0	8.3	3.8	5.9	6.2
<b>NYS*</b>	17.3	11.8	8.0	5.0	4.4

### Race.<sup>17</sup>

County	White Only	Black Only	Other	Hispanic
<b>Albany</b>	4.3	11.5	6.2	5.5
<b>Columbia</b>	3.3	8.2	6.3	3.3
<b>Greene</b>	5.4	6.7	23.1	11.8
<b>Rensselaer</b>	4.8	S <sup>18</sup>	11.1	8.7
<b>NYS*</b>	3.3	10.8	5.6	6.3

<sup>15</sup>[https://www.health.ny.gov/statistics/vital\\_statistics/2019/table26.htm](https://www.health.ny.gov/statistics/vital_statistics/2019/table26.htm)

<sup>16</sup>[https://www.health.ny.gov/statistics/vital\\_statistics/2019/table12a.htm](https://www.health.ny.gov/statistics/vital_statistics/2019/table12a.htm)

<sup>17</sup>[https://www.health.ny.gov/statistics/vital\\_statistics/2019/table12b.htm](https://www.health.ny.gov/statistics/vital_statistics/2019/table12b.htm)

<sup>18</sup>Data do not meet NYS DOH reporting criteria.

## Unintended Pregnancy

An unintended pregnancy is one that occurred when a woman wanted to become pregnant in the future but not at the time she became pregnant (“wanted later”), or one that occurred when she did not want to become pregnant then or at any time in the future (“unwanted”).

Although researchers have been measuring unintended pregnancy for decades, the conventional approach to categorizing recalled pregnancy desires does not capture the complexities of women’s and couples’ desires, their experiences prior to pregnancy, or the context in which a pregnancy occurs. As a result, sources of data available to characterize pregnancy desires and experiences are limited.

## Induced Abortion

On June 24, 2022, the US Supreme Court overturned Roe v. Wade, the landmark 1973 Supreme Court decision that affirmed the constitutional right to abortion. Over the decades, research has demonstrated that abortion bans most severely impact people in marginalized groups who already struggle to access health care, including abortion.

The abortion landscape is fragmented and increasingly polarized. Many states have abortion restrictions or bans in place that make it difficult, if not impossible, for people to get care. Other states, like New York, have taken steps to protect abortion rights and access. According to the most recent available data from Guttmacher Institute, 110,360 abortions were performed in New York State in 2020. This is an increase of 5000 since 2017. The resulting abortion rate is 28.8 abortions per 1,000 women of reproductive age (15–44). As of 2020, there are 113 facilities providing abortions in NYS this is a decrease from 252 facilities in 2017, and 39% of New York counties do not have an abortion provider at all.<sup>19</sup>

To maintain fidelity of data comparisons the chart below illustrates Induced Abortions by Woman’s Age and Resident County New York State for the years 2014, 2016, 2017, and 2019 according to NYS DOH most recently available data <sup>20</sup>

County	Total Induced Abortions 2014	Total Induced Abortions 2017	Total Induced Abortions 2017	Total Induced Abortions 2019
Albany	1,148	882	947	1,129
Rensselaer	543	405	503	540
Columbia	156	84	88	73
Greene	94	49	63	57
NYS*	932999	82,189	77,810	74,211



<sup>20</sup> [https://www.health.ny.gov/statistics/vital\\_statistics/2019/table21.htm](https://www.health.ny.gov/statistics/vital_statistics/2019/table21.htm)

## HIV and STI Prevalance

According to the most recent New York State HIV/AIDS Surveillance Report (2020) there are some notable highlights that demonstrate some improvements in outcomes, however Black and Hispanic individuals remain disproportionately impacted.

- The number of persons newly diagnosed with HIV in New York State (NYS) has decreased 51% from 2011 to 2020 (3,971 to 1,933)
- In 2020, 209,098 live births were recorded in NYS hospitals, yielding one case of mother-to-child transmission (MTCT)
- Based on data for 2020, NYS met the Centers for Disease Control and Prevention (CDC) definition of elimination of MTCT. This is the seventh time that NYS has achieved the elimination of MTCT (2013, and 2015-2020) and the **first time that NYS has met the goal for 6 consecutive years.**

Overall, in the UHPP service area, there has been a decrease in the HIV case total except for Albany County where there was a small increase.

County	HIV Case Total 2014-2016	HIV Case Total 2017-2019
<b>Albany</b>	78	85
<b>Rensselaer</b>	23	21
<b>Columbia</b>	16	8
<b>Greene</b>	7	5
<b>Region Total</b>	124	119

According to the New York State Sexually Transmitted Infections Surveillance Report, across all age groups, most early and secondary syphilis cases are diagnosed among males. Non-Hispanic Black individuals continue to have the highest rates of early and secondary syphilis, American Indian/Native Alaskan individuals have the second highest rates in the state. Chlamydia remains the most reported STI in New York State with 52.5% cases being diagnosed among people younger than 26 years of age. In New York State, excluding New York City, gonorrhea increased by 45% in 2020. Cases among males (296.9) are more than double that of females (160.3). Non-Hispanic Black individuals account for 43.2% of new gonorrhea cases.

The table below illustrates the rates per 1,000 for gonorrhea, chlamydia, and syphilis in the UHPP service area.

County	Early Syphilis	Gonorrhea	Chlamydia
<b>Albany</b>	25.4	277.7	462
<b>Rensselaer</b>	27.2	240.8	469.5
<b>Columbia</b>	17.5	107.3	331.4
<b>Greene</b>	10	63.2	253.0
<b>New York State Total</b>	41.7	228.3	529.6

## Community Identification Results

The sites selected for the CID process include the cities at highest risk located in Upper Hudson Planned Parenthood's County service areas. This includes the cities of Albany (Albany), Troy (Rensselaer), and Hudson (Columbia). Using existing departmental knowledge and resources, UHPP's Education staff conducted a number of interviews and focus groups with the intention of learning about the community itself. These interviews focused on service providers/stakeholders; people who have been identified as working closely with similar target populations as UHPP. For Internal stakeholder interviews were conducted with health center operations staff including, but not limited to, RNs, Health Center Managers, and Front-Desk staff. External stakeholders interviews were conducted with teachers, outreach/program facilitators, and staff working in medical, mental health, and juvenile justice fields.

This process was implemented to solicit feedback from current/potential UHPP clients and community members living in the target service area. These interviews offered an insight into participant behavior, knowledge of services, and attitude about their communities. Teen and parent focus groups were conducted to provide additional information on the factors mentioned above as well as offering UHPP a better perspective on how to engage the population using marketing and program outreach. Below are the summarized key findings of the process.

## Stakeholder Interview Results

In Albany, Columbia, and Rensselaer counties, when stakeholders were asked, "What are some of the barriers and challenges faced by the communities in your county or counties?" The following trends emerged.

Stakeholders identified family stress and access to affordable child-care as challenges faced by community members. Specifically, there is a trend in the perception of parents being overburdened, typically in single-parent households where the parent is stressed by external factors and in turn children/students are stressed and school performance is impacted. Stakeholders described racism, stigma, fear, and economic status as challenges specific to accessing healthcare. Transportation continues to be identified as a barrier. The current inflation of gas prices has caused additional stress on community members. Albany's public transportation system is the most robust of the counties but is still burdensome for people who need to take multiple busses and/or have limited travel time.

Due to the specific timing of this needs assessment, UHPP included questions specific to impacts of COVID-19 on individuals, communities, and organizations. Stakeholders detailed the following impacts to their work serving the community. Across the board, organizations have been impacted by low staffing due to sickness and quarantine. This, combined with increased community needs of mental health and social services, has caused additional stress on employees and leading to cycles of burnout and increased low staffing. In schools, students continue to struggle with stress and mental health issues like depression and anxiety at what has been described as an alarming rate. Across the board, organizations were forced to adapt to various platforms to provide virtual services, outreach, and educ This impacted staff ability to be more hands-on with community members, and highlighted community members' limited reading and writing skills.

In Albany, Columbia, and Rensselaer counties, when stakeholders were asked, "What community needs are unmet in the county?" The following trends emerged. Stakeholders reported inadequate resources to address mental health, drug and alcohol issues. There is also an ongoing unmet need of adequate childcare. This has been exacerbated by the pandemic as many daycare and afterschool programs have remained shut down.

Stakeholders were asked, "What strategies are being used by your organization to address the factors affecting historically underserved communities in your county?"

Many organizations reported being able to offer bus passes or offer some sort of transportation support for community members. Many organizations, including learning institutions, became intentional about offering mental health and wellness referrals and resources. Some programs were able to provide hotspots for families to ensure they had reliable access to Wi-Fi.

## Adult Focus Group Results

When asked, “What are some Community Based Organizations that you seek for social welfare and general health services?” Participants listed the following:

- Primary care providers
- WIC program
- Whitney Young Health
- Urgent Care
- Planned Parenthood
- Legal AID
- Department of Social Services
- Greene County Family Planning

*Participants described some of the challenges faced when accessing services.*

Across the board, participants described scheduling as a challenge. In particular, patients experienced booking appointments further out, and they also experienced longer wait times when receiving services.

*Adults were asked what social issues were affecting teens and adults in the Capital Region. They had the following responses:*

Universally, gun violence, online bullying and harassment, peer/gang pressure, teen pregnancy, and drug use came up as social issues. Social media dependence was raised as a big issue, because social media does not foster connection the way people think it does, which leads to loneliness and social anxiety. Depression was also a consistent theme of concern throughout all counties.

*Participants were asked to describe what comes to mind when they think of Planned Parenthood. They had the following responses:*

- Birth control
- STI Testing
- Abortion
- Free/Low-Cost Services
- Sex Education

Participants did not mention Gender Affirming Hormone Therapy (GHAT) or behavioral health services when listing what comes to mind. Participants were asked if they were aware that UHPP provided such services, and the majority response was no.

## Teen Focus Group Results

When asked, “What comes to mind when you think of Planned Parenthood?” participants responded similarly to adults.

*Teens identified where they received reproductive health care services like STI testing and birth control and identified challenges they face when getting those services:*

- Gynecologist
- Pediatrician
- CVS for pregnancy testing or EC
- Planned Parenthood
- College Campus

Teens identified transportation, parents, fear of being judged, and embarrassment as barriers to receiving services.

Teens described some issues faced by teens in their community (City/Town):

- Homophobia
- School Violence
- Gun Violence
- Lack of after-school programming, safe community spaces for teens to gather

*Teens identified the following community programs or organizations communities that teens go to for help with food, shelter, intimate partner violence (define IPV if necessary), and medical issues:* emergency rooms of Albany's hospitals, the health department, Whitney Young, Equinox, Joseph's house, Unity House, Planned Parenthood, Kite's Nest, Perfect Ten, Food Pantries, and YMCA,

*Teens were asked to identify where they generally get their sexual health information, and if they think those sources are reliable and accurate. These were their responses:* Students identified TikTok as source of information but were not confident if the information was always accurate or reliable. Other sources identified included porn sites, Google, school (friends), and school (health class.)

*Teens were asked if they feel comfortable speaking with other teens or adults about sexual health. These were their responses:* Overall, teens seemed to be split. Those who identified as being comfortable had trusted adults in their lives like parents or school staff. Teens who identified as being uncomfortable listed reasons including awkwardness and not being able to identify anyone with whom they could talk.

## High-Priority Populations and Target Areas

Following a careful review and analysis of community needs throughout the Capital Region, several high need populations and service areas have emerged to stress the continued need for family planning services. The following groups and areas that demonstrated a consistently high risk for unintended pregnancy, STI/HIV infection, and/or breast and cervical cancer are the following:

- African American and Hispanic residents living within Albany, Rensselaer, Columbia, and Greene Counties with an emphasis on addressing health disparities related to family planning indicators.
- Adolescents between the ages of 15 – 24, especially those living within zip code areas shared with UHPP Health Centers.
- All individuals living within cities demonstrating levels of poverty higher than their regional or county rates, including Albany, Troy, and Hudson.
- All individuals living in remote areas with limited resources and transportation.

A key focus of UHPP's activities within the Capital Region will be reducing or eliminating health care disparities for our most at-risk populations. Activities in support of this will include: the continued location and relocation of UHPP health centers within geographic areas consistently demonstrating high levels of negative health outcomes, providing patients with a wide range of hours in which they may access health care services, continued utilization of Language Line interpreter phone service for patients with limited English proficiency, and programs to provide financial assistance for low-income patients (e.g. Medicaid, the Family Planning Benefit Program, and the Title X Sliding Fee Scale), as well as targeted education and outreach programs throughout the Capital Region.

## Implementation of Program Components to Reduce Health Disparities

Based on the analysis of community demographics as well as data on relevant health outcomes, UHPP has implemented several strategies to help address the health care issues and disparities seen within their service area. Some of those strategies include the pursuit and acquisition of several grants (such as ESSMA (abortion money to buy equipment and hire new staff), VOCA (Behavioral Health funding), Sexual Health Clinical Services (free HIV/HCV testing), Family Planning Grant (low-cost family planning care), CAPP (sex education for qualifying schools,) NYSED (after school social and emotional health program in Albany,) and Touhey (Education in Albany County schools.)

Additional strategies include:

- Locating health centers within targeted high-needs areas to improve access for individuals within identified geographic areas.
- UHPP health centers are currently located within zip code areas in Albany, Troy, and Hudson that consistently demonstrate adverse rates of health outcomes that are significantly higher than their respective regional averages.
- Locations are also selected to maximize patient ability to access health services by car, public transportation, and/or by foot.
- Due to increased demand, caused by the closure of other nearby sexual and reproductive health centers, we were able to expand hours and open an extra day at our Hudson Health Center. The health center is now open every Monday through Thursday and will be open five days of the week by the end of 2023. UHPP strives to be flexible and accessible to meet our patients' needs. We have online appointment scheduling available 24/7, evening and weekend hours, walk-in availability, in-person and telehealth services available. UHPP expanded our programming with the addition of the pilot Digital Access Program (DAP). The program was designed to directly address the digital divide, connecting patients with reproductive health care while raising community awareness around telehealth services. The Digital Access Specialist met them in the community with a tablet and hotspot to assist patients with scheduling, troubleshooting, and facilitating telehealth appointments. The DAP allowed us to meet patients where they were, while ensuring they felt safe accessing essential reproductive health care, even during a pandemic.

- UHPP expanded abortion access in the new and improved Troy health center by offering medication abortion five days per week, we added in-clinic abortion service and adapt our schedules to accommodate community need.
- Through the Behavioral Health and Wellness Counseling program, UHPP improves the overall well-being of patients through an innovative collaborative solution. As the sole health care provider for more than 60% of patients (as self-identified at the time of their visit), UHPP is perfectly positioned to assist patients accessing community resources for immediate basic needs as well as initiating behavioral health care while identifying more advanced, comprehensive care in the community. UHPP provides depression and anxiety medication management, talk therapy and provide referrals and financial support for social determinants of health needs such as housing, food, safety and so much more.
- With the assistance and training from the New York State Department of Health, UHPP expanded services to offer the diagnosis and treatment of syphilis in the spring of 2021. As part of a grant through Planned Parenthood Federation of America. UHPP also expanded marketing efforts in both English and Spanish to encourage STI testing in our community, With UHPP's new Sexual Health Services grant we added free HIV and Hep C testing and case management.

UHPP provides several services on a sliding fee scale to help ensure that all patients, regardless of income, can access needed health care services.

- Services include Gender Affirming Health Care, Behavioral Health, Family Planning and AB (both of which are funded).
- UHPP annually updates its fee scale to help improve access to more patients.
- The UHPP Education Department also regularly conducts outreach and education activities in high-risk areas to increase community awareness and utilization of free/low-cost health care services.

UHPP runs a rigorous Risk and Quality management program to ensure the highest level of patient care, ensure regulatory compliance, and continuously improve quality and efficiency of health care delivery systems.

- UHPP trains all clinical staff to evaluate uninsured or underinsured patients for enrollment eligibility in various free/low-cost insurance programs offered through the NYS Department of Health.
- UHPP has also established a contracted service agreement with facilitated enrollers and health care navigation specialists to provide outreach and enrollment assistance to qualified individuals at various UHPP health centers.
- UHPP regularly engages in community outreach, education, and marketing programs to increase awareness of free/low-cost health insurance programs and promote increased enrollment among eligible individuals throughout the Capital Region.

UHPP integrates a strengths-based approach to increase healthy behaviors among patients and the larger community.

- UHPP's Education Department provides a wide range of sexual health education and outreach to high-risk individuals throughout the Capital Region. This work includes the facilitation of evidence-based programming aimed at reduced teen pregnancy and STI transmission, as well as parent engagement programs and activities, and youth-focused outreach programs facilitated by a team of Youth Health Promoters.



## Community Linkages to Promote Healthy Outcomes

The Capital Region is home to numerous qualified health care providers, clinics, and public health programs aimed at reducing health disparities and providing increased access to health care services. UHPP has several partnerships with area health care providers and professionals to provide clinical referrals to patients in need of health care outside of the scope of UHPP services. UHPP continues to partner Alliance for Better Health in their Healthy Together Program which includes screenings for social determinants of health and community referrals. As of 2020 UHPP is in the early stages of collaboration with the Albany Prematurity Workgroup and CDPH to engage high risk mothers.

In addition, UHPP clinical staff works closely with local health departments to make referrals for free testing and treatment of sexually transmitted infections including HIV, as well as Partner Notification Assistance Programs (PNAP). UHPP continues to maintain strong referral relationships with various OB/GYN providers and agencies that work to support pregnant or parenting individuals. This includes referrals to prenatal health care providers able to take low-income patients, Maternal and Infant Community Health Collaboratives (MICHC) Community Health Works employed through the Albany County Department of Health, as well as area Women, Infants and Children (WIC) programs available through community agencies within the Capital Region.

All patients obtaining health services at UHPP are screened for intimate partner violence, and UHPP partners with several community and governmental agencies to provide sexual assault, rape crisis and/or domestic violence services. All UHPP staff members receive information about available programs, as well as steps necessary to refer any patients when necessary. In addition to partnerships and linkages for the provision of health services, UHPP also partners with numerous other schools, faith-based communities, parent groups, colleges, and universities, as well as professional organizations. As we move forward with efforts to reduce health disparities and meet the expanding needs of the diverse populations we serve, the 2022 Community Needs Assessment will be used to inform program planning, work plan development and strategic planning initiatives throughout UHPP.

## Sex Education Data in UHPP Service Area

Like all other departments at UHPP, the Education Department was impacted by COVID-19. UHPP Education staff adapted to ensure information would still reach the appropriate audiences. In addition to adapting curricula, facilitation, and data collection to be online, the department also turned to technology to use creative ways of educating. This included live lessons on Facebook and Instagram, the creation of a digital office, and a podcast called Spilling the T.E.A. Below is a comprehensive list of Albany, Columbia, Greene, and Rensselaer County School Districts.<sup>21</sup>

A brief by Guttmacher Institute summarizes state-level sex and HIV education policies, as well as specific content requirements, based on a review of state laws, regulations and other legally binding policies.<sup>22</sup> This document demonstrates that NYS is only mandated to discuss HIV as a general requirement, and when this education is provided it is only required that it be age-appropriate and parents are allowed to opt out. As for content, NYS schools are only required to include information about condoms and instructed to “stress” abstinence.

To date, New York State public schools are not required to teach Comprehensive Sex Education as part of the health curriculum. Comprehensive Sex Education teaches about abstinence as the best method for avoiding STIs and unintended pregnancy, but also teaches about condoms and contraception to reduce the risk of unintended pregnancy and of infection with STIs, including HIV. It also teaches interpersonal and communication skills and helps young people explore their own values, goals, and options.<sup>23</sup>

<sup>21</sup> <http://www.newyorkschoools.com/>

<sup>22</sup> [https://www.guttmacher.org/sites/default/files/pdfs/spibs/spib\\_SE.pdf](https://www.guttmacher.org/sites/default/files/pdfs/spibs/spib_SE.pdf)

<sup>23</sup> <https://www.advocatesforyouth.org/publications/publications-a-z/655-sex-education-programs-definitions-and-point-by-point-comparison>

In 2021, Bill S2584A was introduced by Senators Brouk and Gounardes.

This legislation would define comprehensive sexuality education to be medically accurate, culturally responsive, LGBTQ+ inclusive, age-appropriate, and aligned with national sexuality education standards. This legislation would amend the state regulation on health education (NY EDUC § 804) to explicitly include comprehensive sexuality education in the definition of health education. Specifically, it would:

- Require sex ed to be taught K-12 in all public and charter schools.
- Require State Department of Education to develop, within one year from the bill's passage, state learning standards for each grade and a sample state curriculum for schools to use—to be made available online.
- Require the Commissioner to implement guidelines, procedures, and a tracking and evaluation system for sex ed teachers.
- Make available pre-service training and professional development.
- Ensures school districts have local control of the curriculum.
- Require all schools to start teaching comprehensive sex ed by the third year after the bill has passed.
- Provide an opt-out provision for parents and caregivers.
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<sup>27</sup><http://www.newyorkschoools.com/>

<sup>28</sup> [https://www.guttmacher.org/sites/default/files/pdfs/spibs/spib\\_SE.pdf](https://www.guttmacher.org/sites/default/files/pdfs/spibs/spib_SE.pdf)

<sup>29</sup> <http://www.advocatesforyouth.org/publications/publications-a-z/655-sex-education-programs-definitions-and-point-by-point-comparison>

\*Indicated Districts where UHPP Education Department has or is currently conducting programming.

**•Albany**

Albany City School District	Albany	PK-12*
Berne-Knox-Westerlo School District	Berne	K-12
Bethlehem School District	Delmar	K-12
Cohoes City School District	Cohoes	K-12*
Green Island School District	Green Island	K-12*
Guilderland School District	Guilderland	K-12
Maplewood Common School District	Watervliet	K-8
Menands School District	Menands	K-8*
North Colonie School District	Latham	K-12
Ravena-Coeymans-Selkirk School District	Selkirk	PK-12*
South Colonie School District	Albany	PK-12
Voorheesville School District	Voorheesville	K-12*
Watervliet City School District	Watervliet	K-12*

**•Columbia**

Berkshire School District	Canaan	7-12
Chatham School District	Chatham	K-12*
Germantown School District	Germantown	K-12
Hudson City School District	Hudson	PK-12*
Kinderhook School District	Valatie	K-12
New Lebanon School District	New Lebanon	K-12
Taconic Hills School District	Craryville	K-12*

**•Greene**

Cairo-Durham School District	Cairo	K-12*
Catskill School District	Catskill	K-12
Coxsackie-Athens School District	Coxsackie	K-12
Greenville School District	Greenville	K-12
Hunter-Tannersville School District	Tannersville	PK-12
Windham-Ashland-Jewett School District	Windham	K-12

**•Rensselaer**

Averill Park School District	Averill Park	K-12
Berlin School District	Berlin	K-12
Brunswick School District	Troy	K-12*
East Greenbush School District	EGB	K-12
Hoosick Valley School District	Schaghticoke	K-12
Hoosick Falls School District	Hoosick Falls	K-12
Lansingburgh School District	Troy	K-12*
North Greenbush Common School District	Rensselaer	K-11*
Rensselaer City School District	Rensselaer	PK-12*
Schodack School District	Castleton	K-12
Troy City School District	Troy	PK-12*
Wynantskill School District	Wynantskill	K-8