



ongovhealth
Onondaga County
Health Department

Onondaga County Community Health Assessment 2025



CROUSE HEALTH

UPSTATE
UNIVERSITY HOSPITAL

ST. JOSEPH'S
HEALTH
Hospital
A Member of Trinity Health

This page is intentionally left blank.

Participating Health Department and Hospitals

Onondaga County Health Department

John H. Mulroy Civic Center
421 Montgomery Street
Syracuse, NY 13202
315.435.3648

Crouse Health

736 Irving Avenue
Syracuse, NY 13210
315.470.7111

St. Joseph's Health

301 Prospect Avenue
Syracuse, NY 13203
1.888.785.6371

Upstate University Hospital

750 E. Adams Street
Syracuse, NY 13210
315.464.5540



ongovhealth
Onondaga County
Health Department
ongov.net/health · facebook.com/ongovhealth



CROUSE HEALTH

UPSTATE
UNIVERSITY HOSPITAL

 **ST.JOSEPH'S**
HEALTH
Hospital
A Member of Trinity Health

Authors

Onondaga County Health Department (OCHD)

Bridget Volz, MPH, CAS-HSMP, CPH

Epidemiologist (*former*)

Rachael Russell, MPH

Director, Division of Community Health

Brittany Welch, MPH, CHES

Public Health Analyst II

Rebecca Shultz, MPH

Deputy Commissioner of Health

Cali Armstrong, MPH

Public Health Analyst I

Kathryn Anderson, MD, PhD, MSPH, CtripMed®

Commissioner of Health

Hospital Steering Committee

Crouse Health

Kathleen Miller Murphy, RN, BSN, Director of Employee and Community Engagement

Monika Taylor, MBA, LCSW, CASAC, Director of Addiction Treatment Services

Allyson Rossi, Director of Financial Initiatives

Kris Waelder, *Former Crouse Health staff member*

St. Joseph's Health

Eric Stone, MBA, Director, Community Health and Well-Being

Upstate University Hospital

Cynthia A. Jaonski, MPH, CPH, MCHES, Associate Administrator

Stacey Keefe, MPA, CAS-HSMP, PMP, Associate Administrator, Testing and Therapeutics

Caitlin Toomey, MD, Medical Director of Population Health

Acknowledgements

The authors wish to thank all community members and agencies who contributed to the development of the 2025 Community Health Assessment. We would also like to honor the memory of Bob Allen, who provided support and direction to several Community Health Assessment cycles during his lifetime, and whose kindness and good humor are greatly missed.

Table of Contents

1. Introduction	1
2. About the Data	2
3. Acronyms Used	2
4. Geographic Profile	4
5. Community Demographics	5
6. Factors Influencing Population Health and Wellbeing	9
7. Social Determinants of Health	10
Economic Stability	11
Social and Community Context.....	20
Neighborhood and Built Environment.....	25
Health Care Access and Quality.....	38
Education Access and Quality.....	42
8. Health Status of County Residents	47
Key Indicators of Health.....	47
Chronic Diseases.....	56
Mental Health and Substance Use Disorders	68
Healthy and Safe Environments.....	76
Healthy Women, Infants, and Children	86
Communicable Diseases	95
9. Community Engagement	104
10. Appendices	106
Appendix 1: New York State Prevention Agenda Framework.....	107
Appendix 2: Methodology	108
Appendix 3: Dissemination to the Public	109

ONONDAGA COUNTY COMMUNITY HEALTH ASSESSMENT

Introduction

The World Health Organization defines **health** as a “**state of complete physical, mental, and social well-being and does not merely indicate the absence of disease.**”¹ Health is shaped by several factors ranging from the biological traits we were born with to the complex social and economic environments in which we live, learn, work and play. Throughout our lifespan, each of these factors has the potential to influence our health risks and outcomes.

As we strive to ensure the health and well-being of county residents, it is important to understand the multitude of factors that influence health. This **Community Health Assessment (CHA)** provides a local framework for understanding the health needs of Onondaga County residents.

Onondaga County’s CHA was developed by the Onondaga County Health Department (OCHD) in partnership with Crouse Health, St. Joseph’s Health, and Upstate University Hospital. Additional support was provided by the Central New York Healthcare Equity Task Force.

Creation of the CHA was undertaken in alignment with the 2025-2030 New York State (NYS) Prevention Agenda, which identifies five domains of focus.² More information about the Prevention Agenda Framework is available in Appendix 1.

- Economic Stability
- Social and Community Context
- Neighborhood and Built Environment
- Health Care Access and Quality
- Education Access and Quality

The CHA process is rooted in data, equity, and community feedback to ensure this document is meaningful to our community.

¹ World Health Organization’s definition of health, adopted by the International Health Conference, New York, Signed July 22, 1946 and adopted April 7, 1948.

² https://health.ny.gov/prevention/prevention_agenda/2025-2030/. Accessed 11/10/2025.

About the Data

The CHA provides a comprehensive review of data from local, state, and national sources. Driven by a focus on equity, data reflecting disparities in health outcomes are included when available. Additionally, comparisons to Central New York (CNY) and statewide data are included as appropriate. More information about our data sources and methods can be found in Appendix 2.

To further supplement available data sources, the OCHD and Steering Committee conducted an extensive Community Health Survey in 2025 to gather feedback directly from county residents. The survey collected more than 1,900 responses. A detailed description of the survey methods can be found in the Community Engagement section on pages 104-105. Together, these data provide a comprehensive overview of the current health status of Onondaga County residents.

Data Definitions

Data presented in the CHA will be standardized whenever possible so that data can be compared across populations. Below are some key definitions for understanding and interpreting data used in the CHA.

Rates	In public health, rates are used to standardize data so comparisons can be made across populations, geographies, and years. In the CHA, data are often reported as a rate "per 10,000." <i>For example: the asthma hospitalization rate is 4.4 per 10,000.</i> ³ This means that for every 10,000 people in Onondaga County, approximately 4 people are hospitalized for asthma. In addition, you will see rates in the CHA that are "per 100,000". This is used for rare events and whenever mortality (death) rates are presented.
Age-Adjusted Rates	Age-adjustment is a process used in statistics to compare populations with different age groups. ⁴ For example, a community with many young children will likely have more playground injuries than a community with older adults. However, a community with a larger number of older adults will likely have higher chronic disease rates. By age-adjusting the data, we are accounting for differences caused by age distribution so that we can make more accurate comparisons between populations. ⁵ In the CHA, when age-adjusted rates are not available, a "crude" rate will be provided.
Small numbers	When there are only a few cases of a disease or injury, it is difficult to tell whether changes over time are due to real variations or just due to random chance. ⁶ Therefore rates using small numbers are often considered to be unstable. When a rate is unstable, it should be interpreted with caution. Any unstable rates included in the CHA are noted.

³ NYS Community Health Indicator Reports: <https://www.health.ny.gov/statistics/chac/indicators/>. Accessed 2/24/2025

⁴ New York State Department of Health (NYSDOH) Age-Adjusted Rates – Statistical Teaching Tools: <https://www.health.ny.gov/diseases/chronic/ageadj.htm>. Accessed 11/12/2025.

⁵ San Juan County Health & Community Services: 2023 Community Health Assessment.

⁶ NYSDOH Rates Based on Small Numbers - Statistics Teaching Tools

<https://www.health.ny.gov/diseases/chronic/ratesmall.htm>. Accessed 11/12/2025.

Acronyms Used

Below is a list of acronyms used throughout the CHA document.

ACS	American Community Survey
CDC	Centers for Disease Control and Prevention
CHA	Community Health Assessment
CHIP	Community Health Improvement Plan
CNY	Central New York
LGBTQIA+	Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, and Asexual Plus
NH	Non-Hispanic
NIH	National Institutes of Health
NYC	New York City
NYS	New York State
NYSDOH	New York State Department of Health
US	United States
WHO	World Health Organization

Geographic Profile

Our county geography impacts many factors including climate, proximity to jobs and transportation, as well as access to natural resources, green spaces, and waterways.

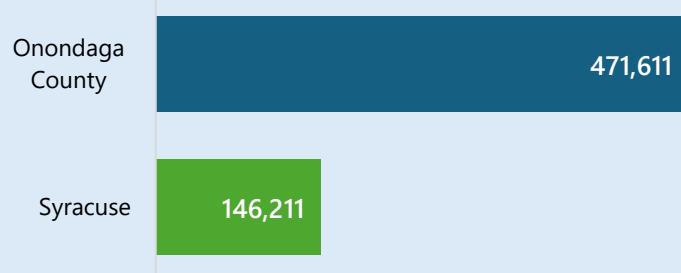
Unless otherwise noted, data in this section are from the U.S. Census Bureau, American Community Survey, 5-Year Estimates, 2019-2023.



Onondaga County is located in the CNY region. The county covers a total of 806 square miles and is made up primarily of woodlands and agricultural land.⁷

Syracuse, the largest city in the region, accounts for about one-third of the county's population.

Figure 1. Population Counts



In addition, 19 towns, and 15 villages fall within Onondaga County including the heavily populated towns of Clay, Salina, and Cicero in the northeast, Dewitt and Manlius in the east, and Camillus in the west. The Onondaga Nation Territory, located south of Syracuse, also falls within Onondaga County.

The County's transportation network is currently evolving to address aging infrastructure and population changes. 2025 brings the start of significant modifications to Interstate-81, the area's major north-south thoroughfare.⁸ Other major transportation routes in the county include Interstate-481 and the NYS Thruway (Interstate- 90). These highways are depicted in the map above.

The area is rich in green spaces with more than 70 State, County, and City parks contained within the county border. Additionally, Onondaga County is home to several water bodies including Onondaga Lake, located northwest of Syracuse, as well as Otisco Lake and a portion of Skaneateles Lake to the southwest.

⁷ <https://www.ny.gov/counties/onondaga>. Retrieved 11/19/2025.

⁸ <https://www.syracuse.com/news/2025/02/new-roundabouts-new-exits-new-bridges-what-to-expect-on-the-i-81-project-in-2025.html>. Retrieved 11/19/2025.

Community Demographics

Understanding the demographic composition of Onondaga County is important for ensuring that programs and services meet the needs of all community members. Additionally, health status and access to health care services may be impacted by demographic factors, often leading to disparities in health outcomes on a population level.

Data in this section are from the U.S. Census Bureau, American Community Survey, 5-Year Estimates, 2019-2023, unless noted otherwise.

Age Distribution and Trends

The County's median age is 39.5 years, with 5.5% of residents under 5 years old. Notably, Syracuse has a younger population with more children under 5 years (5.9%) and a higher proportion of residents between the ages of 20-24 years. This is likely due to the presence of four major colleges and universities: Syracuse University, SUNY Environmental Science and Forestry, SUNY Upstate Medical University, and LeMoyne College.

Future demographic predictions suggest that by 2040, nearly a quarter of the County's population will be 65 years or older. This group currently makes up 18.2% of the community. Both older adults and young children experience unique health needs that must be met with community planning and resources.

Sex and Gender

Slightly more than half of the county (51.5%) and city (51.8%) populations are female. A 2024 study found women are more likely than men to skip or delay medical care.⁹ Acute care and preventive health visits are the most likely to be skipped according to the study. The largest factors accounting for missed or delayed care among women were cost, access, and prior experiences seeking care. Providers discounting symptoms and misdiagnoses were common experiences for women, which drives many to avoid future care.

LGBTQIA+

In NYS, LGBTQIA+ residents are more likely than non-LGBTQIA+ residents to be impacted by poverty and food insecurity.¹⁰ While local data for these indicators are not available, it is important to consider social and health care needs unique to this population when planning service delivery. Recent data (2022) for Onondaga County indicate 4.7% of marriages were for same-sex couples.¹¹

⁹ What's causing US women to skip or delay medical care? <https://www2.deloitte.com/us/en/insights/industry/health-care/why-women-skip-or-delay-health-care.html>. Retrieved 2/28/2025.

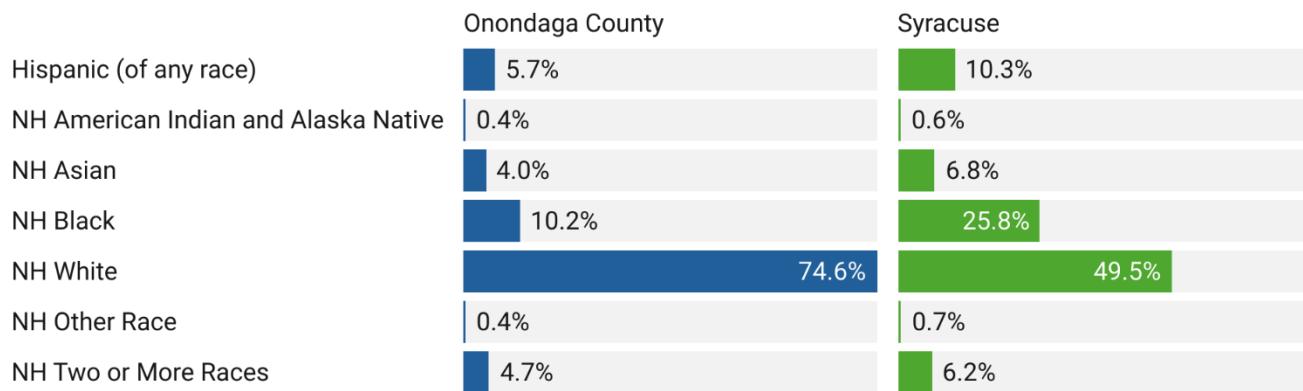
¹⁰ UCLA School of Law: Williams Institute: <https://williamsinstitute.law.ucla.edu/visualization/lgbt-stats/?topic=LGBT&area=36#demographic>. Retrieved 11/19/2025.

¹¹ NYS Department of Health, Vital Statistics, Marriages by County of Occurrence and Gender, 2022. Retrieved 12/22/2025, from: https://www.health.ny.gov/statistics/vital_statistics/2022/table47a.htm. Note: gender is an optional field on the New York State marriage license.

Race and Ethnicity Distribution

The current race and ethnicity distributions for Onondaga County and Syracuse are displayed in Figure 2 below. Notably, Syracuse is more diverse than Onondaga County. In the County, 74.6% of the population is non-Hispanic (NH) White, compared to 49.5% of the City. In Syracuse, a quarter of residents are NH Black, compared to 10.2% of County residents.

Figure 2. Population by race and ethnicity, Onondaga County and Syracuse, 2019-2023

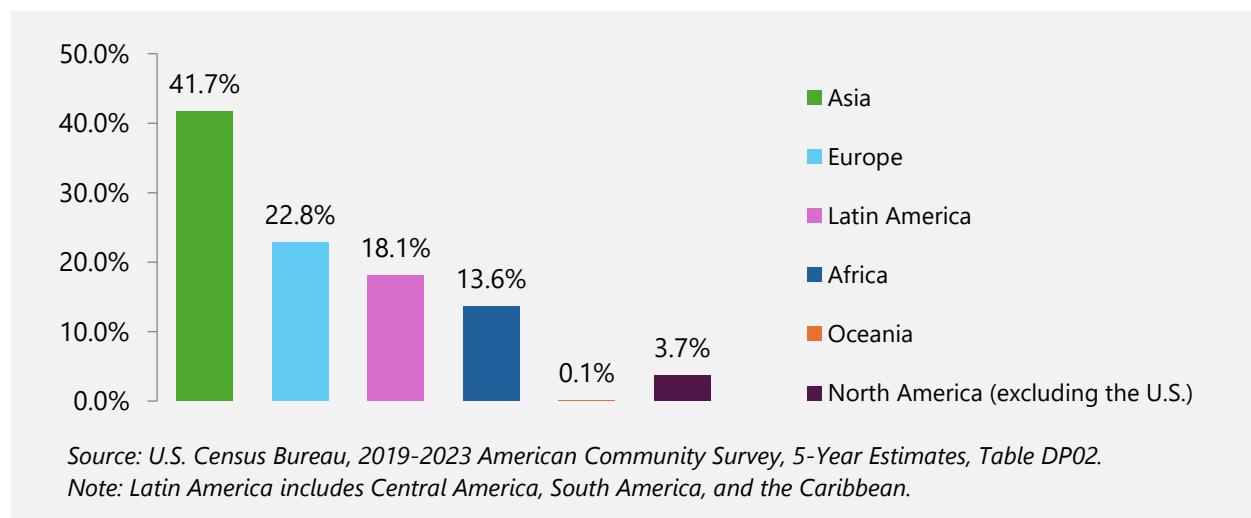


Source: U.S. Census Bureau, 2019-2023 American Community Survey, 5-Year Estimates, Table DP05. Data for Onondaga County are inclusive of Syracuse.

Country of Birth

Onondaga County is home to a diverse group of residents born outside of the US who bring a diversity of perspectives and experiences to the community at large. Nearly 8% of the County's population were born outside of the US, with the greatest proportion having been born in Asia, Europe, and Latin America.¹²

Figure 3. Region of birth for Onondaga County's populations born outside the U.S., 2019-2023

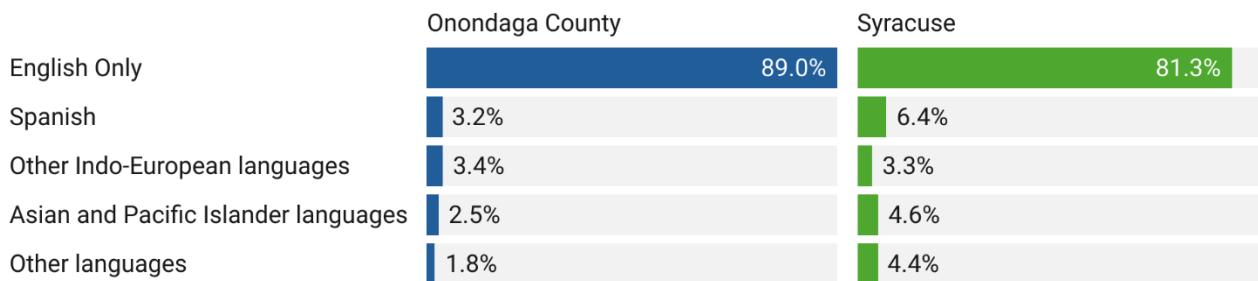


¹² U.S. Census Bureau, 2019-2023 American Community Survey, 5 Year Estimates, Table DP02.

English Proficiency and Language Spoken at Home

English language proficiency may impact educational and employment opportunities, as well as the ability to effectively communicate with healthcare providers. In Onondaga County, 2.3% of the population has limited English proficiency, compared to 4.8% in Syracuse, and 11.0% of Onondaga County households speak a language other than English at home, compared to 18.7% in Syracuse. The figure below shows the languages most commonly spoken at home in the County and City.

Figure 4. Language spoken at home, Onondaga County and Syracuse, 2019-2023



Source: U.S. Census Bureau, 2019-2023 American Community Survey, 5-Year Estimates, Table DP02. Data for Onondaga County are inclusive of Syracuse.

Disability Status

The WHO¹³ and CDC¹⁴ define disability as having three dimensions (shown in the table below). People with disabilities have a diverse set of health needs and individuals with the same disability type may have different needs from one another.¹⁵ Additionally, adults with disabilities may be at greater risk for certain health conditions including obesity, diabetes, and heart disease.¹⁶

Impairment in a person's body structure or function, or mental functioning; examples of impairments include loss of a limb, loss of vision or memory loss.

Activity limitation, such as difficulty seeing, hearing, walking, or problem solving

Participation restrictions in normal daily activities, such as working, engaging in social and recreational activities, and obtaining health care and preventive services.

Source: Language used from CDC, Disability and Health Overview: <https://www.cdc.gov/disability-and-health/about/>. Accessed 11/23/2025.

¹³ WHO, International Classification of Functioning, Disability and Health, Accessed 11/23/2025.

<https://www.who.int/classifications/international-classification-of-functioning-disability-and-health>.

¹⁴ CDC, Disability and Health Overview: <https://www.cdc.gov/disability-and-health/about/>. Accessed 11/23/2025.

¹⁵ CDC, Disability and Health Overview: <https://www.cdc.gov/disability-and-health/about/>. Accessed 11/23/2025.

¹⁶ Disability Status, New York State Adults, 2023. BRFSS Brief Number 2025-12:

https://www.health.ny.gov/statistics/brfss/reports/docs/2025-12_brfss_disability_status.pdf. Accessed 11/23/2025.

Locally, 13.8% of the County population as a whole and 16.6% of the City population have a disability.¹⁷ This reflects 40,463 people outside of Syracuse and 23,911 people in the City who are currently living with a disability. In both geographies, females have a higher disability rate (Figure 5). When considering data by age, the prevalence of disabilities increases with each subsequent age group, with individuals 75 and older in Onondaga County having the highest disability rate compared to other age groups in the County.

Figure 5. Disability prevalence by sex, Syracuse and Onondaga County, 2019-2023

	Onondaga County	City of Syracuse
Male	13.2%	15.8%
Female	14.3%	17.4%

Source: U.S. Census Bureau, 2019-2023 ACS, 5-Year Estimates, Table S1810. Onondaga County is inclusive of Syracuse.

Below is a table depicting the prevalence of different types of disability throughout Onondaga County and in the City of Syracuse. Within the County, ambulatory difficulties are the most common, followed by independent living difficulty and cognitive difficulties.

Figure 6. Disability Types, Syracuse and Onondaga County, 2019-2023

	Onondaga County	City of Syracuse
Persons with a cognitive difficulty	6.2%	8.4%
Persons with a hearing difficulty	3.2%	2.9%
Persons with a self-care difficulty	2.7%	3.5%
Persons with a vision difficulty	2.2%	2.9%
Persons with an ambulatory difficulty	6.8%	8.5%
Persons with an independent living difficulty	6.7%	8.4%

Source: U.S. Census Bureau, 2019-2023 American Community Survey, 5-Year Estimates, Table S1810. Onondaga County is inclusive of Syracuse.

Community Resources

Several agencies offer services for people living with disabilities in Onondaga County, these include:

- [AccessCNY](#)
- [Arc of Onondaga](#)
- [ARISE](#)
- [Aurora of CNY](#)
- [Exceptional Family Resources](#)
- [L'Arche Syracuse](#)
- [Liberty Resources](#)

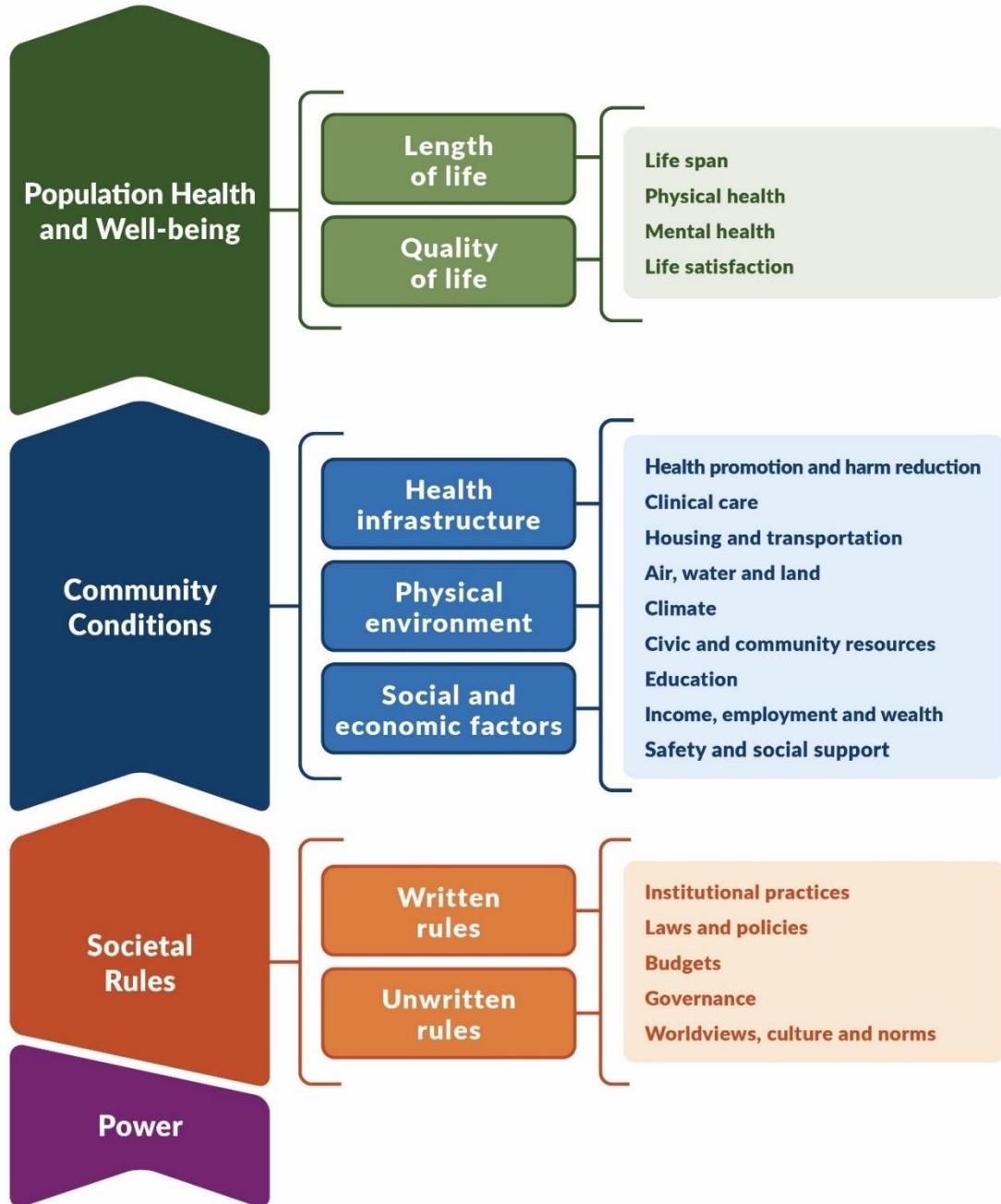
Additionally, the agencies below provide advocacy:

- [Advocates Incorporated](#)
- [Center on Disability and Inclusion at Syracuse University](#)
- [CNY Disability Advocacy Group](#)
- [Person to Person Advocacy](#)

¹⁷ Note: These rates reflect the civilian noninstitutionalized population of Onondaga County and Syracuse respectively.

Factors Influencing Population Health and Well-Being

The diagram shown below provides a framework for understanding factors that influence health, longevity, and well-being on a population level¹⁸. The CHA explores several of these factors to better understand their role in shaping life in Onondaga County.



University of Wisconsin Population Health Institute Model of Health © 2025

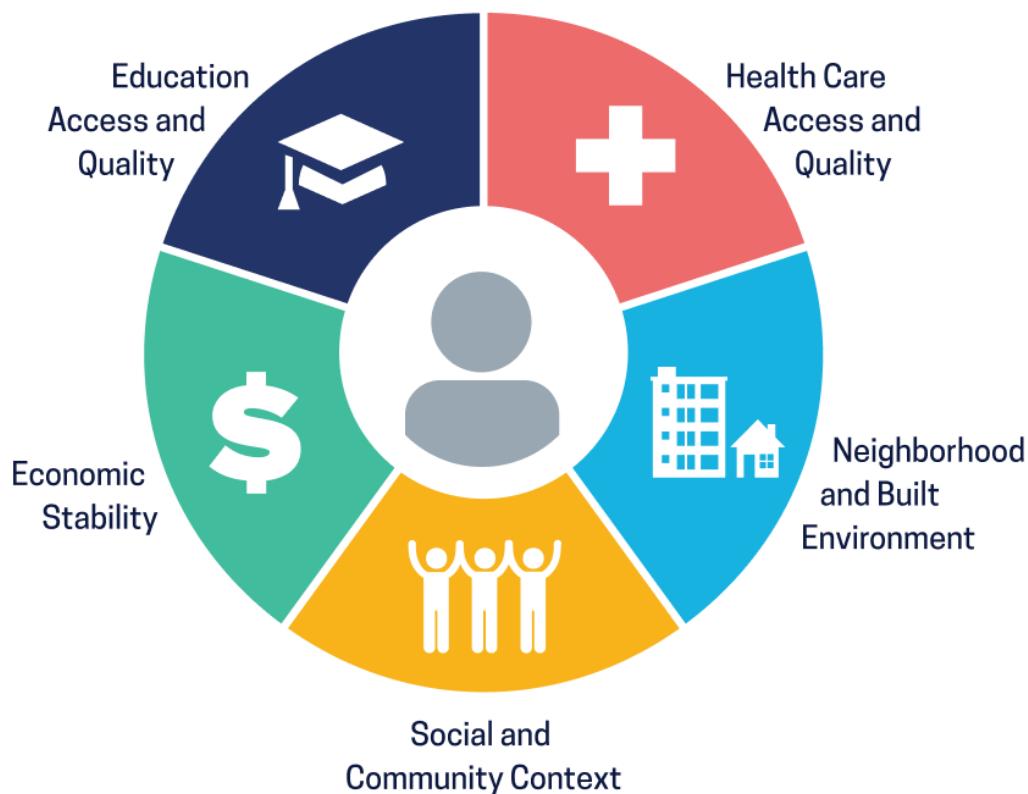
¹⁸ University of Wisconsin Population Health Institute. University of Wisconsin Population Health Institute Model of Health. County Health Rankings & Roadmaps 2025.

Social Determinants of Health

Our health is profoundly impacted by how we **live, learn, work, and play**. Within each of these environments, there are social factors that shape our health and quality of life. These factors are known as the social determinants of health (SDOH) and can be grouped into five categories as shown below. This section explores the SDOH and how these factors impact the health of Onondaga County residents.

Unless otherwise noted, data in this section come from the U.S. Census Bureau, ACS, 5-Year Estimates, 2019-2023.

Social Determinants of Health



Economic Stability

Economic stability impacts many aspects of health and wellness, including access to safe and healthy housing, food security, physical activity opportunities, educational and employment opportunities, and access to safe and reliable childcare. In this section, several indicators of economic stability are explored including:

- Unemployment rates
- Poverty
- Housing stability
- Food access
- Childcare access

Employment and Income

The County's unemployment rate is 5.1%. This is better than both NYS (6.2%) and Syracuse (7.4%). However, in both Onondaga County and Syracuse, there are variations in unemployment based on race. In both geographies, the highest unemployment rate is among Black or African American residents (Figure 7).

Figure 7. Unemployment rate, by race, Syracuse, Onondaga County, and New York State, 2019-2023

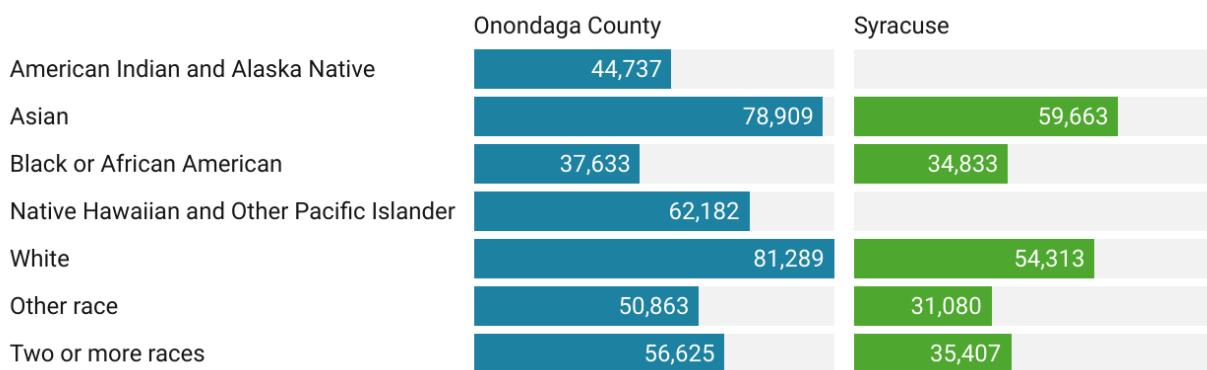
	City of Syracuse	Onondaga County	New York State
American Indian and Alaska Native	2.6%	1.2%	8.4%
Asian	7.5%	6.4%	5.5%
Black	10.8%	9.5%	9.2%
White	6.1%	4.5%	4.9%
Other race	7.7%	7.7%	8.6%
Two or more races	6.9%	5.2%	7.9%

Source: U.S. Census Bureau, 2019-2023 American Community Survey, 5-Year Estimates, Table S2301. Note: Onondaga County data are inclusive of Syracuse. Data are not included for Native Hawaiian and Other Pacific Islander residents due to small numbers.

The median household income in Onondaga County is \$74,740 compared to \$45,845 in Syracuse.¹⁹ Figure 8 below depicts median household income by race for both geographies, demonstrating substantial racial disparities in income level.

¹⁹ U.S. Census Bureau, 2019-2023 American Community Survey, 5-Year Estimates, Table S1903.

Figure 8. Median household income in U.S. dollars by race, Onondaga County and Syracuse, 2019-2023



Source: U.S. Census Bureau, 2019-2023 American Community Survey, 5-Year Estimates, Table S1903. Notes: Data were not available for Native Hawaiian and Other Pacific Islander households in Syracuse due to small numbers. Onondaga County data are inclusive of Syracuse.

Poverty

Overall, 13.9% of Onondaga County's residents live below the federal poverty level. In Syracuse the rate is nearly double (29.6%). Poverty indicators for Syracuse, Onondaga County, and New York State are provided below. Across geographies, there are substantial differences in poverty by race, with Black residents and American Indian or Alaska Native residents experiencing the highest rates (Figure 9).

Figure 9. Poverty indicators by race, Syracuse, Onondaga County, and New York State, 2019-2023

	City of Syracuse	Onondaga County	New York State
Percent below the federal poverty level	29.6%	13.9%	14.4%
American Indian or Alaska Native	39.7%	28.1%	22.7%
Asian	23.8%	16.9%	13.9%
Black	39.3%	34.9%	20.6%
Native Hawaiian and Other Pacific Islander	-	20.7%	22.2%
White	22.9%	9.8%	10.0%
Other race	32.8%	23.7%	21.9%
Two or more races	35.5%	21.6%	16.0%

Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates, Table S1701. Notes: Data were not available for Native Hawaiian and Other Pacific Islander households in Syracuse due to small numbers. Onondaga County data are inclusive of Syracuse.

In Syracuse, the poverty rate among children is alarming, with 45.6% of children under 18 living in poverty. Among older adults (age 65 years and older) poverty rates were lower than for the entire population. Notably, only 10.0% of older adults in the County are living in poverty.

Figure 10. Additional poverty indicators, Syracuse, Onondaga County, and New York State, 2019-2023

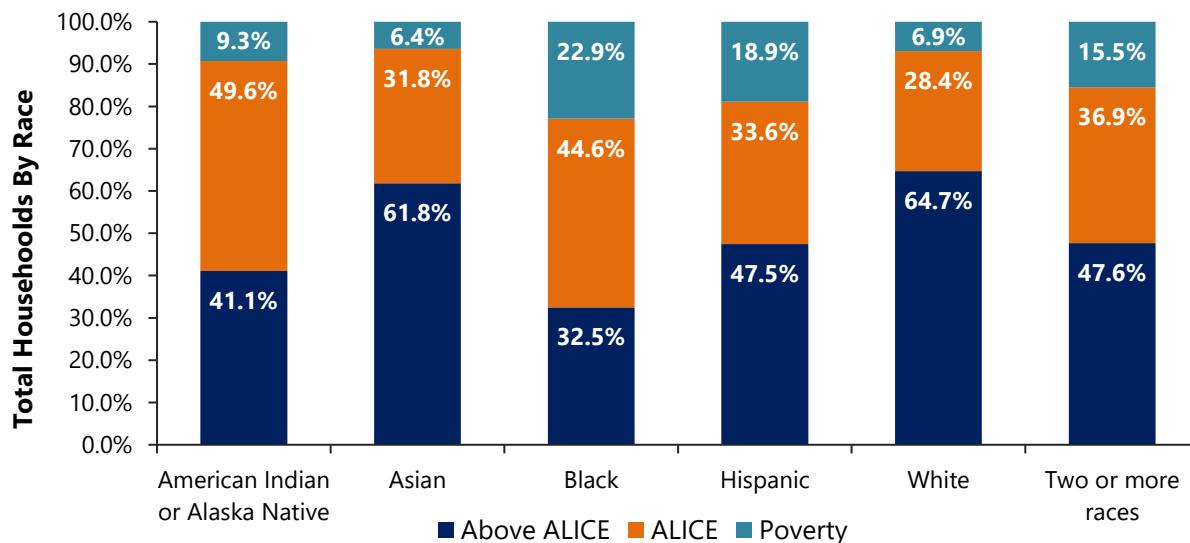
	City of Syracuse	Onondaga County	New York State
Children (under 18 years of age)	45.6%	21.2%	18.2%
Adults age 65+ years	20.6%	10.0%	12.7%
People with a disability (age 16 and older)	38.9%	23.2%	24.1%

Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates, Table S1701 and Table S1811. Notes: Onondaga County data are inclusive of Syracuse.

Asset Limited, Income Constrained, Employed

In Onondaga County, many residents earn just above the federal poverty level but still earn less than what it costs to afford basic needs. This is referred to as Asset Limited, Income Constrained, Employed (ALICE). According to a point in time estimate (from 2023), 33% of New York households and 26% of Onondaga County households meet the ALICE criteria. ALICE households include people of all genders, ages, and racial backgrounds, and come in all types of families. Factors such as systemic racism, ageism, gender discrimination, and geographic barriers make it harder for many families to access the resources and opportunities necessary for financial stability.²⁰

Figure 11. Households by race, Onondaga County, 2023



Source: United for ALICE, Households by Race/Ethnicity, Onondaga County, New York, 2023. Retrieved 12/5/2025 from <https://www.unitedforalice.org/demographics/new-york>.

²⁰ United for Alice: <https://www.unitedforalice.org/county-reports/new-york>. Retrieved 12/1/2025.

Housing Affordability and Stability

Access to stable, affordable, and safe housing can play an important role in facilitating health. In Onondaga County, 14.0% of residents report residing in a different residence now compared to one year ago.²¹ There are many reasons that individuals change residences, including relocating for job or educational opportunities, changes in relationships or social networks, or changes in financial circumstance. While not all of these changes reflect housing instability, it is important to recognize that changing residence locations may impact social support and access to services. To provide additional context, the table below includes several indicators of housing stability within Onondaga County and Syracuse.

Figure 12. Housing indicators, Syracuse, Onondaga County, and New York State, 2019-2023

	City of Syracuse	Onondaga County	New York State
% of properties that are owner occupied	41.3	65.7	54.3
% of properties that are renter occupied	58.7	34.3	45.7
% of renters spending 30% or more of household income on rent	56.4	50.0	51.5
% of housing units built in 1939 or earlier	43.0	22.8	30.5
% of housing units built in 1979 or earlier	86.4	71.2	74.8

Source: U.S. Census Bureau, 2019-2023 American Community Survey, 5-Year Estimates, Table DP04. Onondaga County data are inclusive of Syracuse.

Home values in Onondaga County and Syracuse have increased substantially in recent years in alignment with national trends. This has made purchasing a home more difficult or unattainable for many County residents. Unfortunately, recent predictions indicate home values in the Syracuse metro area are expected to rise by 3.9% by September 2026 (compared to September 2025 home values).²² This puts the expected rise in the Syracuse area at the 14th highest rate in the entire country during this timeframe. Neighboring metro areas of Buffalo and Rochester are expected to rise as well, but at slightly lower rates (Buffalo: 3.0%, Rochester 2.9%). On a national level, this trend is attributed to a low number of properties for sale and

Community Resources

Local organizations can assist community members with housing support:

- [Catholic Charities](#)
- [Liberty Resources](#)
- [Onondaga County Department of Social Services](#)
- [Syracuse Housing Authority](#)
- [PEACE, Inc.](#)
- [The Salvation Army](#)

²¹ [New York State Department of Health, Community Health Indicator Reports, Onondaga County](#). Retrieved 2/20/2025.

²² Syracuse.com: Home values in Upstate NY projected to surge in coming year, new data says. Published 11/14/2025: <https://www.syracuse.com/data/2025/11/home-values-in-upstate-ny-projected-to-surge-in-coming-year-new-data-says.html>.

housing supply not meeting the current demand. More and diverse housing types are needed to meet the current and projected demand in Onondaga County.

Across the county, the age and condition of housing stock varies. In Syracuse, 86.4% of the housing stock was built in 1979 or earlier. Older homes are more likely to contain environmental hazards, such as lead paint. Additionally, in areas with high concentrations of rental properties, older homes may not be maintained to healthy standards. Inadequately maintained homes may be at increased risk for mold, pest infestations, and fire hazards.

In addition to the housing stability concerns noted above, homelessness remains a persistent challenge in our region. In 2024, 1,192 individuals were documented as experiencing homelessness within the counties of Onondaga, Oswego, and Cayuga.²³

Cost of Living

Over the past several years, most areas of the nation have experienced notable increases in the cost of living. These increases are driven by a combination of factors, including lingering disruptions from COVID-19, higher energy prices, and inflation. Households continue to face higher prices for many essentials such as groceries, healthcare, transportation, and rent. While the overall cost of living in Onondaga County is in line with national trends, as noted above, housing costs have increased significantly in recent years, leaving less room in household budgets for other necessities.

Nutrition Security

Cost of living increases and uncertainty around government food programs have directly impacted nutrition security in Onondaga County. According to the Food Bank of Central New York, distribution has increased over 20% in 2025 compared to the previous year.²⁴ Access to healthy, fresh, and affordable food is important for maintaining healthy lifestyles; and food production, processing, distribution, and waste management have significant impacts on a community's environment, economy, and health.²⁵ Income, transportation, and geographic location are several factors that currently affect food access in Onondaga County.

Overall, 13.2% of Onondaga County residents experience food insecurity compared to 14.5% of NYS residents.²⁶ Notably, Black residents and Hispanic residents experience the highest rate of food insecurity in the county (Figure 13). The Supplemental Nutrition Assistance Program (SNAP) and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) provide food access to income eligible program participants. Within Onondaga County, 14.4% of households participate in SNAP.²⁷ In

²³ Housing and Homeless Coalition of Central New York, Point in Time Count Reports, 2024. Retrieved 2/20/2025, from <https://www.hhccny.org/stats-resources/point-in-time-report-pit/>.

²⁴ Syracuse.com, Food insecurity surges across CNY, food bank says, 2025. Retrieved 12/16/2025 from <https://www.localsyr.com/news/local-news/food-insecurity-surges-across-cny-food-bank-says/>.

²⁵ Community Food Systems Planning. Retrieved 12/7/2022.

²⁶ Feeding America, Map the Meal Gap, 2023. Retrieved 12/17/2025 from <https://map.feedingamerica.org/>.

²⁷ U.S. Census Bureau, 2019-2023 American Community Survey, 5-Year Estimates, Table S2201.

Syracuse, 28.3% of households receive SNAP benefits. In 2024, the Onondaga County WIC program has an average monthly caseload of approximately 9,500 clients.

Figure 13. Food Insecurity by Demographic, Onondaga County and NYS, 2023

	Onondaga County	New York State
All individuals (regardless of age and race or ethnicity)	13.2%	14.5%
Children under 18 (regardless of race or ethnicity)	19.1%	19.0%
Older adults (ages 50 to 59, regardless of race or ethnicity)	12.8%	12.7%
Senior (ages 60 and older, regardless of race or ethnicity)	9.2%	9.9%
Black (all ages, includes Hispanic and non-Hispanic)	30.0%	25.0%
Hispanic or Latino (any race)	28.0%	26.0%
Non-Hispanic White	9.0%	9.0%

Source: Feeding America, Map the Meal Gap, retrieved 7/11/2025 from <https://map.feedingamerica.org/>

Universal Free School Meals program

To address food insecurity, New York State recently enacted legislation providing all public school students with free breakfast and lunch, regardless of family income. The Universal Free School Meals Program, launched in the 2025–2026 school year, ensures students have access to nutritious meals, supports healthy eating habits, and promotes improved academic performance and readiness to learn.²⁸

Affordable Childcare

Access to affordable high-quality childcare is beneficial to family wellbeing.²⁹ Challenges in finding adequate care can lead to increased stress levels and lower quality of life for families. Additionally, parents who struggle to afford child care may not be able to return to work, which impacts families' health and economic outlook. In New York, the child care sector has continued to face challenges. In 2023, 60% of the

Community Assets

The [Child Care Assistance Program](#) offered by the Onondaga County Department of Social Services - Economic Security helps to reduce the financial burden of child care for eligible families.

²⁸ NY.gov, Governor Hochul Celebrates Universal School Meals Program in Effect During First Week of 2025-26 Academic School Year, 2025. Retrieved 12/17/2025 from <https://www.governor.ny.gov/news/governor-hochul-celebrates-universal-school-meals-program-effect-during-first-week-2025-26>.

²⁹ Evolve Family Medicine. Retrieved 3/19/2025 from <https://evolvehealthtx.com/child-care-family-health/#:~:text=In%20summary%20child%20care%20is,the%20foundation%20for%20future%20generations>.

state's census tracts were child care deserts or locations where there is a significant lack of available child care options.³⁰ New York has also experienced workforce issues since 2020 as the number of day care service jobs dropped by 19.8% statewide. Furthermore, New York's average annual child care prices are the second highest in the nation. County-level costs of child care for infants range from 10.2% to 36.6% of median family income. The child care cost burden for a household with more than two children is higher in Onondaga County than NYS. Additionally, Onondaga County has a lower rate of child care centers for children under the age of 5 than NYS (Figure 14).

Figure 14. Child Care, Onondaga County and NYS

	Onondaga County	New York State
Child Care Cost Burden (2023 & 2024)	41%	38%
Child Care Centers per 1,000 children under age 5 (2010-2022)	5	6

Source: County Health Rankings & Roadmaps. Retrieved 3/19/2025 from <https://www.countyhealthrankings.org/health-data/new-york/onondaga?year=2025>.

Note: Child care cost burden is for a household with two children as a percent of median household income.

Economic Stability: Community Assets and Resources

Food Security:

- Farmers markets are located across the county including the year-round Central New York Regional Market which accepts EBT, WIC Farmers Market coupons, and cash.
- The Double Up Food Bucks program helps SNAP recipients buy more local produce at participating markets, grocery stores, corner stores, and farm stands.
- Community gardens within Syracuse produce fruit, vegetables, and/or other plants and increase the accessibility of healthy, safe, and affordable foods for many county residents.
 - Syracuse Grows is a grassroots network cultivating food justice by strengthening urban food production through education, advocacy, and community resources.
- The Food Bank's Mobile Food Pantry (MFP) program delivers highly desirable perishable food items including fresh fruits and vegetables, dairy, and bread items to families and individuals in underserved areas, and has expanded into Cayuga, Chenango, Cortland, Lewis, Madison, Oneida, Onondaga, and Oswego counties.

³⁰ Office of the New York State Comptroller, Child Care in NY Challenged by Staff Shortages, High Prices and Too Few Slots, 2025. Retrieved 3/19/2025 from <https://www.osc.ny.gov/press/releases/2025/02/child-care-ny-challenged-staff-shortages-high-prices-and-too-few-slots>.

Economic Stability: Community Assets and Resources

- The [Onondaga County Health Department WIC Program](#) offers nutritious foods, nutrition education, breastfeeding/chestfeeding support, and provides referrals to other programs and services for individuals and families who qualify.
- [Syracuse Community Connections](#) in partnership with the [Food Bank of CNY](#), supports families in need through a food pantry, monthly fresh food giveaways, and daily nutritious meals for children in its afterschool program.
- [Food Sense](#), run by the Food Bank of CNY, is an open monthly food-buying co-op offering 12–15 staple grocery items at a discounted price, plus optional add-ons. Anyone can participate, and there's no limit on the number of packages purchased.
- The [Onondaga County Office for Aging's Senior Nutrition Services](#) provides county residents (aged 60+ years) nutritious meals, nutrition counseling, and nutrition education. Nutritious meals are served up to five days a week at dining sites and through various home delivery meal providers.

Onondaga County is served by numerous non-profit foodbanks, food pantries, and soup kitchens that provide emergency food, basic personal care items, and referrals to other agencies to additional support services.

- The Onondaga County Public Libraries offer a directory of [Community and Social Services Resources](#). This list includes resources for child care and after-school programs, family services, food assistance, general and home assistance, pet support, and senior services.
- A list of local food pantries, meal programs, and community organizations helping residents meet their food needs: [2025 Community Food Connections Brochure](#)

Home Ownership Programs:

- [Jubilee Homes of Syracuse Inc.](#) supports revitalization on the city's Southwest side through housing and economic programs. Its homeownership program helps buyers with credit rebuilding, budgeting, education, and mortgage preparation.
- The [Onondaga County Community Development](#) home ownership program offers subsidized, rehabilitated homes to eligible first-time buyers. The County also operates the Onondaga County Housing Initiative Program (O-CHIP) which funds private and nonprofit developers for new construction and to close financing gaps.
- [Home HeadQuarters](#) provides a variety of programs and services, focusing on home improvement loans and homeownership education to create new city homeowners and strengthen neighborhoods.

Economic Stability: Community Assets and Resources

As Syracuse's primary housing agency, it rehabilitates distressed properties, builds new homes for first-time buyers, and offers urgent care, closing cost assistance, and Syracuse homeowner assistance programs for low- to moderate-income families.

Legal Help with Housing Issues:

- CNY Fair Housing is committed to ending housing discrimination, fostering inclusive communities, and ensuring equal housing access across Central and Northern New York. The organization provides enforcement and litigation, education and outreach, and research and contractual services.
- The Volunteer Lawyers Project of CNY, Inc. offers free legal information, assistance, and representation in civil matters to low-income residents of Central New York including housing issues.

Economic Development and Employment Opportunities

- Micron, New York State's largest development at 1,400 acres in Onondaga County, will take up to 20 years to build and is expected to create nearly 50,000 jobs, including 9,000 high-paying positions.
- The New York Hiring for Emergency Limited Placement Statewide (NY HELPS) program, launched in 2023, helps state agencies fill critical positions without exams, supporting workforce growth and diverse hiring, with thousands of openings available.
- The Onondaga County Office of Economic Development helps employers recruit, train, and retain workers, offering the Employee Productivity Program with grants and training to boost skills and productivity.
- The Onondaga County Department of Social Services – Economic Security operates the TA Employment Program to assist Temporary Assistance and/or SNAP applicants and recipients overcome barriers to employment.
- CNY Works brings job seekers, businesses, and training opportunities together to enhance the workforce and strengthen the local economy.
- In 2025, Governor Hochul announced a \$50 million investment for child poverty reduction. The Onondaga County Department of Social Services will use \$12.5 million for initiatives to address generational poverty, promote housing stability, improve school attendance rates, and distribute free diapers to families that are eligible for Temporary Assistance.
- PEACE Inc. is a federally designated Community Action Agency (CAA) that serves nearly 10,000 clients in Syracuse, Onondaga County, and parts of Oswego County, providing nine antipoverty services.

Social and Community Context

Connections between individuals and within communities play a crucial role in health and well-being. Strong community ties and positive relationships with others can help protect mental, emotional, and physical health, particularly for those affected by challenging life events. Interventions that strengthen social and community supports are vital for improving health and can range from reducing the effects of bullying, trauma, or discrimination to boosting civic engagement.

In today's world, staying connected often depends on technology and broadband access. Expanding broadband infrastructure and enhancing digital skills and health literacy are crucial for promoting overall well-being.

This section explores the social and community context of Onondaga County residents including social support, families and marital status, civic participation, the digital divide, discrimination, and trauma.

Families and Marital Status

Familial relationships and marital status may impact an individual's social support which may in turn influence their health and well-being. Onondaga County is comprised of 114,065 families, with 27,539 families in Syracuse.³¹ The average family size in Onondaga County and Syracuse is similar, with an average of 2.98 and 3.10 people per family, respectively. Within the county, there are less households that have a male householder with no spouse or partner present compared to Syracuse (19.9%; 27.3%).³² In Syracuse, 25.9% of residents aged 15 years old and older are married and 55.3% of residents have never been married (Figure 15). Cohabiting couple households make up 8.6% of households in the county and 10.6% in Syracuse.³³ Among county households with children, 28.5% are single-parent households with no spouse or partner present. In the city, 48.0% of households with children are single-parent households.

Figure 15. Marital status, Syracuse, Onondaga County, and New York State, 2019-2023

	City of Syracuse	Onondaga County	New York State
% of residents married	25.9	43.9	44.6
% of residents never married	55.3	37.5	38.6
% of residents divorced or separated	14.1	12.9	11.2
% of residents widowed	4.7	5.6	5.6

Source: U.S. Census Bureau, 2019-2023 American Community Survey, 5-Year Estimates, Table S1201. Note: Data is for population 15 years and over.

³¹ U.S. Census Bureau, 2019-2023 American Community Survey, 5-Year Estimates, Table S1101.

³² U.S. Census Bureau, 2019-2023 American Community Survey, 5-Year Estimates, Table DP02.

³³ U.S. Census Bureau, 2019-2023 American Community Survey, 5-Year Estimates, Table B09005.

Adverse Childhood Experiences (ACEs)

Adverse Childhood Experiences (ACEs) are traumatic or stressful events that occur in childhood from the ages of 0-17 years.³⁴ Examples of ACEs include experiencing violence, abuse, or neglect, seeing violence in the home or community, growing up in a household with substance use problems or mental health problems, instability due to parental separation or due to a member of the household being in jail, and living in poverty.

The effects of traumatic or stressful events can add up over time and adults who have experienced ACEs may have higher rates of negative health outcomes such as poor mental health, obesity, substance use, and premature death. In Onondaga County, 38.7% of adults have experienced two or more ACEs compared to 40.5% of adults in NYS excluding NYC.³⁵ Moreover, the rate of children under 18 years who have indicated reports of abuse/maltreatment is higher in Onondaga County (17.7) than NYS excluding NYC (13.7).

Preventing and mitigating the effects of ACEs requires collaboration among public health, government, education, and social services to implement a variety of comprehensive strategies.³⁶ Effective strategies include creating environments that are safe, stable, and nurturing which may require changes in norms, behaviors, and surroundings. Protective factors that may increase child or parent resilience include having supportive relationships, culturally responsive programs, healthy lifestyles, economic stability, and access to quality childcare and education early in life.³⁷ Community based organizations often play a key role in delivering these services, providing a wide range of programs that address both immediate family needs and long-term well-being.

Community Resources

Programs are available for families and children in need of wrap-around services:

- [McMahon Ryan Child Advocacy Center](#)
- [Hillside Children's Center](#)
- [Onondaga County Mental Health Services](#)
- [Department of Social Services- Economic Security \(DSS-ES\)](#)
- [NYS Office of Child Welfare and Family Services](#)

³⁴ U.S. Centers for Disease Control and Prevention (CDC), About Adverse Childhood Experiences, retrieved 2/19/2025 from [About Adverse Childhood Experiences | Adverse Childhood Experiences \(ACEs\) | CDC](#).

³⁵ New York State Prevention Agenda, retrieved 2/20/2025 from https://apps.health.ny.gov/public/tabvis/PHIG_Public/pa/.

³⁶ CDC, A Public Health Approach to Adverse Childhood Experiences, retrieved 2/19/2025 from <https://www.cdc.gov/aces/php/public-health-strategy/index.html>.

³⁷ New York State Office of Children and Family Services, Adverse Childhood Experiences (ACEs), retrieved 2/19/2025 from <https://ocfs.ny.gov/programs/cwcs/aces.php>.

Positive childhood experiences (PCEs)

Positive childhood experiences (PCEs) promote healthy child development, build resilience, and contribute to better overall health and well-being as an adult.³⁸ PCEs occur when children experience safe, stable and nurturing relationships and environments as they grow. Exposure to more PCEs is associated with a lower risk for adult depression and poor mental health, and a greater chance of having healthy relationships in adulthood.³⁹

The prevalence of PCEs differs significantly by race and ethnicity, age group, and sexual orientation. Studies have shown there were fewer PCEs reported among lesbian, gay, and bisexual adults and more PCEs reported among adults with higher income and educational attainment.⁴⁰ PCEs help to buffer against the long-term effects of ACEs, increasing the likelihood of better mental health in adulthood. Communities can support efforts in preventing ACEs and promote PCEs by supporting children and families where they live, work, and play.⁴¹ Community organizations including faith-based and youth groups play a crucial role in creating PCEs and provide a variety of necessary services to prevent ACEs.

Children may be placed in foster care for various reasons, including safety concerns, a family's temporary inability to provide care, the need for specialized treatment, or behavioral challenges. Placement can occur through a court order or voluntarily at the request of parents or guardians. Courts aim to place children in the least disruptive, most family-like setting to minimize trauma. Regardless of the reason, foster care often brings major changes including separation from parents, siblings, school, friends, and community, and adjustment to a new home environment. However, a stable, nurturing setting with supportive caregivers can promote emotional

7 PCEs that can contribute to healthy development:

1. The ability to talk with family about feelings.
2. The sense that family is supportive during difficult times.
3. The enjoyment of participation in community traditions.
4. Feeling a sense of belonging in high school.
5. Feeling supported by friends.
6. Having at least two non-parent adults who genuinely cared.
7. Feeling safe and protected by an adult in the home.

Source: CDC, Preventing Adverse Childhood Experiences, retrieved 2/19/2025 from <https://www.cdc.gov/aces/prevention/index.html>

³⁸ John Hopkins Bloomberg of Public Health, For Better Adult Mental and Relational Health, Boost Positive Childhood Experiences, retrieved 2/19/2025 from <https://publichealth.jhu.edu/2019/for-better-adult-mental-and-relational-health-boost-positive-childhood-experiences>.

³⁹ Bethell C, et al, Positive Childhood Experiences and Adult Mental and Relational Health in a Statewide Sample: Associations Across Adverse Childhood Experiences Levels. *JAMA Pediatr.* 2019;173(11):e193007. doi:10.1001/jamapediatrics.2019.3007.

⁴⁰ Sege R, Swedo EA, Burstein D, et al. Prevalence of Positive Childhood Experiences Among Adults — Behavioral Risk Factor Surveillance System, Four States, 2015–2021. *MMWR Morb Mortal Wkly Rep* 2024;73:399–404. DOI: <http://dx.doi.org/10.15585/mmwr.mm7317a3>.

⁴¹ CDC, Preventing Adverse Childhood Experiences, retrieved 2/19/2025 from <https://www.cdc.gov/aces/prevention/index.html>.

growth and create positive childhood experiences. The foster care rate for children aged 0 to 21 years is significantly higher in Onondaga County (4.6 per 1,000) than NYS (2.6 per 1,000).⁴²

Discrimination and Racism

Discrimination occurs when people are treated unfairly because of social systems or beliefs, causing harm to individuals or groups. It can be experienced as both structural discrimination and individual level discrimination. Structural discrimination exists when systems limit opportunities and resources for less privileged groups. Individual level discrimination involves negative interactions or treatment based on a person's specific characteristics. Discrimination can affect many population groups, including, but not limited to, racial and ethnic groups, women, lesbian, gay, bisexual, transgender, and queer (LGBTQ+) individuals, people with disabilities, and older adults. In the United States, over half (55.8%) of the population report experiencing some level of discrimination.⁴³

Experiencing discrimination can adversely affect both physical and mental health. Discrimination has been associated with increases in unhealthy behaviors and decreases in health promoting behaviors, including chronic disease management, cancer screening, and condom use. Additionally, discrimination has been directly linked with poor maternal and infant health outcomes including infant mortality, preterm birth, and pregnancy-related depression.⁴⁴ Individuals experiencing discrimination may develop both acute and chronic stress.⁴⁵ Chronic stress occurs not only from specific incidents, but also from the ongoing need to guard oneself from potential future discrimination. Discrimination can also impact the quality of patient care or a patient's healthcare experience. The 2025 Onondaga County Community Health Survey (described in the Community Engagement section pages 104-105, which reached more than 1,900 Onondaga County residents, found that 12.7% of survey respondents experienced stigma, discrimination, or judgement when seeking healthcare in the past year.⁴⁶ When broken down by race and ethnicity of respondents, 21.4% of non-Hispanic Black or African American respondents and 20.5% of Hispanic respondents (of any race) indicated experiencing stigma, discrimination, or judgement when seeking healthcare in the past year.

Racism (discrimination on the basis of race), **has been recognized as a public health crisis.**⁴⁷ Like other types of discrimination, racism encompasses both structural and individual aspects, and occurs when individuals are assigned value and access to opportunity on the basis of the color of their skin. Centuries

⁴² NYS Office of Children and Family Services, Kids Well-being Indicator Clearinghouse Data Source. Retrieved 3/27/2025 from https://www.nyskwc.org/get_data/county_report_detail.cfm?countyid=36067&profileType=8.

⁴³ Wang ML, Narcisse M. Discrimination, Depression, and Anxiety Among US Adults. *JAMA Netw Open*. 2025;8(3):e252404. doi:10.1001/jamanetworkopen.2025.2404. Retrieved 12/22/2025.

⁴⁴ KFF, Racial Disparities in Maternal and Infant Health: Current Status and Key Issues, December 2025. Retrieved 12/10/2025.

⁴⁵ Williams DR. Stress and the Mental Health of Populations of Color: Advancing Our Understanding of Race-related Stressors. *J Health Soc Behav*. 2018 Dec;59(4):466-485. doi: 10.1177/0022146518814251. Retrieved 12/22/2025, from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6532404/>.

⁴⁶ Onondaga County Health Department, Onondaga County Community Health Survey, 2025.

⁴⁷ CDC, Combating Racism Through Research, Training, Practice, and Public Health Policies, 2023. Retrieved 12/10/2025 from https://www.cdc.gov/pcd/collections/pdf/racism_is_a_public_health_crisis_combating_racism_508.pdf.

of racism in the United States have had lasting harmful effects on communities of color, shaping where people live, learn, work, worship, and play. These impacts have created deep social, economic, and health inequities. These long-standing inequities affect everything from access to housing, education, employment, wealth-building opportunities, and healthcare. Racism ultimately prevents individuals from reaching their fullest health potential and undermines the health of our entire community.

Neighborhood and Built Environment

Our health is impacted by the environments in which we live, learn, work, and play. Access to safe spaces to be active, the ability to get to and from medical appointments, access to food, and housing conditions are all impacted by the built environment (sidewalks, roads, bike lanes, etc.) and natural environment (parks, green space, water, etc.). Many built environment and policy factors that impact the health of Onondaga County residents are reviewed in this section.

Built Environment

When health is considered in the development and design of community spaces, the built environment has an incredible potential to positively impact the health of residents. A few examples include safe spaces for physical activity and recreation, neighborhoods that are both pedestrian and bicycle friendly, and safe routes for children to get to and from school. Consideration of the needs of diverse and aging populations is also critical for the development of safe and healthy communities.

Smart growth is an approach to community planning and design that considers the impact of the built environment on a community's health, well-being, and prosperity.⁴⁸ Smart growth principles provide guidelines for the development of safe, accessible, and diverse communities designed to support healthy living.

A list of the 10 smart growth principles is provided to the right.

Land Use and Zoning Policies

Land use planning and zoning laws directly impact how the environments in which we live, learn, work, and play are developed and modified. Considerations of green space, community centered design, and accessibility directly impact how residents use spaces in their community. Well-designed spaces can be created to promote active living, ensure safety, and cultivate social interaction and diversity. However, some zoning efforts and policies have historically resulted in racial/ethnic residential segregation, defined as two or more demographic groups living separately from one another in a geographic area. Current data show

Smart Growth Principles

1. Mix land uses
2. Take advantage of compact design
3. Create a range of housing opportunities and choices
4. Create walkable neighborhoods
5. Foster distinctive, attractive communities with a strong sense of place
6. Preserve open space, farmland, natural beauty, and critical environmental areas
7. Direct development towards existing communities
8. Provide a variety of transportation choices
9. Make development decisions predictable, fair, and cost effective
10. Encourage community and stakeholder collaboration in development decisions

Source: U.S. Environmental Protection Agency, *About Smart Growth*, 2025. Retrieved 12/22/2025, from <https://www.epa.gov/smartgrowth/about-smart-growth>

⁴⁸ Smart Growth America: What is Smart Growth. Retrieved 11/18/2022, from <https://smartgrowthamerica.org/what-is-smart-growth/>

that the residential index for Black and White residents of Onondaga County is 67 compared to 75 in NYS.⁴⁹ The index ranges from 0 (complete integration) and 100 (complete segregation). While Onondaga County is less segregated than NYS, to reach complete integration, 67% of Black or White residents would have to move to different geographic areas in the County.

Several transformational projects are underway in Onondaga County, which will shape land use, development, and transportation policies for decades to come. The influx of jobs available at the planned Micron semiconductor fabrication campus in northern Onondaga County will drive demand for new housing, commercial services, retail, and healthcare facilities. With coordinated planning and environmental stewardship, this project will expand residential and mixed-use development, and encourage investment in water, energy, and transportation infrastructure to support long-term economic expansion.

Interstate 81 currently runs through the center of Syracuse and has often been cited as a contributing factor to highly concentrated poverty, particularly in predominantly African American neighborhoods in the city. A portion of the highway that runs through Syracuse is reaching the end of its usable life and does not meet current highway standards. After years of public discussion and debate, in early 2022 New York State officials announced that the elevated highway will be replaced with a Community Grid Alternative. The community grid will reconnect previously divided city neighborhoods, while reducing traffic flow and enhancing opportunities for bike and pedestrian infrastructure. The project was approved with the requirement to hire a percentage of the needed workforce directly from the community, which can lead to improved economic security for Syracuse families. The project involves construction in a variety of locations throughout Syracuse and Onondaga County. Each of the two project phases consist of several smaller project contracts that focus on integrating different areas of I-81 into the community grid. Phase One began in the Spring of 2023 and construction efforts currently remain underway, with Phase One anticipated to be completed in early 2026. Phase Two construction is anticipated to begin mid-2026. Overall completion of the I-81 Viaduct Project is targeted for 2028. Traffic routing and construction updates are communicated by the New York State Department of Transportation through a variety of channels including social media, news releases, and updates on the I-81 Viaduct Project website. The impacted area of I-81 is adjacent to the Syracuse Housing Authority public housing campus, which is also being redesigned and redeveloped as part of an ambitious neighborhood transformation plan called the East Adams Neighborhood Transformation Project. The project plan includes improvements to the housing units and investments in childcare, parks, transportation, and food access. Construction on the East Adams Neighborhood project began in December of 2025 and is anticipated to take roughly ten years to be completed.

Tobacco and Nicotine Use Policy

Policies to control tobacco use have proven to be effective in reducing smoking, encouraging some smokers to quit, and discouraging initiation of smoking by children.⁵⁰ In 2023, a new licensing requirement was

⁴⁹ County Health Rankings & Roadmaps. Retrieved 3/19/2025 from <https://www.countyhealthrankings.org/health-data/new-york/onondaga?year=2025>.

⁵⁰ Warner, KE. Tobacco control policies and their impacts. Past, present, and future. *Ann Am Thorac Soc*. 2014 Feb;11(2):227-30. doi: 10.1513/AnnalsATS.201307-244PS.

signed into law that restricts the placement of new tobacco retailers in the City of Syracuse. Under this legislation, sellers are required to maintain a city tobacco retail license, and the number of available licenses is capped. In addition, no licenses will be granted for retail locations near schools and parks. In 2024, NYS reached a settlement with the vape company, JUUL. Funds from this settlement will allow counties to combat underage vaping and e-cigarette addiction.

Transportation

Transportation impacts health in numerous ways. Inadequate transportation resources may result in poor access to healthcare and basic needs, while also limiting opportunities for employment, social connection, and physical activity. While transportation access is beneficial for health and well-being, an overreliance on personal vehicles can impact our natural environment through carbon emissions. Active transportation (such as biking and walking) provides opportunities for physical activity but requires adequate infrastructure to keep bicyclists and pedestrians safe.

Complete Streets is a transportation approach that ensures that streets are designed and maintained to enable safe transportation for individuals of all ages and abilities regardless of mode of transportation.⁵¹ This approach incorporates the adoption of sidewalks, bicycle lanes, bus lanes, crosswalks, improved signage, and other design elements that reduce motor vehicle collisions and risks to pedestrians and bicyclists. By enhancing the safety of all individuals using the roadways, this approach supports active transportation and increased physical activity. Many local municipalities across the United States, including several in Onondaga County have adopted complete streets policies to ensure these approaches are incorporated into transportation planning. This includes the City of Syracuse which has incorporated Complete Streets into the City's Comprehensive Plan.⁵² The New York State Department of Transportation also requires that state, county, and local agencies adopt a Complete Streets approach when receiving state and federal funding for transportation projects.⁵³

As a further commitment to improving traffic safety, in early 2023 the City of Syracuse pledged to become a Vision Zero City by eliminating all traffic fatalities and severe injuries, while increasing safety, health, and equitable mobility for all.⁵⁴ Onondaga County is highly vehicle dependent with 72.9% of workers (age 16 years and older) commuting alone to work each day (Figure 16).⁵⁵ Public transportation, walking, and biking are only utilized by 6.2% of County residents for commuting to work. However, this rate is higher (17.2%) among City residents.

⁵¹ U.S. Department of Transportation. Retrieved 11/12/2022, from <https://www.transportation.gov/mission/health/complete-streets>.

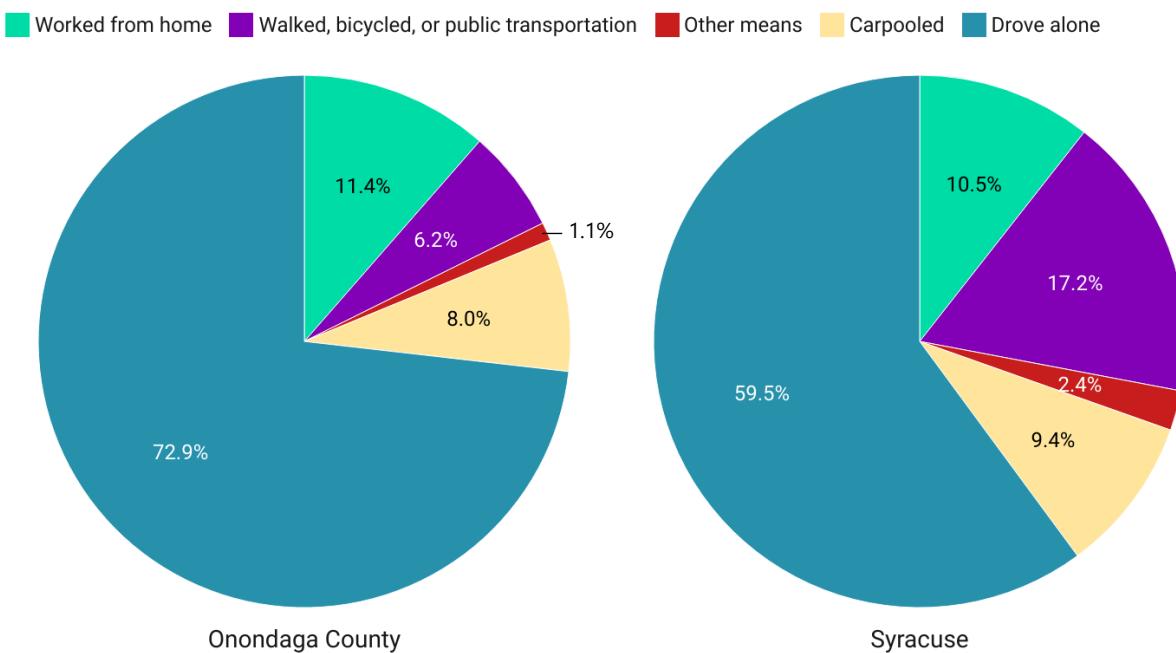
⁵² City of Syracuse Comprehensive Plan 2040. Retrieved 11/12/2022, from <http://www.syrgov.net/uploadedFiles/Comp%20Plan%20amended%202013-08-14.pdf>.

⁵³ NYS Department of Transportation, Complete Streets. Retrieved 11/12/2022, from <https://www.dot.ny.gov/programs/completestreets>.

⁵⁴ City of Syracuse Vision Zero Initiative. Retrieved 12/18/2025, from <https://www.syr.gov/Departments/Public-Works/Vision-Zero>.

⁵⁵ U.S. Census Bureau, 2019-2023 American Community Survey, 5-Year Estimates, Table B08301.

Figure 16. Means of transportation to work, Onondaga County and Syracuse



Source: U.S. Census Bureau, 2019-2023 American Community Survey, 5-Year Estimates, Table B08301. Note, Onondaga County is inclusive of Syracuse.

Many residents of Onondaga County rely on personal vehicles as their main mode of transportation, and not having access to a car can be challenging. In Syracuse, 25.2% of households do not have a vehicle available at home.⁵⁶ Among County residents, this rate is 11.7%. Unfortunately, there are many areas of the City and County that make navigating without a car difficult. However, in recent years, the NYS, the City of Syracuse, and several local municipalities have worked to increase the availability of safe and accessible bike lanes and streets, making active transportation safer.

Crime and Violence

The health of a community can be significantly impacted by crime and violence. Not only does violent crime cause injury and death, but exposure to violence can cause toxic stress which has been linked to adverse health outcomes.⁵⁷ Residents are also less likely to engage in outdoor physical activity in areas where they feel unsafe. Crime and violence can lead to financial divestment from communities, which may contribute to decreased property values and increases in poverty. Understanding the root causes of violence is important for prevention efforts. The CDC has identified "systemic racism, bias, and discrimination; economic instability; concentrated poverty; and limited housing, education, and healthcare access" as factors that may contribute to the incidence of violence.⁵⁸ Some communities are more likely to

⁵⁶ U.S. Census Bureau, 2019-2023 American Community Survey, 5-Year Estimates, Table DP04.

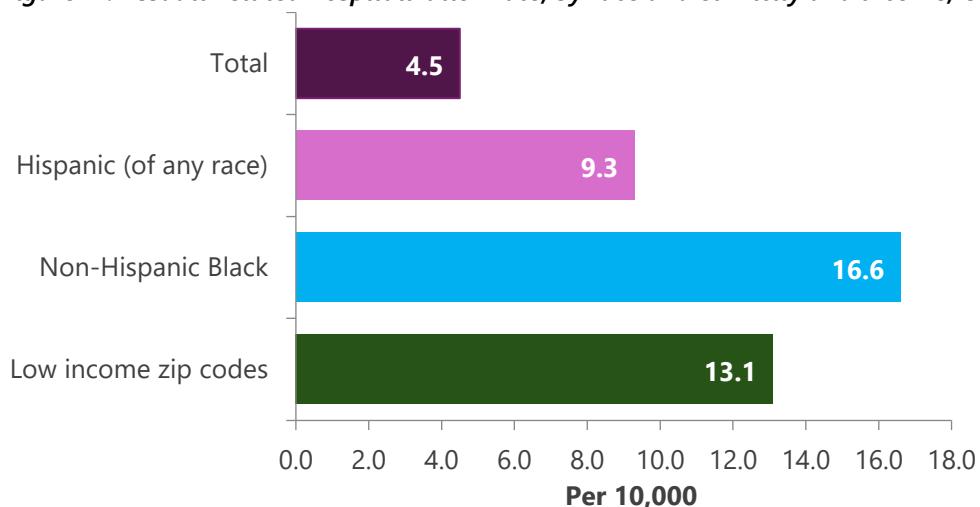
⁵⁷ Felitti, Vincent J et al. Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults. Am. Journal of Prev. Med. 14:4, 245-58.

⁵⁸ CDC, Community Violence Prevention. Retrieved 12/7/2022, from <https://www.cdc.gov/violenceprevention/communityviolence/index.html>.

experience violence; including “communities of color [who] often disproportionately experience these negative conditions, placing residents at greater risk for poor health outcomes.”

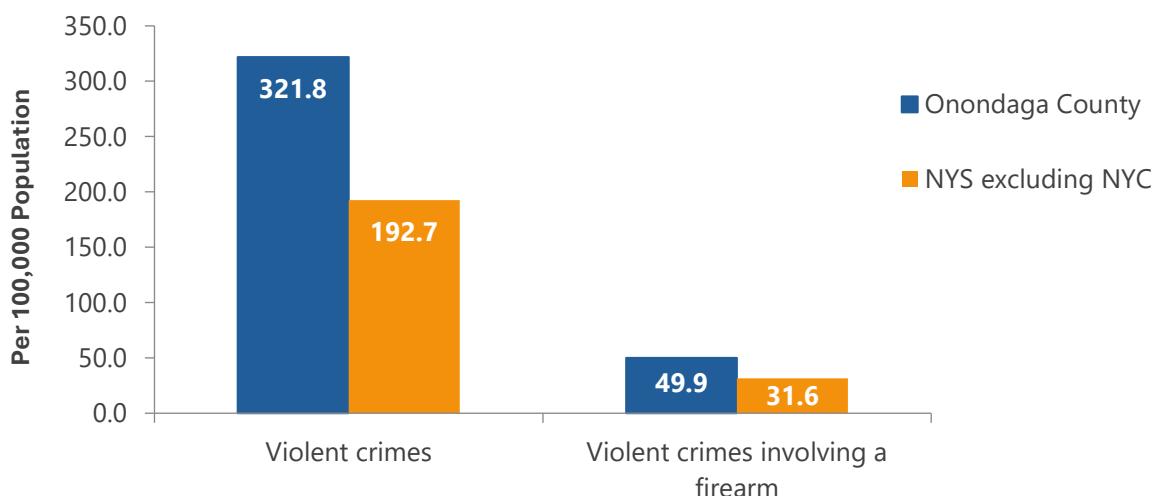
Figure 17 displays disparities in the county’s assault-related hospitalization rates by race and ethnicity, as well as income. The overall County rate (4.5 per 10,000) is higher than the rate for NYS excluding NYC (2.5 per 10,000).⁵⁹

Figure 17. Assault-related hospitalization rate, by race and ethnicity and income, Onondaga County, 2020



Source: [NYS Prevention Agenda Dashboard](#). Retrieved 2/20/2025. Note: Data not available for Non-Hispanic White and Non-low income zip code populations.

Figure 18. Violent crimes and firearm related violent crimes per 100,000 population, Onondaga County and NYS excluding NYC, 2024

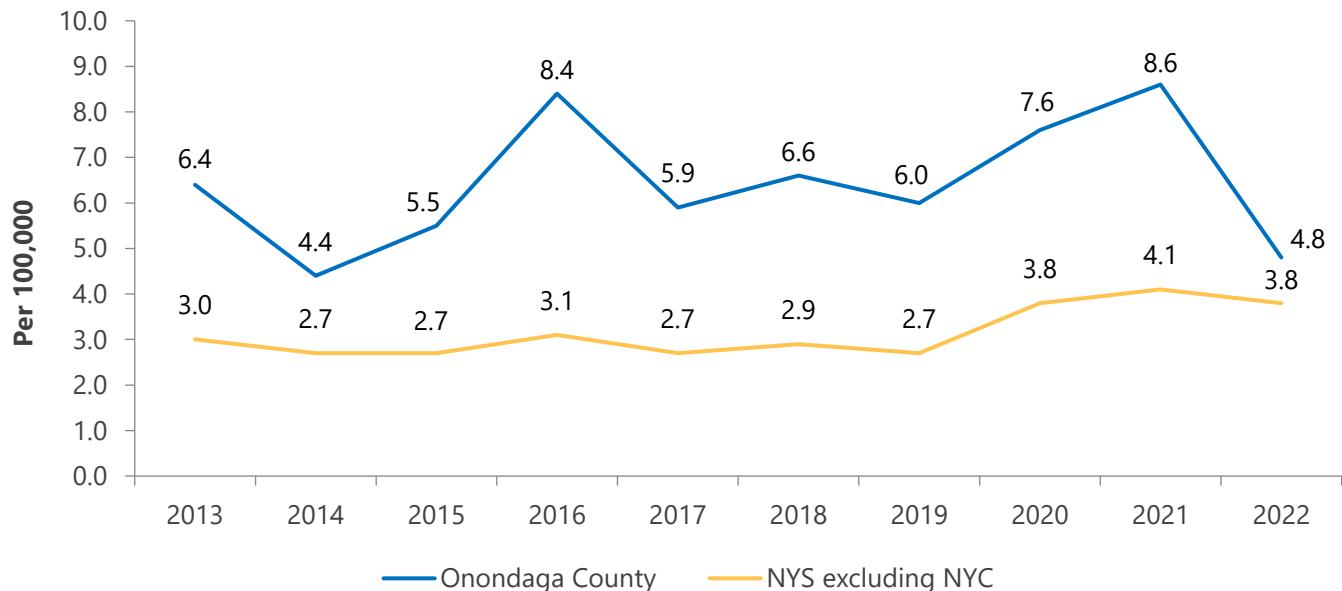


Source: [NYS Division of Criminal Justice Services; Uniform Crime Reporting System, 2024](#). Retrieved 12/3/2025 from <https://www.criminaljustice.ny.gov/crimnet/ojsa/countycrimestats.htm>

⁵⁹ [NYS Prevention Agenda Dashboard](#). Retrieved 2/20/2025.

Overall Onondaga County fares worse than NYS excluding NYC for several indicators of violent crimes, which include murder, rape, robbery, and aggravated assault.⁶⁰ The violent crime rate in Onondaga County (321.8 per 100,000) is substantially higher than the rate for NYS excluding NYC (192.7 per 100,000).⁶¹ In Onondaga County, the rate of violent crimes involving a firearm is also higher than in NYS excluding NYC (Figure 18). Additionally, homicide rates in Onondaga County have consistently exceeded the rates for NYS excluding NYC. The age-adjusted homicide mortality rates per 100,000 population for Onondaga County and NYS excluding NYC from 2013 to 2022 are displayed in Figure 19. While the rate for NYS excluding NYC has remained fairly constant over the last decade, Onondaga County's rate has fluctuated over time, with particularly high rates seen in 2016 and 2021, respectively. While the homicide mortality rate decreased significantly from 2021 to 2022, Onondaga County still maintains the highest homicide mortality rate in CNY.⁶² Early data for 2025 show a significant decrease in overall crime in Syracuse, down 23.7% compared to the previous year.⁶³

Figure 19. Age-adjusted homicide mortality rate per 100,000 population, Onondaga County and NYS excluding NYC, 2013-2022



Source: NYS Community Health Indicator Reports. Retrieved 12/3/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

⁶⁰ NYS Division of Criminal Justice Services; Uniform Crime Reporting System. Retrieved 10/21/2022, from <https://www.criminaljustice.ny.gov/crimnet/ojsa/stats.htm>.

⁶¹ NYS Division of Criminal Justice Services; Uniform Crime Reporting System, 2024. Retrieved 12/3/2025, from <https://www.criminaljustice.ny.gov/crimnet/ojsa/stats.htm>.

⁶² NYS Community Health Indicator Reports. Retrieved 3/3/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

⁶³ Syracuse Police Department COMPSTAT. Retrieved 12/19/2025 from www.syr.gov/files/sharedassets/public/v1/departments/police/documents/compstat/2025/weeklycompstat081125.pdf

Injury

Indicators for injuries occurring in Onondaga County, CNY, and NYS excluding NYC are displayed in Figure 20. Onondaga County fares worse than CNY and NYS excluding NYC for unintentional injury mortality. However, Onondaga County has a lower motor vehicle mortality rate than both CNY and NYS excluding NYC.

Figure 20. Injury indicators, Onondaga County, CNY, and NYS excluding NYC, 2020-2022

	Onondaga County	Central New York	NYS excluding NYC
Hospitalizations due to falls (per 10,000) – Aged 65+ years (2020)	187.6	185.2	189.7
Unintentional injury hospitalization rate (per 10,000)	69.5	69.9	70.6
Unintentional injury mortality rate (per 100,000)	63.7	62.4	51.2
Motor vehicle mortality rate (per 100,000)	6.4	9.0	8.0
Poisoning hospitalization rate (per 10,000)	11.2	12.0	9.2

Sources: *NYS Prevention Agenda Dashboard - County Level*; NYS Community Health Indicator Reports. Retrieved 2/24/2025 from <https://www.health.ny.gov/statistics/chac/indicators/>

Occupational Health

Health and safety can be impacted by the environment in which individuals work. Residents in certain occupations are at an increased risk for job-related injuries or exposure to harmful chemicals, toxins, or fibers. Several occupational health related indicators for Onondaga County, Central New York, and NYS are provided below. Onondaga County fares better than CNY and NYS excluding NYC for the exposure related indicators, elevated blood lead levels and asbestosis hospitalization. Onondaga County also has a higher rate of fatal work-related injuries than CNY but lower than NYS excluding NYC.

Figure 21. Occupational health indicators, Onondaga County, CNY, and NYS excluding NYC

	Onondaga County	Central New York	NYS excluding NYC
Blood lead levels $\geq 10 \mu\text{g}/\text{dL}$ (per 100,000) employed and aged 16+ years (2010-2022)	4.3	10.7	12.0
Incidence of malignant mesothelioma (per 100,000) - aged 15+ years (2019-2021)	s	0.9	1.2

Asbestosis hospitalization rate (per 100,000) - aged 15+ years (2020-2022)	0.9	2.4	5.1
Work-related hospitalizations (per 100,000) - employed and aged 16+ years (2020-2022)	121.1	119.6	113.8
Fatal work-related injuries (per 100,000) - employed and aged 16+ years (2020-2022)	3.0	2.7	3.4

Source: NYS Community Health Indicator Reports. Retrieved 3/4/2025 from <https://www.health.ny.gov/statistics/chac/indicators/>. 's' indicates the data did not meet reporting criteria when there are issues of confidentiality thus results are suppressed.

Social Support and Connectedness

Relationships play an important role in supporting health and well-being. One benefit of strong community relationships is social capital. Social capital refers to shared community resources, such as learning about a job opportunity through the friend of a friend.⁶⁴ Sources of social capital can include faith-based communities, neighborhoods, and families. Another benefit of strong social relationships is social support. Having a family member or friend to rely on can provide numerous benefits including helping individuals cope with stress, serving as positive role models for healthy behaviors, and reducing barriers to accessing health care or economic opportunities (for example, by providing transportation). Social isolation and loneliness are factors that can negatively influence health outcomes. These challenges can often disproportionately impact older adult populations. In Onondaga County, 14.1% of adults who live alone are age 65 years or older which is lower than in Syracuse (14.6%).⁶⁵

Civic Health

Civic health is an important factor in achieving a healthy community. Civic health embraces everyone's voice to create priorities, make decisions, and share resources.⁶⁶ There are two aspects of civic health: civic infrastructure and civic participation. Civic infrastructure includes places, policies, programs, and practices that provide opportunities for people to connect, share ideas, solve problems together, and engage in cultural activities to encourage a sense of belonging and empowerment. Civic participation includes the ways people engage in their community to improve conditions and/or shape their community's future. There are many ways people can engage in community life including voting, advocacy, volunteering, and mentoring. Ensuring people have opportunities for civic participation is central to building healthy, thriving, and equitable communities. In fact, communities with more structural barriers to civic participation have a life expectancy of about three years shorter than those with fewer barriers. A well-resourced civic infrastructure includes a more accessible information environment (local news outlets, broadband access, and public libraries) and is associated with having a community that offers more social and economic

⁶⁴ Healthy People 2030: Social Cohesion. Retrieved 11/15/2022, [Social Cohesion - Healthy People 2030 | health.gov](https://www.health.gov/plan-health-objectives/healthy-people-2030/social-cohesion).

⁶⁵ U.S. Census Bureau, 2019-2023 American Community Survey, 5-Year Estimates, Table S1101.

⁶⁶ County Health Rankings & Roadmaps, 2024 National Findings Report retrieved 2/20/2025 from <https://www.countyhealthrankings.org/findings-and-insights/2024-national-findings-report>

opportunities for good health. When there is less access to civic spaces, this can harm the health of everyone in a community.

The NYS Prevention Agenda provides a Community Score for Onondaga County by combining data from several sources. The Community Score index assesses volunteering, voter registration, youth disconnection, violent crime, access to primary health care, access to healthy food, and rates of incarceration. In 2023, the Community Score for Onondaga County was 54.2%; slightly lower than the score for NYS (57.0%).⁶⁷ While the Community Score has improved over time, Onondaga still falls short of the Prevention Agenda goal of 61.3%. Civic health is a shared responsibility. Individual actions can lead to community change, but collective action can have an even greater impact in advancing civic health. Examples of collective action include labor unions, voter registration initiatives, and voter turnout initiatives. Data show that in 2020 Onondaga County had a higher voter turnout than NYS, however the voter turnout in Syracuse was significantly lower (Figure 22).

Figure 22. Voter Turnout, Syracuse, Onondaga County, and NYS, 2020

	City of Syracuse	Onondaga County	New York State
Population aged 18 or older who voted in the 2020 U.S. Presidential election.	43.3%	67.3%	62.9%

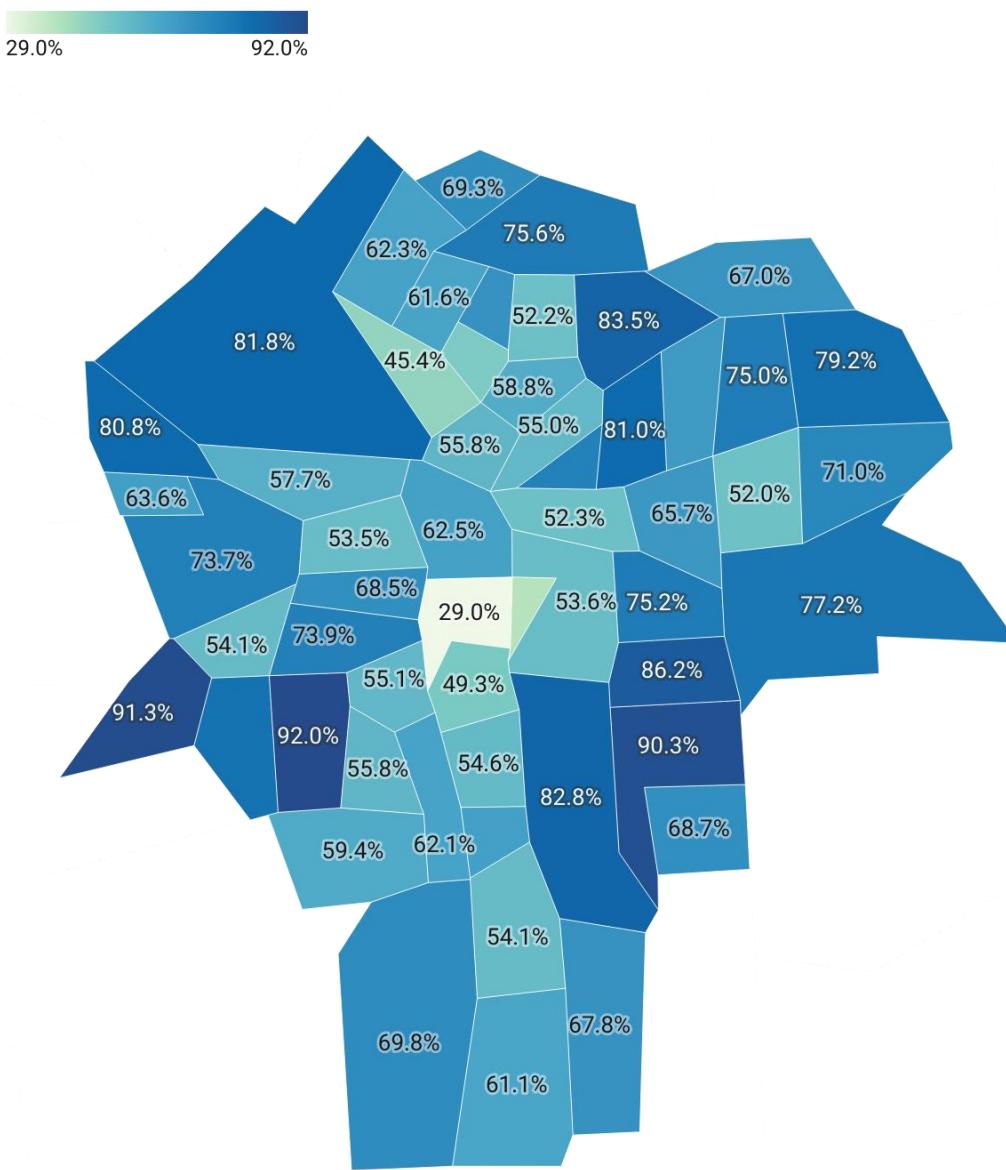
Source: County Health Rankings, retrieved 2/18/2025 from <https://www.countyhealthrankings.org/health-data/new-york/onondaga?year=2024>. City Health Dashboard, retrieved 2/18/2025 from <https://www.cityhealthdashboard.com/NY/Syracuse/metric-detail?metricId=47&dataPeriod=2020>. Percentage of citizen population aged 18 or older who voted in the 2020 U.S. Presidential election.

Digital Divide

Communities are increasingly relying on electronic methods for staying connected and sharing important information. Despite infrastructure improvements, not all populations have equal access to the required technology, including broadband internet. The map below displays the percent of households with connections to high-speed broadband internet (cable, fiber optic, DSL) by census tract in Syracuse. As shown in the map, areas closer to the center of the City have lower percentages of households with broadband access compared to census tracts among the edge of the City.

⁶⁷ New York State Prevention Agenda, retrieved 2/20/2025 from https://apps.health.ny.gov/public/tabvis/PHIG_Public/pa/

Figure 23. Households with high-speed broadband internet connection by census tract, Syracuse, 2022



Source: City Health Dashboard, 2022. Retrieved 2/20/2025, from <https://www.cityhealthdashboard.com/> Note: Displays percentage of households with connection to high speed broadband internet (cable, fiber optic, DSL). Census tracts use 2020 boundaries.

Broadband allows access to telehealth visits, which can eliminate barriers to receiving healthcare, like transportation or childcare. Differential access to broadband may further perpetuate health inequities for those who are unable to access broadband or do not have adequate technology at home.⁶⁸ In addition to improving access to healthcare, broadband internet can help individuals connect with others, learn about

⁶⁸Saeed SA, Masters RM. Disparities in Health Care and the Digital Divide. Curr Psychiatry Rep. 2021 Jul 23;23(9):61. doi: 10.1007/s11920-021-01274-4. PMID: 34297202; PMCID: PMC8300069. Retrieved 11/8/2022.

events happening in their area, obtain information about topics of interest, and access needed community-based services.

Community Resilience Estimates

Community resilience is defined as the ability of communities to prepare for, adapt, respond to, and recover from natural hazards/disasters (i.e., flooding, winter weather, extreme heat, wildfires) or public health emergencies (i.e., COVID-19 pandemic, opioid crisis).⁶⁹ The 2023 Community Resilience Estimates (CRE) developed by the U.S. Census Bureau uses information from the 2023 American Community Survey (ACS) obtained by individuals and households and the Census Bureau's Population Estimates to identify socio-economic vulnerabilities within populations. The CRE is used to help recognize populations that are more likely to be impacted by disaster events and that may have more difficulties overcoming such events. The components of social vulnerabilities within a population help to determine community resilience. There are a maximum of 10 possible social vulnerability components based on individual and household level indicators. The CRE provides an estimate for the percentage of residents with a specific number of social vulnerabilities. Zero components is considered "low social vulnerability," one or two components is considered "moderate social vulnerability," and three or more components is considered "high social vulnerability." Within Onondaga County, 40.4% of the population is considered to have "moderate social vulnerability" due to having 1 or 2 components of social vulnerability. Around one fifth of the County population is considered to have "high social vulnerability", meaning that more than half of the County population may not have the ability to handle the impacts of a disaster and may need additional resources to mitigate long-term impacts of a disaster. The table below displays the CRE for Onondaga County and NYS.

Figure 24. Community Resilience Estimates, Onondaga County, and NYS, 2023

	Onondaga County	New York State
0 components of social vulnerability	39.6%	29.6%
1-2 components of social vulnerability	40.4%	45.0%
3+ components of social vulnerability	20.1%	25.5%

Source: U.S. Census Bureau, *Community Resilience Estimates*, 2023. Retrieved 3/4/2025 from https://data.census.gov/table?q=CRE+Community+Resilience+Estimates&g=040XX00US36_050XX00US36067

Note: "Components of Social Vulnerability" refers to the categories of social vulnerability out of a possible 10 variables (e.g., poverty status, age 65+, unemployment, etc.), where 0 components is considered "low," 1-2 components is considered "moderate," and 3 or more components is considered is "high."

⁶⁹ U.S. Census Bureau, 2023 Community Resilience Estimates, 2025. Retrieved 3/4/2025 from [cre quick guide 2023.pdf](cre_quick_guide_2023.pdf).

Neighborhood & Built Environment: Community Assets and Resources

Land Use and Zoning:

- Development in both Onondaga County and the City of Syracuse is guided by robust Comprehensive Plans. Released in 2023, Plan ONondaga outlines a vision and goals for each municipality, focused on community engagement, quality of life, and economic development.⁷⁰ The City of Syracuse Planning and Sustainability Department recently completed Phase I of the Syracuse Comprehensive Plan 2050, which will focus on long term planning for land use, housing, mobility, and the built environment within city limits.⁷¹

Transportation:

- A micromobility fleet in the City of Syracuse provides alternate modes of transportation for City residents and visitors. Pedal bikes, electric bikes, and electric scooters are offered for temporary use by adults 18+. Survey data from 2024 showed that approximately 59% of local riders do not have access to a car⁷², demonstrating improved transportation access throughout the city.
- Numerous collaborations between governmental, healthcare, academic, and community-based organizations to promote sustainable environmental and policy changes that will positively impact the health of County residents. One such effort is work to encourage local municipalities to adopt Complete Streets policies which will improve access to safe routes for bicyclists and pedestrians.

Tobacco and Nicotine Policy:

- The Tobacco-Free CNY program engages youth and community members in Cayuga, Onondaga, and Oswego counties. These efforts include developing and supporting policies relating to smoke-free multi-unit housing, tobacco-free workplaces and outdoor spaces, and tobacco imagery in youth-rated movies. The Tobacco-Free CNY program is also working with local school districts and youth to ensure that e-cigarettes are included in policies that prohibit tobacco use on school grounds. As the policy landscape around tobacco control continues to evolve, especially around the use of e-cigarettes, and menthol flavoring, Onondaga County will continue to be an early supporter and adopter of policies that reduce the health impacts of tobacco use for residents, particularly populations at increased risk for smoking initiation and high smoking rates, including youth, individuals living in poverty, individuals with a disability, and individuals with poor mental health, and individuals identifying as LGBTQ+.

⁷⁰ Plan ONondaga. Retrieved 12/18/2025, from <https://plan.ongov.net/>.

⁷¹ City of Syracuse Comprehensive Plan. Retrieved 12/18/2025, from <https://www.syr.gov/Departments/Planning-and-Sustainability/Planning-Initiatives/Comprehensive-Plan>.

⁷² City of Syracuse, [Mayor Walsh Announces the Return of Veo Fleet](#). Retrieved 12/18/2025.

Neighborhood & Built Environment: Community Assets and Resources

Crime and Violence:

- Several violence and crime prevention initiatives operate in Syracuse, including the Mayor's Office to Reduce Gun Violence through [Community Violence Intervention Plan](#), the Safer Streets program, the Police/Athletics Activities League, and the Gun Involved Violence Elimination (GIVE) initiative. As a result of this investment, there has been a 29% decrease in shooting incidents involving injury in Syracuse when comparing the first nine months of 2024 to the same time in 2023, and 44% decrease when compared to the five-year average (2019-2024).⁷³

Civic Engagement:

- Onondaga County has a strong civic infrastructure including a vast public library system, 6,500 acres of parkland, and local news outlets. There are also opportunities throughout the calendar year to engage in civic participation such as public hearings, school board meetings, local elections, and volunteer opportunities. Volunteering can help to contribute to a better quality of life for all residents, provide individuals with opportunities to develop new skills, expand their network, address societal issues, and advocate for change. Some volunteer opportunities for County residents include [Onondaga County Parks](#), [Catholic Charities](#), [Food Bank of CNY](#), and [Salvation Army](#). The [City of Syracuse](#) also has a centralized site where residents can find various ways to engage in their neighborhood, community, and local government initiatives.

⁷³ City of Syracuse, [\\$23.5M in state funding for public safety investments in Syracuse – City of Syracuse](#). Retrieved 4/1/2025.

Healthcare Access and Quality

Access to healthcare services is essential for promoting and maintaining good health as well as preventing or managing disease. Several factors may impact access to care including health insurance status, having a primary care provider, cost of health care services, and the availability of providers. Prior experiences with the healthcare system can also impact whether individuals choose to seek care.

Pages 53-55 in the *Key Indicators of Health* section provides a comprehensive list of assets and resources, including information on healthcare systems and other health care services available within the county.

Health Insurance

Within Onondaga County, 98.0% of children have health insurance coverage.⁷⁴ Figure 25 displays health insurance rates for specific age groups across Syracuse, Onondaga County, and New York State. For the age groups shown, New York State reports lower insurance rates than both Syracuse and Onondaga County. Nearly one quarter of county residents (24.5%) and 41.5% city residents have Medicaid or other means tested public insurance coverage. This may affect access to care, as the number of providers who accept Medicaid is limited. As shown in Figure 26, it is evident that racial disparities in insurance coverage persist in Onondaga County and Syracuse.

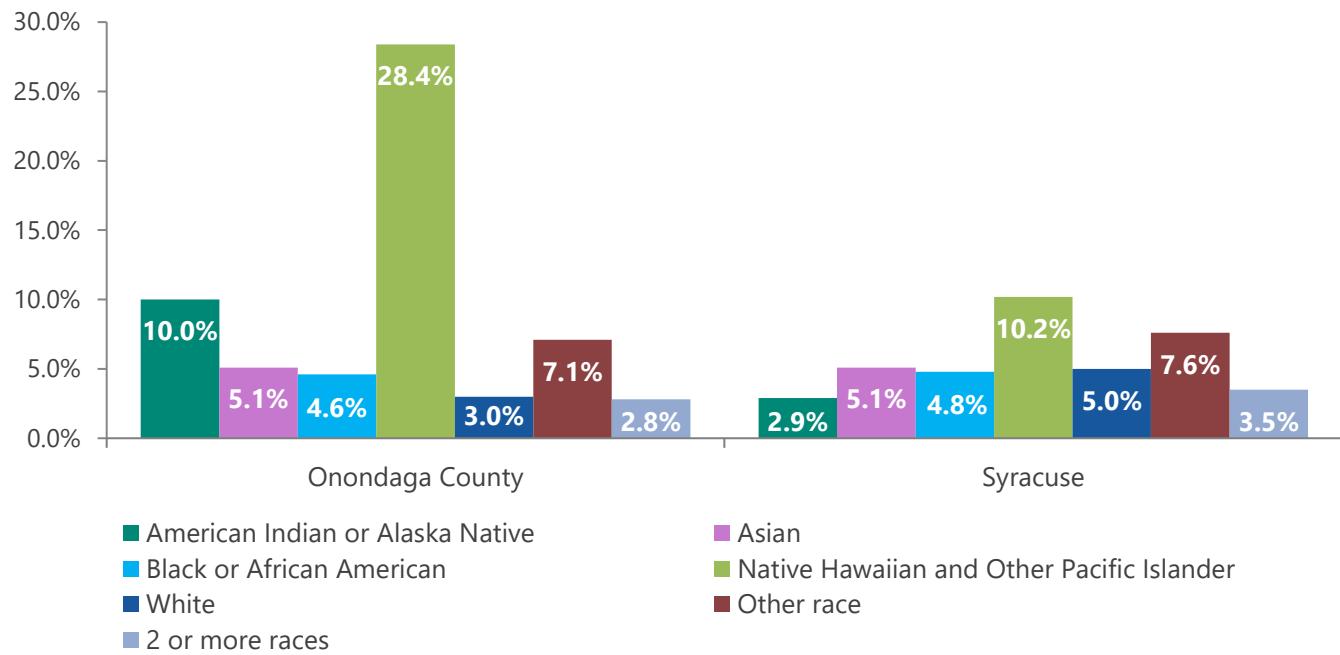
Figure 25. Health insurance status, Syracuse, Onondaga County, and NYS, 2019-2023

	City of Syracuse	Onondaga County	New York State
Children with health insurance (age 0-18)	97.8%	98.0%	97.5%
Adults with health insurance (age 19-64)	93.1%	95.2%	92.8%
Adults with health insurance (age 65+)	99.4%	99.7%	99.1%
Population with Medicaid/means tested public insurance coverage	41.5%	24.5%	27.4%

Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates, Tables S2701 and S2704. Note: Onondaga County data are inclusive of Syracuse.

⁷⁴ U.S. Census Bureau, 2019-2023 American Community Survey, 5-Year Estimates, Table S2701.

Figure 26. Percent of population without health insurance, by race, Onondaga County and Syracuse, 2019-2023



Source: U.S. Census Bureau, 2019-2023 American Community Survey 5-Year Estimates, Table S2701. Onondaga County is inclusive of Syracuse.

Health Care Provider

Routine and preventive care including annual check-ups and regular dental cleanings are important for early detection of health issues and the management of chronic conditions. In Onondaga County, 89.7% of adults report having a regular health care provider; this is higher than the rate for NYS excluding NYC (87.1%).⁷⁵ Within the last year, 80.3% of County adults and 81.1% of City adults visited a doctor for a routine checkup.⁷⁶

The number of providers to the population plays an important part when considering why some residents may not engage in routine and preventive care. When there are fewer providers per population, this may impact wait times when scheduling appointments as well as the ability to find a provider accepting new patients. Figure 27 shows the provider ratio to the number of residents served in Onondaga County and NYS for various types of providers. Onondaga County fares better than NYS when comparing the number of primary care physicians and other primary care providers (nurse practitioners, physician assistants, and clinical nurse specialists) per population. However, NYS fares better than Onondaga County when comparing the number of mental health providers and dentists per population

⁷⁵ NYS Expanded BRFSS, 2021. Retrieved 2/27/2025, from <https://www.health.ny.gov/statistics/brfss/expanded/>.

⁷⁶ CDC PLACES: Local Data for Better Health, 2023. Retrieved 12/10/2025, from: <https://www.cdc.gov/places>.

Figure 27. Provider Ratio, Onondaga County, and NYS, 2019-2023

	Onondaga County	New York State
Primary Care Physicians (2021)	1,080:1	1,240:1
Mental Health Providers (2024)	280:1	260:1
Dentists (2022)	1,310:1	1,200:1
Other Primary Care Providers (2024)	340:1	610:1

Source: County Health Rankings & Roadmaps. Retrieved 3/24/2025 from <https://www.countyhealthrankings.org/health-data/new-york/onondaga?year=2025>. Note: Other Primary Care Providers include nurse practitioners (NPs), physician assistants (PAs), and clinical nurse specialists who can provide routine and preventative care.

Experiences Seeking Health Care

The Onondaga County Community Health Survey (described in the Community Engagement section on pages 104-105) collected feedback from Onondaga County residents about experience seeking health care in the past year. The three most commonly cited experiences seeking medical care are provided in Figure 28.

Figure 28. Three common experiences seeking healthcare, Onondaga County, 2025

	Onondaga County
Provider did not understand me or my concerns	18.2%
Stigma, discrimination, or judgement by a provider	12.7%
Provider did not offer culturally appropriate care	6.6%

Source: Onondaga County Health Department, Onondaga County Community Health Survey, 2025.

Oral Health Care

Within Onondaga County, 64.3% of adults reported having a dentist visit within the past year.⁷⁷ Figure 29 displays oral health indicators among residents in Onondaga County, Central New York, and NYS excluding NYC. Of note, the percent of Medicaid enrollees with at least one dental visit in the last year and the percent of Medicaid enrollees aged 2-20 years with at least one dental visit in the last year is lower in Onondaga County when compared to CNY and NYS excluding NYC.

⁷⁷ CDC PLACES: Local Data for Better Health, 2023. Retrieved 12/10/2025, from: <https://www.cdc.gov/places>.

Figure 29. Oral Health Indicators, Onondaga County, CNY, and NYS excluding NYC

	Onondaga County	Central New York	NYS excluding NYC
Outpatient visit rate per 10,000 due to caries (tooth decay or cavities) - Aged 3 to 5 (2019-2022)	184.5	221.4	130.2
% of Medicaid enrollees with at least one dental visit within the last year (2021-2023)	24.6	25.5	30.5
% of Medicaid enrollees with at least one preventive dental visit within the last year (2021-2023)	20.2	21.4	26.3
% of Medicaid enrollees (aged 2-20) who had at least one dental visit within the last year (2021-2023)	34.0	36.2	48.2
% of Medicaid enrollees (aged 2-20) with at least one preventive dental visit within the last year (2021-2023)	30.4	32.8	44.7
% of children (aged 2-20) with at least one dental visit in government sponsored insurance programs (Medicaid and Child Health Plus programs) (2021-2023)	40.8	42.1	55.0

Source: New York State Community Health Indicator Reports. Retrieved 3/7/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>. Note: Preventive dental visit may include a routine dental cleaning, examination, and potentially X-rays.

Dental Sealants

In addition to community water fluoridation, dental sealants help to protect against cavities for children and adults. Dental sealants are thin protective coatings that are applied to the chewing surfaces of the back teeth.⁷⁸ They can be applied to both baby teeth and adult teeth starting from the age of 2 and continuing throughout adulthood. The back teeth are where 9 in 10 cavities occur, and dental sealants can prevent 80% of cavities.⁷⁹ In the United States, children aged 6 to 11 years without dental sealants have almost three times as many cavities as children with sealants. Less than half (42%) of children nationwide aged 6 to 11 years have dental sealants on their permanent teeth. Additionally, 48% of adolescents aged 12 to 19 years have dental sealants on their permanent teeth. According to the 2022 National Survey of Children's Health, among children under the age of 18 years in New York, only 15.5% had a dental sealant in the past year and 20.3% did not receive preventive dental care in the past year.⁸⁰

⁷⁸ CDC, About Dental Sealants. Retrieved 3/10/2025 from <https://www.cdc.gov/oral-health/prevention/about-dental-sealants.html>.

⁷⁹ CDC, Dental Sealant Facts. Retrieved 3/10/2025 from <https://www.cdc.gov/oral-health/data-research/facts-stats/fast-facts-dental-sealants.html>.

⁸⁰ Data Resource Center for Child & Adolescent Health, 2023 National Survey of Children's Health. Retrieved 12/10/2025 from <https://nsch.org/2023-received-dental-sealant-during-the-past-12-months-nationwide>.

Education Access and Quality

Educational attainment can shape an individual's health, wellbeing, and length of life.⁸¹ On a community scale, access to high quality educational opportunities is critical to maintaining a healthy population. This section explores several aspects of education access and quality within Onondaga County, including:

- Academic Institutions
- Training and Vocational Programs
- High School Graduation Rates

Academic Institutions

Onondaga County is home to eighteen public school districts, which enroll nearly 63,000 students each year in total. The Syracuse City School District (SCSD) enrolls approximately 17,000 students, which accounts for more than a quarter of the County's public-school enrollment.⁸² Additionally, there are more than thirty private, parochial, or charter K12 schools. Several post-secondary academic institutions operate within Onondaga County, including:

- Syracuse University
- Le Moyne College
- SUNY College of Environmental Science and Forestry
- SUNY Upstate Medical University
- Onondaga Community College
- Bryant & Stratton College

Local hospitals also offer professional programs, including, Pomeroy College of Nursing at Crouse Hospital and St. Joseph's College of Nursing. SUNY Upstate Medical University offers the region's only academic medical center.

Among local higher education institutions, more than 36,000 undergraduates are currently enrolled towards the completion of a degree or certificate, as well as approximately 9,500 graduate students.⁸³

Community Assets

Local education institutions offer numerous professional degree and licensure programs. Several have a healthcare, allied health, or public health focus.

Many of these programs require limited or no pre-requisites and provide routes to financially stable careers in sectors that are in need in our community, including positions as:

- Respiratory Therapists,
- Ultrasound Technicians
- X-ray Technicians

Additionally, several local institutions offer programs aimed to recruit and retain students from populations traditionally underrepresented in higher education. Including:

- [Say Yes to Education](#)
- [InclusiveU at Syracuse University](#)
- [SCSD and Upstate's Medical Education for Diverse Students Mentorship Program](#)

⁸¹ Healthy People 2030, Education Access and Quality, <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/education-access-and-quality>. Retrieved 11/29/2025.

⁸² New York State Department of Education, Syracuse City School District, 2023-2024. Retrieved 2/13/2025, <https://data.nysesd.gov/enrollment.php?year=2024&instid=800000040902>.

⁸³ NYS Education Department, Onondaga County Higher Education Enrollment (2023-24). Retrieved 2/27/2025 from <https://data.nysesd.gov/highered-enrollment.php?year=2024&county=42#4-YEAR/GRAD>.

Additional Community Assets and Resources

STEAM School

Onondaga County, the City of Syracuse, and SCSD, are collaborating on the CNY region's first Science, Technology, Engineering, Arts & Mathematical (STEAM) high school. The 2025-2026 school year is the first academic year for the STEAM high school, which is open to any rising 9th grade students who live in Onondaga, Cortland, and Madison counties. Attendance at the STEAM school is free. The curriculum will include work-based learning such as internships and job shadowing. Additionally, the program offers students the opportunity to earn college credits.

Training and Vocational Programs

Several local agencies provide flexible high school equivalency (HSE) programs or adults, including OCM BOCES and SCSD's Adult High School Equivalency Program. The SCSD also offers a Youth HSE Program for students 17 to 20 years seeking an alternative pathway to completing a high school diploma. The Syracuse Educational Opportunity Center offers a tuition-free HSE program for financially eligible participants. Additionally, some Onondaga County Public Library locations offer GED study groups or classes.

Literacy Programs

Within Onondaga County, there are many free programs to improve literacy skills for both children and adults, these include:

- United Way's Book Buddies program which connects volunteers with SCSD students in grades K-3.
- The SCSD offers Literacy Zones to help parents and community members experiencing challenges with literacy and poverty. Literacy Zones offer free classes to improve reading, writing, and English skills, job training and career advice, and linkages to community organizations.
- Literacy Coalition of Onondaga County offers programs for both children and adults.
- Literacy CNY provides training in English comprehension, reading and writing, U.S. citizenship test questions, math comprehension, and basic computer skills.
- OCM BOCES offers Adult Literacy programs for people over the age of 21 years.
- The Early Childhood Alliance's Talking is Teaching: Talk, Read, Sing initiative focuses on increasing early literacy opportunities for all children in the County through a robust messaging and outreach campaign.

English Language Arts Proficiency

English Language Arts (ELA) skills are assessed for students in third and fourth grade. ELA tests are important as educators use the results to help improve teaching in classrooms and determine the needs of each student. When students score a level 3 or higher on the ELA test, this demonstrates that the students are at or above proficiency in understanding the content in the subject and grade level. Onondaga County students in both third and fourth grade scored lower in ELA tests than NYS students (Figure 30).

Figure 30. Student performance in English Language Arts, Onondaga County, and NYS, 2022-2023

	Onondaga County	NYS
Third grade students who met or exceeded proficiency levels	33.1%	38.8%
Fourth grade students who met or exceeded proficiency levels	34.6%	41.4%

Source: *Kids' Wellbeing Indicators Clearinghouse, Council on Children and Families*: www.nyskwic.org. Retrieved 3/12/2025.

Chronic Absenteeism

Missing school can negatively impact academic development. Missing more than 10% of school days within an academic year for any reason including excused absences, unexcused absences, and suspensions is considered chronic absence. Chronic absenteeism puts students at greater risk of falling behind and dropping out of school. Within Onondaga County, 27.1% of elementary and middle school students experience chronic absenteeism, compared to 26.4% of NYS students.⁸⁴

High School Graduation Rates

Onondaga County's 4-year high school graduation rate is 85.2%, which is slightly lower than NYS as a whole (86.4%).⁸⁵ Within the County, graduation rates vary based on several factors, including: socioeconomic status, demographic characteristics, English language proficiency, and school district. County-wide, economically disadvantaged students graduate at lower rates (75%) than their non-disadvantaged counterparts (94%). Compared to the County as a whole, students living with a disability have a lower graduation rate (67% vs. 85%). Disparities by race and ethnicity as well as variations by school district are shown in the figures below.

⁸⁴ Kids' Wellbeing Indicators Clearinghouse, Council on Children and Families: www.nyskwic.org. Retrieved 3/12/2025.

⁸⁵ New York State Department of Education: <https://data.nysesd.gov/graduate.php?year=2021&county=42>. Retrieved 2/13/2025.

Figure 31. Four-year high school graduation rate by race and ethnicity, Onondaga County, 2023

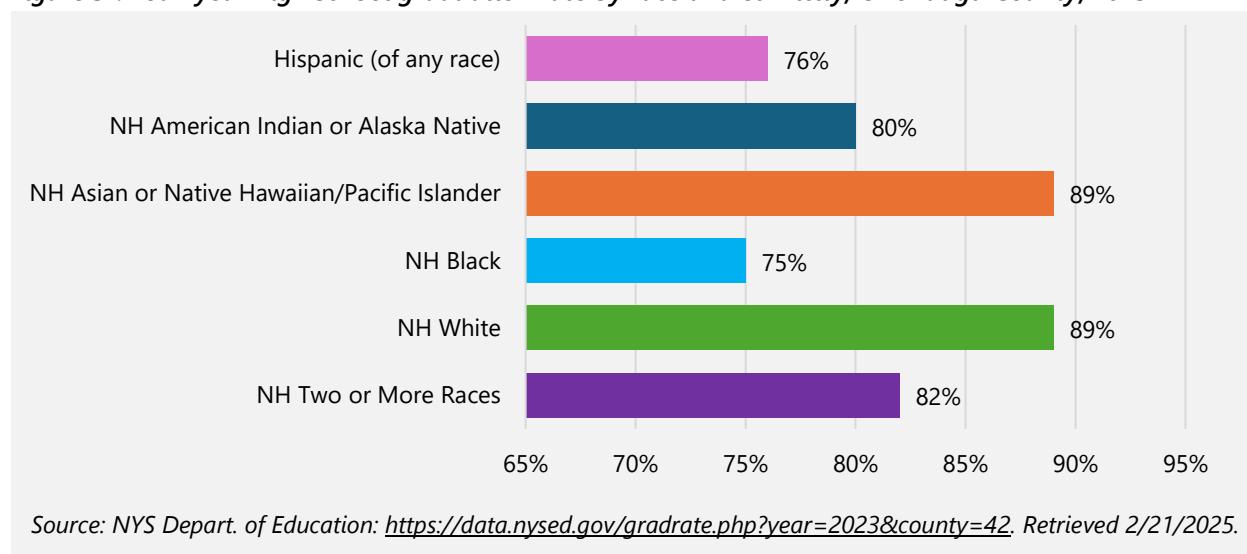
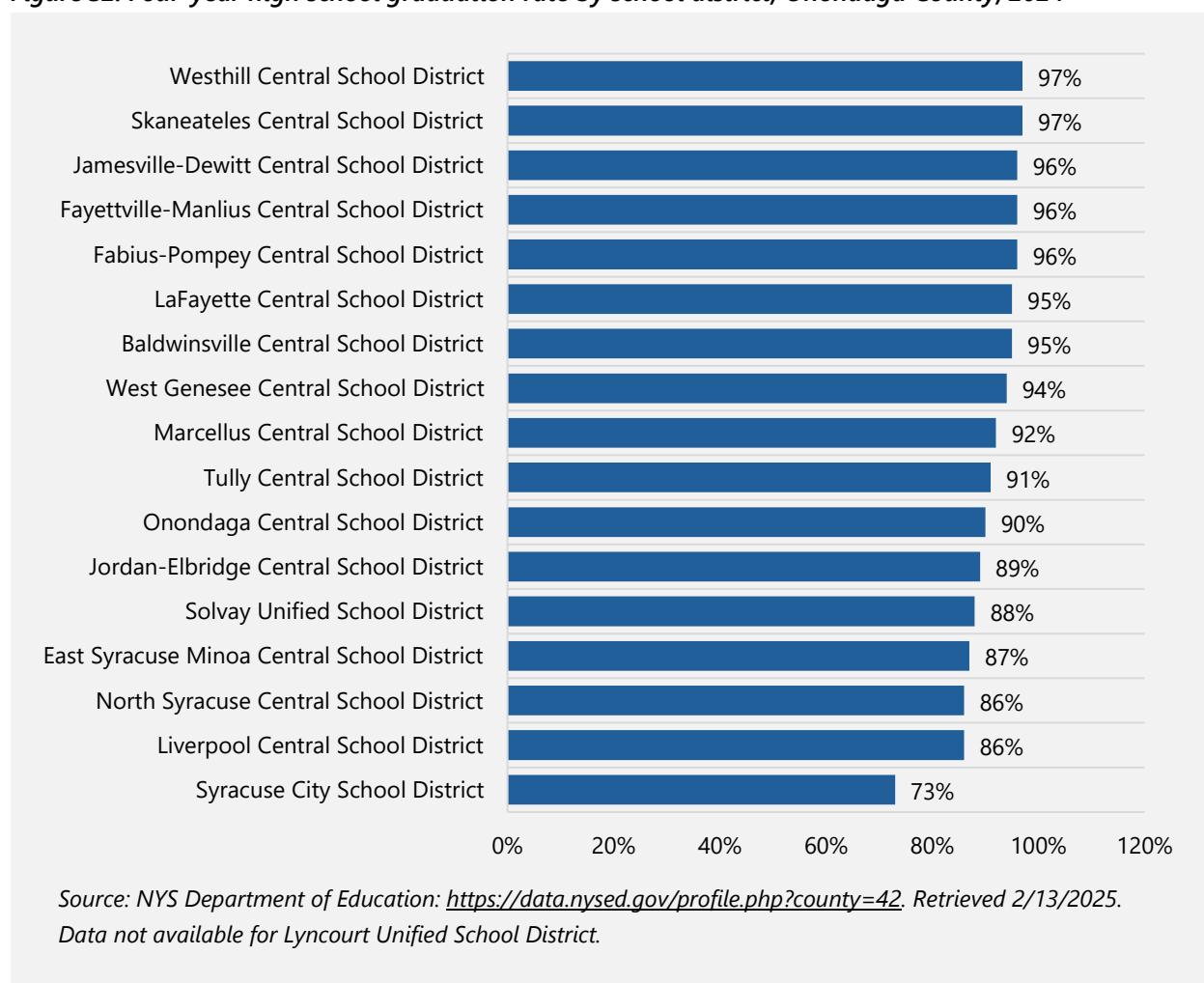


Figure 32. Four-year high school graduation rate by school district, Onondaga County, 2024



Educational Attainment

Within Onondaga County, 91.7% of adults (ages 25 and older) are high school graduates and 38.1% have completed a bachelor's degree or higher. As shown in the figure below, educational attainment in Syracuse is lower than in the County.

Figure 33. Educational attainment among adults aged 25 years and older, Syracuse, Onondaga County, and NYS, 2019-2023

	City of Syracuse	Onondaga County	New York State
High school graduate or higher	85.2%	91.7%	87.9%
Bachelor's degree or higher	30.5%	38.1%	39.6%

Source: U.S. Census Bureau, 2019-2023 American Community Survey, 5-Year Estimates, Table S1501. Onondaga County is inclusive of Syracuse.

Health Status of County Residents

This section explores the current health status of Onondaga County residents. In order to fully represent the health status of the County's diverse populations, data are presented by geography, race and ethnicity, income, and disability status. Additionally, where applicable, comparisons are made to statewide data and data for the CNY region.

Key Indicators of Health

Several measures are examined below to provide a comprehensive summary of health status and disease occurrence as experienced by residents of our County.

- Health Disparities
- Self-reported Health Status
- Preventable Hospitalizations
- Premature Mortality
- Leading Causes of Death

Health Disparities

The National Institutes of Health (NIH) defines health disparities as "*largely preventable health differences that adversely affect populations who experience greater challenges to optimal health and are closely linked with intergenerational social, economic, and/or environmental factors—primarily observed among racial and/or ethnic minority populations and/or low socioeconomic status groups.*"⁸⁶

The data displayed in this section and throughout the CHA bring attention to disparities in health outcomes that exist within Onondaga County. Many of the assets and resources explored in the CHA reflect work being done in our community to address disparities. However, this work is ongoing, and continuing to document disparities is a critical step toward addressing the root causes.

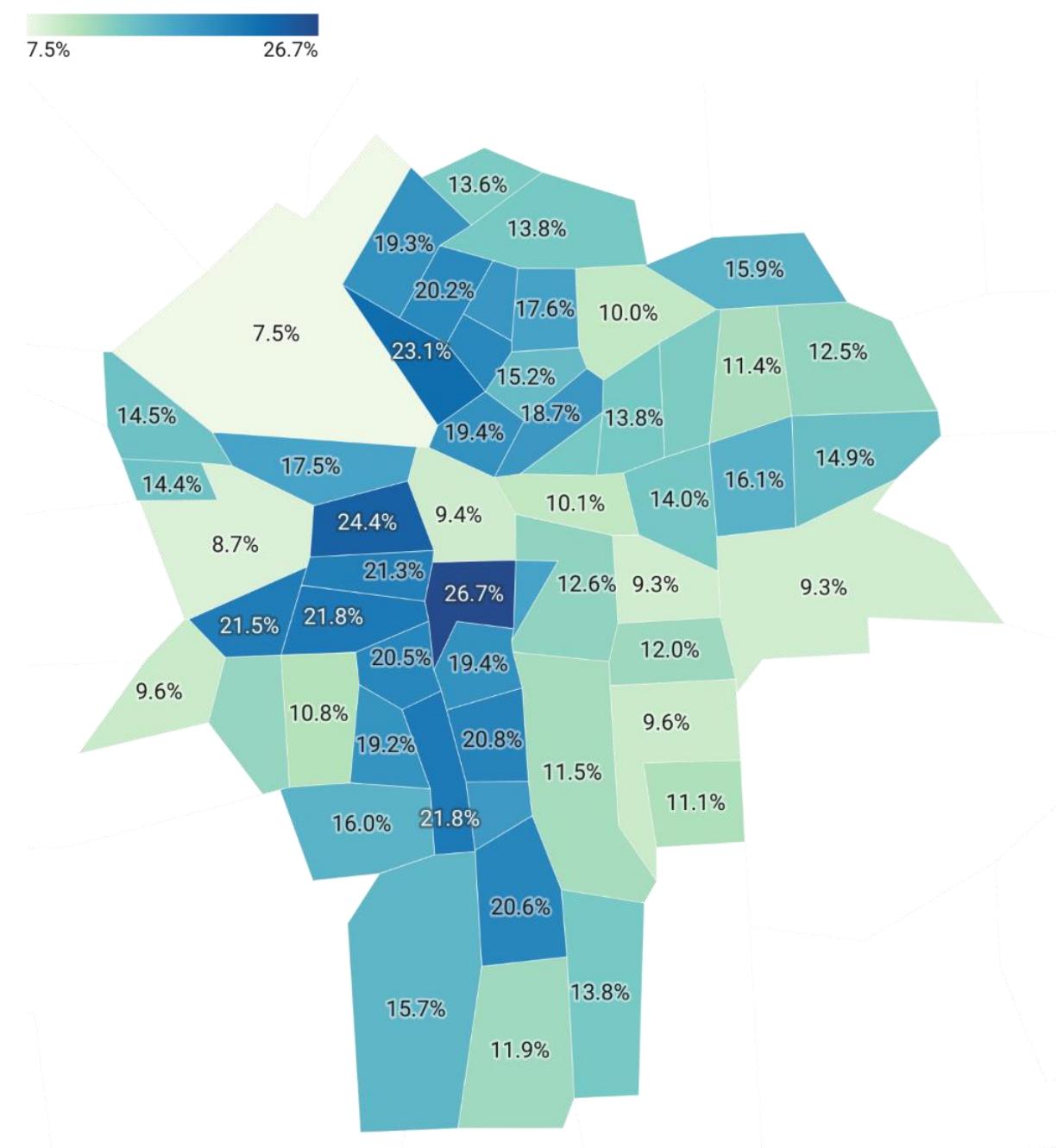
Self- Reported Health Status

Both physical and mental health can have a significant impact on quality of life, while also impacting our ability to carry out daily activities and contribute to the community. In Onondaga County, 12.4% of adults report experiencing poor physical health and 13.9% report poor mental health.⁸⁷ In both instances, "poor health" was defined as 14 or more days of poor health in the last month. Variations in poor physical and mental health for Syracuse census tracts are shown in the maps below.

⁸⁶ NIH: National Institute on Minority Health and Health Disparities: Retrieved 11/25/2025, from <https://www.nimhd.nih.gov/about/what-are-health-disparities>.

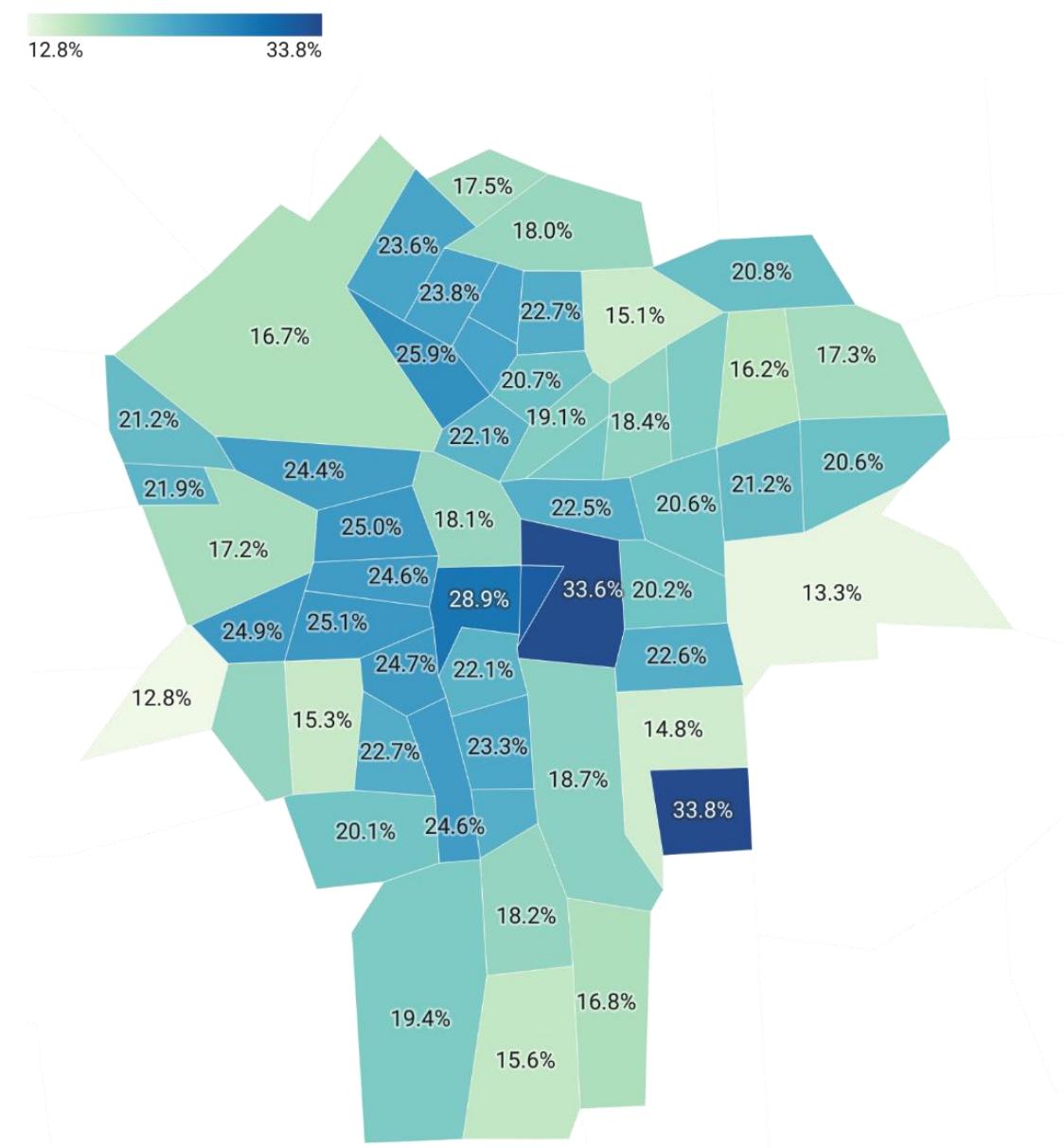
⁸⁷ CDC PLACES: Local Data for Better Health, 2022. Retrieved 3/3/2025, from: <https://www.cdc.gov/places>.

Figure 34. Percent of adults reporting poor physical health, by census tract, Syracuse, 2022



Source: CDC PLACES: Local Data for Better Health, 2022. Retrieved 11/26/2025 from <https://www.cdc.gov/places>. Note: "poor physical health" was defined as 14 or more days of poor physical health in the last month.

Figure 35. Percent of adults reporting poor mental health, by census tract, Syracuse, 2022



Source: CDC PLACES: Local Data for Better Health, 2022. Retrieved 11/26/2025 from <https://www.cdc.gov/places>.

Note: "poor mental health" was defined as 14 or more days of poor mental health in the last month.

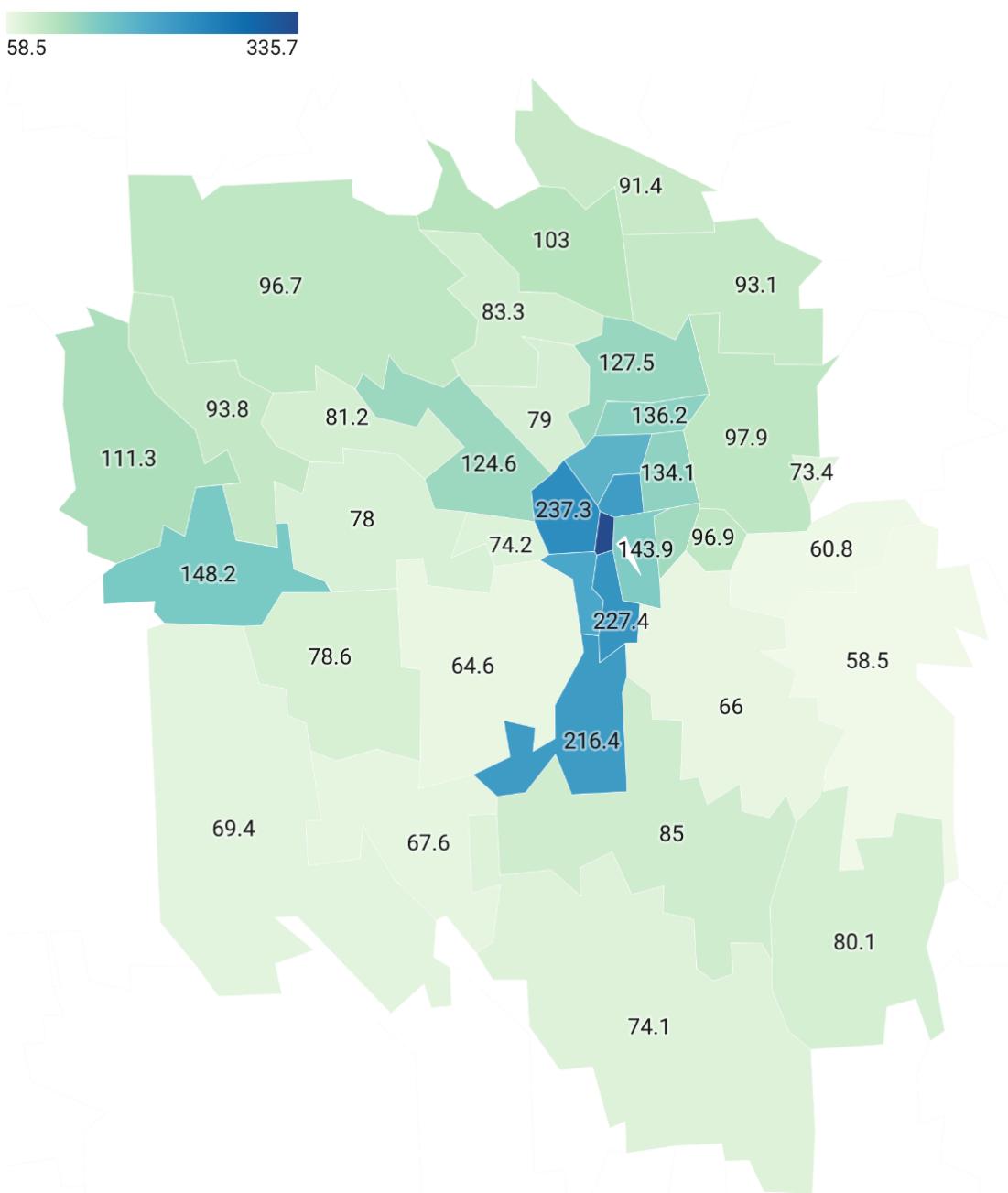
Preventable Hospitalizations

The age-adjusted potentially preventable hospitalization rate in Onondaga County (101.6 per 10,000) is higher than the rate in NYS excluding NYC (90.8 per 10,000).⁸⁸ Onondaga County's rate of potentially preventable hospitalizations has continuously decreased since 2020 and has met the Prevention Agenda

⁸⁸ SPARCS, 2022. Retrieved 2/21/2025, from [NYS Prevention Agenda Dashboard](#).

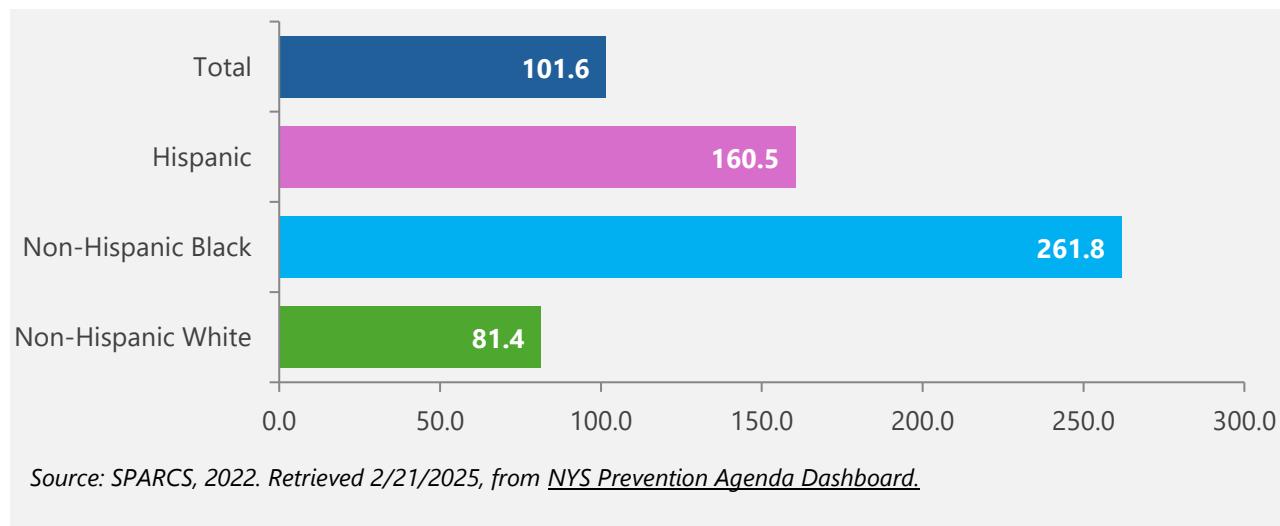
goal (115.0 per 10,000). The figures below demonstrate variations in preventable hospitalization rates based on zip code of residence and race and ethnicity, with urban zip codes and NH Black residents experiencing the highest rates.

Figure 36. Age-adjusted potentially preventable hospitalization rate per 10,000 adults, Onondaga County by Zip Code, 2019-2022



Source: SPARCS, 2016-2019. Retrieved 2/21/2025, from NYS Prevention Agenda Dashboard.

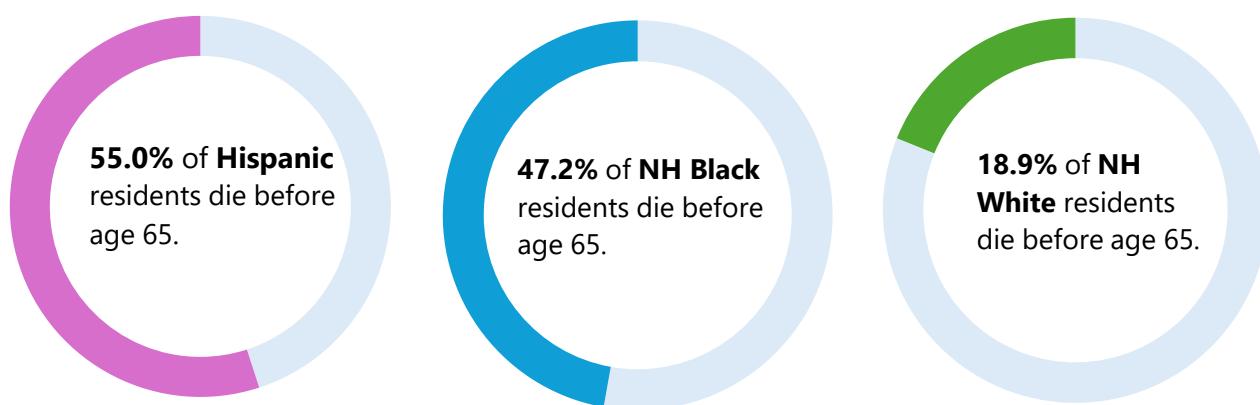
Figure 37. Age-adjusted potentially preventable hospitalization rate per 10,000 adults, by race and ethnicity, Onondaga County, 2022



Premature Death

Premature death leads to lost time with family and friends, and as a member of Onondaga County's community. For the data presented below, premature death is defined as any death before an individual reaches the age of 65 years. In Onondaga County, 23.0% of deaths occur before age 65, which is comparable to the rate for the CNY region (23.5%).⁸⁹ The premature death rate in the County is highest among Hispanic residents (55.0%), followed by NH Black residents (47.2%), with the lowest rate occurring among NH White residents (18.9%). Figure 38 compares premature death rates by race and ethnicity for Onondaga County residents.

Figure 38. Deaths occurring before age 65, by race and ethnicity, Onondaga County, 2022

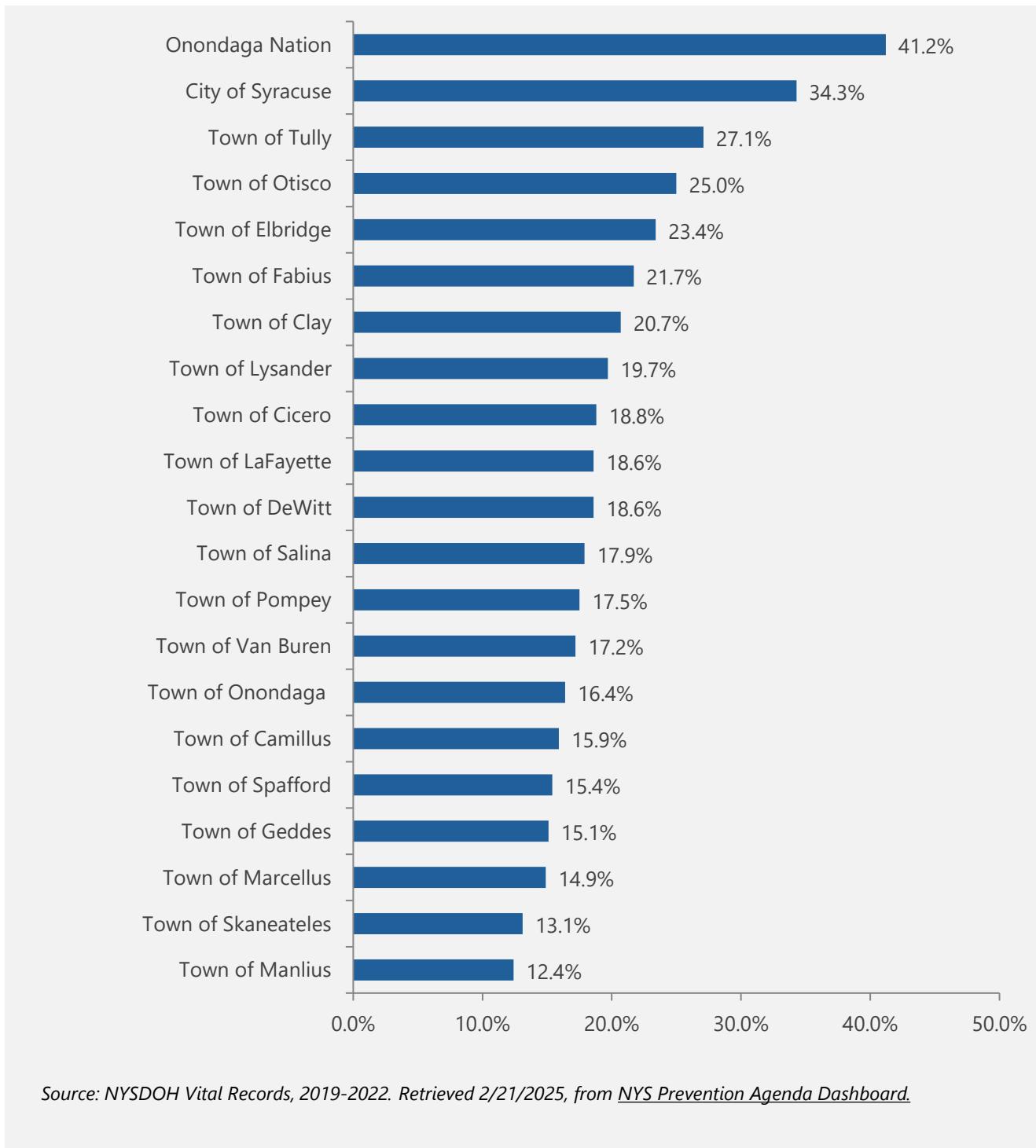


Source: NYSDOH Vital Records, 2022. Retrieved 2/21/2025, from [NYS Prevention Agenda Dashboard](#).

⁸⁹ NYSDOH Vital Records, 2022. Retrieved 2/21/2025, from [NYS Prevention Agenda Dashboard](#).

Additionally, rates vary significantly by municipality. Residents of the Onondaga Nation and Syracuse have the highest premature death rates while Manlius and Skaneateles have the lowest.

Figure 39. Percentage of premature death rates, by municipality, Onondaga County, 2019-2022



Leading Causes of Death

The five leading causes of death in Onondaga County in 2022 were as follows: heart disease, cancer, COVID-19, diabetes, and chronic lower respiratory diseases. The leading causes of death vary by sex as displayed in Figure 40. Among males in Onondaga County, COVID-19 and diabetes are leading causes of death however, these causes are not among the leading causes for female residents. Similarly, cerebrovascular disease and chronic lower respiratory diseases are leading causes for women, but not for men in our County.

Figure 40. Leading causes of death per 100,000 males and females, Onondaga County, 2022

Males		Females	
Heart Disease	190.1 per 100,000	Cancer	126.4 per 100,000
Cancer	157.5 per 100,000	Heart Disease	113.8 per 100,000
Unintentional Injury	92.5 per 100,000	Unintentional Injury	40.6 per 100,000
COVID-19	41.1 per 100,000	Cerebrovascular Disease	30.8 per 100,000
Diabetes	40.2 per 100,000	Chronic Lower Respiratory Diseases	30.1 per 100,000

Source: NYSDOH, *Leading Causes of Death, 2022*. Retrieved 3/10/2025, from:
https://apps.health.ny.gov/public/tabvis/PHIG_Public/lcd/reports/#county.

Key Indicators of Health: Community Assets and Resources

Below is a list of comprehensive assets and resources that can be leveraged to improve overall health status and reduce preventable hospitalizations and premature deaths.

The Onondaga County Health Department (OCHD)

The health department provides a wide range of public health services to Onondaga County. The Department is currently accredited by the Public Health Accreditation Board and continues to ensure the highest level of public health services. The 2025 adopted County budget approved 321 employees and a budget of approximately \$100 million, including about \$38.2 million in grant funding. Information about health department programs and services can be obtained on the Health Department website: <https://onondaga.gov/health/>

Key Indicators of Health: Community Assets and Resources

Below is a list of comprehensive assets and resources that can be leveraged to improve overall health status and reduce preventable hospitalizations and premature deaths.

Health Care Systems: There are four health systems located within Onondaga County

- Crouse Health has 506 acute-care beds and is recognized for their comprehensive maternity, surgical, cardiac, oncology and stroke care services. Crouse Health delivers nearly 4,000 babies each year and has 57 neonatal intensive care bassinets.
- St. Joseph's Health Hospital has 451 beds, including 48 beds for intensive care. St. Joseph's is known for a variety of services and is nationally recognized as a leader in cardiovascular and orthopedic surgical care.
- Syracuse VA Medical Center has 106 beds for general medical and surgical services with an additional 30 beds in the Regional Spinal Cord Injury and Disorder Center and 48 beds in the Community Care Center.
- Upstate University Hospital Downtown Campus has 420 beds and the region's only Level-I Trauma and Burn Center. Upstate Community Hospital Campus has 306 beds and houses the Physical Medicine and Rehabilitation Center, Upstate Family Birth Center, Wellspring Breast Center, Sleep Center, Center for Orthopedics, and Emergency Services for seniors, children and adults. Upstate is also home to the Upstate Nappi Wellness Institute, Upstate Poison Center, Joslin Diabetes Center, Upstate Cancer Center, Upstate Neurological Institute, Upstate Heart Institute, and Golisano Children's Hospital. Golisano Children's Hospital serves individuals from birth to 19 years of age and operates 44 medical/surgical, 15 intensive care, and 12 hematology or oncology beds.

Other Health Care Services:

- Primary care providers are located throughout the county and participate with several insurance providers. Additionally, many providers (including pediatricians) now offer after-hour care for established patients.
- Urgent care facilities are located county-wide, including some facilities specific to children.
- Affordable health care and family planning services are made available by Planned Parenthood located in Syracuse.
- The OCHD offers testing and treatment for STDs and tuberculosis, and testing for HIV in downtown Syracuse.
- Upstate University Hospital's Inclusive Health Services offers comprehensive primary care to people living with HIV, people at high risk for HIV, and the LGBTQ+ community.

Key Indicators of Health: Community Assets and Resources

Below is a list of comprehensive assets and resources that can be leveraged to improve overall health status and reduce preventable hospitalizations and premature deaths.

- Syracuse Community Health (SCH), a Federally Qualified Health Center, provides comprehensive care for children and adults in the greater Syracuse area. SCH operates 11 clinical locations including eight school-based health centers in the Syracuse City School District and three community-based clinics that provide health care services to uninsured or under-insured individuals.
- There are several mental health providers and chemical dependency treatment resources located throughout Onondaga County (see page 74).
- Amaus Dental Services, located in downtown Syracuse, offers free dental services to CNY residents who are unemployed, homeless, or do not have dental insurance.
- Many Article 28 and 36 healthcare facilities provide surgical, orthopedic, and dialysis services.

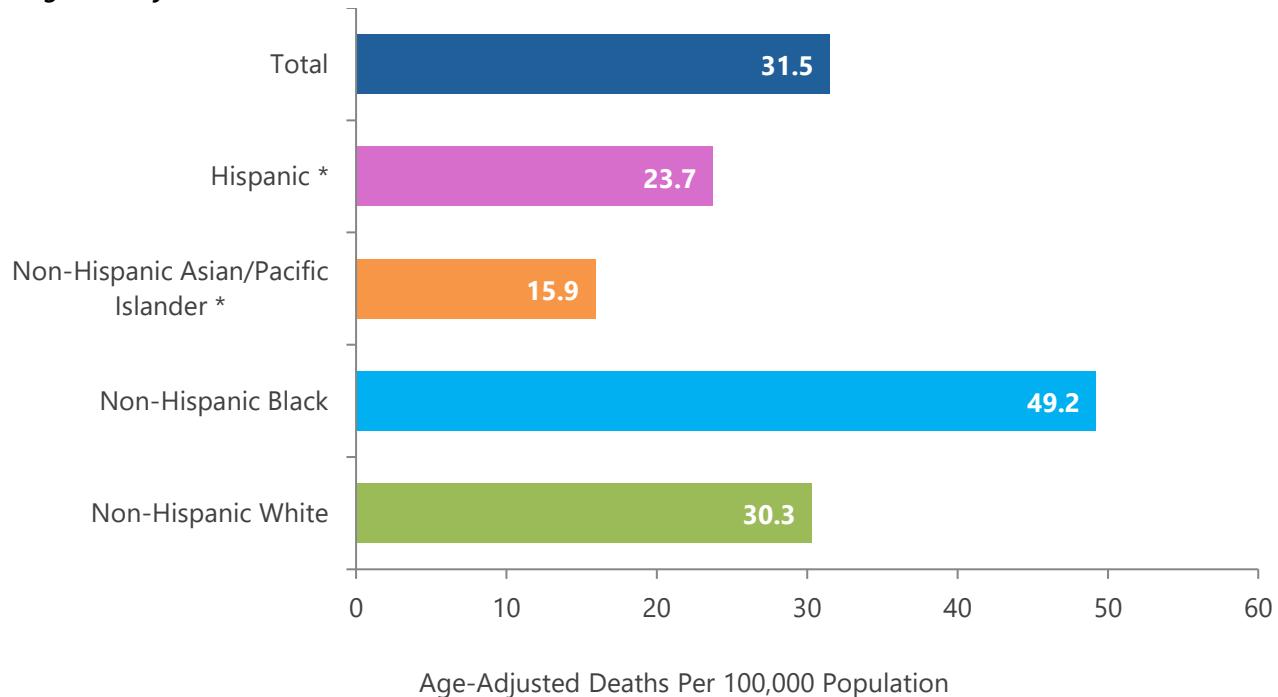
Chronic Diseases

Chronic diseases are defined broadly as “conditions that last 1 year or more and require ongoing medical attention or limit activities of daily living or both.”⁹⁰ Several measures of chronic disease are examined below to provide a comprehensive summary of chronic disease indicators in Onondaga County.

Cerebrovascular Disease (Stroke)

The age-adjusted hospitalization rate for stroke in Onondaga County (20.0 per 10,000) and is similar to NYS excluding NYC (19.6 per 10,000) however, the County’s mortality rate for stroke (31.5 per 100,000) is higher than NYS excluding NYC (27.6 per 100,000).⁹¹ Figure 41 presents disparities in stroke mortality by race and ethnicity. Non-Hispanic Black residents have the highest mortality rate due to stroke in Onondaga County.

Figure 41. Age-adjusted mortality rate due to stroke, per 100,000 population, by race and ethnicity, Onondaga County, 2020-2022



Source: NYSDOH County Health Indicators by Race/Ethnicity, 2020-2022. Retrieved 2/21/2025 from, <https://www.health.ny.gov/statistics/community/minority/county/onondaga.htm>. *Rate is unstable.

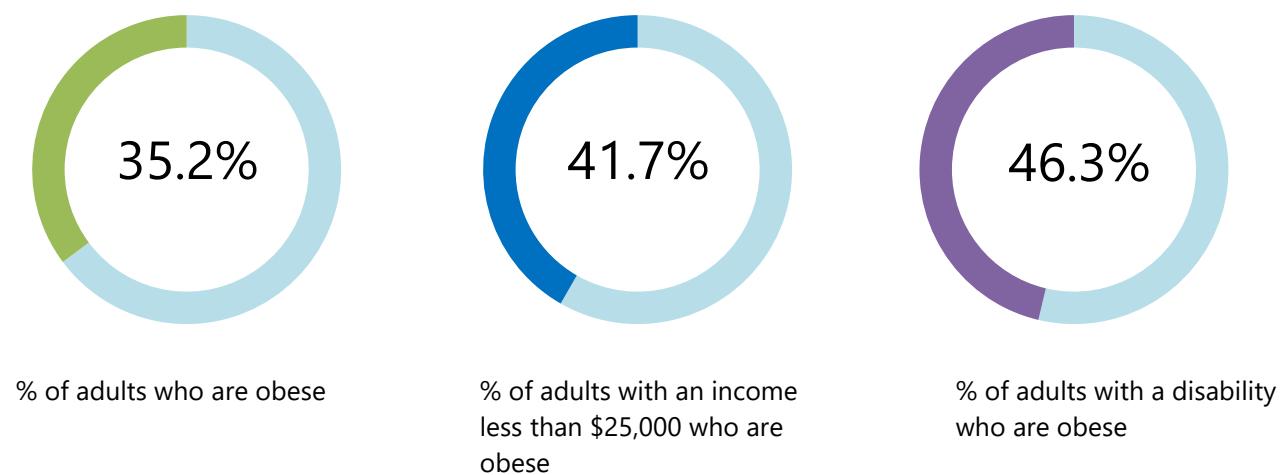
⁹⁰ CDC, Chronic diseases in America, 2024. Retrieved 12/22/2025, from <https://www.cdc.gov/chronic-disease/about/index.html>.

⁹¹ NYS Community Health Indicator Reports. Retrieved 3/3/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

Overweight and Obesity

The obesity rate among adults in Onondaga County is 35.2%, which is higher than the rate for NYS (29.2%) but lower than the rate in CNY (36.7%).⁹² In Onondaga County 72.9% of adults are either overweight or obese, putting them at increased risk for chronic health conditions. Within Onondaga County's population, obesity rates vary significantly. Compared to the County overall, higher obesity rates are found among individuals who have an annual income less than \$25,000 per year and among individuals with a disability. These differences are shown in Figure 42. Geographically, there are also variations which is evident in the map below depicting obesity prevalence by census tract in Syracuse in Figure 43.

Figure 42. Disparities in adult obesity, Onondaga County, 2021

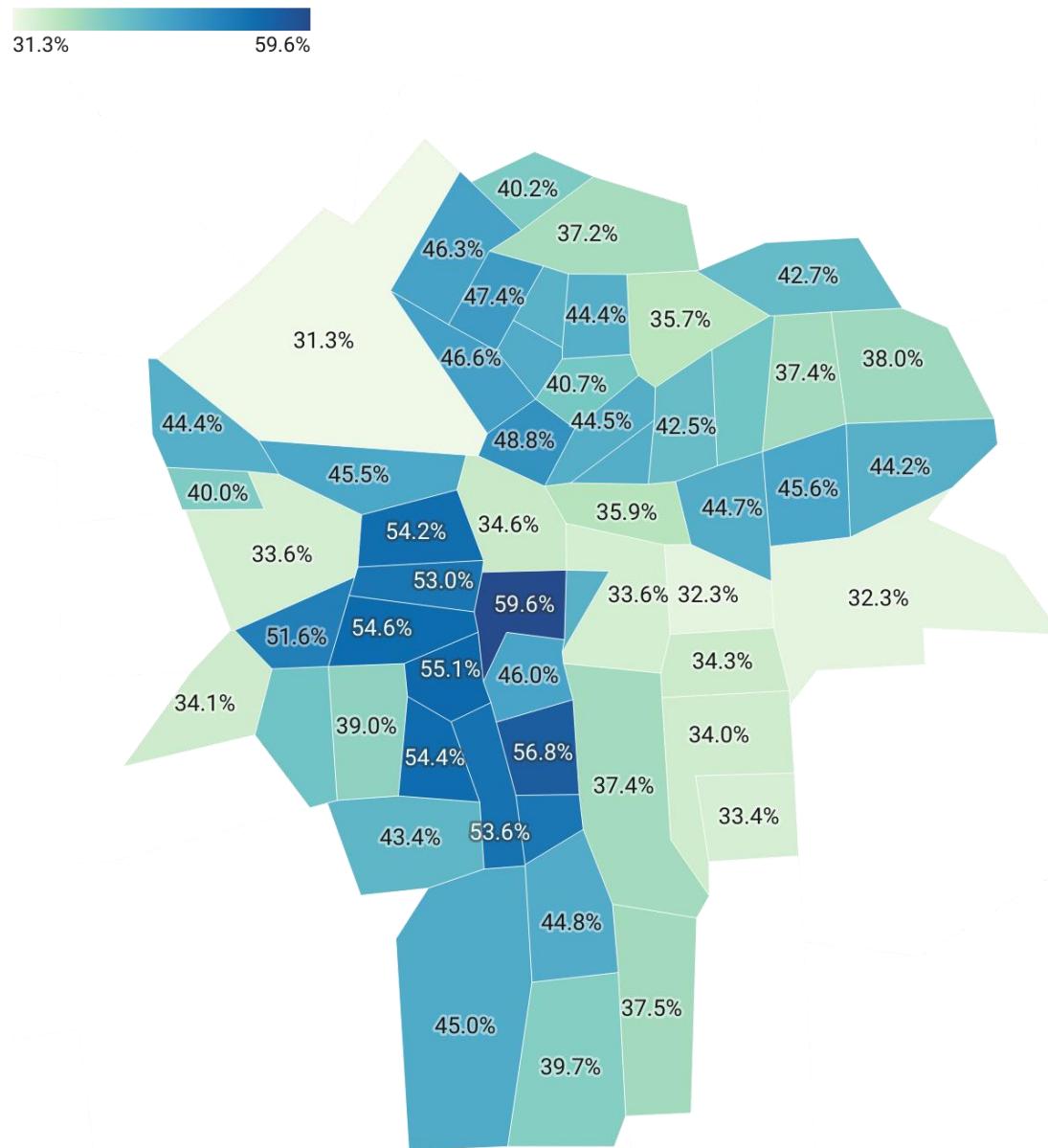


Source: NYS Expanded BRFSS, 2021. Retrieved 12/16/2025, from <https://www.health.ny.gov/statistics/brfss/expanded>.

Note: Percentages are age-adjusted³

⁹² NYS Community Health Indicator Reports. Retrieved 2/21/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

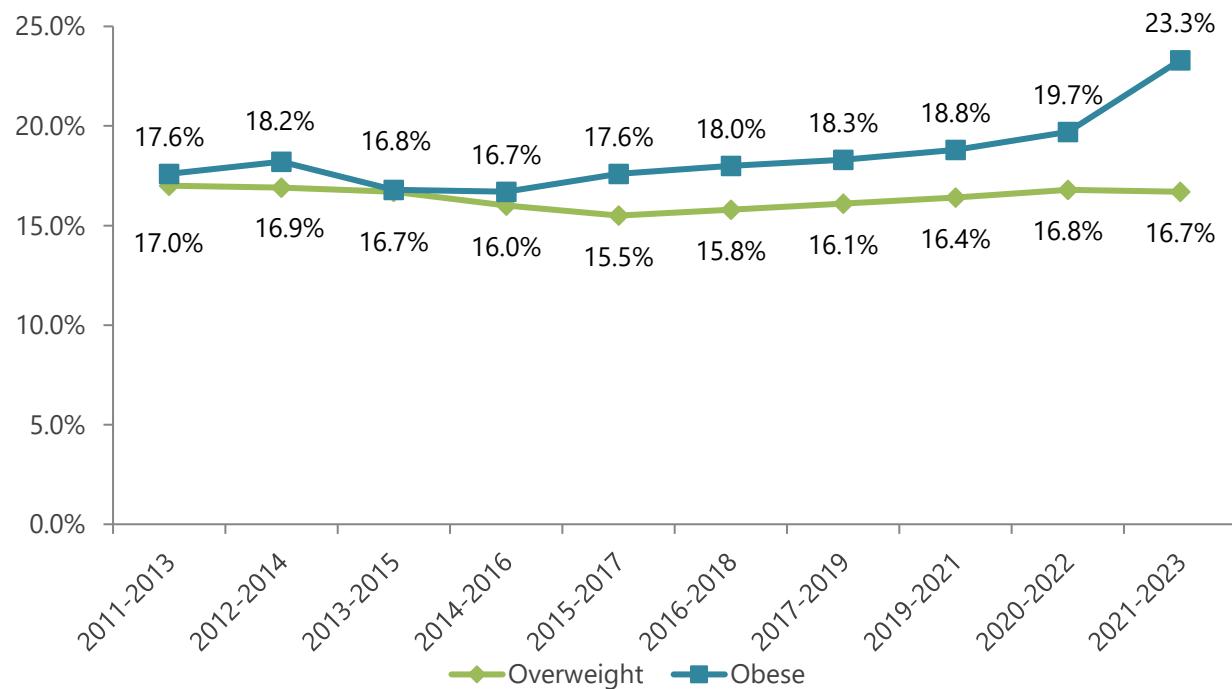
Figure 43. Percentage of adults with obesity by census tract, Syracuse, 2023



Source: City Health Dashboard, 2023. Retrieved 12/16/2025, from <https://www.cityhealthdashboard.com/>.

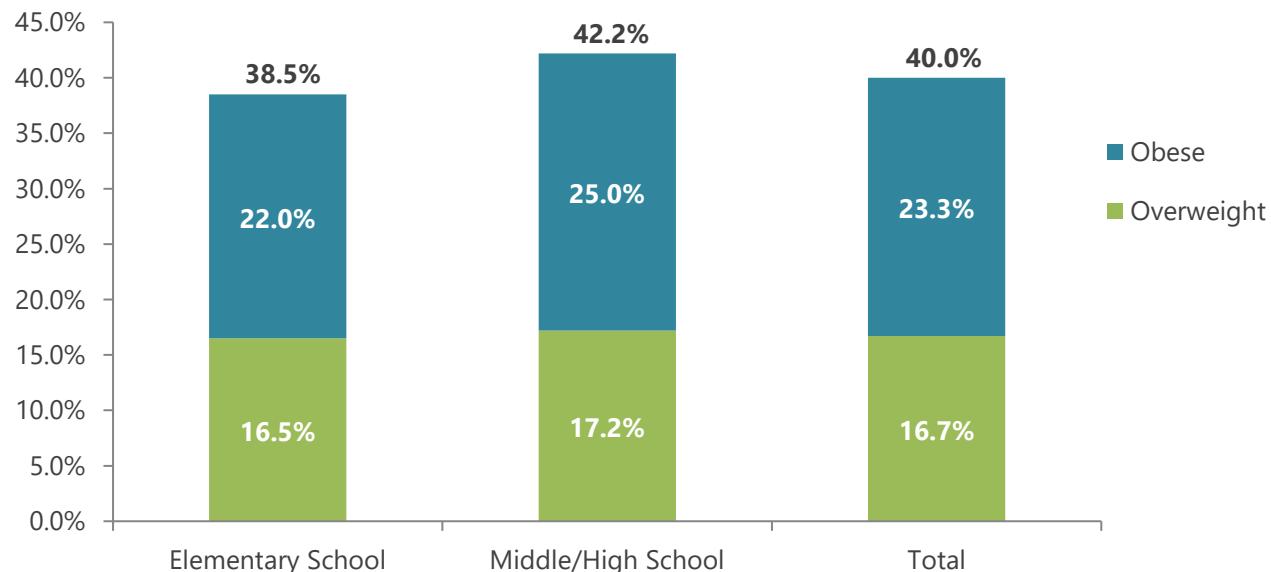
Overweight and obesity rates remain a concern, especially among children in Onondaga County. Figure 44 depicts the overweight and obesity rates among students enrolled in public schools in Onondaga County from 2011 to 2023. These rates are displayed as a three-year rolling average to account for year-to-year variability.

Figure 44. Overweight and obesity rates among public school students, Onondaga County, 2011-2023, 3- year rolling average



Source: NYS Community Health Indicator Reports. Retrieved 12/16/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

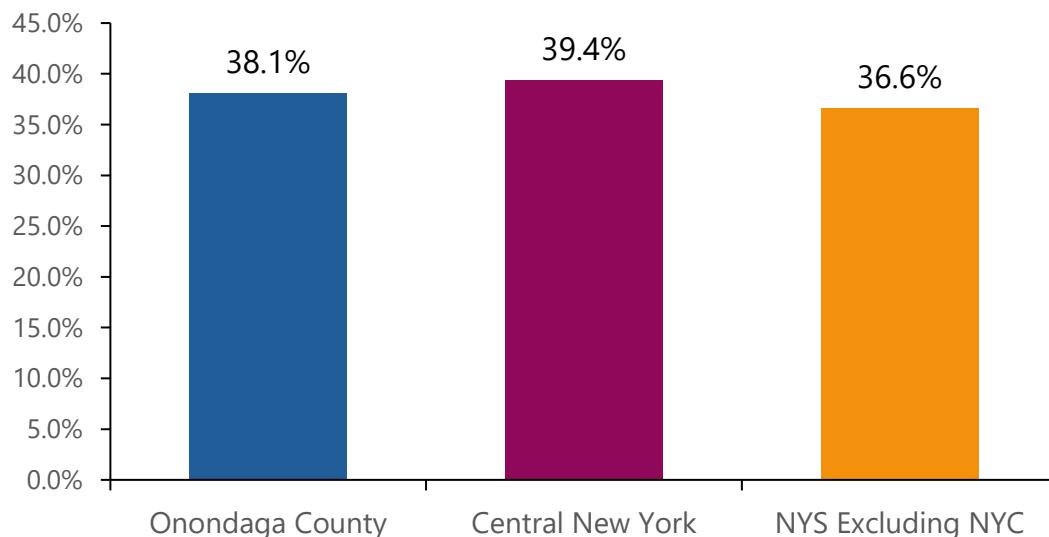
Figure 45. Overweight and obesity rates among public school students, by grade level, Onondaga County, 2021-2023



Source: NYS Community Health Indicator Reports. Retrieved 12/16/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

Figure 45 displays the current obesity rates for all public school students in Onondaga County. In Onondaga County, 40.0% of public school students are overweight or obese.⁹³ The percentage of students who are overweight or obese also varies geography (Figure 46).

Figure 46. Percentage of public school students who are overweight or obese, by geography, Onondaga County, Central New York, and NYS excluding NYC, 2022-2024



Source: NYS Student Weight Status Category Reporting System (SWSCRS), 2022-2024. Retrieved 12/3/2025 from <https://nyshc.health.ny.gov/web/nyapd/student-weight-data-explorer>.

Diabetes

In Onondaga County, the prevalence of physician diagnosed diabetes is 9.1% compared to 9.7% in CNY and 10.2% in NYS.⁹⁴ Figure 47 shows diabetes hospitalization and mortality rates for Onondaga, CNY, and NYS excluding NYC.

Figure 47. Diabetes indicators, Onondaga County, CNY, and NYS excluding NYC, 2020-2022

	Onondaga County	Central New York	NYS excluding NYC
Diabetes mortality rate per 100,000	24.1*	25.3*	19.9*
Diabetes hospitalization rate per 10,000 (primary diagnosis)	20.0*	20.0*	15.7*

⁹³ NYS Community Health Indicator Reports. Retrieved 2/21/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

⁹⁴ NYS Community Health Indicator Reports. Retrieved 3/26/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

Diabetes hospitalization rate per 10,000 (any diagnosis)	179.4*	191.4*	176.6*
Diabetes short-term complications hospitalization rate per 10,000 - Aged 6-17 Years	5.8	4.1	2.5
Potentially preventable diabetes short-term complications hospitalization rate per 10,000 - Aged 18 years and older	10.6	10.0	6.7

Source: NYS Community Health Indicator Reports. Retrieved 12/16/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>. *Rate is age-adjusted value

Cancer

Cancer screenings play a vital role in cancer prevention and detecting early stages of cancer. Screening guidelines vary by age and sex and help detect cancer early, including colorectal and breast cancer screenings starting at age 45.⁹⁵ Onondaga County residents have higher colorectal cancer screenings and mammography use than Syracuse residents (Figure 48).

Figure 48. Colorectal cancer screening and mammography use, Onondaga County and Syracuse, 2022

	Onondaga County	Syracuse
Colorectal cancer screening among adults aged 45 to 75 years	64.5%	58.9%
Mammography use among women aged 50 to 74 years	82.0%	77.5%

Source: CDC PLACES: Local Data for Better Health, 2022. Retrieved 3/26/2025, from <https://www.cdc.gov/places>.

The incidence and mortality rate for cancer is higher in Onondaga County than NYS. The incidence and mortality rates for cancer for Onondaga County and NYS are displayed in Figure 49. Disparities in cancer incidence and mortality rate vary by race within Onondaga County. Figure 50 provides a breakdown by race for cancer overall. Disparities in incidence and mortality rates for breast (female), colon and rectum, lung and bronchus, and prostate cancers are displayed in Figure 51.

Cancer Services Program

The OCHD's [Cancer Services Program](#) (CSP) offers free breast, cervical, and colorectal cancer screenings to uninsured and underinsured residents of Syracuse and Onondaga County.

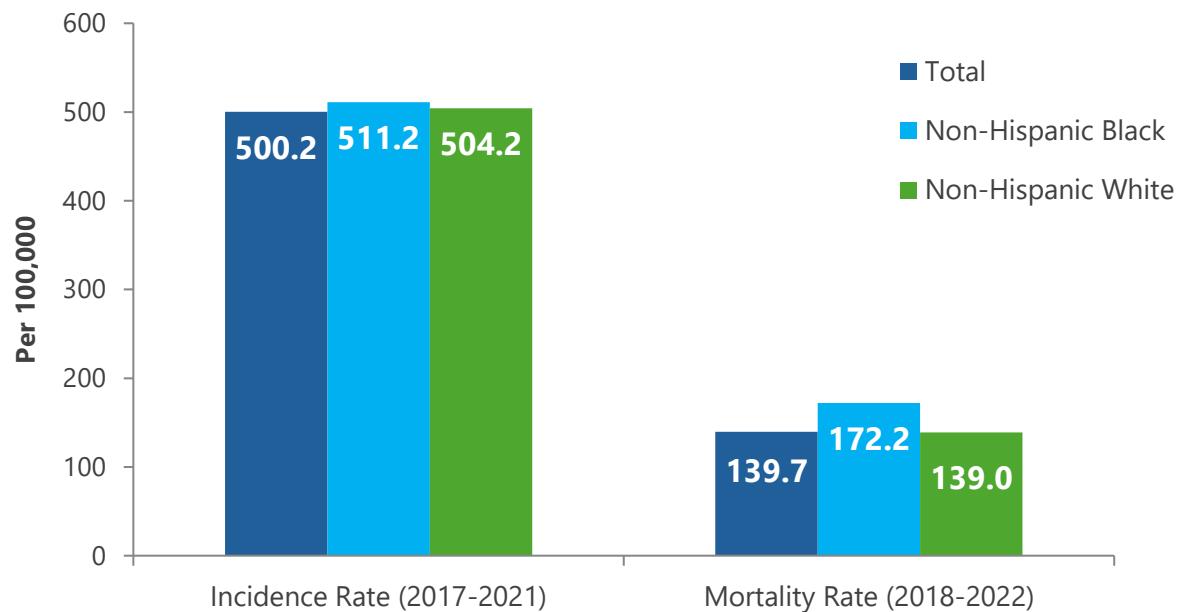
⁹⁵ American Cancer Society, Cancer Screening Guidelines by Age. Retrieved 3/26/2025 from <https://www.cancer.org/cancer/screening/screening-recommendations-by-age.html#all-ages>.

Figure 49. Cancer incidence and mortality rates, per 100,000, Onondaga County and NYS, 2019-2021

	Onondaga County	NYS excluding NYC
Incidence rate for all cancer types (per 100,000)	495.5	489.2
Mortality rate for all cancer types (per 100,000)	137.7	135.8

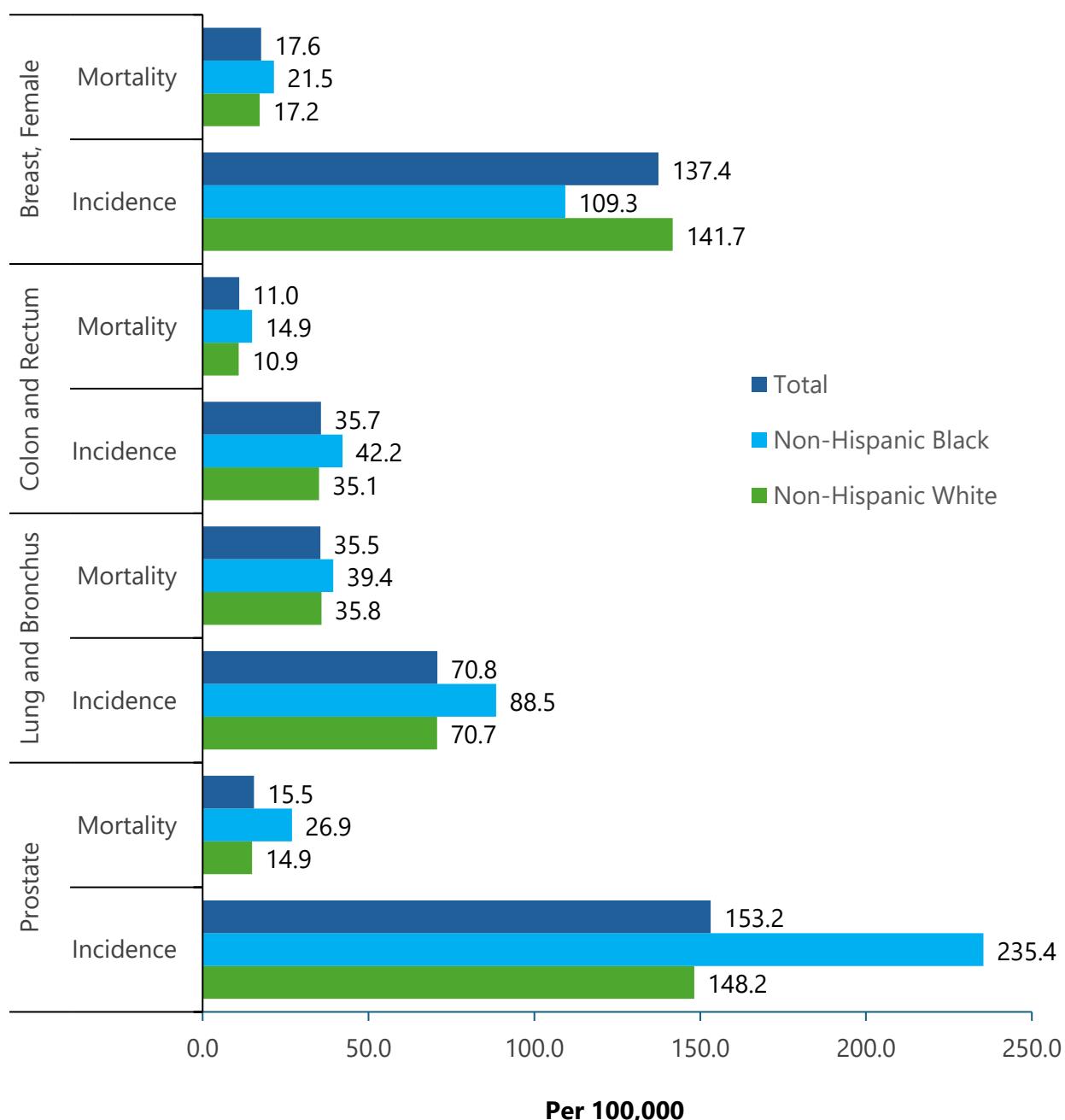
Source: NYS Prevention Agenda Dashboard. Retrieved 12/16/2025 from https://apps.health.ny.gov/public/tabcis/PHIG_Public/chirs/reports/#county.

Figure 50. Cancer (all types) incidence and mortality rates, per 100,000, by race, Onondaga County



Source: State Cancer Profiles. Retrieved 2/24/2025 from <https://statecancerprofiles.cancer.gov/index.html>.

Figure 51. Incidence and mortality rates for several cancer types, per 100,000, by race, Onondaga County



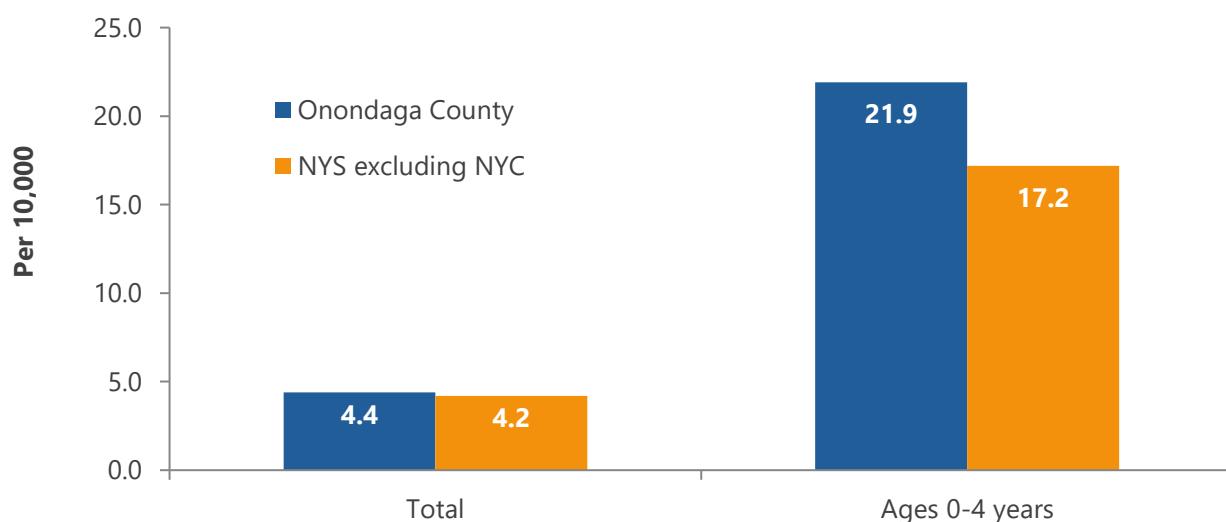
Source: State Cancer Profiles. Incidence rate from 2017-2021; Mortality rate from 2018-2022. Retrieved on 12/16/25 from <https://statecancerprofiles.cancer.gov/index.html>.

Asthma

Asthma is a chronic respiratory disease that can be life-threatening if not properly controlled through medical treatment and management of environmental triggers. Although there is no cure for asthma, proper care allows individuals to still live healthy, productive, and fully active lives. Asthma symptoms can be worsened by factors such as pets, tobacco smoke, dust mites, mold, cockroaches and other pests, and air pollution.⁹⁶

The prevalence of asthma among adults in Onondaga County is 11.7% compared to 11.1% in CNY, and 10.1% in NYS.⁹⁷ In Onondaga County, children ages 0 to 4 years have significantly higher rates of hospitalizations for asthma than the overall population (Figure 52).

Figure 52. Hospitalization rate for asthma, per 10,000, by age, Onondaga County and NYS excluding NYC, 2020-2022



Source: NYS Community Health Indicator Reports. Retrieved 12/4/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

Smoking

Within Onondaga County, 12.4% of adults are current smokers compared to 17.9% of adults in Syracuse.⁹⁸ Onondaga County's smoking prevalence is higher than NYS (9.3%).⁹⁹ Figure 53 displays smoking rates in

⁹⁶ U.S. Environmental Protection Agency, Learn about Asthma, 2025. Retrieved 12/17/2025, from <https://www.epa.gov/asthma/asthma-triggers-gain-control#chemical>.

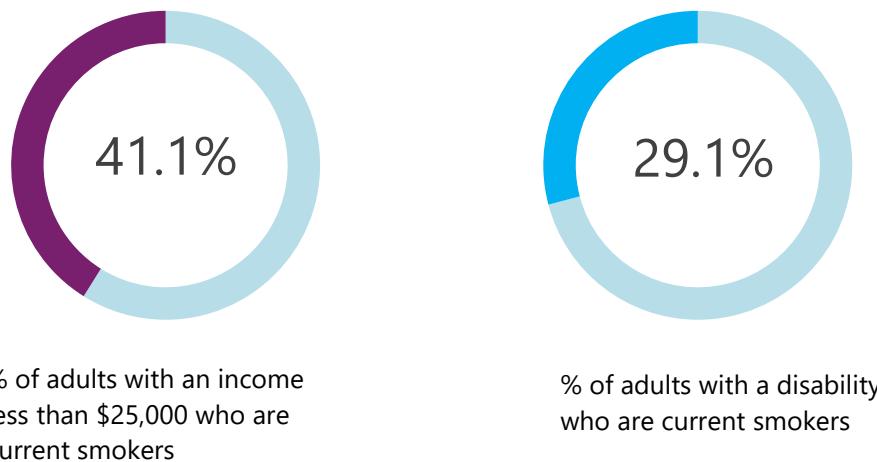
⁹⁷ NYS Community Health Indicator Reports. Retrieved 12/17/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

⁹⁸ PLACES: Local Data for Better Health, 2023. Retrieved 12/16/2025, from <https://www.cdc.gov/places/index.html>.

⁹⁹ NYS BRFSS Brief, 2025. Retrieved 12/17/2025 from https://www.health.ny.gov/statistics/brfss/reports/docs/2025-18_brfss_cigarette_smoking.pdf.

Onondaga County among adults with annual incomes less than \$25,000 and among adults with disabilities. Adults reporting poor mental health also have a higher smoking rate (29.7%).¹⁰⁰

Figure 53. Disparities in smoking, Onondaga County, 2021



Source: Expanded BRFSS. Retrieved 12/3/2025 from <https://www.health.ny.gov/statistics/brfss/expanded/>.

Note: Percentages are age-adjusted

The use of electronic cigarettes (e-cigarettes) creates serious health risks due to the exposure to harmful substances and high levels of nicotine. E-cigarette aerosol has been found to contain carcinogens (cancer causing chemicals), volatile organic compounds, heavy metals (including nickel, tin, and lead), and lung-damaging chemicals like diacetyl.¹⁰¹ Ultrafine particles found in e-cigarette aerosol can be inhaled deep into the lungs increasing the risk for e-cigarette or vaping use-associated lung injury (EVALI). Adult e-cigarette use is similar in Onondaga County (7.0%) and NYS excluding NYS (6.8%) with adult e-cigarette use highest in CNY (7.8%).¹⁰² Among youth, e-cigarette use can be particularly concerning as youth who use e-cigarettes may be more likely to smoke cigarettes in the future. E-cigarettes have often been marketed to attract youth through flavors such as candy or fruit and extensive advertising. Additionally, some e-cigarettes cost less than cigarettes which makes them more accessible to youth.¹⁰³

Healthy Eating

Healthy eating can influence both the likelihood of developing chronic conditions and the management of existing health issues. Within Onondaga County, 19.7% of adults report consuming one or more sugary

¹⁰⁰ NYS Expanded BRFSS, 2021. Retrieved 12/16/2025, from <https://www.health.ny.gov/statistics/brfss/expanded/>.

¹⁰¹ CDC, Quick Facts on E-Cigarettes, 2022. Retrieved 9/23/2022, from

https://www.cdc.gov/tobacco/basic_information/e-cigarettes/Quick-Facts-on-the-Risks-of-E-cigarettes-for-Kids-Teens-and-Young-Adults.html#e-cigarette-aerosol.

¹⁰² NYS Expanded BRFSS, 2021. Retrieved 12/16/2025, from <https://www.health.ny.gov/statistics/brfss/expanded/>.

¹⁰³ CDC, Why Youth Vape, 2024. Retrieved 12/16/2025 from <https://www.cdc.gov/tobacco/e-cigarettes/why-youth-vape.html>.

drinks daily while 34.9% report consuming less than one fruit and one vegetable each day.¹⁰⁴ An unhealthy diet high in saturated fat, sugar, and salt can lead to coronary heart disease, a condition in which plaque builds up in the coronary arteries, increasing the risk of heart attacks.¹⁰⁵ Onondaga County (103.7 per 100,000) has a lower rate of coronary heart disease mortality than NYS excluding NYC (118.0 per 100,000).¹⁰⁶

Physical Activity

Physical activity is important for preventing chronic disease and managing existing conditions. In Onondaga County, over one-fifth (22.3%) of adults report that they did not participate in leisure time physical activity within the last 30 days.¹⁰⁷ In Syracuse this increases to 31.9% of adults. Parks can provide opportunities for physical activity or exercise. In Onondaga County and NYS, 63.0% of residents live within half a mile to a park.¹⁰⁸

Chronic Diseases: Community Assets and Resources

Opportunities for Physical Activity:

- Onondaga County is home to 3 state parks, 13 county parks, and over 100 city, town, and village parks, offering indoor and outdoor spaces for exercise and family recreation.
- The Onondaga County Parks system is an extensive network of nearly 6,500 acres, used by nearly 3 million people annually, and includes nature centers, beaches, forested areas, recreational facilities, and athletic fields, many of which can be used year-round.
- The Syracuse Department of Parks, Recreation & Youth Programs manages an additional 1,000 acres of parks, playgrounds, and open spaces for recreational activities. Many towns also offer Parks and Recreation programs with activities for all ages.
- There are numerous hiking, walking, and biking trails in the county, including the Erie Canalway/Empire State Trail, the Onondaga Creekwalk, Onondaga Lake Park, and Lakeview Park. Fitness centers, athletic clubs, and recreational sporting groups further support active lifestyles in the County.

¹⁰⁴ NYS Expanded BRFSS, 2021. Retrieved 2/21/2025, from <https://www.health.ny.gov/statistics/brfss/expanded>. Note: rate reflects age-adjusted value.

¹⁰⁵ National Heart, Lung, and Blood Institute, What Is Coronary Heart Disease? Retrieved 3/26/2025 from <https://www.nhlbi.nih.gov/health/coronary-heart-disease>.

¹⁰⁶ NYS County Health Indicators Reports Dashboard. Retrieved 12/16/2025 from https://apps.health.ny.gov/public/tabvis/PHIG_Public/chirs/reports/#county.

¹⁰⁷ CDC PLACES: Local Data for Better Health, 2023. Retrieved 12/16/2025, from: <https://www.cdc.gov/places>. Rate reflects age-adjusted value.

¹⁰⁸ County Health Rankings & Roadmaps. Retrieved 3/24/2025 from <https://www.countyhealthrankings.org/health-data/new-york/onondaga?year=2025>.

Chronic Diseases: Community Assets and Resources

Tobacco

- The Tobacco Action Coalition of Onondaga County (TACO) is a group of collaborating agencies, health care partners, and community advocates. TACO works to engage and educate elected officials, community organizations, corporate decision makers, and community members. TACO focuses on initiatives to change social norms, decrease the social acceptability of tobacco, and reduce the burden of tobacco use in our community by developing and implementing smoke-free policies.
- Tobacco-Free CNY (TFCNY) works to reduce the health, social, and economic burdens of tobacco use. TFCNY operates the youth-led NYS Reality Check program that exposes the marketing tactics of the tobacco and e-cigarette industry. Reality Check members organize events, campaigns, and trainings to educate their communities, raise awareness, and take action to reduce tobacco and e-cigarette use.

Healthy Communities:

- Creating Healthy Schools & Communities (CHSC), is an OCHD program that works collaboratively with local schools and communities in the City of Syracuse, Town of Van Buren, Village of Solvay, and Onondaga Nation to increase access to healthy foods, and improve nutrition and physical activity policies in worksites, community settings, and early care and education environments.

Mental Health and Substance Use Disorders

Mental health impacts the way we feel, think, and act and includes emotional, psychological, and social wellbeing. Mental health is closely linked to physical health and is a key component to overall health.¹⁰⁹ Substance use disorders are chronic, treatable diseases that can lead to significant problems in all aspects of life including mental health, physical health, and social wellbeing.¹¹⁰ Several measures of mental health and substance use disorders are presented below.

Poor Mental Health

Within Onondaga County, 13.9% of adults report experiencing poor mental health for fourteen or more days in the last month which is similar to the rate for NYS excluding NYC (13.2%) and lower than the rate for CNY (15.6%).¹¹¹ Syracuse has higher rates with 20.3% of adults experiencing poor mental health for fourteen or more days in the last month.¹¹² Page 49 in the *Self-Reported Health Status* section includes a map depicting self-reported poor mental health by census tract in Syracuse.

Self-Harm and Suicide

When an individual harms themselves intentionally, this is known as self-harm or self-injury. Self-harm typically begins in teenage and early adult years. A person who self-harms does not usually have the intention of suicide; however, they are at higher risk of attempting suicide and dying by suicide if they do not receive treatment.¹¹³ Onondaga County (7.6 per 10,000) has higher rates of self-inflicted injury hospitalizations than NYS excluding NYC (5.5 per 10,000)¹¹⁴ (Figure 54). The County's suicide rate (10.5 per 100,000) is also higher than the rate for NYS excluding NYC (9.7 per 100,000) (Figure 55).

¹⁰⁹ CDC, About Mental Health, 2025. Retrieved 12/23/2025, from <https://www.cdc.gov/mental-health/about/index.html>.

¹¹⁰ CDC, Treatment of Substance Use Disorders, 2024. Retrieved 12/23/2025, from <https://www.cdc.gov/overdose-prevention/treatment/index.html>.

¹¹¹ NYS Expanded BRFSS, 2021. Retrieved 2/24/2025, from <https://www.health.ny.gov/statistics/brfss/expanded/>.

¹¹² CDC PLACES: Local Data for Better Health, 2021. Retrieved 2/24/2025 from <https://www.cdc.gov/places/index.html>.

¹¹³ SAMHSA, Self-Harm, 2023. Retrieved 12/11/2025, from <https://www.samhsa.gov/mental-health/what-is-mental-health/conditions/self-harm>.

¹¹⁴ NYS Community Health Indicator Reports. Retrieved 3/4/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

Figure 54. Self-inflicted injury hospitalization rate per 10,000, by age, Onondaga County and NYS excluding NYC, 2020-2022

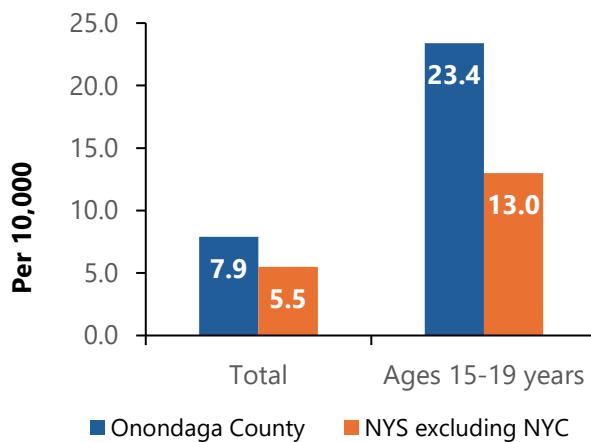
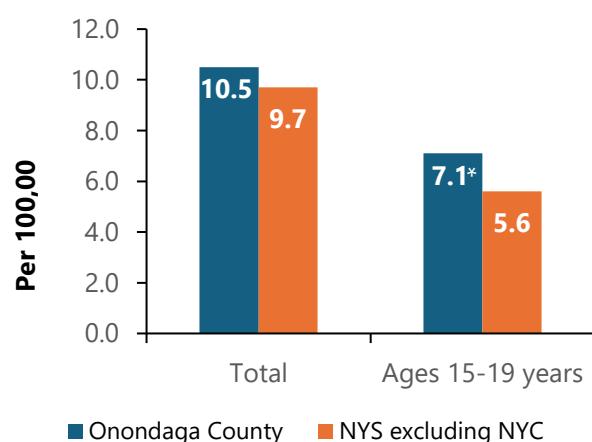


Figure 55. Suicide mortality rate per 100,000, by age, Onondaga County and NYS excluding NYC, 2020-2022



Source: NYS Community Health Indicator Reports. Retrieved 3/4/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>. *Rate is unstable

Alcohol Misuse

An individual is at an increased risk for immediate and long-term health risks, including injury, violence, liver failure, cancer, and heart disease due to drinking excessive amounts of alcohol. Long-term alcohol use can lead to social and wellness issues such as relationship problems and mental health conditions.¹¹⁵ In Onondaga County, 13.7% of adults report binge drinking during the past month which is lower than the rate for CNY (16.0%).¹¹⁶ Additionally, the County rate is lower than at last measurement (23.3% in 2018). Onondaga County (26.3%) has lower alcohol-related motor vehicle injuries and deaths compared to CNY (29.0%) and NYS excluding NYC (30.8%).¹¹⁷

Figure 56. Alcohol misuse indicators, Onondaga County, Central New York, and NYS

	Onondaga County	Central New York	New York State
% of adults binge drinking in the past month (2021)	13.7	16.0	16.1*
Alcohol related motor vehicle injuries and deaths (per 100,000) (2020-2022)	26.3	29.0	30.8*

¹¹⁵ Alcohol & Substance Misuse, 2018. Retrieved 12/10/2025, from <https://www.cdc.gov/alcohol/about-alcohol-use/index.html>.

¹¹⁶ NYS Expanded BRFSS, 2021. Retrieved 2/24/2025, from <https://www.health.ny.gov/statistics/brfss/expanded/>.

¹¹⁷ NYS Community Health Indicator Reports. Retrieved 3/4/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

% of all motor vehicle deaths involving alcohol (2018-2022)	28.0	-	22.0
--	------	---	------

Sources: NYS Expanded BRFSS: <https://www.health.ny.gov/statistics/brfss/expanded/>; NYS Community Health Indicator Reports: <https://www.health.ny.gov/statistics/chac/indicators/>; County Health Rankings:

<https://www.countyhealthrankings.org/health-data/new-york/onondaga?year=2025>.

*Rate is for NYS excluding NYC

Opioid Use

Opioid use disorders continue to impact Onondaga County residents. Onondaga County fares worse than NYS excluding NYC for many opioid related indicators. Emergency department visit and hospitalization rates for opioid overdoses in Onondaga County and NYS excluding NYC are displayed in Figures 57 and 58. The county has higher rates than NYS excluding NYC for emergency department visits due to opioid overdoses for all opioids, heroin, and opioids excluding heroin. However, the county has slightly lower rates than NYS excluding NYC for hospitalization rates due to opioid overdoses.

Figure 57. Emergency department visit rate due to opioid overdoses per 100,000 population, Onondaga County and NYS excluding NYC, 2024

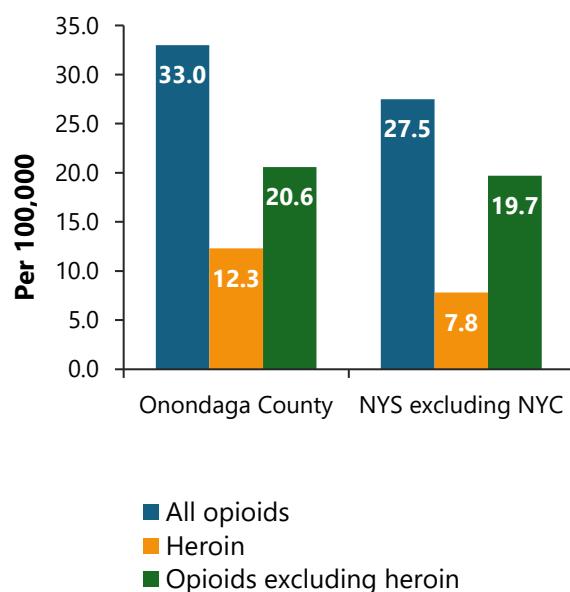
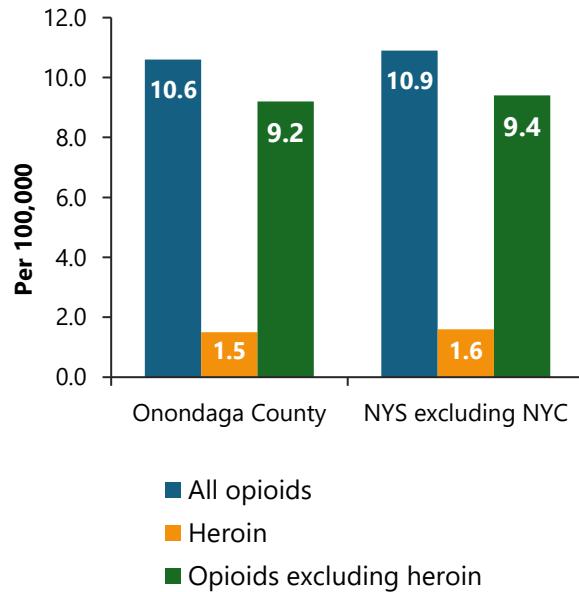


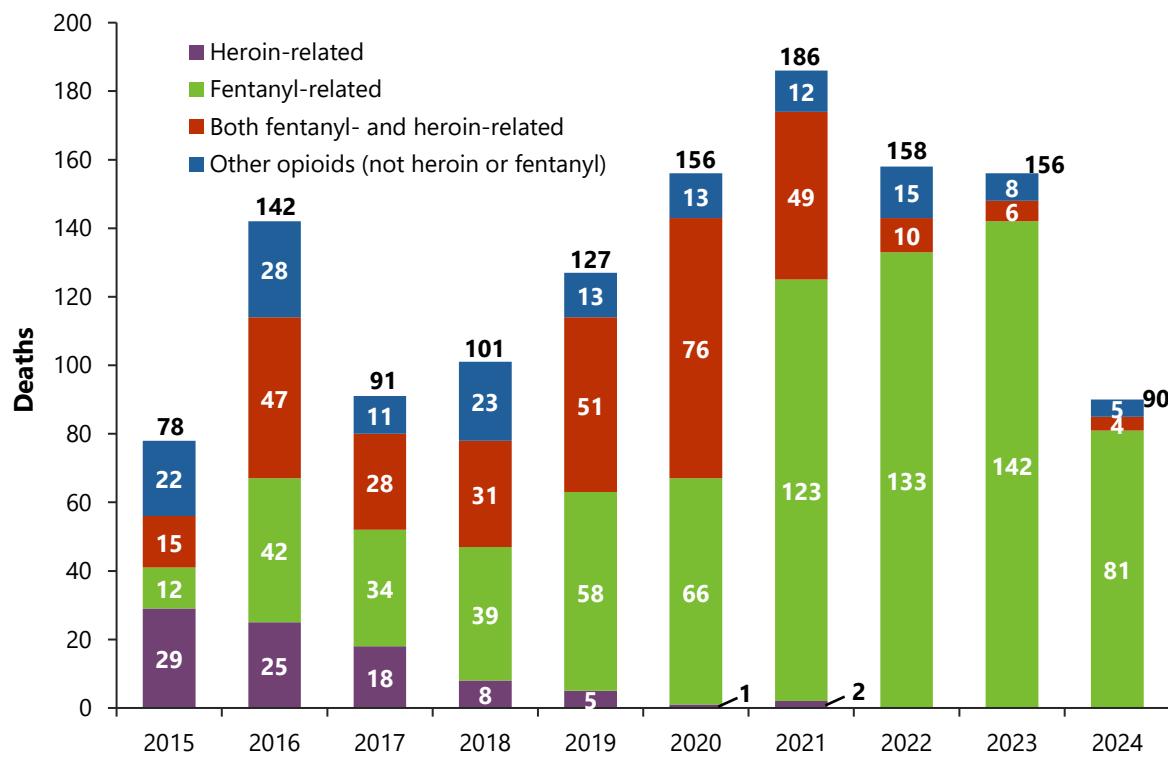
Figure 58. Hospitalization rate due to opioid overdoses per 100,000 population, Onondaga County and NYS excluding NYC, 2024



Source: New York State Department of Health - County Opioid Quarterly Report, Published October 2025. Retrieved 12/4/25 from https://apps.health.ny.gov/public/tabvis/PHIG_Public/opioid-quarterly/.

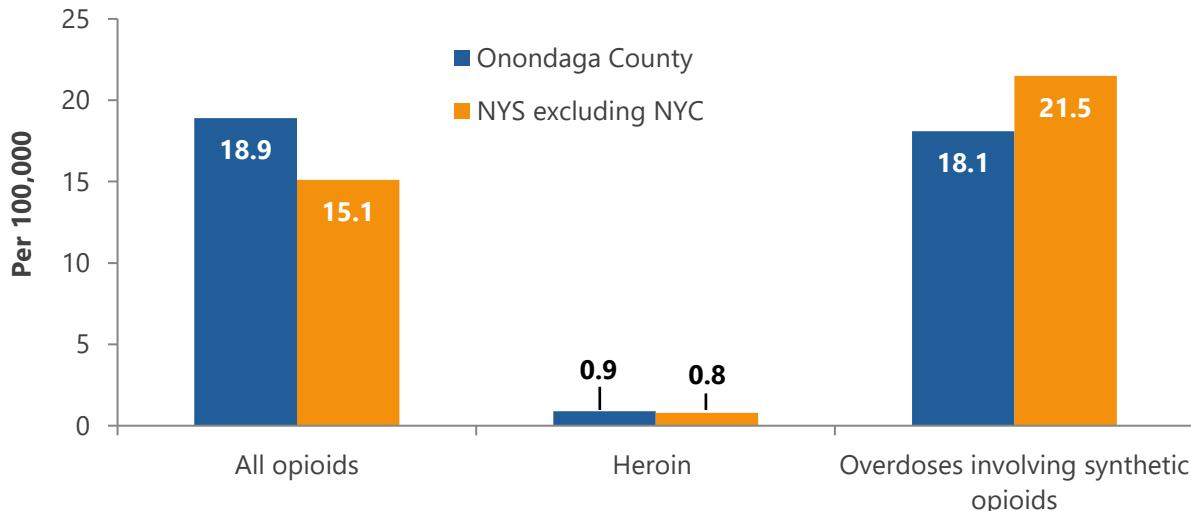
In Onondaga County, unintended opioid-related deaths reached a peak in 2021. Since then, annual deaths have decreased (Figure 59). The mortality rate due to all types of opioid overdoses and heroin overdoses is higher in Onondaga County than in NYS excluding NYC (Figure 60).

Figure 59. Unintended opioid-related deaths, Onondaga County, 2015-2024



Source: Onondaga County Medical Examiner's Office. Retrieved, 12/4/2025, from <https://healthystories.ongov.net/onondaga-county-opioid-epidemic-data-report/>. Note: Data are provisional.

Figure 60. Mortality rate due to opioid overdoses, per 100,000, Onondaga County and NYS excluding NYC, 2024



Source: New York State Department of Health - County Opioid Quarterly Report, Published October 2025. Retrieved 12/4/25 from https://apps.health.ny.gov/public/tabvis/PHIG_Public/opioid-quarterly/. Note: Overdose deaths involving synthetic opioids other than methadone (incl. illicitly produced opioids such as fentanyl).

Drug Misuse and Overdose Including Primary Prevention Among Youth

Primary prevention strategies are more "upstream" by helping people avoid, reduce or modify drug use instead of "downstream" interventions that require acute treatment or an emergency response.¹¹⁸ Primary prevention for drug misuse and overdose focuses on reducing risk factors and strengthening protective factors. Protective factors include having personal and social supports and this is especially important for young people to reduce the likelihood of initiating substance use. Additionally, protective factors for young people promote mental and physical health and improve overall wellbeing. Some protective factors for young people include having positive relations with parents and other family members, enjoying school, having a network of adult role models outside the home (i.e., teachers, coaches, youth leaders), and living in communities with less drug use.

Counselling and Mentoring Including Avoidance of Risky Substances

The Onondaga County Health Department in partnership with Contact Community Services has worked to increase the delivery of the PAX Good Behavior Game. PAX is an evidence-based classroom management program that teaches K-12 students emotional regulation and self-control and builds resilience to reduce risky behaviors such as substance use in youth. This program has been extensively recognized by Substance Abuse and Mental Health Services Administration (SAMHSA), the Washington State Institute for Public Policy, and the Institute of Medicine.¹¹⁹ PAX has been shown to be an effective tool for improving classroom behavior and academic performance. There is a 95% reduction in off-task and disruptive behavior in classrooms that support PAX. Through Contact Community Services, there have been 19,010 classroom visits and 10 current PAX partners with support from 14 schools and 247 teachers.¹²⁰

Community Resources

- Promise Zone is a program to help increase social emotional success and provides a support system for students in grades elementary, middle, and high school. This program is a collaborative partnership among school, family, and the community to help children who may be struggling in school with behavioral or emotional challenges.
- The Alcohol-Drug Abuse Prevention Education Program (ADAPEP) is a school-based substance use prevention program that provides research-based information, education, counseling services, skill building, and growth opportunities to students.

¹¹⁸ Alcohol and Drug Foundation, Prevention and early intervention. Retrieved 3/14/2025 from <https://adf.org.au/resources/health-professionals/aod-mental-health/prevention-early-intervention/>.

¹¹⁹ Contact Community Services, 2023 Impact Report. Retrieved 3/11/2025 from <https://www.contactsyracuse.org/wp-content/uploads/2024/03/Contact-Community-2023-Annual-Report.pdf>.

¹²⁰ Contact Community Services, PAX Good Behavior. Retrieved 3/11/2025 from <https://www.contactsyracuse.org/pax-good-behavior-game/>.

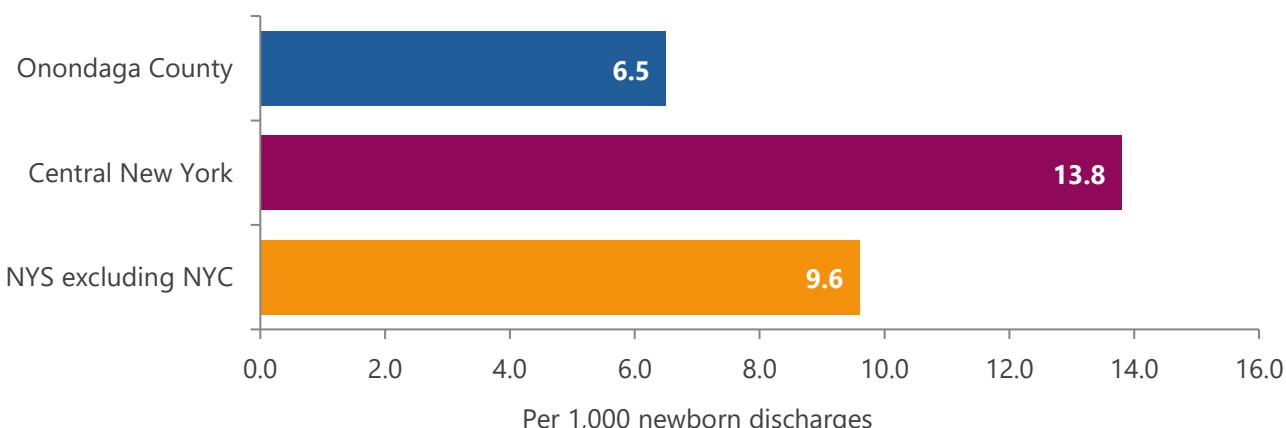
Infections among Persons who Inject Drugs

There is an increased risk of certain infections including hepatitis A, B, and C, and HIV/AIDS associated with injection drug use. Onondaga County has a relatively small annual number of hepatitis A, and acute hepatitis B and C infections. In Onondaga County, the incidence rate for acute hepatitis C is 0.2 per 100,000 compared to 1.8 per 100,000 in NYS excluding NYC.¹²¹ Although rates remain low, Onondaga County residents are at an increased risk for exposure to these viruses due to behaviors associated with injection drug use. Increased vaccination against hepatitis, and community-based prevention programs, such as syringe services programs, can reduce the risk of contracting viral hepatitis among those who inject drugs.¹²²

Neonatal Abstinence Syndrome

Neonatal abstinence syndrome (NAS) is a set of conditions that result from a newborn infant's withdrawal from certain substances that they were exposed to before birth. Neonatal opioid withdrawal syndrome (NOWS) is a subset of NAS that is specific to opioid withdrawal during the first month of life.¹²³ Within Onondaga County, the rate of newborns with neonatal withdrawal symptoms and/or affected by maternal use of opioid or other substance (any diagnosis) is 6.5 per 1,000 newborn discharges.¹²⁴ This is lower than the rates for NYS excluding NYC and CNY (Figure 61).

Figure 61. Newborns with neonatal withdrawal symptoms and/or affected by maternal use of drugs of addiction (per 1,000 newborn discharges), Onondaga County, Central New York, and NYS excluding NYC, 2022



Source: NYS Prevention Agenda Dashboard retrieved 2/24/2025 from [Prevention Agenda Tracking Dashboard](#)

¹²¹ NYSDOH 2022 Communicable Disease Annual Reports. Retrieved 12/10/2025, from <https://www.health.ny.gov/statistics/diseases/communicable/2023/docs/rates.pdf>.

¹²² CDC, Viral Hepatitis Among People Who Use or Inject Drugs, 2025. Retrieved 12/11/2025, from <https://www.cdc.gov/hepatitis/hcp/populations-settings/pwid.html>.

¹²³ CDC, Treat and Manage Infants Affected by Prenatal Opioid Exposure, 2025. Retrieved 12/11/2025, from <https://www.cdc.gov/opioid-use-during-pregnancy/treatment/infants-opioid.html>.

¹²⁴ NYS Prevention Agenda Dashboard. Retrieved 2/24/2025.

Mental Health and Substance Use: Community Assets and Resources

- Contact Community Services provides a 24-hour/7-day a week free and confidential telephone hotline service offering crisis counseling and suicide prevention services through their Crisis and Suicide Prevention program. The program also provides follow-up care for those in crisis at discharge from local hospitals or mental health agencies.
- The Onondaga County Drug Task Force (DTF) includes representation from over 50 agencies including local and state government, public safety, academia, clinical care, business, and community-based organizations. The DTF works together to prevent, treat, and reverse the public health drug crisis. Current initiatives are focused on data and resource sharing and collaboration between agencies.
- The CNY Crisis Network is a cohesive group of local crisis response service providers who work together to ensure individuals experiencing mental, emotional, and behavioral crises or substance use crisis receive excellent and consistent care. A complete list of crisis services in Onondaga County is available here: [https://onondaga.gov/mental-health/wp-content/uploads/sites/255/2025/09/Onondaga County Crisis Services Grid06.2024.pdf](https://onondaga.gov/mental-health/wp-content/uploads/sites/255/2025/09/Onondaga%20County%20Crisis%20Services%20Grid06.2024.pdf).
- The Central Region Addiction Resource Center is a cross-sector collaboration working to enhance local and regional capacity in areas of substance use prevention, treatment, and recovery. Partners work together to reduce stigma around opioid addiction, raise awareness of substance use issues, and share resources.
- Peer Services are available within the community to assist and support people with substance use disorders in navigating the service system. This includes the OCHD Peer Engagement Services program which helps adults identify barriers to their recovery and connect them with services such as care management, counseling, transportation, housing, and patient treatment services.
- St. Joseph's Health Hospital provides behavioral health services for adults and children, including the region's only Comprehensive Psychiatric Emergency Program (CPEP) with a licensed Psychiatric Emergency room.
- The Upstate Emergency Opioid Bridge Clinic, an innovative Emergency Medicine approach to helping manage opioid use disorder. Patients arriving to the Emergency Department are evaluated for withdrawal and treated as needed. Patients are then referred to the Bridge Clinic within three to five days for short-term treatment until they are connected to a rehab program or community provider for longer-term treatment.

Mental Health and Substance Use: Community Assets and Resources

- Crouse Health's Addiction Treatment Services offers comprehensive inpatient and outpatient programs including an opioid treatment program.
- Harm Reduction is a public health approach to minimize the health and safety risks associated with substance use for individuals and the community. Harm reduction approaches in Onondaga County include sharps disposal, drug disposal, overdose reversal using Naloxone (also known as Narcan), use of Fentanyl and Xylazine tests strips, and syringe services programs.
 - The OCHD Syringe Services Program and ACR Health's Syringe Exchange Program provide free and confidential services to people who inject drugs.
 - Several Naloxone training and distribution programs provide training and promote the use of Naloxone throughout the community. In addition to the OCHD Naloxone Training program, other agencies also provide overdose prevention within the County and CNY. The NSYDOH provides a resource of overdose prevention trainings and events available statewide including a list of trainings within CNY/Syracuse Region.
- Zero Suicide, a model of care developed by the National Action Alliance for Suicide Prevention, was piloted in Onondaga County with a network of health providers to establish a regional Zero Suicide safety net.
- The Onondaga County Suicide Prevention Coalition is invested in creating a suicide safe community and has representation from service providers, volunteers, and community members. The goal of the coalition is to educate and link the community around suicide prevention to reduce stigma, promote help-seeking, and save lives.
- The Lobdell Family Foundation sponsors a county-wide suicide-prevention training program for all school district employees in Onondaga County. This program shares tools with educators, administrators, and school personnel with the skills to help recognize early warning signs of mental distress, identify students at risk of suicide, and guide them toward getting support.

Healthy and Safe Environments

The environment in which individuals live, work, and play has a significant impact on health. Many aspects of the environment can impact health including exposure to toxins and chemicals, access to safe indoor and outdoor spaces for physical activity, and occupational hazards. Ensuring safety and promoting a healthy lifestyle are essential to the development of a healthy community.

One Health

Human interactions with ecosystems shape our environment and influence health. The One Health approach emphasizes that human health is closely tied to the health of animals and our shared environment, which has become increasingly important in recent years.¹²⁵ Interactions among people, animals, plants, and the environment provides opportunities for diseases to spread quickly. Infectious disease outbreaks, such as those caused by SARS CoV-2, mpox, and Ebola virus, highlight the need to understand the changing interactions between humans and animals. Current One Health issues include zoonotic diseases, vector borne diseases, antibiotic resistance, environmental contamination, and food safety, among others. Zoonotic diseases like rabies, West Nile virus, Lyme disease, and Salmonella can transfer between animals and people. As with other public health strategies, applying a One Health framework is most successful when multiple sectors work together to address shared public health challenges.

Figure 62. One health framework



Source: Centers for Disease Control and Prevention, About One Health. Retrieved 12/16/2025, from <https://www.cdc.gov/one-health/about/index.html>.

¹²⁵ CDC, About One Health. Retrieved 12/16/2025, from <https://www.cdc.gov/one-health/about/index.html>.

The Natural Environment

The natural environment greatly influences the health and safety of residents. Onondaga County experiences large amounts of snowfall each year, with Syracuse averaging 127 inches usually between October and May.¹²⁶ While many residents are accustomed to the local weather patterns, heavy snowfall can make physical activity and everyday activities like traveling to grocery stores or to medical appointments difficult. Severe winter weather events can also increase the risk for weather-related vehicle accidents, and temporary loss of heat and electricity. Additionally, social isolation, especially among older adults can be exacerbated due to extreme winter conditions.

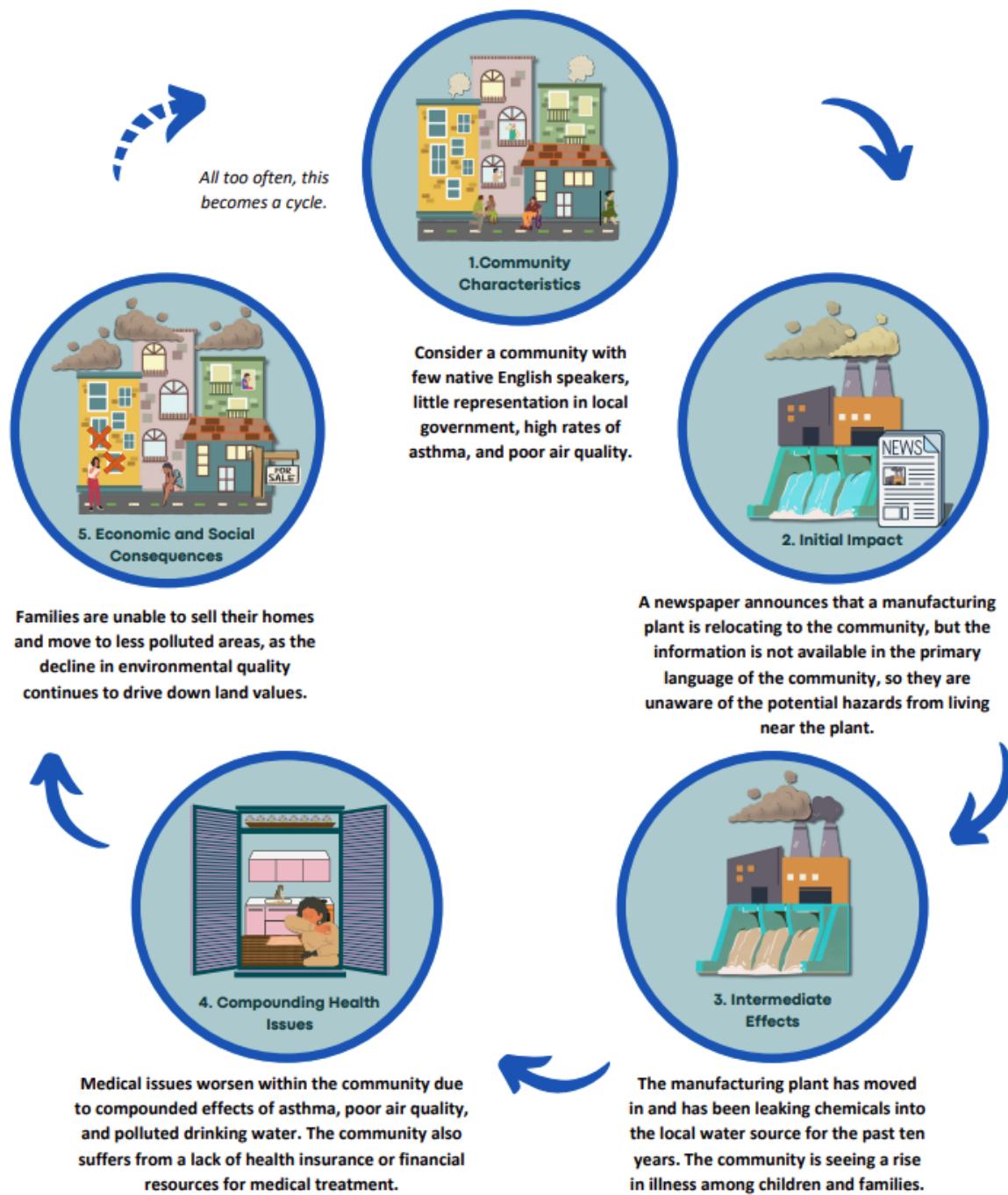
Environmental Justice Index

Environmental justice means ensuring all people and communities have equal access to healthy environments, environmental protections, and meaningful involvement in research and programs for a healthy environment.¹²⁷ This means having equitable access to a healthy, sustainable, and resilient environment regardless of race and ethnicity, or income. Environmental justice is intertwined with the social determinants of health as environmental hazards often disproportionately affect groups that are disadvantaged, low-income, marginalized, and vulnerable. The cumulative effect of environmental risks—such as pollution, lead, and extreme heat combined with social and systemic barriers, can significantly harm human health.

¹²⁶ Syracuse.com, [Syracuse has more snow so far than any other big Upstate NY city](#). Retrieved 12/16/2025.

¹²⁷ CDC/Agency for Toxic Substances and Disease Registry (ATSDR) Environmental Justice Index (EJI) Fact Sheet, 2024. Retrieved 2/28/2025 from <https://www.atsdr.cdc.gov/place-health/media/pdfs/2024/10/EJI-Fact-Sheet-2024-v9-2.pdf>.

Figure 63. Environmental Burden and Cumulative Impacts Cycle



Source: CDC/Agency for Toxic Substances and Disease Registry (ATSDR) Environmental Justice Index (EJI) Fact Sheet, 2024. Retrieved 2/28/2025 from <https://www.atsdr.cdc.gov/place-health/media/pdfs/2024/10/EJI-Fact-Sheet-2024-v9-2.pdf>.

The Environmental Justice Index (EJI) was created in 2022 by the Centers for Disease Control and Prevention (CDC) and the Agency for Toxic Substances and Disease Registry (ATSDR), in collaboration with the Department of Health and Human Services (HHS) Office of Environmental Justice. This place-based tool assesses the cumulative impacts of environmental, social, and chronic health conditions in communities across the United States, focusing on human health and health equity. Communities are ranked by census tract to identify and map areas at the highest risk for negative health outcomes due to environmental burdens, social vulnerabilities, and health vulnerabilities.

In 2024, the EJI was updated to integrate data on climate risks, environmental hazards, socioeconomic inequality, and population health which provides a Climate Burden rank.¹²⁸ The EJI can be used to identify and prioritize areas in need of more public health interventions, guide research development to reduce environmental injustice, and track progress toward environmental justice and health equity.

According to the EJI, 17.7% of residents in Onondaga County and 22.3% of residents in New York State live in areas with high environmental burdens.¹²⁹ Within the County, 33 out of 142 census tracts are classified as highly burdened. Among these highly burdened tracts, the leading environmental burdens are the presence of treatment, storage, and disposal sites; toxic release inventory sites; and impaired or contaminated surface water. The primary social vulnerability factors contributing to these burdens are poverty, housing challenges, and unemployment. In terms of health vulnerabilities, the most significant indicators are high rates of asthma, poor mental health, and diabetes. Furthermore, 20 census tracts in the county are highly burdened due to exposure to extreme heat days and wildfire smoke.

Community Water Fluoridation

Community water fluoridation is an important strategy for prevention of cavities and tooth decay in the United States. There is naturally occurring fluoride in nearly all water however, the levels are typically too low to provide protection. The optimal fluoride concentration is 0.7 milligrams per liter, and community water systems will add fluoride to the water as needed to reach the optimal level.¹³⁰ Drinking fluoridated water has been shown to reduce cavities by 25% in children and adults. Most residents in Onondaga County are served by Public Water Systems which provide safe drinking water. Within Onondaga County, 98.9% of residents are served by community water systems that have optimally fluoridated water which is higher than both CNY (80.5%) and NYS excluding NYC (48.0%).¹³¹

¹²⁸ CDC/ATSDR, Environmental Justice Index 2024 Update. Retrieved 2/28/2025 from [Environmental Justice Index 2024 Update | Place and Health - Geospatial Research, Analysis, and Services Program \(GRASP\) | ATSDR](https://www.cdc.gov/atsdr/eji/index.html).

¹²⁹ CDC/ATSDR, EJI Explorer, 2024. Retrieved 2/28/2025 from [EJI Explorer | Place and Health - Geospatial Research, Analysis, and Services Program \(GRASP\) | ATSDR](https://www.cdc.gov/atsdr/eji/index.html).

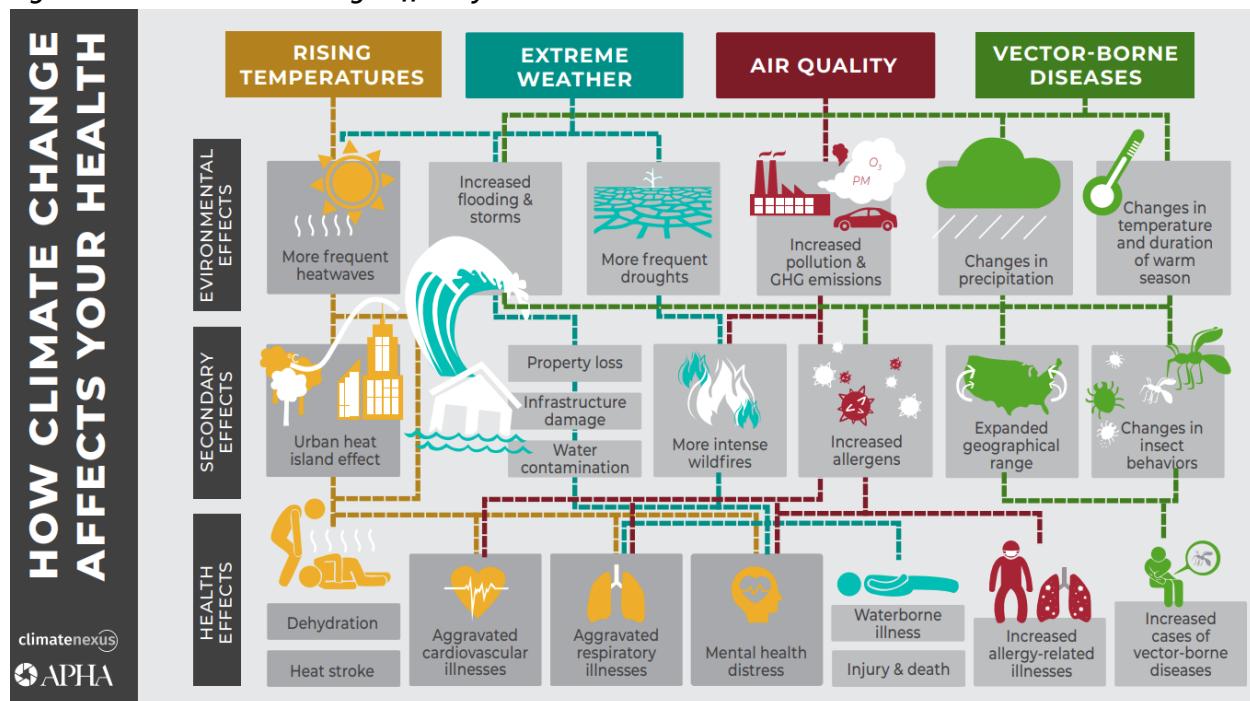
¹³⁰ CDC, About Community Water Fluoridation, 2024. Retrieved 3/10/2025 from <https://www.cdc.gov/fluoridation/about/index.html>.

¹³¹ NYS Prevention Agenda Dashboard retrieved 3/10/2025 from [Prevention Agenda Tracking Dashboard](https://www.cdc.gov/fluoridation/about/index.html).

Climate Change

Climate change poses substantial risks to human health, affecting disease patterns and overall well-being in multiple ways.¹³² Figure 64 illustrates several impacts of climate change on human health such as heat-related illness, respiratory problems caused by air pollution and increased allergens, and ecological changes that affect the transmission of vector borne diseases including Lyme disease, West Nile virus, and Eastern Equine Encephalitis virus. Climate change also contributes to waterborne illnesses and the growth of harmful algal blooms. Understanding these health impacts is a critical first step toward reducing and mitigating the effects of climate change.

Figure 64. How climate change affects your health



Source: American Public Health Association, *How Climate Change Affects Your Health*. Retrieved 12/16/2025
<https://www.apha.org/news-and-media/multimedia/infographics/how-climate-change-affects-your-health>.

Air Quality

Exposure to air pollution can have a considerable impact on human health. Public health concerns associated with high levels of air pollution exposure include increased risks of cancer, cardiovascular disease, respiratory illnesses, diabetes mellitus, obesity, and reproductive, neurological, and immune system disorders.¹³³ Air pollution results from human activities such as vehicle exhaust, fossil fuel combustion, and

¹³² CDC, Effects of Climate Change on Health. Retrieved 12/16/2025, from <https://www.cdc.gov/climate-health/php/effects/index.html>.

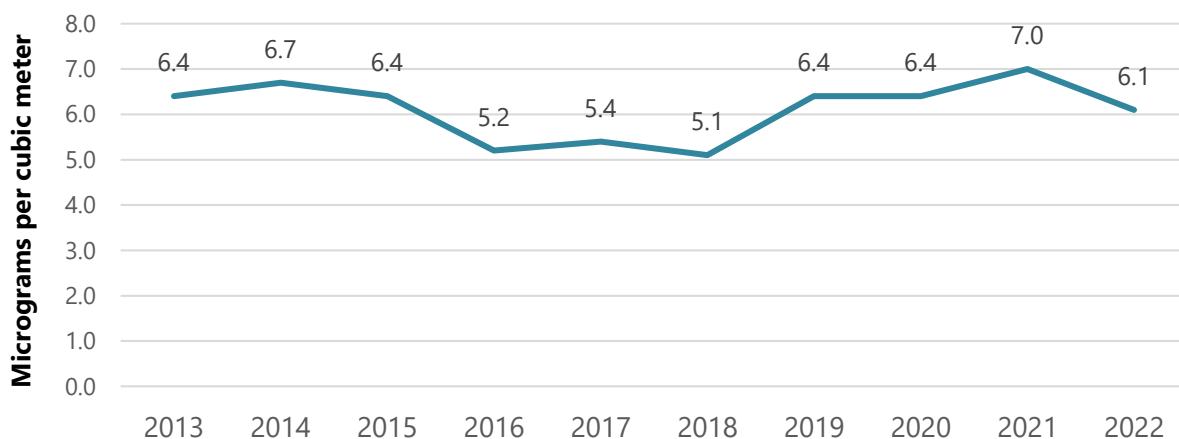
¹³³ National Institute of Environmental Health Sciences, Air Pollution and Your Health. Retrieved 12/16/2025, from <https://www.niehs.nih.gov/health/topics/agents/air-pollution>.

emissions from chemical production; however, pollutants can also originate from natural sources, including smoke from wildfires.

The concentration of particulate matter (PM) in the air is one measure for air pollution. PM is a mixture of solid particles and liquid droplets in the air. Some particles such as dust, dirt, soot, or smoke, may be large enough to see with the naked eye, while other particles may only be seen using a microscope. Particulate matter is categorized by its size in micrometers. PM₁₀ includes particles 10 micrometers or smaller such as dust, pollen, and mold can get into the bloodstream by entering deep into the lungs. PM_{2.5} consists of particles 2.5 micrometers or smaller and causes the greatest health risk due to its fine size including combustion particles, organic compounds, and metals.¹³⁴

Exposure to particulate matter harms health especially for people with heart or lung disease, children, older adults, and disadvantaged communities, causing premature death, heart and lung problems, and breathing difficulties, while also damaging ecosystems through pollution, crop and forest harm, reduced water and soil quality, and acid rain.¹³⁵ In Onondaga County, the current annual average concentration of fine particulate matter (PM_{2.5}) is 7.8 µg/m³,¹³⁶ which meets the National Ambient Air Quality Standard of 9µg/m³.¹³⁷ Onondaga County's average annual concentration of fine particulate matter is displayed in Figure 65.

Figure 65. Annual average concentration of fine particulate matter (PM_{2.5}), Onondaga County, 2013-2022



Source: CDC National Environmental Public Health Tracking Network, Retrieved 12/4/2025 from <https://ephtracking.cdc.gov/DataExplorer>

¹³⁴ U.S. Environmental Protection Agency, Particulate Matter (PM) Basics, 2025. Retrieved 12/16/2025 from <https://www.epa.gov/pm-pollution/particulate-matter-pm-basics>.

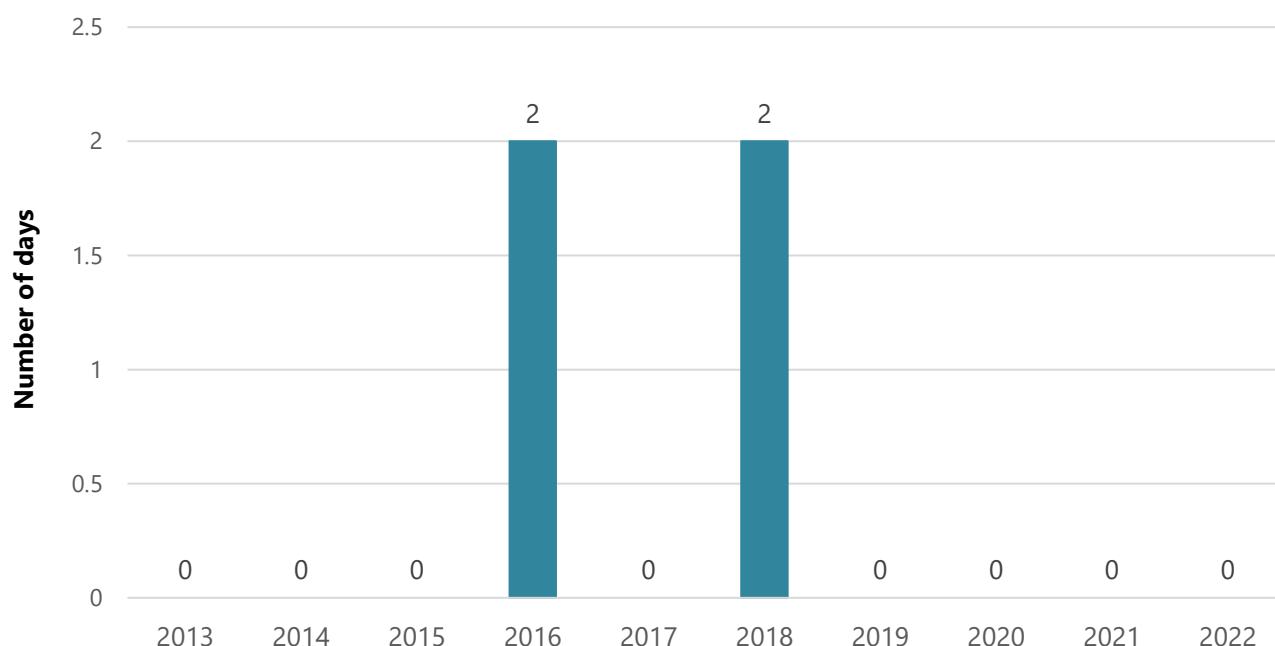
¹³⁵ U.S. Environmental Protection Agency, Health and Environmental Effects of Particulate Matter (PM), 2025. Retrieved 12/17/2025 from <https://www.epa.gov/pm-pollution/health-and-environmental-effects-particulate-matter-pm>.

¹³⁶ U.S. Environmental Protection Agency, Air Quality - Cities and Counties, 2023. Retrieved 12/17/2025, from [Air Quality - Cities and Counties | US EPA](https://www.epa.gov/cities-and-counties).

¹³⁷ U.S. Environmental Protection Agency, National Ambient Air Quality Standards (NAAQS) for PM, 2025. Retrieved 12/16/2025 from [National Ambient Air Quality Standards \(NAAQS\) for PM | US EPA](https://www.epa.gov/national-ambient-air-quality-standards-naaqs-pm).

Ground level ozone is a harmful air pollutant that contributes to what is referred to as smog or haze and is more likely to form during summer months. High ozone levels can occur in both rural and urban areas. Because ozone is inhaled, the respiratory tract can be damaged, leading to the onset of respiratory symptoms, reduced lung function, and airway inflammation. Individuals with asthma and other pre-existing chronic respiratory diseases are at a greater risk for hospitalization and mortality from ozone exposure, as their symptoms may be worsened.¹³⁸ The trend for the number of days in Onondaga County where ozone concentration was above National Ambient Air Quality Standards is depicted in Figure 66.

Figure 66. Number of days with ozone concentration above National Ambient Air Quality Standard, Onondaga County, 2013-2022



Source: CDC National Environmental Public Health Tracking Network, Retrieved 12/4/2025, from <https://ephtracking.cdc.gov/DataExplorer>.

Water Quality

Water is a vital community resource for both drinking and recreation. Clean and safe drinking water is essential to sustain human life, while recreational activities such as swimming promote healthy lifestyles. The OCHD provides regulatory oversight of public water systems in the county. Major public water suppliers include the Onondaga County Water Authority, City of Syracuse Water Department, and several town and village systems. Skaneateles Lake, Lake Ontario, and Otisco Lake are the primary sources of water for this

¹³⁸ U.S. Environmental Protection Agency, Course Outline and Key Points - Ozone, 2025. Retrieved 12/17/2025, from <https://www.epa.gov/ozone-pollution-and-your-patients-health/course-outline-and-key-points-ozone>.

county. Suppliers are required to routinely test the water for a variety of contaminants and results are made available to the public. If disease-causing pathogens are identified in the water, a Boil Water Order may be issued to inform residents that their water must be boiled before use until safety levels are restored.

Both drinking water and recreational uses of Skaneateles Lake can be impacted by harmful algae blooms (HABs). Throughout the summer and fall season, the lake is monitored for HABs and sampling results are posted on the OCHD website. Although only low levels of toxins have been detected in untreated water, a plan is in place to notify the public if there is any potential for toxins to reach residential drinking water taps.

Throughout the summer, public beaches are regularly inspected for safety and water quality. Bacterial contamination, such as E. coli, is monitored through routine testing. Beaches are closed when bacteria levels are high or harmful algal blooms (HABs) are detected to protect public health and safety.

Food Safety

Foodborne illness is a common but preventable public health issue. As estimated by the CDC, 1 in 6 Americans get sick each year from contaminated food or beverages.¹³⁹ Symptoms can include vomiting, diarrhea, and fever, and in rare cases, infection can be fatal. Contamination often occurs when food is improperly handled at home or in restaurants, allowing bacteria, viruses, or parasites to thrive. Foodborne outbreaks can be minimized by practicing safe food handling, such as washing hands and surfaces, preventing cross-contamination, cooking foods to proper temperatures, and promptly refrigerating perishable items.

Lead Exposure

Lead exposure is preventable, but children and pregnant women are particularly vulnerable to its harmful effects. In children, lead exposure can negatively impact physical growth and cognitive development. Common sources of exposure include chipping or peeling lead-based paint, especially in homes built before 1978 (when lead paint was banned in the U.S.). Older, poorly maintained homes are at higher risk for deteriorating paint. Other sources include lead-containing water pipes, certain consumer products such as dishware, toys, and jewelry, as well as occupational or hobby-related activities involving lead, such as stained glass work.¹⁴⁰

¹³⁹ Healthy People 2030, Foodborne Illness. Retrieved 12/17/2025 <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/foodborne-illness>.

¹⁴⁰ U.S. Environmental Protection Agency, Learn about Lead, 2025. Retrieved 12/17/2025 from <https://www.epa.gov/lead/protect-your-family-sources-lead>.

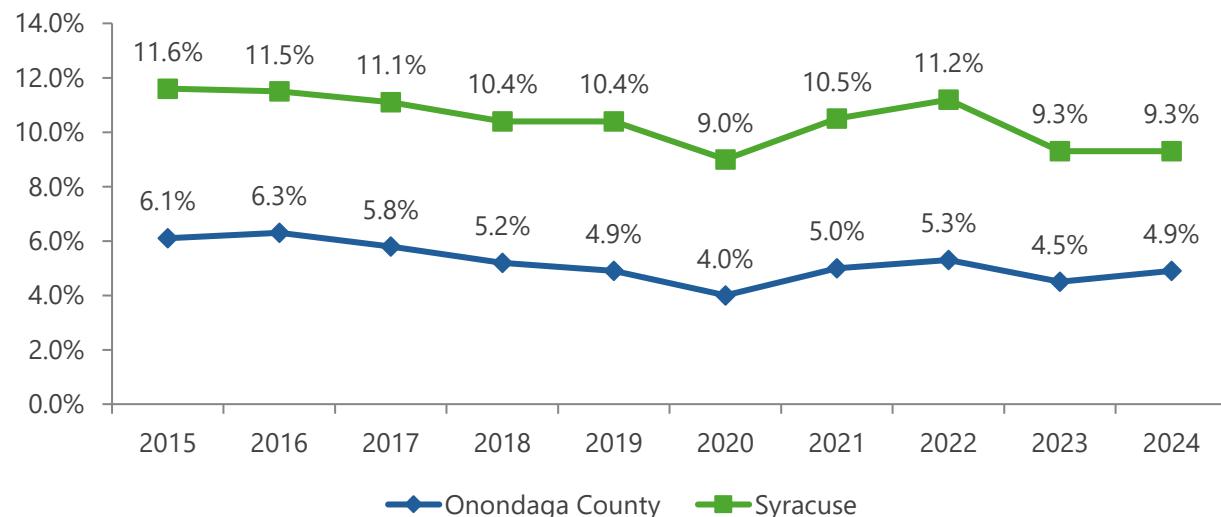
The Save the Rain Program

The Save the Rain Program is an award-winning initiative to improve the water quality of Onondaga Lake and its tributaries. The program implements comprehensive stormwater management projects including tree planting, distributing rain barrels to residents, and improving the sewer systems.

Lead in drinking water, while rarely the sole source of lead poisoning, can increase a person's total lead exposure, especially for young children. Older homes may have lead in plumbing like water service lines, pipes, solder, and plumbing fixtures. Water may become contaminated with lead as it passes through lead pipes or if it sits overnight in a home's plumbing system. The EPA passed the Lead and Copper Rule Improvements (LCRI) regulation in 2024, which requires water suppliers to identify and replace lead service lines within 10 years. As part of the regulation, additional funding is being allocated to states and communities to support lead pipe replacement and inventory projects. The City of Syracuse Water Department has begun mapping the locations of lead service lines throughout their service area. A citywide inventory of water service lines has been created and catalogues the materials used at each property. The City is working to replace all lead service lines. A phased approach will be communicated to City residents, providing timelines on when residents can expect their service line to be replaced.

The only method to detect whether a child has been exposed to lead is through blood lead level testing. In New York State, doctors are required to test all children for lead poisoning at ages 1 and 2 years. Further testing and monitoring is necessary when blood levels are 5 micrograms per deciliter (5 μ g/dL) or greater. Figure 67 displays the percentage of tested children with blood lead levels of 5 μ g/dL or greater in Onondaga County and Syracuse from 2015-2024. The percentage of children with blood lead levels of 5 μ g/dL or greater has declined for both Onondaga County and Syracuse over the past decade, however Syracuse continues to have rates that are approximately twice as high as the county overall. Within Syracuse, blood lead levels of 5 μ g/dL or higher vary by census tract, with the highest percentages observed in areas south of downtown and in the northern part of the city.¹⁴¹

Figure 67. Percentage of tested children with elevated blood lead levels, Onondaga County and Syracuse, 2015-2024



Source: OCHD Division of Community Health, Lead Poisoning Prevention Program. Retrieved 12/17/2025 from <http://www.ongov.net/health/lead/data.html>. Note: Onondaga County is inclusive of Syracuse. Data are preliminary.

¹⁴¹ OCHD Lead Poisoning Prevention Program. Retrieved 12/17/2025 from <https://onondaga.gov/health-lead/>. Note, data are provisional.

Healthy and Safe Environments: Community Assets and Resources

Lead Poisoning Prevention:

- The [Lead Hazard Reduction \(LHG\) Program](#) administered by Onondaga County Community Development works to reduce lead paint hazards throughout the county in privately owned residential structures and some rental units occupied by tenants. Funding is provided to eligible participants to repair lead paint hazards including window and door replacement, exterior siding, and porch work.
- The [OCHD Lead Poisoning Prevention Program](#) works to prevent lead exposure through several initiatives including testing children for elevated blood lead levels, providing contractor recruitment and training on how to use lead safe work practices in homes where lead-based paint may be distributed, community education around preventing lead exposure, and informing residents of lead home repair resources.
- Onondaga County, in partnership with [Home HeadQuarters \(HHQ\)](#) and the [Central New York Community Foundation](#), uses grant funding to replace windows and doors of rental properties in high-risk zip codes within the county through the Windows and Doors program. The program is being expanded to include full remediation of lead hazards in homes identified by the Onondaga County Health Department as needing attention.
- The Foster Home Lead Hazard Reduction Program led by Onondaga County allocates funding for properties where Department of Children and Family Services (DCFS) and the Lead Poisoning Prevention team have inspected and identified lead hazards that are prohibiting foster services from being provided. Similar protocol will be followed to that of the LHG grant to remediate the hazards, free of charge, for the residents.
- [LeadSafeCNY](#), an initiative of the Central New York Community Foundation, works to collectively prevent childhood lead poisoning. The LeadSafeCNY Coalition consists of government and community partners as well as community members.

Healthy Homes:

- The [Onondaga County Healthy Neighborhoods Program](#) aims to reduce illnesses and injuries related to housing conditions. The HNP team offers free home safety checks in Syracuse, addressing indoor air quality, lead hazards, fire risks, fall prevention, pest control, and asthma education. Safety checks also provide residents with free supplies, including cleaning products, smoke detectors, and carbon monoxide detectors.

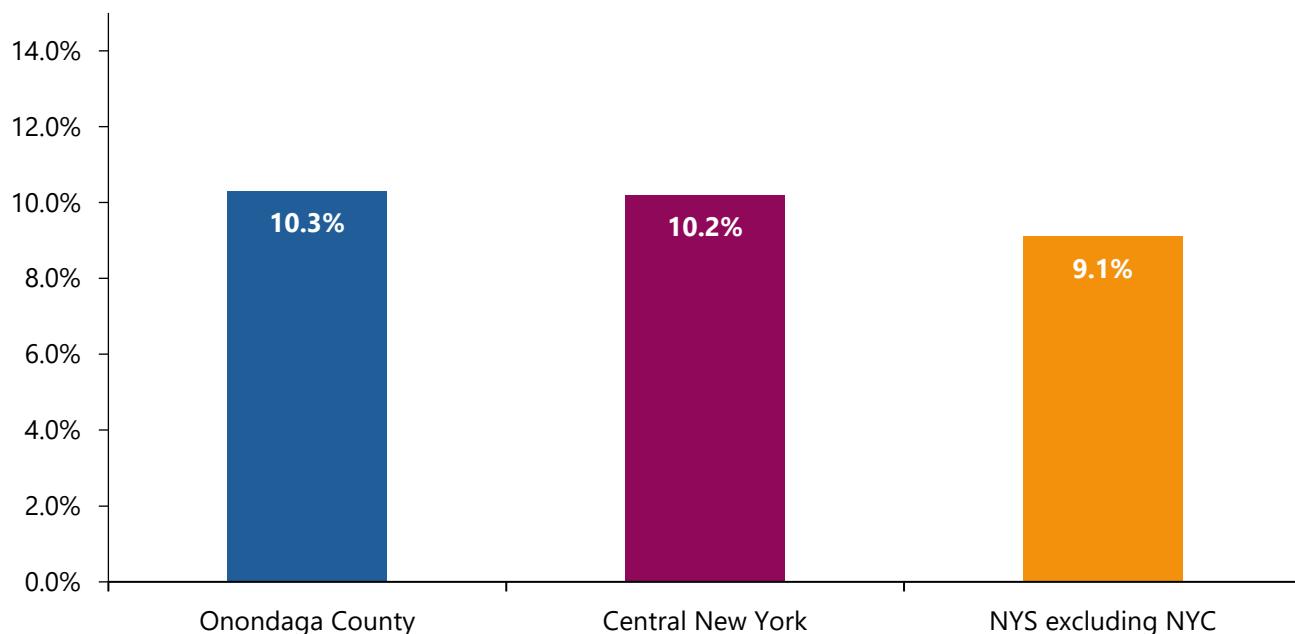
Healthy Women, Infants, and Children

Protecting the health of women, infants and children is essential in supporting the current and future health of the community. The section below provides a summary containing several health indicators these populations.

Family Planning and Natality

In 2024, there were approximately 4,300 live births to Onondaga County residents, with approximately 1,500 of those to Syracuse residents.¹⁴² As seen in Figure 68 below, the percentage of births to women aged 25 and older without a high school education is similar for Onondaga County (10.3%) and CNY (10.2%) with the lowest percentage in NYS excluding NYC (9.1%).¹⁴³

Figure 68. Percentage of births to women aged 25 years and older without a high school education, Onondaga County, Central New York, and NYS excluding NYC, 2020-2022



Source: NYS Community Health Indicator Reports. Retrieved 12/4/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

Onondaga County's teen pregnancy rate (aged less than 18 years) is 3.9 per 1,000 females which is higher than the rate for NYS excluding NYC (3.0 per 1,000).¹⁴⁴ This measure includes all pregnancy outcomes, including live births, induced terminations, and all fetal deaths. The teen pregnancy rate has decreased in

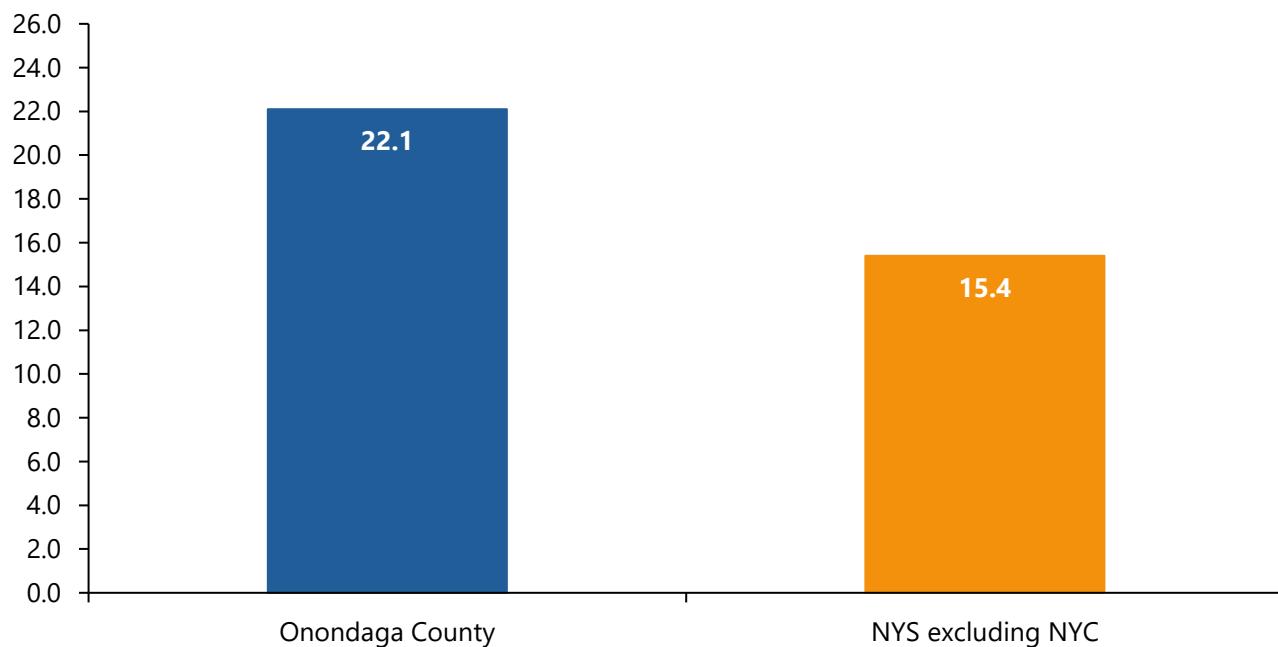
¹⁴² OCHD Division of Community Health, 2024. Data were accessed from the NYS Statewide Perinatal Data System. Note: Data are provisional.

¹⁴³ NYS Community Health Indicator Reports. Retrieved 2/24/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

¹⁴⁴ NYS Community Health Indicator Reports. Retrieved 12/15/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

recent years, though disparities by race and ethnicity remain. In Onondaga County, non-Hispanic Black populations (10.5 per 1,000) and Hispanic populations (7.2 per 1,000) experience higher rates of teen pregnancy compared with non-Hispanic White populations (1.4 per 1,000).¹⁴⁵ Onondaga County's teen pregnancy rate (females aged 15-19 years) is higher than the rate for NYS excluding NYC (Figure 69).

Figure 69. Teenage pregnancies (aged 15-19 year) per 1,000 female population, Onondaga County and NYS excluding NYC, 2020-2022



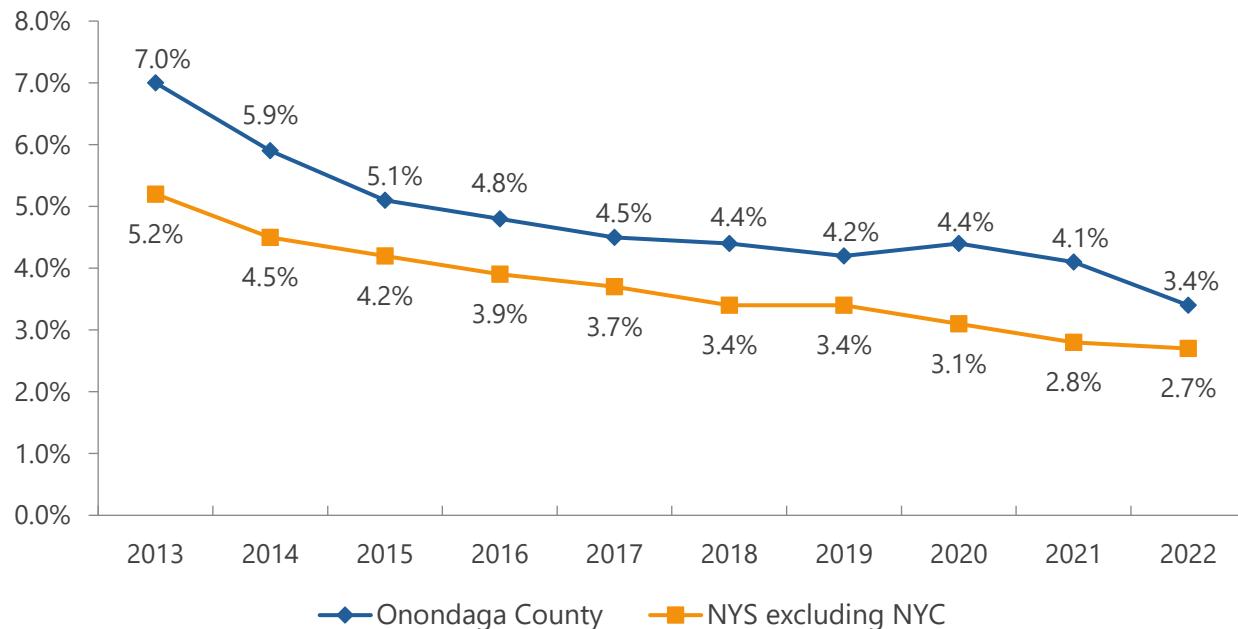
Source: NYS Community Health Indicator Reports. Retrieved 12/4/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

With respect to births, teens aged 15-19 years accounted for 3.4% of all births in the County in 2022.¹⁴⁶ This rate has decreased substantially in the last decade however, Onondaga County's rate continues to exceed that of NYS excluding NYC (Figure 70).

¹⁴⁵ NYS County Health Indicators by Race/Ethnicity, 2020-2022. Retrieved 2/24/2025 from <https://www.health.ny.gov/statistics/community/minority/county/index.htm>.

¹⁴⁶ NYS Community Health Indicator Reports. Retrieved 2/24/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

Figure 70. The percentage of total births that were to females aged 15-19 years, Single-year, Onondaga County and NYS excluding NYC, 2013-2022



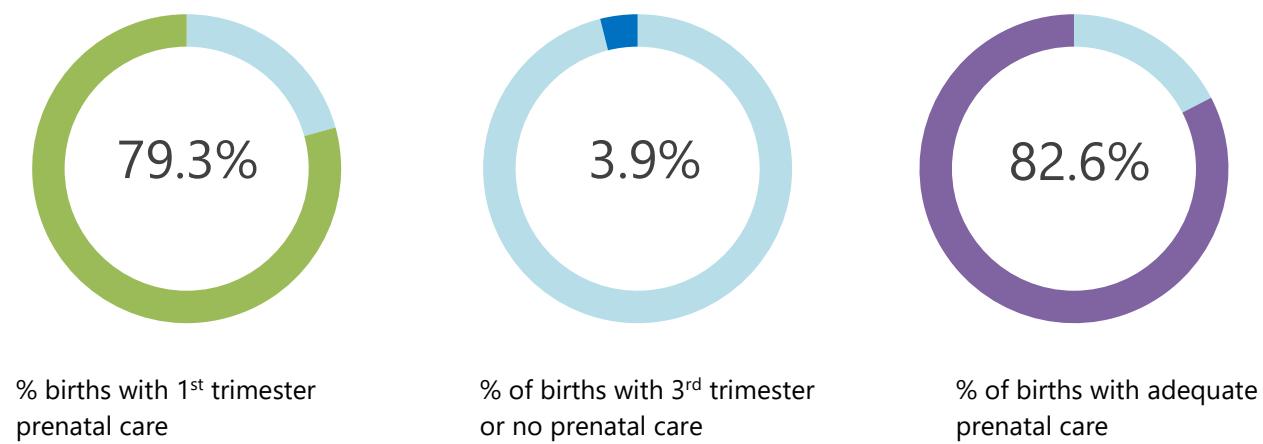
Source: NYS Community Health Indicator Reports. Retrieved 12/4/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

Prenatal Care

To support a healthy pregnancy, access to early and adequate prenatal care is essential. In Onondaga County, 79.3% of mothers entered prenatal care in their first trimester compared to 77.5% in NYS excluding NYC.¹⁴⁷ The percentage of mothers with late (3rd trimester) or no prenatal care in Onondaga County (3.9%) is also lower than NYS excluding NYC (4.6%). Additionally, mothers in Onondaga County (82.6%) had higher rates of adequate prenatal care compared to NYS excluding NYC (77.3%). Though Onondaga County has more favorable prenatal care indicators than NYS, there are still disparities in birth outcomes and infant mortality. Prenatal care indicators for Onondaga County are detailed in Figure 71.

¹⁴⁷ NYS Community Health Indicator Reports. Retrieved 2/24/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

Figure 71. Prenatal care indicators, Onondaga County, 2020-2022



Source: NYS Community Health Indicator Reports. Retrieved 12/4/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

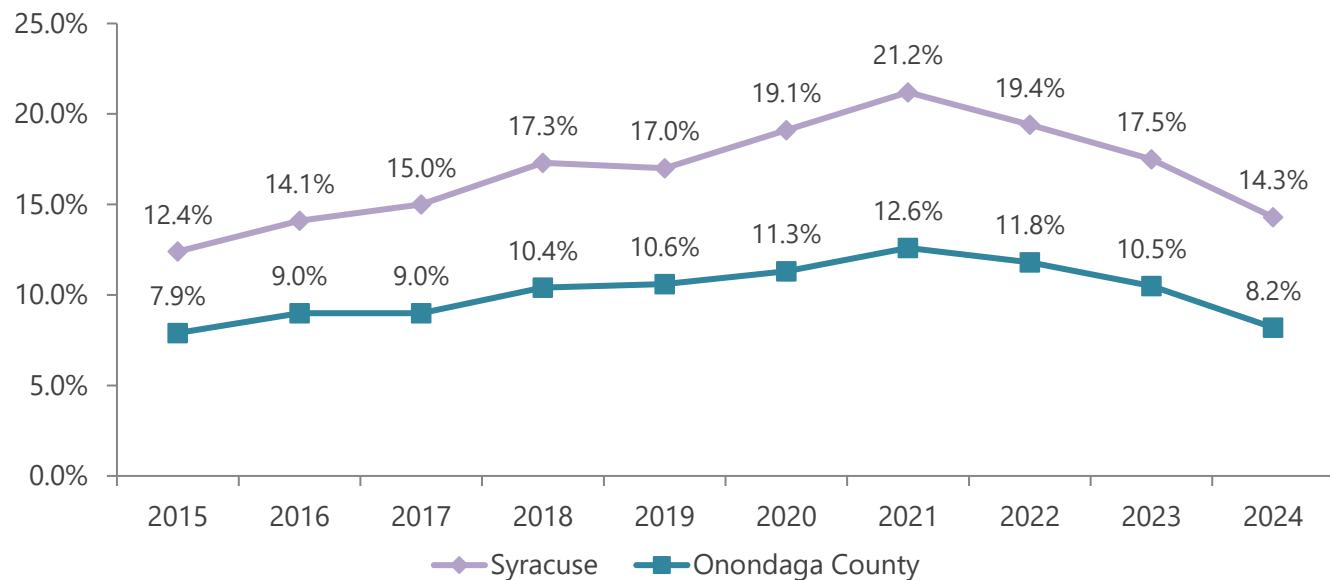
Substance Use in Pregnancy

Smoking and consuming alcohol or drugs during pregnancy can significantly impact fetal development and health. Within Onondaga County in 2024, 3.8% of individuals reported smoking during their first trimester of pregnancy, compared to 5.9% in Syracuse. Less than one percent of individuals in both Onondaga County and Syracuse report alcohol use during pregnancy.¹⁴⁸

Illegal drug use in pregnancy has become more frequent in recent years and may reflect the impact of higher rates of opioid misuse. Figure 72 depicts the percentage of women reporting illegal drug use during pregnancy from 2015 to 2024 in Onondaga County and Syracuse. In 2024, 8.2% of women reported illegal drug use in pregnancy countywide, compared to 14.3% in Syracuse.¹⁴⁸

¹⁴⁸ OCHD Division of Community Health, 2024. Data were accessed from the NYS Statewide Perinatal Data System. Note: Data are provisional.

Figure 72. Self-reported illegal drug use in pregnancy, Syracuse and Onondaga County, 2015-2024



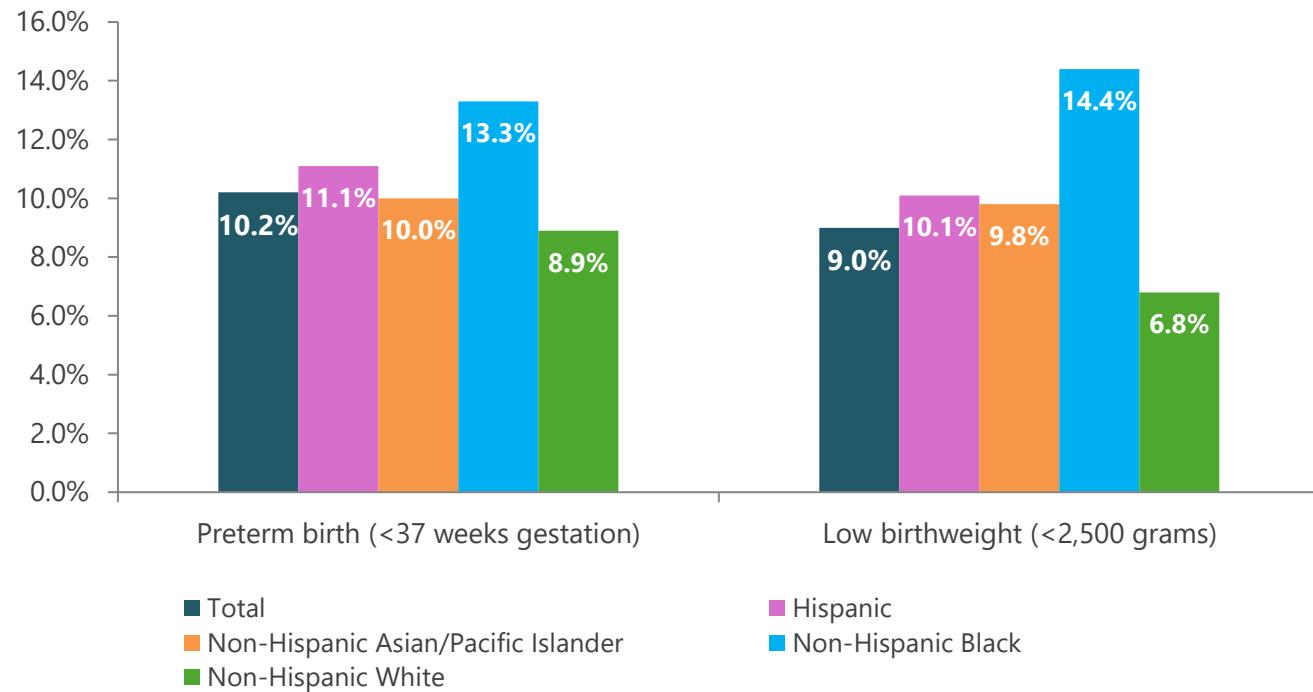
Source: NYS Statewide Perinatal Data System, accessed by OCHD Division of Community Health. Notes: Onondaga County is inclusive of Syracuse. Data are provisional.

Birth Outcomes

Onondaga County continues to experience racial disparities in birth outcomes, including preterm births and low birth weight. Preterm births and low birth weight births by race and ethnicity in Onondaga County are depicted in Figure 73. Notably, non-Hispanic Black County residents experience more low birth weight births than other County residents. Additionally, non-Hispanic Black residents, Hispanic residents, and non-Hispanic Asian/Pacific Islander residents experience higher preterm births than non-Hispanic White residents. Overall, Onondaga County fares worse than NYS excluding NYC for preterm births (10.2% compared to 9.5%) and low birth weight (9.0% compared to 8.0%).¹⁴⁹

¹⁴⁹ NYS Community Health Indicator Reports. Retrieved 2/24/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

Figure 73. Preterm births and low birth weight births by race and ethnicity, Onondaga County, 2020-2022



Source: NYSDOH County Health Indicators by Race/Ethnicity (CHIRE). Retrieved 12/4/2025 from <https://www.health.ny.gov/statistics/community/minority/county/index.htm>.

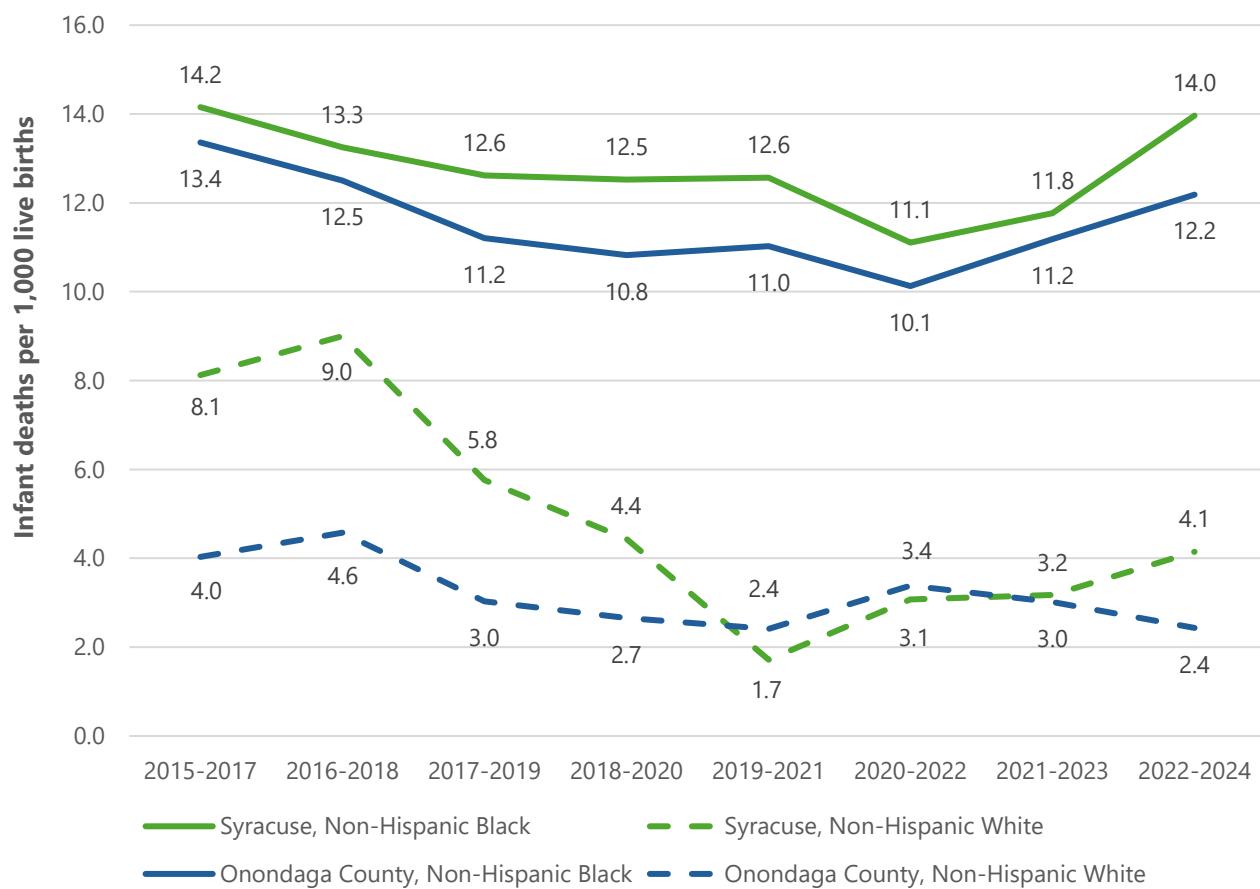
Infant Mortality

Onondaga County continues to struggle with infant mortality. The overall infant mortality rate for Onondaga County was 5.1 per 1,000 live births in 2022-2024.¹⁵⁰ This is lower than the national average of 5.6 per 1,000 live births however, significant racial and ethnic disparities in infant mortality continue to persist.¹⁵¹ The figure below depicts trends in infant mortality for non-Hispanic Black and non-Hispanic White infants in Onondaga County and Syracuse. Infant mortality rates for non-Hispanic Black infants continue to be higher than rates for non-Hispanic White infants demonstrating a continued need for efforts to prevent infant mortality among non-Hispanic Black infants.

¹⁵⁰ NYS Statewide Perinatal Data System (accessed by OCHD) and OCHD, Office of Vital Statistics. Notes: A 3-year average is used to account for small number of deaths and fluctuations in individual years. Data are provisional.

¹⁵¹ CDC, National Vital Statistics System, Vital Statistics Rapid Release, Report No. 33, 2023. Retrieved 3/4/2025, from <https://www.cdc.gov/nchs/data/vsrr/vsrr033.pdf>.

Figure 74. Infant Mortality Rate, 3-Year Rolling Average, By Race and Ethnicity, Onondaga County and Syracuse, 2015-2024



Sources: NYS Statewide Perinatal Data System (accessed by OCHD) and OCHD, Office of Vital Statistics. Notes: Onondaga County data are inclusive of Syracuse. A 3-year rolling average is used to account for small number of deaths and fluctuations in individual years. Data are provisional.

Breastfeeding, Chestfeeding, and Lactation

Breast milk (human milk) provides all the nutrients needed for many infants and helps to reduce the risk of many diseases among infants. Breast/chestfeeding also lowers the risk of certain diseases in birthing parents.¹⁵² In Onondaga County, 77.0% of infants are fed any breast milk while in the delivery hospital.¹⁵³ Infants who are breast feeding and using formula as well as those exclusively breastfeeding are included. The percentage of infants exclusively breastfed while in the delivery hospital are similar in Onondaga County (60.2%) and CNY (57.4%) with NYS excluding NYC faring worse with 46.7%.¹⁵⁴ Within Onondaga County, exclusive breastfeeding in the delivery hospital varies by race and ethnicity (Figure 75). The percent of non-

¹⁵² NYSDOH, Breast/chestfeeding Promotion, Protection, and Support, 2023. Retrieved 12/12/2025, from <https://www.health.ny.gov/community/pregnancy/breastfeeding/>.

¹⁵³ NYS Community Health Indicator Reports. Retrieved 3/4/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

¹⁵⁴ NYS Prevention Agenda Dashboard- County Level. Retrieved 2/24/2025.

Hispanic Black infants who are fed exclusively breast milk in the delivery hospital is lower than the percent for both Hispanic infants and the total among all infants.

Figure 75. Percentage of infants fed exclusively breast milk in delivery hospital by race and ethnicity, Onondaga County, 2022



Source: [NYS Prevention Agenda Dashboard- County Level](#). Retrieved 12/4/2025.

Healthy Women, Infants, & Children: Community Assets and Resources

- The [Perinatal and Infant Community Health Collaborative \(PICH\)](#) of Onondaga County, a NYS initiative to support community-based approaches to improve maternal and infant health outcomes.
- The Onondaga County [Child Fatality Review Team](#) works to reduce preventable child fatalities. Unexpected deaths of children and adolescents are investigated by a multidisciplinary team composed of several county entities, law enforcement, emergency medical services, and child advocates.
- The [Early Childhood Alliance \(ECA\)](#) leads several evidence-based initiatives grounded in community voice to promote healthy communities and families and advance early child development.
- [Central New York Breastfeeding Connection](#) is a regional coalition dedicated to promoting and supporting breastfeeding, chestfeeding, and lactation. The coalition consists of Lactation Consultants, Lactation Counselors, Physicians, Nurses, Dietitians, La Leche League members, Doulas, Educators, and other healthcare and public health workers.

Healthy Women, Infants, & Children: Community Assets and Resources

- Breastfeeding, Chestfeeding, and Lactation Friendly New York (BFFNY) is a program funded by the NYS Department of Health that helps to establish and support communities as places where it is easier to start and continue chest/breastfeeding, especially in low-income and racially and ethnically diverse communities.
- The Upstate University Hospital Breastfeeding (Lactation) Medicine Program offers evaluation and support for families experiencing breastfeeding, chestfeeding, and lactation difficulties.
- A coordinated home visiting system supported by multiple programs and agencies, including the OCHD, REACH CNY, Syracuse Community Connections and Catholic Charities of Onondaga County. Home visitors provide education, outreach and referrals to support healthy children and families.
- The Community Consortium is an integral part to the Syracuse Healthy Start program. The mission of the consortium is to eliminate health inequities and empower the community through outreach, education, and advocacy. The consortium is a group comprised of residents, community-based organizations, healthcare and government workers and others.
- Several clinics offer prenatal, post-partum, well woman, and pediatric care to uninsured and Medicaid-eligible families, including Syracuse Community Health, Upstate Health Care Center's Women's Health Services and the Regional Perinatal Center; the Upstate Midwifery Program at Community Campus; St. Joseph's Primary Care Center – Main, St. Joseph's Primary Care Center – West, and St. Joseph's Primary Care Family Medicine Center.
- Three delivery hospitals including Crouse Health (Regional Perinatal Center), St. Joseph's Hospital Health Center (Level 3 Perinatal Center), and Upstate University Hospital Community Campus (Level 1 Perinatal Center). St. Joseph's Hospital Health Center and Upstate University Hospital Community Campus are designated Baby-Friendly by Baby Friendly, USA.

Communicable Diseases

Communicable diseases can be transmitted in several ways; however, there are many public health strategies that can mitigate the spread and impact of communicable diseases. These include vaccination, hygiene practices, public education, masking, disease investigation, partner notification, screening, treatment, and pre-exposure prophylaxis.

Vaccine Preventable Diseases

Onondaga County fares better than CNY and NYS excluding NYC for vaccine preventable disease indicators. A list of immunization indicators for Onondaga County, CNY, and NYS excluding NYC is provided in Figure 76. Onondaga County's vaccination rates for childhood immunizations, HPV, influenza (among adults aged 18+ years and 65+ years), and pneumococcal vaccinations among adults aged 65+ years exceed the rates for both CNY and NYS excluding NYC.

Figure 76. Immunization indicators, Onondaga County, CNY, and NYS excluding NYC

	Onondaga County	Central New York	NYS excluding NYC
% of children with 4:3:1:3:3:1:4 immunization series– Aged 24-35 months (2023)	84.8	79.6	69.1
% of adolescents with 3-dose HPV immunization –Aged 13 years (2023)	40.0	35.2	31.3
% of adults with an influenza immunization in the past year –Aged 18+years (2021)	55.4	51.1	44.7
% of adults with an influenza immunization in the past year –Aged 65+ years (2021)	74.5	70.6	69.2
% of adults with pneumococcal immunization– Aged 65+years (2021)	75.9	71.8	70.1

Sources: [NYS Prevention Agenda Dashboard- County Level](#); NYS Expanded BRFSS at: <https://www.health.ny.gov/statistics/brfss/expanded/>. Retrieved 12/4/2025.

Figure 77 displays incidence rates for several vaccine preventable diseases. For pneumonia/influenza hospitalizations among adults age 65+ years, Onondaga County fares better than CNY but worse than NYS excluding NYC. Onondaga County has a higher hepatitis A incidence rate (2.0 per 100,000) than NYS excluding NYC (1.1 per 100,000).¹⁵⁵

¹⁵⁵ NYS Community Health Indicator Reports. Retrieved 2/25/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

Figure 77. Vaccine preventable disease indicators, Onondaga County, CNY, and NYS excluding NYC, 2020-2022

	Onondaga County	Central New York	NYS excluding NYC
Pneumonia/influenza hospitalization rate (per 10,000) – Aged 65+years	66.5	73.1	59.8
Hepatitis A incidence (per 100,000)	2.0	3.9	1.1
Acute hepatitis B incidence (per 100,000)	0.1*	0.3*	0.2
Meningococcal incidence rate (per 100,000)	0.07*	0.03*	0.1
Mumps incidence rate (per 100,000)	0.1*	0.5	0.1
Pertussis incidence rate (per 100,000)	0.3*	1.3	1.3

Source: NYS Community Health Indicator Reports. Retrieved 12/4/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>. *Rate is unstable.

Timely Immunization

In NYS, children attending school (public, private, and religious schools), must be age-appropriately immunized to attend or remain in school.¹⁵⁶ Figure 78 displays vaccination rates for MMR and Polio in Onondaga County and NYS overall. Vaccination rates for MMR in Onondaga County (89.2%) are higher than for NYS (81.2%). Vaccination rates are also higher for polio in Onondaga County (90.3%) compared to NYS (82.7%).

Figure 78. MMR and Polio Vaccinations, Onondaga County and NYS, 2025

	Onondaga County	New York State
Children who have received 1 MMR (Measles, Mumps, Rubella) immunization by 2 years of age	89.2%	81.2%
Children that have received 3 Polio immunizations by 2 years of age	90.3%	82.7%

Source: NYSDOH, About New York State MMR Vaccination Rates. Retrieved 3/7/2025 from <https://www.health.ny.gov/diseases/communicable/measles/vaccine/>. NYSDOH, Polio Vaccination Data. Retrieved 4/24/2025 from <https://health.ny.gov/diseases/communicable/polio/data.htm>.

¹⁵⁶ NYSDOH, School Vaccination Requirements, 2025. Retrieved 12/16/2025, from https://www.health.ny.gov/prevention/immunization/schools/school_vaccines/.

Respiratory Illnesses

Respiratory viruses such as influenza (flu), COVID-19, and respiratory syncytial virus (RSV) cause illnesses in the respiratory system. These viruses cause hundreds of thousands of hospitalizations every year and thousands of deaths, especially during the fall and winter virus season.¹⁵⁷ It is recommended to stay up to date with immunizations for flu, COVID-19, and RSV to protect oneself and others and help prevent severe respiratory illnesses. Other prevention strategies include washing hands, improving airflow in homes and workplaces, masking, physical distancing, and testing to detect some respiratory viruses. Additional common respiratory viruses include adenovirus, rhinovirus/enterovirus (common cold), parainfluenza, and parvovirus B19 (fifth disease). There are also effective treatments (antiviral medications) for those who have the flu or COVID-19 and are recommended for people at a higher risk for severe illness. Certain populations at a higher risk for severe illness from respiratory viruses include older adults, young children, people with disabilities, people with weakened immune systems, and pregnant and recently pregnant women. Respiratory viruses may cause both upper and lower respiratory tract symptoms, and some can lead to serious lung infections such as pneumonia.

Sexually Transmitted Infections

High rates of sexually transmitted infections (STIs) continue to be a challenge for Onondaga County as displayed in Figure 79. There are 1,690.4 cases of chlamydia per 100,000 population of females ages 15-44 years in the County which exceeds the rates for both CNY and NYS excluding NYC.¹⁵⁸ The Onondaga County chlamydia case rate for males between the ages 15-44 years (851.6 per 100,000) also exceeds the rate for CNY and NYS excluding NYC. The chlamydia case rates over time for female and male populations ages 15-44 years are shown in Figure 80. Additionally, the highest rates of chlamydia are seen in the 20-24-year-old age group, with 3,637.2 cases per 100,000 females and 1,740.9 cases per 100,000 males.

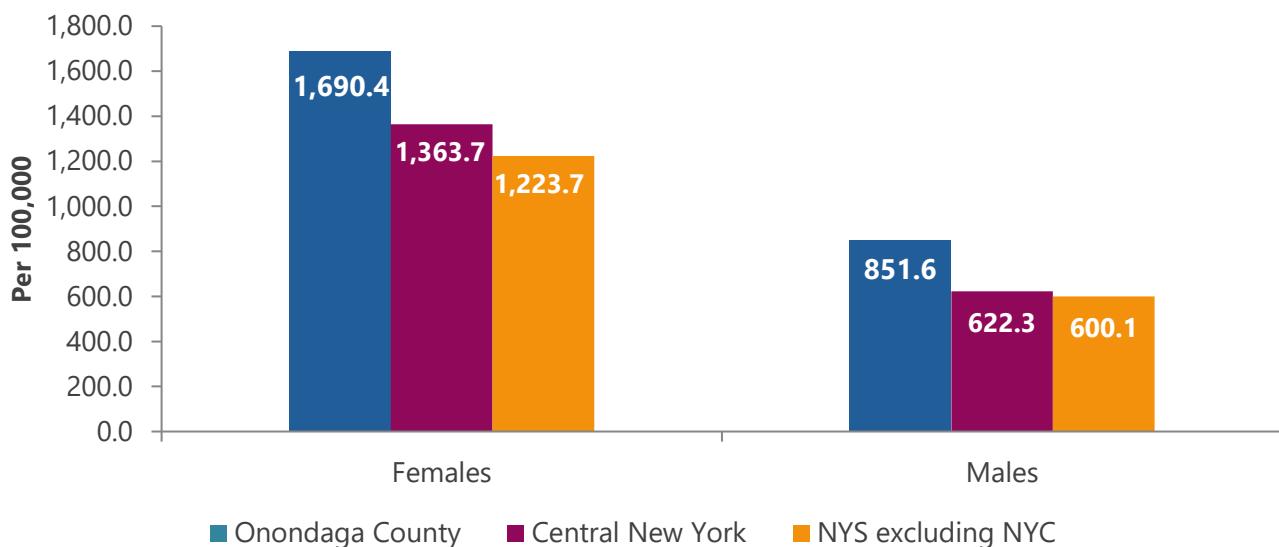
Community Assets

- The [OCHD Immunization Clinic](#) in Downtown Syracuse offers vaccination appointments Tuesday – Thursday for children between the ages of 2 months and 18 years who do not have private health insurance. In addition to the vaccinations required for school entry/attendance, the immunization clinic offers HPV vaccine. Adults 18 years and older without public or private health insurance may also make an appointment for vaccination. COVID, RSV, and Influenza vaccines are available seasonally.

¹⁵⁷ CDC, About Respiratory Illnesses, 2024. Retrieved 3/13/2025 from <https://www.cdc.gov/respiratory-viruses/about/index.html>.

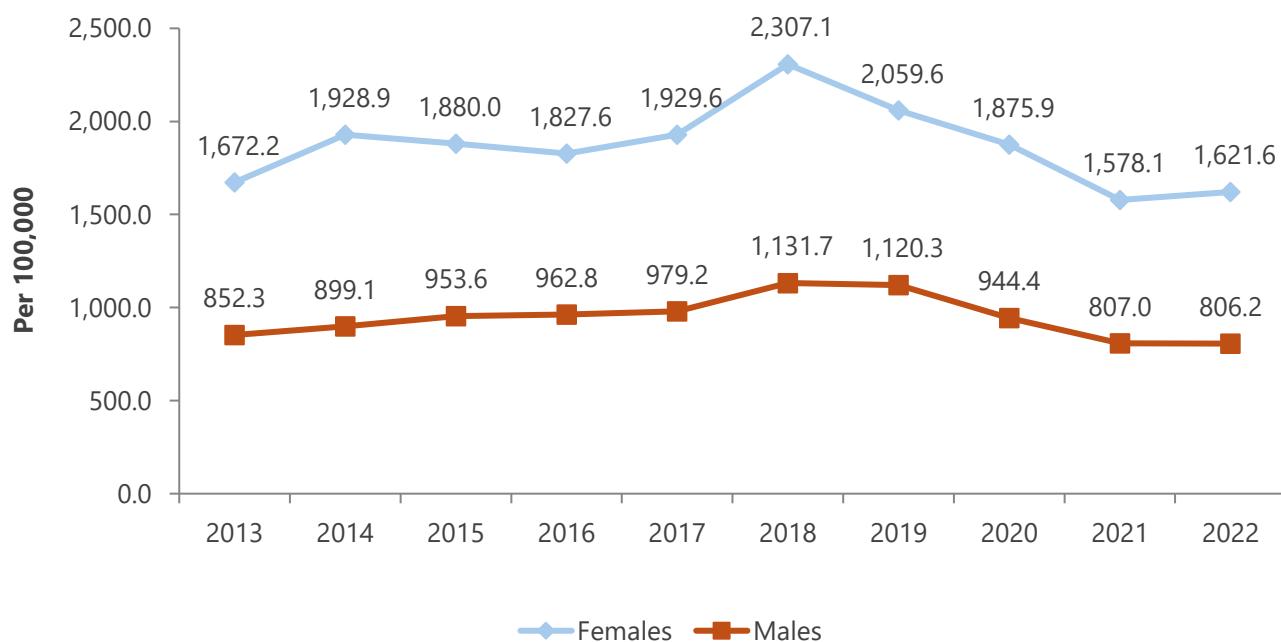
¹⁵⁸ NYS Community Health Indicator Reports. Retrieved 2/25/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

Figure 79. Chlamydia case rate per 100,000 population, ages 15-44 years, by sex, Onondaga County, CNY, and NYS excluding NYC, 2020-2022



Source: NYS Community Health Indicator Reports. Retrieved 12/4/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

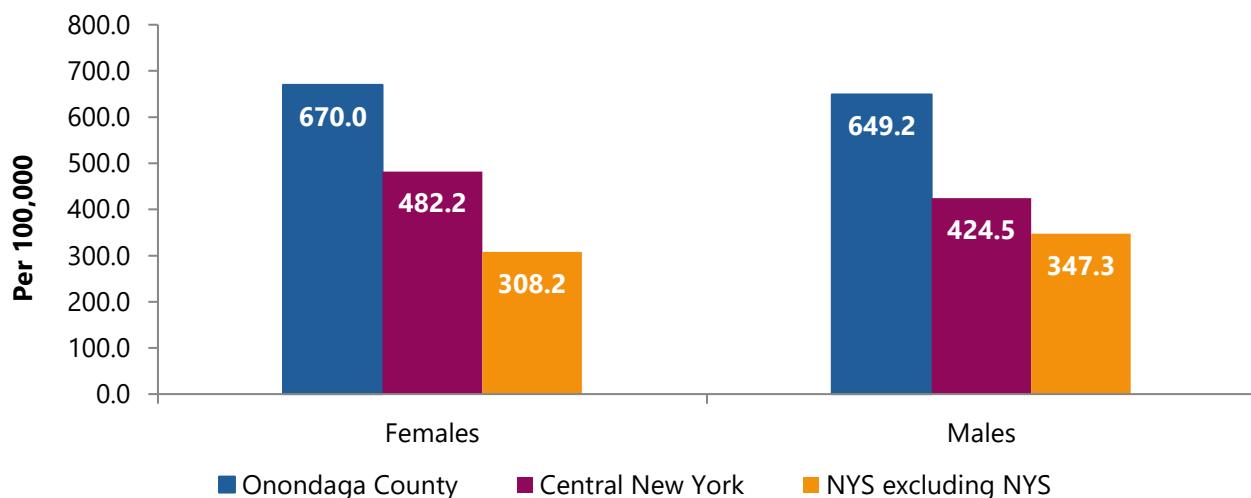
Figure 80. Chlamydia case rate per 100,000 population, ages 15-44 years, by sex, Onondaga County, 2013-2022



Source: NYS Community Health Indicator Reports. Retrieved 12/4/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

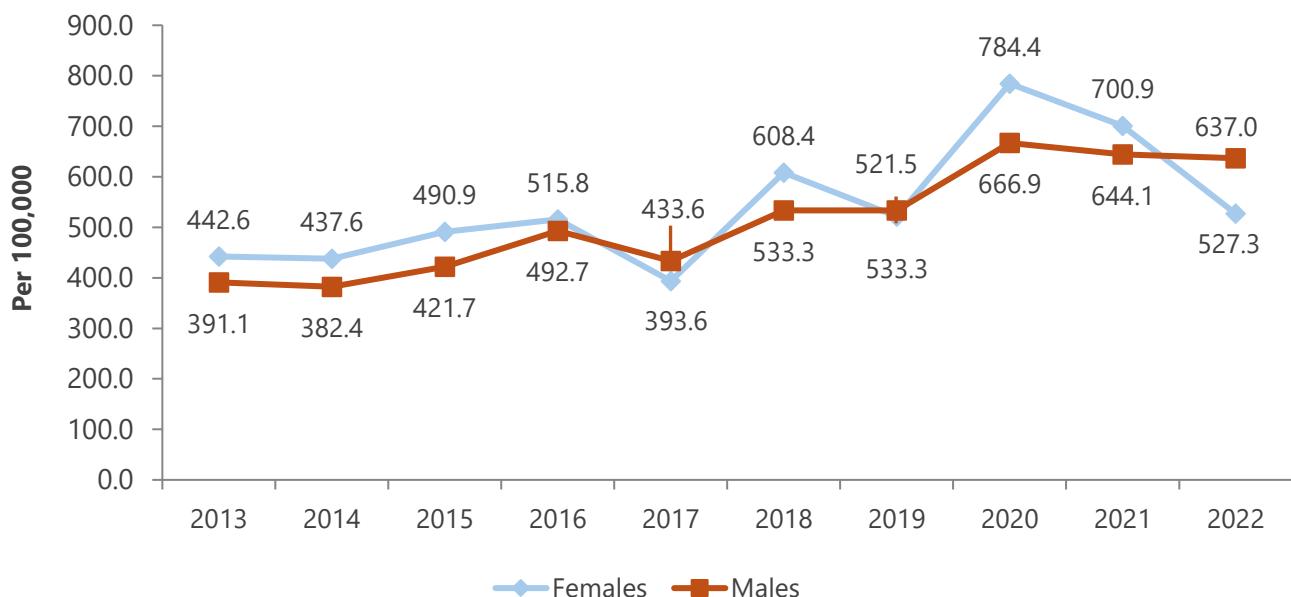
Gonorrhea case rates for Onondaga County, CNY, and NYS excluding NYC for 2020-2022 are displayed in Figure 81. Onondaga County's case rate for gonorrhea among females and males aged 15-44 years exceeds the rates for both CNY and NYS excluding NYC. Figure 82 displays trends in gonorrhea case rates among females and males from 2013 to 2022 in Onondaga County.

Figure 81. Gonorrhea case rate per 100,000 population, ages 15-44 years, by sex, Onondaga County, CNY, and NYS excluding NYC, 2020-2022



Source: NYS Community Health Indicator Reports. Retrieved 12/4/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

Figure 82. Gonorrhea case rate per 100,000 population, ages 15-44 years, by sex, Onondaga County, 2013-2022



Source: NYS Community Health Indicator Reports. Retrieved 12/4/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

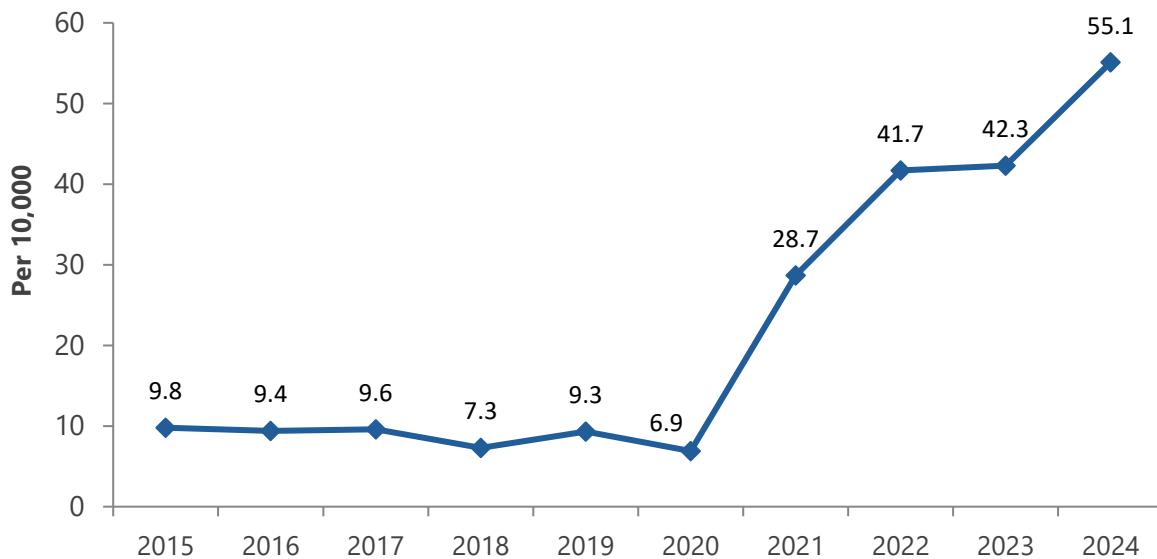
Figure 83 displays the syphilis case rates for Onondaga County and NYS excluding NYC. Syphilis case rates for males continue to be a notable challenge. The primary and secondary syphilis case rate for males in Onondaga County is 27.0 per 100,000, which is significantly higher than the rate for NYS excluding NYC (16.8 per 100,000).¹⁵⁹ Overall, the County has higher syphilis case rates than NYS excluding NYC. Figure 84 shows the syphilis case rate in Onondaga County from 2015 to 2024. There has been a considerable increase in syphilis cases especially in recent years.

Figure 83. Syphilis case rate per 100,000 population, Onondaga County and NYS excluding NYC, 2023

	Onondaga County	NYS excluding NYC
Primary and secondary syphilis case rate (per 100,000)	15.7	10.9
Primary and secondary syphilis case rate (per 100,000) – Females	4.7	4.8
Primary and secondary syphilis case rate (per 100,000) – Males	27.0	16.8
Unknown duration or late latent syphilis case rate (per 100,000)	15.2	13.0

Source: NYSDOH Sexually Transmitted Infections Surveillance Report, 2023. Retrieved 12/4/2025 from https://www.health.ny.gov/statistics/diseases/communicable/std/docs/sti_surveillance_report_2023.pdf.

Figure 84. Syphilis case rate per 100,000 population, Onondaga County, 2015-2024



Source: NYS Communicable Disease Electronic Surveillance System (CDESS), accessed by OCHD, 2015-2024. Note: Data are provisional.

¹⁵⁹ NYSDOH Sexually Transmitted Infections Surveillance Report, 2023. Retrieved 2/25/2025, from https://www.health.ny.gov/statistics/diseases/communicable/std/docs/sti_surveillance_report_2023.pdf.

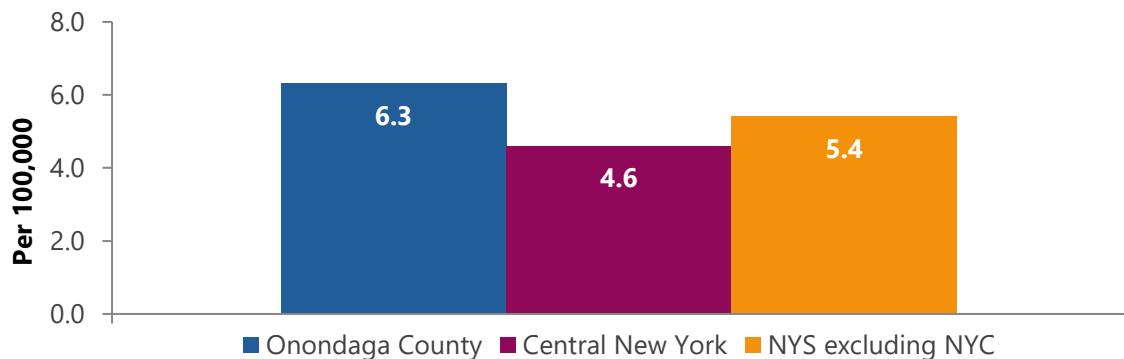
Prevention and treatment of STDs is essential for reducing the burden of disease in our community. Women and infants are especially vulnerable to the consequences of undiagnosed and untreated STDs. Infection with STDs during pregnancy can cause poor health outcomes for both the mother and infant including preterm birth, premature rupture of membranes, low birth weight and still birth. Some STDs, like chlamydia and gonorrhea can be asymptomatic and can result in pelvic inflammatory disease which increases risk for infertility and ectopic pregnancy if not treated.¹⁶⁰ There is an increased risk of congenital syphilis if the mother is infected with syphilis and does not receive treatment. Congenital syphilis can result in major health impacts including miscarriage, preterm birth, and stillbirth. Screening and early treatment are critical prevention methods for congenital syphilis. In 2024, there were three reported cases of congenital syphilis in Onondaga County.¹⁶¹

Testing for STDs is an important tool for increasing treatment and reducing transmission. In Onondaga County, among sexually active females aged 16- 24 years enrolled in Medicaid Managed Care, 67.3% have had at least one chlamydia test.¹⁶² This percentage is higher than CNY (59.8%) and NYS excluding NYC (65.6%). Other tools to reduce STD transmission and increase treatment include sexual health education and expedited partner therapy.

HIV and AIDS

The newly diagnosed case rate for HIV in Onondaga County (6.3 per 100,000) exceeds the rate for CNY (4.6 per 100,000) and NYS excluding NYC (5.4 per 100,000).¹⁶³

Figure 85. Newly diagnosed HIV case rate per 100,000 population, Onondaga County, CNY, NYS Excluding NYC, 2020-2022



Source: NYS Community Health Indicator Reports. Retrieved 12/4/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>. Note: Age-adjusted case rate.

¹⁶⁰ CDC, About STIs and Pregnancy, 2025. Retrieved 12/11/2025, from <https://www.cdc.gov/sti/about/about-stis-and-pregnancy.html>.

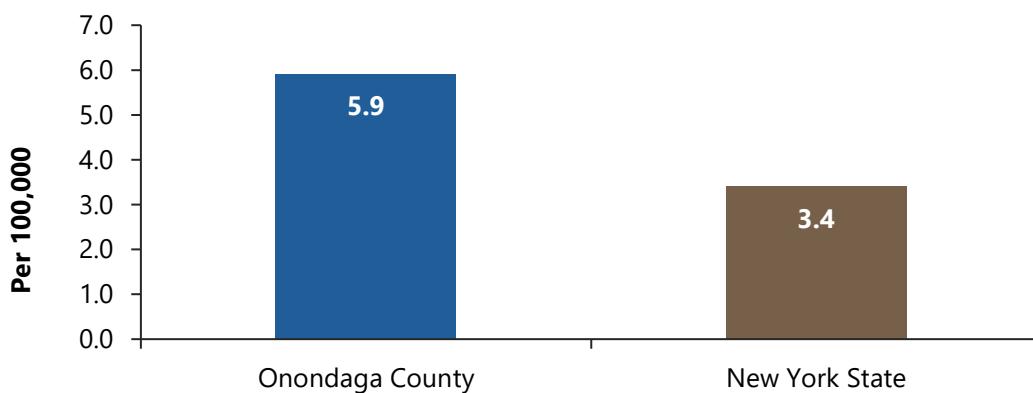
¹⁶¹ NYS Communicable Disease Electronic Surveillance System (CDESS), accessed by OCHD. Note: Data are provisional.

¹⁶² NYS Community Health Indicator Reports. Retrieved 3/4/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

¹⁶³ NYS Community Health Indicator Reports. Retrieved 3/4/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>.

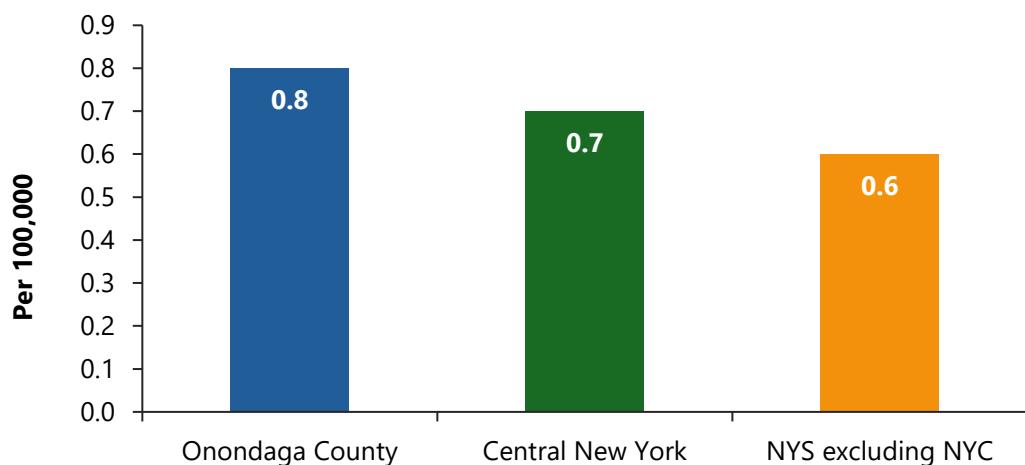
The newly diagnosed AIDS case rate is higher in Onondaga County (5.9 per 100,000) than for NYS (3.4 per 100,000) as shown in Figure 85. Figure 86 displays the AIDS mortality rate for Onondaga County (0.8 per 100,000) is higher than CNY (0.7 per 100,000) and NYS excluding NYC (0.6 per 100,000).¹⁶⁴

Figure 86. Newly diagnosed AIDS case rate per 100,000 population, Onondaga County and NYS, 2024



Sources: NYS HIV Surveillance System, 2024. Retrieved 12/4/2025 from https://www.health.ny.gov/diseases/aids/general/statistics/annual/2024/2024_annual_surveillance_report.pdf.

Figure 87. AIDS mortality rate per 100,000 population, Onondaga County, CNY, and NYS excluding NYC, 2020-2022



Sources: New York State Community Health Indicator Reports. Retrieved 12/4/2025 from <https://www.health.ny.gov/statistics/chac/indicators/>. Note: Age-adjusted mortality rate.

¹⁶⁴ New York State Community Health Indicator Reports. Retrieved 3/4/2025, from <https://www.health.ny.gov/statistics/chac/indicators/>. Note: Age-adjusted case rate.

Additional Community Assets and Resources

STI Testing and Treatment:

- The [OCHD Sexual Wellness Center](#) operates a walk-in clinic Monday-Friday that offers STI testing, diagnosis, and treatment. Other sexual health services are also available at the Sexual Wellness Center by appointment.
- HIV testing and treatment is provided through several agencies in Onondaga County, including the [OCHD Sexual Wellness Center](#) (in collaboration with the NYSDOH Regional Office), [Upstate Medical University's Inclusive Health Services](#), and [ACR Health](#). Testing and referral for treatment is offered by [Planned Parenthood](#), [Syracuse Community Health](#), and many primary care providers.

Infection Control and Prevention

- The [OCHD Tuberculosis \(TB\) Control Program](#) provides testing, diagnosis and treatment of latent and active tuberculosis cases in Onondaga County.
- The OCHD, the [NYSDOH](#), local laboratories, medical providers and hospitals work together to identify and investigate cases of reportable communicable disease, including healthcare-associated infections.
- Infection control programs operate at all area hospitals to help prevent infections from spreading within healthcare facilities. The OCHD partners with all area hospitals to receive regular updates on current infectious disease issues.

Community Engagement

Community Engagement

In 2025, the OCHD and Hospital Steering Committee made up of representation from each of the participating local hospitals gathered direct feedback from Onondaga County residents and local community-based organizations (CBOs) on important community health issues. Feedback was gathered through a comprehensive Community Health Survey (CHS) and an in-person focus group. Additionally, the OCHD and Hospital Steering Committee identified several CBOs to engage in a CHIP prioritization activity. Preliminary health indicator data and a brief survey were shared with CBOs to help identify key priority areas.

Community Health Survey

The CHS was developed by the OCHD, with input from the Hospital Steering Committee, the Central New York Regional Healthcare Equity Task Force, and public health partners. The survey was designed to collect data and community member feedback related to the five domains of the NYSDOH 2025-2030 Prevention Agenda: Economic Stability, Social and Community Context, Neighborhood and Built Environment, Health Care Access and Quality, and Education Access and Quality. Respondents were asked to complete a series of multiple-choice questions and were given the opportunity to provide open-ended feedback. The survey was administered from late May to late July 2025.

A total of 1,938 eligible survey responses were collected. The survey was available electronically and on paper. The electronic version of the survey was available in English and Spanish. The paper version of the survey was available in English, Spanish, and Arabic. As an incentive for participation, respondents had the option to include their name and contact information for a chance to win a \$200 VISA gift card. All identifying information was removed prior to random selection of the gift card winner.

The OCHD and the Hospital Steering Committee promoted the CHS through a variety of methods. Members of the Central New York Healthcare Equity Task Force and select public health partners were also engaged to distribute the survey more widely. Organizational websites and community partner list serves were utilized to share the survey link. Promotional materials including flyers and quarter sheets containing a QR code linking to the survey were distributed widely throughout the community such as in public spaces, laundromats, and local higher education institutions. Paper copies of the survey were distributed at select local community events and at the Civic Center in Downtown Syracuse with assistance from the OCHD Public Health Education Team. Throughout the survey period, the OCHD implemented survey monitoring and dissemination activities to improve the representativeness of the survey results.

Focus Group

In July 2025, an in-person focus group was hosted by the OCHD in partnership with the Syracuse Healthy Start Community Consortium and Public Health Education Team. Onondaga County adults aged 18 and older were eligible to participate and participation was voluntary. During the focus group discussion, participants shared their thoughts about community health, health issues, and services missing in Onondaga County. All participants were compensated with a \$25 American Express gift card.

Community Feedback

Community engagement results indicated that many Onondaga County residents are particularly concerned about meeting basic needs (like housing, food, or healthcare). Respondents shared that improvements are especially needed in areas such as access to affordable healthy food, safe and affordable housing, and employment that pays a living wage. Mental health concerns, violence-related injuries, and substance use were identified as key community health issues. Additionally, open-ended feedback from respondents also indicated that additional services are needed in Onondaga County to address mental health concerns (i.e. anxiety and stress), poverty, injuries and violence, chronic disease prevention and control, and health and wellness in schools.

A full summary of CHS results is presented in the Onondaga County **2025 Community Health Survey Report**, available on the OCHD website: <https://onondaga.gov/health/>.

Appendices

Appendix 1: 2025-2030 Prevention Agenda Framework

Vision Every individual in New York State has the opportunity, regardless of background or circumstances, to attain their highest level of health across the lifespan	
Foundations Health Equity Prevention Across the Lifespan Health Across All Policies Local Collaboration-Building	
Domain	Priorities
Economic Stability	Economic Wellbeing <ul style="list-style-type: none"> • Poverty • Unemployment <ul style="list-style-type: none"> • Nutrition Security • Housing Stability and Affordability
Social and Community Context	Mental Wellbeing and Substance Use <ul style="list-style-type: none"> • Anxiety and Stress • Suicide • Depression • Drug Misuse and Overdose Including Primary Prevention <ul style="list-style-type: none"> • Tobacco/ E-cigarette Use • Alcohol Use • Adverse Childhood Experiences • Healthy Eating
Neighborhood and Built Environment	Safe and Healthy Communities <ul style="list-style-type: none"> • Opportunities For Active Transportation and Physical Activity • Access to Community Services and Support <ul style="list-style-type: none"> • Injuries and Violence
Health Care Access and Quality	Health Insurance Coverage and Access to Care <ul style="list-style-type: none"> • Access to and Use of Prenatal Care • Prevention of Infant and Maternal Mortality • Preventive Services for Chronic Disease Prevention and Control • Oral Health Care Healthy Children <ul style="list-style-type: none"> • Preventive Services • Early Intervention • Childhood Behavioral Health
Education Access and Quality	PreK-12 Student Success And Educational Attainment <ul style="list-style-type: none"> • Health and Wellness Promoting Schools • Opportunities for Continued Education

Appendix 2: Data Collection Methodology

The OCHD completed a comprehensive review and update of the health indicator data focusing on the five Prevention Agenda domains throughout 2025. Data from primary and secondary sources were incorporated in the CHA to provide a description of the current health status of County residents. Sources of quantitative primary data included the Onondaga County Medical Examiner's Office, and the OCHD Division of Community Health. Secondary data sources include but are not limited to:

- [CDC PLACES: Local Data for Better Health](#)
- [County Health Rankings](#)
- [Feeding America: Map the Meal Gap](#)
- [New York State Community Health Indicator Reports \(CHIRS\)](#)
- [New York State County Health Indicators by Race/Ethnicity \(CHIRE\)](#)
- [New York State Expanded Behavioral Risk Factor Surveillance System](#)
- [New York State Maternal and Child Health Dashboard](#)
- [New York State Opioid Dashboard](#)
- [New York State Prevention Agenda Dashboard](#)
- [U.S. Census Bureau](#)

Primary and secondary data analysis was completed using analysis software (e.g. Microsoft Excel, SPSS). Findings from the data collection and analysis process are presented and interpreted throughout the document. Several visual types are presented including charts, graphs, tables, and maps. Within the CHA, disparities by race/ ethnicity, sex, age, income and other demographic factors are included where possible. Additionally, comparisons with other geographies are presented including Central New York, New York State, and New York State excluding New York City.

The OCHD and Steering Committee also completed community engagement activities to gather direct feedback from Onondaga County residents. Results from the CHS are included in the CHA as applicable. A detailed description of community engagement activities is available on pages 104-105 of this document.

Appendix 3: Dissemination to the Public

The Onondaga County 2025 CHA document will be publicly available through several venues. This will include publication on the OCHD website (<https://onondaga.gov/health/>). Each participating hospital will also publish a link directing the public to the document on their respective websites. The document will also be shared with key stakeholder groups including the CNY Regional Healthcare Equity Task Force. Local media outlets will also be notified of the publication of the document through a press release. In addition, to solicit feedback on the final document from members of the public and stakeholders, a brief survey will be made available on the OCHD website and will accept feedback during Spring 2026.



ongovhealth
Onondaga County
Health Department

ongov.net/health · facebook.com/ongovhealth

Published December 2025