

2022 Community Health Assessment

Resident Survey Key Findings—Seniors

As part of the 2022-2024 Community Health Assessment process, the Clinton County Health Department asked county residents about their experiences with health and social challenges, as well as their experience receiving medial care. The results below are based on 269 respondents who reported they were ages 65 or older. To learn more about the survey, methodology, considerations/limitations and conclusions, visit https://health.clintoncountyny.gov/pdf%20files/CHA%202022-2024%20Final.pdf.



of respondents experienced **1** or more health challenge for themselves or family in the past year.

Top ranked challenges:

- · Issues related to aging
- Chronic disease
- Access to a healthcare specialist



more likely to report experiencing a sexually transmitted disease.



more likely to not have transportation to a medical appointment.

55%



of seniors agree or strongly agree that they live in a healthy community.

Seniors were







more likely to live with a chronic disease.



3 times

more likely to experience a fall.

Note: Residents ages 65 and older made up about 25% of all survey respondents. Results above show relations ship between the senior population (ages 65 and older) and the general population (ages 0 to 64).



times more likely to report extremely poor physical health.

Almost **1 in 4**report their mental
health is **excellent**. **2 times** more than
the general population.



Two and a half times more likely to experience homelessness.

3x

more likely to not receive the medical care they needed because there were no veteran services locally.





Three and a half times more likely to report a household income less than \$25,000.



June 2024

Introduction

In the spring of 2022 the Clinton County Health Department (CCHD) surveyed Clinton County residents to provide perspective about community health. Residents were asked to identify features of a strong, vibrant, healthy community; for their opinions on health, social and environmental challenges in the community; to identify health and social challenges and any barriers to medical care experienced by themselves or a family member within the past year; and, for demographic information about individual respondents and their households. The summary below outlines what respondents who indicated they were ages 65 and older (seniors) identified as features, challenges or barriers and highlights how they compare to the responses of all Clinton County respondents.

Findings

A total of 1,081 responses were received from Clinton County residents. Two hundred and sixty-nine (269) of the respondents fell within the identified senior age group.

Demographics of Survey Respondents

The overall demographics of the senior residents varied slightly when compared to the demographics of the general public. Two-thirds (67.77%) of survey respondents identified as female, while just over one quarter of them (26.77%) identified as male (3.72% declined to answer and 1.49% selected 'other'). Threequarters of respondents (72.12%) were ages 65-79 while the other quarter (27.88%) were 80 years and older. All but one respondent indicated that the primary language spoken in their household was English. The resident who did not select English selected 'other'. The vast majority (89.96%) of respondents reported that their race/ethnicity as white, while 2.97% reported as American Indian, 1.12% Black or African American, 0.74% Asian or Pacific Islander, 0.37% Hispanic, Latino or Spanish origin, and 0.37% selected 'other' (7.43% declined to answer). The highest level of education completed by survey respondents was diverse; 9.76% completed some high school but did not finish; 24.91% obtained a high school diploma or GED; 2.23% obtained a technical or trade school certificate; 14.13% completed some college; 8.92% obtained an associate's degree; 17.10% obtained a bachelor's degree; and 20.45% completed a graduate degree or higher. The annual household income reported by survey respondents also varied; 8.18% reported annual income less then \$10,000; 20.07% reported \$10,000-\$24,999; 19.33% reported \$25,000-\$49,999; 20.45% reported \$50,000-\$99,999; 7.43% reported \$100,000-\$149,999; and 3.72% reported annual income of \$150,000 or more (20.82% of respondents declined to answer). The majority of respondents are retired (73.98%), disabled or work part time (7.06%). Just 5.20% reported that they work full time. When asked if they had a primary care provider (PCP), 92.94% reported they did and 7.06% reported that they did not. Responses were collected from residents of all townships. 1.86% reported they reside in Altona; 1.86 in AuSable; 2.60 in Beekmantown; 1.49% in Black Brook; 10.41% in Champlain (including Rouses Point); 5.20% in Chazy; 2.60% in Clinton; 2.97% in Dannemora; 3.72% in Ellenburg; 2.23% in Mooers; 6.32% in Peru; 39.41% in Plattsburgh (City); 12.64% in Plattsburgh (Town); 2.83% in



Saranac; and 4.09% in Schuyler Falls. The breakdown for all the respondents' responses to demographic questions can be found in *Table 1*.

Definition of a Healthy Community

When asked whether they believed they lived in a healthy community, 55.02% agreed or strongly agreed, 14.5% disagreed or strongly disagreed with the statement and 30.48% felt neutral. Seniors were more than three times more likely to strongly agree that they lived in a healthy community than the general population. Respondents were then asked to identify the top three features of a strong, vibrant, healthy community. The top features reported by residents were health care services (46.47%); affordable housing (41.26%); clean environment (37.92%); senior services (24.91%); and good schools (23.42%). Seniors were two times less likely to select livable wages and select parks and recreation sources. They were also less likely (1.8) to select mental health services than the general public. See *Figure 1* for perceptions of living in a healthy community by senior residents and *Figure 2* for the top features of a strong, vibrant, healthy community.

Health Challenges of Concern and Experienced

Senior residents identified issues related to aging (50.19%); chronic disease (43.49%); access to health care services (42.38%); access to health care specialist (31.60%); and substance abuse (27.14%) as the top health related challenges of concern in the community. Senior residents were less likely to select the following than the general public: mental health (2.8); substance abuse (2.6); suicide (2.6); overweight/obesity (2.5); an mental health services (2.0). Survey respondents were then asked what health challenges they or their family members had experienced in the past year. As expected, many seniors (62.90%) reported issues related to aging. Other top reported health challenges experienced were: chronic disease (47.18%); access to health care specialist (25.81%); overweight/obesity (25.81%); and physical activity (24.60%).

Forty percent of seniors indicated there was a time they or a family member could not get the medical care they needed. The top reported reasons were: no specialist locally (32.48%); not having dental/vision insurance (30.77%); not having specialist appointments available (29.06%); co-pays/deductible that were too high (23.08%), and having no primary care appointments available (21.37%). Seniors were more than two times more likely (2.6) to miss a medical appointment because they did not have transportation. See *Figure 3* for health challenges in the community, *Figure 6* for health challenges experienced by them or a family member and *Figure 8* for reason for not getting medical care when needed.

Social Challenges of Concern and Experienced

Senior residents identified affordable housing as the biggest social challenge the community faces (46.47%). They also identified lack of support/resources for seniors (27.51%), transportation (24.16%), lack of livable wage (23.79%) and crime/vandalism (23.05%) as top social issues in the community. Senior residents were less likely to select lack of livable wage (2.50) and lack of support/resources for the LGBTQ+(2.51) than the general public.



Two-thirds (67.77%) of seniors or their family member experienced a social challenge in the past year. The most reported social challenges was lack of support/resources for seniors (34.62%), while 28.02% reported street safety; 26.92% reported transportation; 25.27% reported opportunities for physical activity; and 20.88% reported affordable housing. Senior residents were more likely to experience homelessness (2.59) and lack of transportation (2.47). They were less likely to experience a lack of livable wage (2.92). See *Figure 4* for social challenges within the community and *Figure 7* for social challenges experienced by themselves or a family member.

Environmental Concerns

More than sixty percent (61.34%) of senior residents reported aging infrastructure as a top environmental concern in the community. Other top environmental concerns of seniors were climate change (38.66%), stream, river, lake quality (37.92%), drinking water quality (36.08%), and vector-borne diseases (26.39%). See Figure 5 for environmental concerns among senior residents.

Self- Perceived Physical and Mental Health

Most senior residents (69.14%) reported their mental health as excellent or good, while 25.65% reported average, and 5.2% indicated that their mental health was poor or extremely poor. Senior residents were more than 2 times more likely to report excellent mental health than the general public. When asked about their physical health 48.24% of seniors reported that their physical health was excellent or good, 37.17% reported their physical health was average and 14.5% reported that it was poor or extremely poor. Seniors were almost four times (3.59) more likely to report their physical health was extremely poor. See Figure 12 for self-perceived physical health and Figure 13 for self-perceived mental health.

Learn More

A full report for all Clinton County respondents, including methodology, considerations/limitations and conclusions, can be found included in the 2022-2024 Clinton County Community Health Assessment at https://health.clintoncountyny.gov/pdf%20files/CHA%202022-2024%20Final.pdf.



Tables & Figures

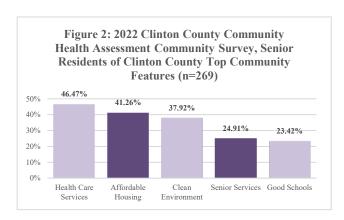
Table 1. 2022 Clinton County Community Health Assessment Community Survey,				
Demographics of Respondent Demographic		Senior Residents (≥65 years old) % (#)	Clinton County % (#)	
Gender (n=269)/(n=1,081)*	Female	67.77% (182)	76.04% (822)	
	Male	26.77% (72)	19.15% (207)	
	Non-Binary	0.37% (1)	0.46% (5)	
	Other	1.49% (4)	0.74% (8)	
	*Note: Of all 269 senior resident respondents, 3.72% County respondents, 3.61% (39) declined to answer.	()	33 111 3223333	
	17 years and younger	0.00% (0)	0.37% (4)	
081	18-24 years	0.00% (0)	4.07% (44)	
=1(25-44 years	0.00% (0)	35.43% (383)	
\ge /(n	45-64 years	0.00% (0)	35.25% (381)	
Age (n=269)/(n=1081)	65-79 years	72.12% (194)	17.95% (194)	
	80 years and older	27.88% (75)	6.94% (75)	
Primary language spoken in household (n=269)/(n=1081)	English	99.63% (268)	99.54% (1076)	
	Chinese	0.00% (0)	0.09% (1)	
	French	0.00% (0)	0.00% (0)	
	Haitian-Creole	0.00% (0)	0.00% (0)	
	Italian	0.00% (0)	0.09% (1)	
	Korean	0.00% (0)	0.00% (0)	
	Polish	0.00% (0)	0.09% (1)	
	Russian	0.00% (0)	0.00% (0)	
	Spanish	0.00% (0)	0.00% (0)	
	Other	0.37% (1)	0.19% (2)	
	American Indian	2.97% (8)	1.39% (15)	
*	Asian or Pacific Islander	0.74% (2)	0.74% (8)	
Race/ethnicity = 269)/(n=1081)*	Black or African American	1.12% (3)	1.20% (13)	
	Hispanic, Latino or Spanish origin	0.37% (1)	1.67% (18)	
	White	89.96% (242)	91.86% (993)	
	Other	0.37% (1)	0.56% (6)	
Ra (n = 2	*Note: Of all 269 senior resident respondents, 7.43% (20) declined to answer. Of all 1081 Clinton County respondents, 5.27% (57) declined to answer. For this question respondents were asked to select all that apply; therefore, responses will not total 100%.			

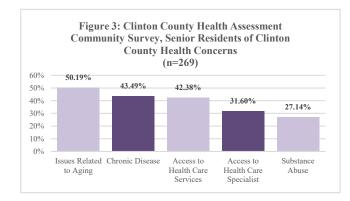


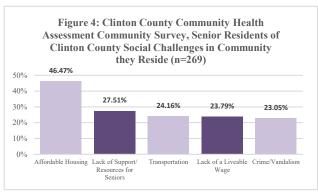
Table 1 Continued. 2022 Clinton County Community Health Assessment Community Survey, Demographics of Respondents				
Demographic		Senior Residents (≥65 years old) % (#)	Clinton County % (#)	
Highest level of education (n=269)/(n=1081)	Some high school (did not finish) High school diploma or GED Technical or trade school certificate Some college Associate's degree Bachelor's degree Graduate degree Other	9.67% (26) 24.91% (67) 2.23% (6) 14.13% (38) 8.92% (24) 17.10% (46) 20.45% (55) 2.60% (7)	3.89% (42) 15.26% (165) 3.24% (35) 13.78% (149) 10.82% (117) 26.46% (286) 25.44% (275) 1.11% (12)	
Household annual income (n=269)/(n=1081)*	Less than \$10,000 \$10,000 - \$24,999 \$25,000 - \$49,999 \$50,000 - \$99,999 \$100,000 - \$149,999 \$150,000 or more *Note: Of all 269 senior resident respondents, 20.82% (56) de Clinton County respondents, 13.04% (141) declined to answer		4.16% (45) 10.36% (112) 16.10% (174) 29.51% (319) 16.93% (183) 9.90% (107) Of all 1081	
Primary Employment Status (n = 269)/(n=1081)	Full-time Part-time Armed forces Disabled Homemaker Retired Student Unemployed Other	5.20% (14) 7.06% (19) 0.00% (0) 7.06% (19) 1.12% (3) 73.98% (199) 0.00% (0) 1.49% (4) 4.09% (11)	54.12% (585) 7.86% (85) 0.09% (1) 4.72% (51) 3.52% (38) 22.76% (246) 1.94% (21) 2.22% (24) 2.78% (30)	
Primary Care Provider (n = 173)/(n=1081)	Yes No	92.94% (250) 7.06% (19)	90.47% (978) 9.53% (103)	

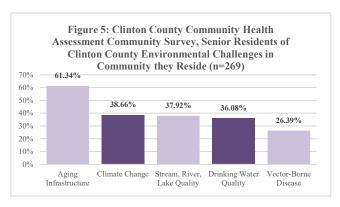


Figure 1: Clinton County Community Health Assessment Community Survey, Senior Residents of Clinton County: I live in a healthy community (n=269) 41.64% 40% 30.48% 30% 20% 13.38% 11.90% 10% 2.60% Strongly Disagree Neutral Agree Disagree









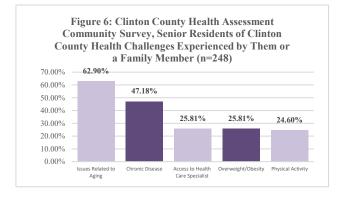




Figure 7: Clinton Community Health Assessment Community Survey, Senior Residents of Clinton County Social Challenges Experienced by Them or a Family Member (n=182) 40.00% 34.62% 35.00% 28.02% 26.92% 25.27% 30.00% 20.88% 25.00% 20.00% 15.00% 10.00% 5.00% 0.00% Opportunities for Physical Activity Lack of Street Safety Transportation Affordable Support/Resources for Seniors

