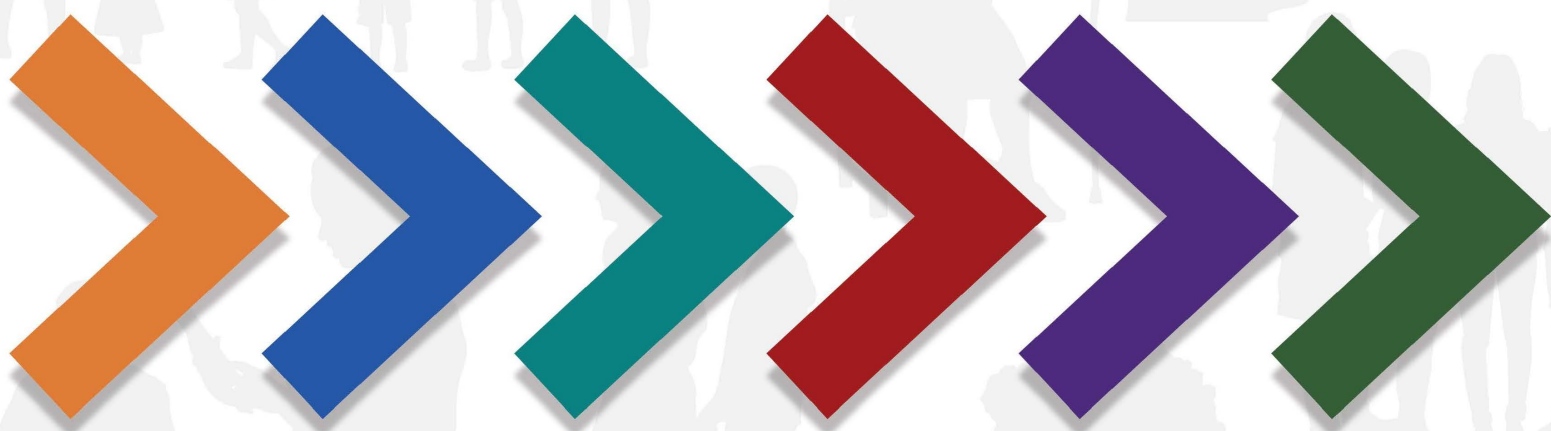


Health Equity in Erie County



**2024 Annual Report
Office of Health Equity
Erie County Department of Health**

Health Equity in Erie County

**OFFICE OF HEALTH EQUITY
ANNUAL REPORT
2024**

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**Erie County
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EXECUTIVE SUMMARY

Existing data strongly indicate that inequities in health experiences and health outcomes occur among Erie County residents according to demographic factors. The root causes for these differences in experiences and outcomes are historical, systemic, and largely ongoing. Addressing these inequities requires intentional and tailored efforts and solutions.

The Erie County Office of Health Equity (ECOHE) was established by the Erie County Health Equity Act of 2021 [1]. The ECOHE is a division of the Erie County Department of Health. The vision of the ECOHE is for all disadvantaged, marginalized, and diverse populations in Erie County to achieve maximum health and wellness.

Health disparities and inequities in Erie County prompted the creation of the ECOHE and continue to provide evidence of the continued need for the Office. The community impacts of recent events such as the COVID-19 pandemic, the racially motivated mass shooting at Tops Supermarket on May 14, 2022, and the December 2022 blizzard have highlighted the ways in which racism and the social determinants of health influence our safety and well-being. A recent *Buffalo Business First* article analyzed the stability of the 50 most populated ZIP codes in the eight counties of Western New York [2]. Their instability index included rates of poverty, school dropouts, and housing vacancies, recognizing economic stability, neighborhood and built environment, and education as key social determinants of health (SDOH). *Buffalo Business First* found that Erie County has 13 of the 25 most unstable neighborhoods in Western New York and named Buffalo's 14201 neighborhood as the most unstable ZIP code in the region.

Achieving health equity means ensuring that who we are or where we live does not limit our ability to live a life of maximum health and wellness. The work of the ECOHE is needed now more than ever. As factors that influence our health continue to change and shift on all levels, from national to local, the ECOHE will continue to work towards health equity for all Erie County residents.

Under the Erie County Health Equity Act of 2021, the ECOHE is tasked with reporting annually on the programs and services provided by the Office to advance health equity, data on populations served, and goals for the upcoming year. This report provides an overview of the ECOHE's programs and actions in 2024 as well as goals for 2025.

ECOHE PROGRAM HIGHLIGHTS

In 2024, two of the ECOHE's innovative efforts were acknowledged as best practices by federal and state public health officials. The ECOHE's Holistic Healing Pilot Program was recognized as a Model Practice by the National Association of County and City Health Officials (NACCHO). The ECOHE also received the Excellence in Communication Award for Local Health Departments at the New York State Association of County Health Officials (NYSACHO) Public Health Partnership Conference Awards.

Brain Health

In 2024, the NYS Department of Health (NYSDOH) invited Erie County to participate in a pilot project for the Building Our Largest Dementia Infrastructure for Alzheimer's Act (BOLD). A planning team consisting of members from NYSDOH, Alzheimer's Association of WNY, ECDOH, ECOHE, and SUNY University at Albany was assembled to carry out the pilot. The goal of the pilot project was to increase public awareness and education around brain health disparities.

On September 18, 2024, NYSDOH and the Alzheimer's Association of WNY held a training titled Advancing Brain Health and Risk Reduction Strategies: A Public Health Approach to Alzheimer's Disease and Other Dementias (ADRD). The ECOHE organized the training and expanded training recruitment beyond the suggested ECDOH team to include key Erie County departments identified as working with populations who can benefit from the dementia risk reduction strategies outlined in the training.

Focal points of the training were the emphasis on reaching populations experiencing significant health disparities, making plain language materials accessible for populations with lower literacy rates and translated for populations who speak languages other than English, and incorporating scenarios into the training agenda. Both NYSDOH and the Alzheimer's Association deemed the pilot a successful endeavor. This pilot program far exceeded the goals that were set before its onset, resulting in several additional projects and new relationships being built between the Alzheimer's Association and ECDOH.

Children and Youth With Special Health Care Needs (CYSHCN)

The Erie County Children and Youth with Special Health Care Needs (CYSHCN, pronounced "shin") Program seeks to improve the coordination of care for children and youth who have special health care needs. This program serves families with infants, children, and youth from birth to 21 years old who have serious or chronic medical, physical, behavioral, emotional, or developmental conditions. A diagnosis is not required for enrollment in the Erie County CYSHCN Program.

The CYSHCN Program matches families with community resources and provides referrals to community programs and services. The Erie County CYSHCN Program has become a leader among CYSHCN programs across New York State through efforts to identify health disparities among CYSHCN in Erie County, understand and connect factors that contribute to them, and make recommendations for improving SDOH and access to care for CYSHCN and their families. As a best practice program, the Erie County CYSHCN Program was asked to present at the annual convening of New York State CYSHCN programs in 2024.

Breastfeeding, Chestfeeding, and Lactation Friendly Erie County

The goal of Breastfeeding, Chestfeeding, and Lactation Friendly Erie County is to create more equitable systems of support and protection for breastfeeding and chestfeeding in Erie County, particularly among marginalized and underserved populations and communities. This initiative is a partnership with Catholic Charities Women, Infants, and Children (WIC) and the United Way of

Buffalo & Erie County to promote public awareness and coordinate educational events around breastfeeding, chestfeeding, and lactation.

The initiative recruits and establishes New York State designated Breastfeeding, Chestfeeding, and Lactation Friendly Worksites across Erie County, providing support for employees to express milk at work. Eleven Erie County worksites were designated in 2024: 9 in Buffalo, 1 in Cheektowaga, and 1 in North Collins.

In 2024, the ECOHE also created and shared a sample lactation policy utilizing inclusive and affirming language that employers can use or customize for their worksites. This sample policy is a key tool to reduce barriers to breastfeeding, chestfeeding, and lactation in Erie County. To view the sample policy and other breastfeeding, chestfeeding, and lactation resources, visit: <https://www3.erie.gov/health/breastfeeding-chestfeeding-and-lactation-friendly-erie-county#resources>

Epidemiology

The goals of the ECOHE's research are to analyze disparities among disadvantaged and marginalized communities in Erie County and to understand and connect factors that contribute to health outcomes. Led by the epidemiology team, the ECOHE developed three key reports in 2024.

In May 2024, the ECOHE published *Health Equity in Erie County: 2023 Annual Report*. The results of the 2022 ECOHE Community Survey were included in this report. In July 2024 the ECOHE presented results from this survey in a webinar that was open to the community. In early 2024, the ECOHE epidemiology team analyzed data from a series of focus groups conducted in 2023 to supplement the 2022 ECOHE Community Survey. *Health Equity in Erie County: 2023 Focus Group Report* was written to discuss the findings. This report is scheduled to be published in early 2025 and will be available here: <https://www3.erie.gov/health/health-equity-reports>

In November 2024, the ECOHE published *Winter Preparedness in the City of Buffalo: 2024 Survey Results and Findings*. This report analyzes the results of a 2023 survey that explored how residents felt about their winter emergency preparedness, how they receive information about winter weather emergencies, ways they struggled after a winter weather emergency, and ways that future county government responses could better support them.

Demographic Form & Metrics

In 2024, several changes were made to the way the ECOHE collects information on the ECOHE Demographic Survey. One change was to combine two separate questions on race and ethnicity into one question. Additionally, the 2024 form allowed respondents who selected Black/African American to specify if they were of African, American, Caribbean, South American descent, or another. Respondents who selected Middle Eastern or North African could specify if they were North African (Egyptian, Moroccan, Sudanese, Algerian, Tunisian, or Libyan), Middle Eastern (Yemeni, Iranian, Iraqi, Lebanese, Israeli, Jordanian, Syrian, Armenian, or Saudi), or another.

The 2024 ECOHE Demographic Survey removed a table for respondents to indicate where they were born and where both of their parents were born that was often completed incorrectly or incompletely. The table was replaced with the question "Did you move to the United States from

another country?” with the response options being No, I was born in the United States; Yes, I moved to the United States as a child (under 18); Yes, I moved to the United States as an adult (18 or older); or Do not wish to say.

Changes were also made to the questions about gender and sexual orientation. To identify transgender people more efficiently, the question “What is your gender?” in the 2024 ECOHE Demographic Survey was followed by the question “Are you transgender?” The question of assigned sex at birth was removed. Definitions were added to the response options to the question “What is your sexual orientation?” This was in part due to the surprising proportion of respondents who selected asexual as their sexual orientation.

These changes appear to have increased data integrity, allowing respondents to answer questions more accurately and as they were intended to be answered. This increased data integrity allows the ECOHE to more accurately analyze disparities, understand and connect factors that contribute to health outcomes, and make recommendations for improving delivery and access to health services for disadvantaged and marginalized populations.

Grants

Organizations who received grant technical assistance in 2024 serve a variety of communities, including racial minority communities, rural communities, LGBTQ+ communities, older adults, children and youth, refugees and immigrants, and people with disabilities. In 2024, the ECOHE provided 120 hours of one-on-one grant technical assistance, helping 53 community-based organizations and groups in Erie County apply for millions of dollars in grant funding from government and foundation funders.

As of December 2024, the ECOHE has provided a total of 342 hours of one-on-one technical assistance with 107 community-based organizations in Erie County. Through grant technical assistance and collaborative partnerships, the ECOHE has helped bring over \$30 million in grant funding to Erie County organizations since these services began in 2023, the vast majority of which has been awarded directly to community-based organizations. Organizations that are rooted in the community and are experts in the work that is needed to help achieve health equity in Erie County often do not have the funding, staff, or other resources required to meet community needs. Grant technical assistance services and resources further the mission of the ECOHE by helping build the capacity of these organizations.

NEXT STEPS

The ECOHE will continue to serve as a resource to organizations and individuals in the community that are striving to reduce health disparities and increase health equity in Erie County. The ECOHE brings its subject matter expertise in data collection, analysis, and reporting as well as grant writing and grants management assistance to those who would like support in these areas in order to further their health equity work. The ECOHE will continue to provide upstream support including engagement, education, and resources to the Erie County community. Future ECOHE reports will analyze new data collected by the ECOHE team as well as report on findings of analysis of public (federal, state, county, and city) and private data sources.

ACKNOWLEDGMENTS & AUTHORS

THIS IS A PUBLICATION OF THE

ERIE COUNTY OFFICE OF HEALTH EQUITY

The Erie County Office of Health Equity's vision is for everyone in Erie County to achieve maximum health and wellness. The Office of Health Equity is located within the Erie County Department of Health.

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We recommend the following citation:

Erie County Department of Health Office of Health Equity. (2025). *Erie County Office of Health Equity Annual Report 2024*.

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LAND ACKNOWLEDGEMENT

The Erie County Office of Health Equity would like to begin this report by acknowledging that we, as Erie County residents, are on the land of Indigenous peoples. Traditionally, these lands were home to many nations, including the Neutral, Erie, Wenro, Huron, and other peoples. Today, these lands are still regarded as the traditional homelands of the Seneca and other Haudenosaunee peoples. We respect the treaty rights of the Six Nations—the Seneca, Mohawk, Cayuga, Onondaga, Oneida, and Tuscarora—and the obligation of the United States and New York governments and American society to adhere to them.

We would like to honor the legacy of the many ancestors and elders who made this land their home and infused it with their spirit for thousands of years. We also honor the Original Peoples who remain on the ancestral homelands of Turtle Island and who have survived centuries of colonialism, genocide, and land theft. We honor those whose lives have been impacted by historical and intergenerational trauma across lifespans and generations, including land dispossession, forced relocation, and forced assimilation through boarding schools like the Thomas Indian School, which was located on the Cattaraugus Territory in Erie County. Finally, we honor those who are not here, but who might have been, were it not for this history of violence.

With hearts and minds focused on healing and truth, we remember the powerful example of democracy and federalism set by the Haudenosaunee, embodied in the Great Law of Peace. Through this inspiration, we commit ourselves to advocate for inclusion and acknowledge and address past atrocities. May we all aspire to a world of reconciliation, guided by the example of the Haudenosaunee themselves, so that our weapons of war are buried forever and mutual respect and equality prevail among all peoples and nations.

Thank you to Samantha Nephew, Healthcare Education Project for assistance with this acknowledgement.

ENSLAVEMENT & LABOR ACKNOWLEDGEMENT

The Erie County Office of Health Equity (ECOHE) respectfully acknowledges our debt as a society to the people past and present whose labor was and continues to be stolen through unjust practices, including the exploited labor of incarcerated people. We acknowledge our debt to the enslaved people, primarily of African descent, whose labor and suffering built and grew the economy and infrastructure of a state that did not abolish the practice of enslavement until July 4, 1827 [3]. While not a Southern state, New York had the largest population of enslaved people of any Northern state and was second to last in abolishing the practice [4].

Erie County, established in 1821, became an integral part of the journey to freedom for enslaved Black people via the Underground Railroad. The homes, businesses, and land of abolitionists were used to assist the enslaved making their way to Canada to live as free people. Landmarks such as Freedom Park are historical hallmarks of the Underground Railroad [5]. The very land on which the Edward A. Rath Building is built was the former home of abolitionist and attorney George W. Jonson [5].

Ramifications from the practice of enslavement in our country are still present today, visible in the systemic racism perpetuated in our institutions, in the segregation of our residents, the exploited labor of incarcerated people, and in many of the inequities in the social determinants of health and health disparities experienced by their descendants. The spirit of freedom embodied by our ancestors, enslaved and free, persists as well, visible in our social justice movements, increased awareness of historical and ongoing inequities, and advocacy for change. The ECOHE will embrace and embody this same spirit of freedom to help eradicate the systemic racism, poverty, and oppression plaguing so many of our Erie County communities.

COMMUNITY RECOGNITION & ACKNOWLEDGEMENT

The Erie County Office of Health Equity (ECOHE) would like to take this time and space to recognize and acknowledge the often overlooked and forgotten work of community in the fight for equity and justice. Everyday community members, community activists, and organizations have been engaging in equity and justice work long before the term became commonplace. Most of the staff of the ECOHE have their roots in community work and bring that framework to this government setting.

Governments, corporations, organizations, and people in positions of power have a history of erasure, historical revision, and appropriation of the work of others as their own innovation, rather than naming and uplifting and adopting community-grown solutions. We must be purposeful in acknowledging and crediting frameworks and foundations, and intentional in acknowledging the roots upon which we build and grow.

Following in the footsteps of cultures documenting their journeys through storytelling and oral history passed through the generations, we seek to keep the work of those that came before us alive. We are the descendants of people that may never be named or credited for their contributions, yet the work we do is imbedded in our DNA, an intergenerational wealth of knowledge beyond measure.

To name a few community organizations and leaders in this space would be to miss the multitude. There are so many contributors to this work, most of whom have no title or office. The progress our Erie County community has made is rooted in the efforts and accomplishments of countless individuals and community organizations.

INTRODUCTION

The Erie County Office of Health Equity (ECOHE) was formed in compliance with the Erie County Health Equity Act of 2021 [1]. Under the law, the ECOHE is responsible for completing an annual report of the ECOHE's achievements, including but not limited to programs and services provided to advance health equity, disaggregated data on populations served and outcomes achieved, and the ECOHE's goals for the upcoming year. For more information on the Erie County Health Equity Act of 2021, see Appendix C.

The vision of the ECOHE is for all disadvantaged, marginalized, and diverse populations in Erie County to achieve maximum health and wellness. Existing data strongly indicate that inequities in health experiences and health outcomes occur among Erie County residents according to demographic factors. The root causes for these differences are historical, systemic, and largely ongoing. As a result, addressing these inequities requires intentional and tailored efforts and solutions.

Additionally, intersectionality is an important factor when understanding health disparities. Intersecting identities such as race, gender, class, sexual orientation, ethnicity, and geography, can compound and interact, resulting in additional health disparities. As a result, addressing these inequities requires accurate data collection, careful analysis, and collaborative solutions.

The ECOHE's mission is to evaluate a wide variety of specific health outcomes among diverse populations to fully understand the depth and scope of health disparities in Erie County and to partner with community members, health care providers, faith and philanthropic leaders, and organizations to enact programs that help disadvantaged, marginalized and diverse populations in Erie County achieve maximum health and wellness.

The ECOHE operates under the guidance of the Erie County Health Equity Advisory Board and within the Live Well Erie framework. Live Well Erie is a plan to help all Erie County residents achieve their full potential organized around the idea that Erie County will leave no one behind [6]. To do this, Live Well Erie focuses on meaningful improvements in the social determinants of health for three populations: children, working families, and older adults. Live Well is framed around 5 guiding principles:

1. A clear focus on the social determinants of health;
2. An integration of the Racial Equity Impact Analysis;
3. An invitation for innovative thinking;
4. An opportunity for the modernization of service delivery; and
5. An expectation of enhanced partnership and collaboration.

Health disparities and inequities in our community both prompted the creation of the ECOHE and provided evidence of the continued need for the office. It was as a result of the stark disparities in the impact of COVID-19 that the Erie County Health Equity Act of 2021 was written into law, founding the ECOHE. Recent tragedies that have befallen our community—like the racially motivated

mass shooting at Tops Supermarket on May 14, 2022, and the December 2022 blizzard—highlighted the ways in which racism and the social determinants of health influence our safety and well-being. A recent *Buffalo Business First* article analyzed the stability of the 50 most populated ZIP codes in the eight counties of Western New York [2]. Their instability index included rates of poverty, school dropouts, and housing vacancies, recognizing economic stability, neighborhood and built environment, and education as key social determinants of health (SDOH). *Buffalo Business First* found that Erie County has 13 of the 25 most unstable neighborhoods in Western New York and named Buffalo's 14201 neighborhood as the most unstable ZIP code in the region.

Achieving health equity means ensuring that who we are or where we live does not limit our ability to live a life of maximum health and wellness. The work of the ECOHE is needed now more than ever. As factors that influence our health continue to change and shift on all levels, from national to local, the ECOHE will continue to work towards health equity for all Erie County residents.

Within this report are summaries of all ECOHE programs and focus areas and a discussion of recommendations, next steps, and future priorities of the ECOHE.

ECOHE UPDATES & ACTIONS

Under the Erie County Health Equity Act of 2021, the ECOHE is tasked with reporting annually on the programs and services provided by the Office to advance health equity, data on populations served, and goals for the upcoming year. This section provides an overview of the ECOHE's programs and actions in 2024 as well as goals for 2025.

DEMOGRAPHIC FORM & METRICS

Data is important to the work of the ECOHE. The Erie County Health Equity Act of 2021 requires that the ECOHE report annually on the Office's programs, services, and outreach, including the populations served based on race and ZIP code. In addition to race and ZIP code, the ECOHE collects data on other demographics such as ethnicity, birthplace, sexual orientation, gender, and age. To collect and report information on the populations reached, the ECOHE uses demographic surveys in programs and research.

In 2024, several changes were made to the way the ECOHE collects information on the ECOHE Demographic Survey through a process of trial and error. One change was to combine race and ethnicity questions as the difference between race and ethnicity is ambiguous and subjective. Response options for the question, "What is your race and ethnicity?" now include American Indian or Alaska Native, Asian, Black/African American, Latino/Hispanic, Middle Eastern or North African, Pacific Islander or Hawaii Native, White, Another, or Do not wish to say.

To collect information that is specific to a respondent's identity, on the original demographic survey the race and ethnicity options of Asian and Latino/Hispanic included specific countries or regions of origin. For example, someone who selected Asian could specify Bangladeshi or Chinese. In the demographic survey used in 2024, respondents who selected Black/African American could specify if they were of African, American, Caribbean, South American descent, or another. Respondents who selected Middle Eastern or North African, in 2024 could specify if they were North African (Egyptian, Moroccan, Sudanese, Algerian, Tunisian, or Libyan), Middle Eastern (Yemeni, Iranian, Iraqi, Lebanese, Israeli, Jordanian, Syrian, Armenian, or Saudi), or another.

Changes were also made to the questions about gender. In the original ECOHE Demographic Survey, response options for "What is your gender?" included Man, Man of Trans Experience, Woman, Woman of Trans Experience, Nonbinary, and Gender Nonconforming/Gender Expansive. This question followed a question asking about assigned sex at birth. Reviewing how respondents answered these questions revealed that some participants whose gender does not correspond with their assigned sex at birth did not indicate a gender of Man of Trans Experience or Woman of Trans Experience. For example, someone assigned female at birth selected Man as their gender rather than Man of Trans Experience. To identify transgender people more efficiently, the response options for

“What is your gender?” in the 2024 ECOHE Demographic Survey included Woman, Man, Nonbinary, Gender Nonconforming/Gender Expansive, Not sure/Questioning, Another, and Do not wish to say. This question was followed by the question “Are you transgender?” with response options of Yes, No, *Not sure or questioning*, and *Do not wish to say*. The question of assigned sex at birth was removed. Since this change was implemented, considerably more respondents answered Yes to the question “Are you transgender?” than had indicated a gender of Man of Trans Experience or Woman of Trans Experience before this change.

Furthermore, definitions were added to the response options to the question “What is your sexual orientation?” This was in part due to the surprising proportion of respondents who selected Asexual as their sexual orientation. Since this change was implemented, a smaller proportion of respondents have selected Asexual or Do not wish to say compared to respondents completing the survey before the definitions were added.

To account for challenges faced by people who move to the United States from another country or territory or whose parents moved to the United States from another country or territory, the 2023 version of the ECOHE Demographic survey displayed a table for respondents to indicate where they were born and where both of their parents were born. This table proved to be confusing for many respondents as the tables were often completed incorrectly or incompletely. Thus, the 2024 ECOHE Demographic Survey asked “Did you move to the United States from another country?” with the response options being No, I was born in the United States; Yes, I moved to the United States as a child (under 18); Yes, I moved to the United States as an adult (18 or older); or Do not wish to say. While this question does not capture the breadth of information that the table attempted to gather, its simplicity proved to be more usable.

These changes appear to have increased data integrity because respondents were able to answer questions more accurately and as they were intended to be answered. For example, before combining the race and ethnicity questions, there were a significant number of write-in responses of Latino or Hispanic in the race question as well as write-in responses of races such as Black or White in the ethnicity question. Since implementing the combined race and ethnicity question format, the same proportion of respondents indicated that they were Hispanic or Latino but there were fewer write-in responses. Additionally, these changes resulted in clearer data. For example, the updated form more accurately captures whether or not respondents were transgender and more complete data on residents who moved to the United States from another country.

COMMUNITY ENGAGEMENT

Community engagement is a key component of the ECOHE’s work to address health disparities faced by minority, marginalized, and underserved populations in Erie County. Community engagement helps the ECOHE increase awareness of health equity topics, reduce stigma around health issues, and provide community education. The ECOHE’s community engagement efforts also create opportunities for community involvement and feedback and strengthen community connections.

Community engagement has helped the ECOHE identify specific challenges faced by Erie County residents, including economic, social, and cultural barriers to care. By working closely with residents,

community leaders, and organizations, the ECOHE is better able to identify and make recommendations to address these challenges and ensure support reaches those who need it most.

In 2024, the ECOHE participated in 233 community events. The figures below show community events by ZIP code and population density.

Figure 1: Number of Community Events by ZIP Code

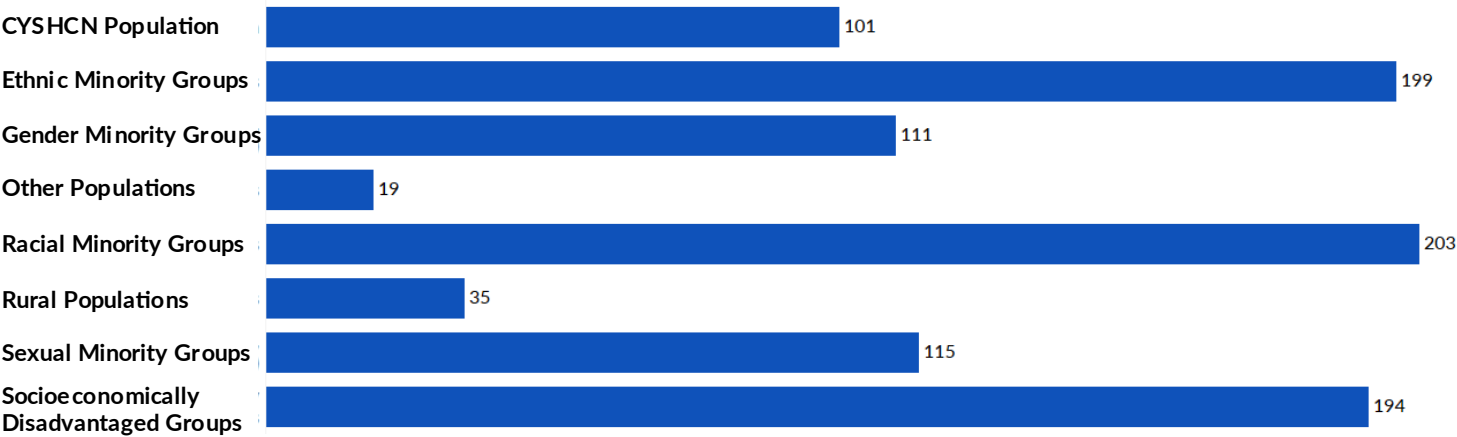
Figure 2: Number of Community Events by Region (Urban, Suburban, or Rural)

Region	Number of OHE Events
Urban	196
Suburban	27
Rural	8

ZIP Code	Number of OHE Events
12110	1
14001	2
14004	3
14052	4
14065	1
14072	1
14075	4
14086	1
14127	1
14141	1
14150	1
14201	21
14202	14
14203	17
14204	15
14206	5
14207	20
14208	5
14209	13
14210	4
14211	17
14212	11
14213	15
14214	10
14215	19
14216	2
14218	5
14219	1
14220	2
14221	2
14224	2
14225	2
14226	1
14228	4
14260	4
14303	1

Most events took place in communities where attendees were primarily from priority populations named in the Erie County Health Equity Act of 2021.

Figure 4: Percentage of Events That Reached Each Priority Population



The ECOHE and Buffalo Municipal Housing Authority (BMHA) organized a ONE-STOP Family Services Resource Fair in August 2024 at Northwest Buffalo Community Center. In addition to the community at large, the ECOHE and BMHA were intentional in prioritizing the New American communities living in the surrounding area in Northwest Buffalo. These communities are primarily made up of Burmese, Karen, and Arabic speaking families. The ECOHE provided signage in 10 languages and encouraged vendors to provide multilingual materials. Below is the table comparing the outcomes of the same resource fair from 2023 and 2024.

Figure 5: Comparison of BMHA Resource Fair Participation, 2023 to 2024

Gender	2023	2024	Change
Number of Vendors	31	53	171%
Number of Families	48	114*	238%
Number of Attendees	75	228**	304%
Number of BMHA Families	11	33	300%

*Estimated number of families.

**Estimated number of participants based on an average of 2 people per family.

NOTE: # of Families may be greater since some families may have just shown up for haircuts and not checked in at the registration table. We don't know the exact # of attendees since we didn't capture the # of kids that attended.

The following feedback on the ONE-STOP Family Services Resource Fair was provided via survey and emails:

"The event was great! My feedback would be the space, with the number of families that attended this year was phenomenal and having more space will help."

"The event allowed citizens in underserved communities know what resources are available to them throughout Erie County. One thing that could be improved was the location did not allow for a lot of air circulation, and with the large amount of people in attendance (great job on getting word out!) it became very warm and potentially unpleasant for attendees to spend adequate time with each vendor."

"It was a great event for the vendors and the families."

"It was great to see so many families in attendance."

"The language materials were very informative, and I wish that I had been able to respond with more information. Looking forward to expanding language access in our materials going forward."

"I thought it was wonderful. Well attended and well run."

"The event was great however it was extremely hot in the gym. Also there were a lot of amazing vendors but not enough space. It would be a good idea for next year to look at the layout. Families were very confused what tables they were supposed to go to."

"Great event, maybe more interactive activities for children outdoors. Bounce house, sports activities, board games, chalk, bubbles, etc."



"It was a great event for the vendors and the families."

"I think the event was fantastic with a variety of resources for everyone that stopped by. I would say if there could be refreshments/soft snacks for the moments it was very hot in the gym. Otherwise, it was a wonderful opportunity to be a part of it. Thank you for having us!"

"It was an amazing event to be a part of with a wide variety of organizational vendors to support community members."

In 2024, the ECOHE served as a resource for other organizations as well as other departments within Erie County around equitable community engagement. In 2024, the ECOHE began drafting a Community Engagement Toolkit (CET) that can be utilized by other departments and organizations as a best practice guide for community engagement with populations that departments and organizations often consider "hard to reach." The CET is anticipated to be available to community members and organizations in 2025.

Moving forward, the ECOHE will remain committed to addressing the social determinants of health (SDOH) by removing barriers to care, expanding health education, and advocating for policies that promote health equity. Open communication and collaboration will help ensure that every community has access to the resources and opportunities needed for better health and well-being.

The ECOHE remains committed to supporting community-led health equity work through collaborations and partnerships with community organizations. In 2024, the ECOHE was an active participant in over 50 coalitions, committees, work groups, and task forces relevant to the ECOHE's communities of focus.

Black/African American Communities

Erie County's Black communities experience the most health disparities and inequities. Black Erie County residents have the highest rates of chronic health conditions, low birth weight, and poor disease outcomes when compared to residents of other races [7]. According to the ECOHE's *Health Equity in Erie County: 2023 Annual Report*, Black survey respondents were more likely to report living with physical health conditions like high blood pressure, asthma, and diabetes as compared to respondents of all other races [8].

In 2024, the ECOHE partnered with the University at Buffalo Community Health Equity Research Institute (UB CHERI), the University at Buffalo Clinical and Translational Science Institute, and the Buffalo Center for Health Equity to plan and implement the 7th annual Igniting Hope Conference, which focuses on addressing health equity and the social determinants of health for Black community members. The focus of the 2024 Igniting Hope Conference was environmental justice. The ECOHE also continued to be an active member of the UB CHERI steering committee as well as the African American Health Equity Task Force, a coalition of community leaders, faith leaders, university faculty, and other stakeholders focused on addressing health disparities within the African American community.

Rural Populations

Erie County residents in rural communities are more likely to live farther away from specialty medical providers, such as oncologists and obstetricians, and emergency services [7]. In the ECOHE's *Health Equity in Erie County: 2023 Annual Report*, survey respondents living in rural communities were less likely to report that they felt they had "more than enough money" [8]. For example, while 100% of respondents in Clarence Center said they had "more than enough money" compared to 0% of respondents in Irving, Gowanda, and Chaffee.

15%

**OF TOTAL ENGAGEMENT
HAS BEEN WITH RURAL COMMUNITIES**

Rural populations were the community of focus in 15% of the ECOHE's community engagement efforts in 2024. According to the 2020 Decennial Census, approximately 9.72% of Erie County residents live in rural areas. While not all residents of rural communities experience poor health outcomes, the health of rural populations can be impacted by SDOH factors such as poverty, limited access to transportation, health care provider shortages, food access challenges, and social isolation [8].

In 2024, the ECOHE was an active participant in Good for the Neighborhood (GFTN) events in rural areas of Erie County. GFTN is a community-based wellness program that brings health-related training and tools to areas where access to health care is limited. Sponsored by the Independent Health Foundation, GFTN provides opportunities to bring health and wellness resources to participants where they live, work and play. GFTN events held in rural areas also created opportunities for the ECOHE to connect with community members to better understand and address the barriers and challenges faced by residents of rural areas. In addition, GFTN events enabled the ECOHE to build relationships with rural-serving organizations to support an equitable focus moving forward.

LGBTQ+ Communities

LGBTQ+ communities often have higher rates of certain illnesses, can be at increased risk for some medical and mental health conditions, generally has less access to health care, and can experience worse health outcomes [7]. According to the ECOHE's *Health Equity in Erie County: 2023 Annual Report*, LGBTQ+ respondents to the 2022 ECOHE Community Survey reported more challenges to access healthcare [8]. This included higher rates of reporting that the cost of health care was a barrier and that they had higher rates of distrust in medical providers than straight/heterosexual respondents.

In 2024, the ECOHE was an active member of the LGBTQ+ Shelter Committee. The focus of this committee is addressing housing as an SDOH for Erie County residents who are LGBTQ+ by establishing an LGBTQ+ shelter. The ECOHE worked to help identify potential partners and funding sources for this project.

Latino/Hispanic Communities

Latino/Hispanic communities in Erie County experience the highest rate of premature death (deaths under the age of 75) at 69.4% – over double the rate of White Erie County residents (37.3%) [10]. Latino/Hispanic residents also have the highest uninsured rate and have the lowest median income when compared to White, Black, and Asian/Pacific Islander residents. According to the ECOHE's *Health Equity in Erie County: 2023 Annual Report*, Latino/Hispanic survey respondents were significantly less likely to own a home than non-Hispanic respondents [8].

Spanish is the most commonly spoken language in Erie County other than English. Many Spanish speakers in Erie County have limited English language proficiency. In 2024, the ECOHE implemented community engagement activities designed to meet the needs of Spanish-speaking communities in Erie County, especially residents who speak Spanish but have limited English proficiency. In 2024, the

ECOHE continued to cultivate strong partnerships with local organizations like Hispanics United of Buffalo, Say Yes Buffalo, and the Department of Social Services, which has Spanish-speaking staff.

The ECOHE engaged with the community through various events including the Puerto Rican and Hispanic Day Parade, the Grease Pole Festival, and the Upstate NY Black and Latino Pride Festival. The ECOHE also supported local groups in the planning and coordination of events for the benefit of the Latino/Hispanic community, including serving on the planning committee for the La Placita Health Screening and Wellness Back to School Fair and the 3rd Annual Taino Heritage Festival in Buffalo.

Immigrant & Refugee Communities

Immigrant and refugees face disparities after resettling in the United States due to lack of health insurance, barriers to access to quality healthcare, poor workplace conditions, lack of education or challenges in education, and low income and poverty [7]. In the ECOHE's *Health Equity in Erie County: 2023 Annual Report*, survey respondents who indicated their race as Burmese reported the highest rate of "did not finish high school" as their highest level of education [8]. Additionally, the report found that respondents born in a U.S. Territory or outside the United States had higher reports of challenges accessing health care as compared to those respondents born in the United States.

Language access is a significant SDOH challenge for immigrant and refugee communities that negatively impacts their health outcomes. In 2024, the ECOHE developed a resource guide about language access called Language Access Allies. Language Access Allies is designed to help health care providers, community organizations, and community members overcome language access barriers. It included both free and at-cost interpretation and translation services. Resources include in-person, virtual, and app-based interpretation and translation services.

In 2024, the ECOHE was consulted by the Erie County Office of Harm Reduction about translating their materials into different languages. As a result, the Office of Harm Reduction is translating all their materials into the top 8 languages spoken and understood in Erie County for 2025. The Office of Harm Reduction was then able to convince the manufacturer of Narcan (Emergent BioSolutions) to translate their promotional materials into multiple languages. These translated materials will increase access to this lifesaving medication for people with limited English proficiency in Erie County and across the country.

In 2024, the ECOHE shared multilingual resources and materials with the WNY Refugees with Disabilities Task Force. As a member of this task force, the ECOHE recognizes that the healthcare and social services system is challenging for individuals with disabilities, especially those with limited English proficiency. Feedback from the WNY Refugees with Disabilities Task Force was positive. One member said: "Glad someone compiled this guide. It will make the lives of our clients and providers so much easier."

Feedback on the Language Access Allies resource guide from other community members and community organizations has also been very positive. Moving forward, the Language Access Allies resource guide will be regularly updated when new resources become available.

EMERGENCY PREPAREDNESS

When emergencies happen, minority, marginalized, and underserved communities are often hit the hardest. While only 14% of Erie County residents are Black or African American according to U.S. Census data, over 50% of those who lost their lives in the blizzard that struck the county in December 2022 were Black or African American [11, 12]. In the ECOHE's report *Winter Preparedness in the City of Buffalo: Survey Results & Findings*, Black survey respondents were significantly more likely to report needing help buying and putting together emergency kits and more information about steps to prepare than White survey respondents [13]. The goal of the ECOHE's emergency kit distribution efforts is to help ease the struggle of getting basic supplies and provide important emergency preparedness information to those who need it most. As a result, a higher proportion of emergency kits were distributed to community organizations serving predominantly Black communities in Buffalo.



Left: Emergency kit assembly volunteers at Erie County warehouse

Above: Emergency kit contents

In 2024, the Erie County Department of Health (ECDOH) helped fund the creation of 5,000 emergency kits. These kits were assembled with help from volunteers from the United Way of Buffalo & Erie County. Each kit included: a hand crank emergency flashlight radio, a reusable water jug, first aid supplies, a Mylar blanket, work gloves, duct tape, a glow stick, a whistle, a thick plastic sealable bag for documents, a reusable tote bag, face masks, a COVID test kit, Narcan, and an emergency preparedness information packet.

To ensure the emergency kits reached those who needed them most, the ECOHE worked with trusted partners within the Erie County community. Kits were distributed throughout Erie County with a focus on distributing kits to areas that were severely impacted by the December 2022 blizzard. These areas included the Grider, MLK, Cold Springs, Lovejoy, First Ward, South Buffalo, Kensington/Bailey, and West Side neighborhoods of Buffalo, where many people lost power. 84% of kits were distributed to organizations serving these and other urban areas, 6% to organizations serving suburban areas, and 10% to organizations serving rural areas of Erie County.

Figure 6: Emergency Kit Distribution by Urban, Suburban, and Rural

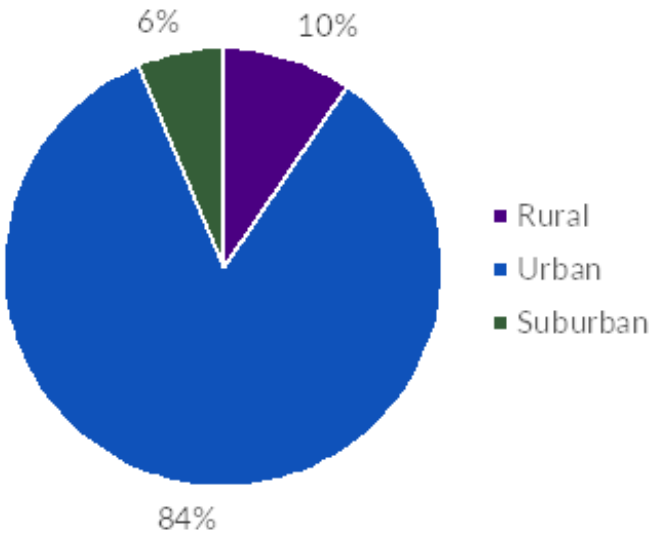
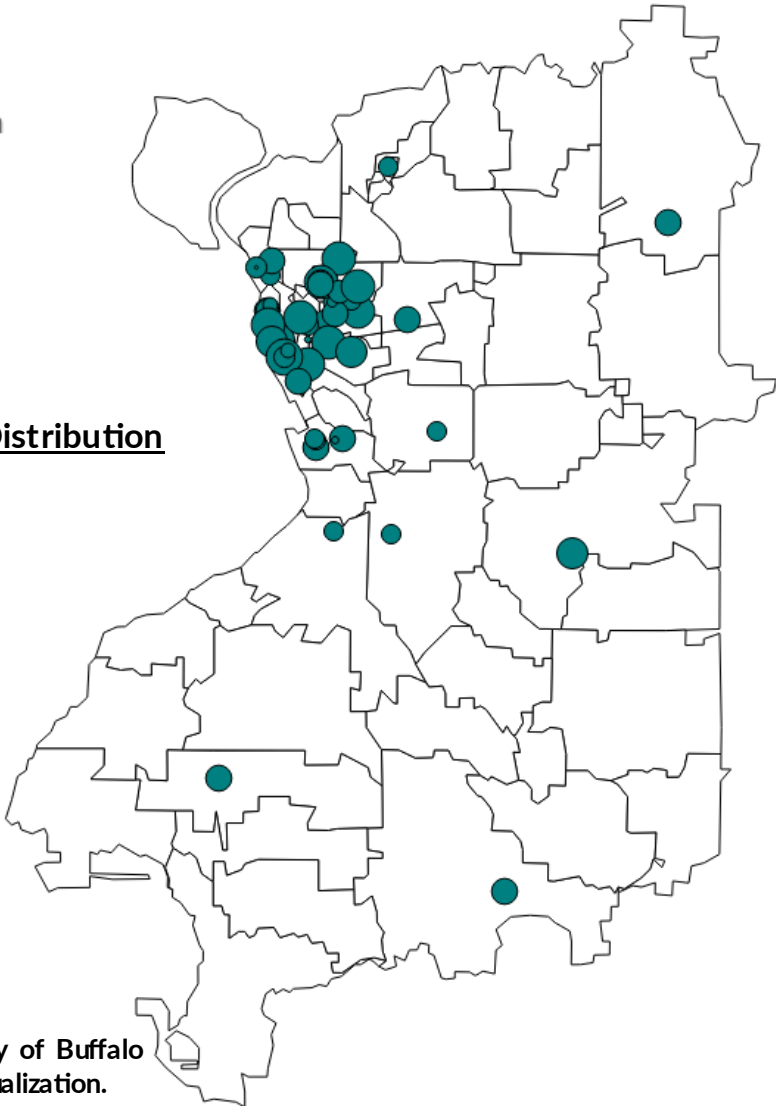


Figure 7: Emergency Kits by Location of Distribution



Many distribution sites were within the City of Buffalo and their points overlap each other in this visualization.

56 community groups and organizations helped distribute all 5,000 emergency kits by December 31, 2024. The map on page 27 shows where the kits were given out. These groups and organizations prioritized distributing kits among members of their communities with the highest need. Some organizations requested more kits due to community need. These requests show the strong need for emergency supplies in communities that are disproportionately impacted by economic stability challenges like disinvestment.

The ECOHE asked Erie County residents and community organizations to share their feedback on the emergency kits through a survey completed during distribution events. Through the survey, residents and community organizations provided positive feedback on the emergency preparedness kits and information provided. According to survey data, the most valued item in the kits was the hand crank emergency flashlight radio. The second most valued item was the reusable Mylar blanket.

The survey also asked residents and organizations to share their thoughts on what was missing from the kits. Many suggested adding non-perishable food items; items to stay warm such as winter gloves, a warm hat, and hand warmers; and more first aid supplies. The ECOHE values community input and will use this feedback in planning for future emergency preparedness kit assembly and distribution.

In 2025, the ECOHE will provide additional emergency kits to improve emergency preparedness among Erie County residents. In 2025, the ECOHE will use community feedback to better prepare residents with supplies that help address identified needs. The ECOHE plans to adjust the emergency kit contents each year to address gaps in preparedness based on community feedback, community needs, and the types of emergencies that may arise. For example, a future kit may focus on supplies for heat-related emergencies.

ORGANIZATIONAL CAPACITY BUILDING

Epidemiology

The epidemiology (“epi”) team leads the research that the ECOHE conducts. The goal of the research is to understand and connect factors that contribute to health outcomes. The 2022 ECOHE Community Survey was conducted in 2022 and focus groups were held in 2023. In May of 2024, the ECOHE published *Health Equity in Erie County: 2023 Annual Report*. The results of the 2022 ECOHE Community Survey were included in this report. In July 2024 the ECOHE presented results from this survey in a webinar. This webinar was open to the community. The report and the presentation of the findings are available by visiting <https://www3.erie.gov/health/health-equity-annual-report>.

The initial goal was to publish findings from both the 2022 ECOHE Community Survey and the focus groups early in 2024. The research process has many steps, from creating a data collection tool to publishing a report. This process took longer than expected. In early 2024, the ECOHE epi team analyzed data from the 2023 focus groups using NVivo. NVivo is a type of software that is useful for analysis of qualitative data. *Health Equity in Erie County: 2023 Focus Group Report* was written to discuss the findings. This report is scheduled to be published in early 2025.

In early 2023, ECOHE staff developed a short survey that explored how residents felt about their winter emergency preparedness, how they receive information about winter weather emergencies, ways they struggled after a winter weather emergency, and ways that future county government responses could better support them. Responses to this survey were collected at winter preparedness events in Erie County that year. Analysis of the survey results was completed in January of 2024 and *Winter Preparedness in the City of Buffalo: 2024 Survey Results and Findings* was published in November of 2024.

The ECOHE Epi team also offers technical data assistance. This assistance is available to other offices within Erie County and outside groups serving minority and underserved communities in Erie County. Types of assistance offered include survey design, finding data sources, data analysis, and data visualizations. This service has supported organizations with grant applications, grant reporting, program implementation, needs assessments, and other research.

In 2024, ECOHE spent about 20.5 hours on data assistance requests from organizations outside of the Erie County Department of Health (ECDOH). About 7 hours were spent on requests from various offices within the ECDOH.

In 2025, ECOHE will strive to expand this service. As part of that effort, an intake form for data assistance requests has been developed and a flyer advertising this service has been created with plans to distribute more widely. Moving forward, the ECOHE will continue to conduct community research to guide the office programs. ECOHE research will also continue to be available and accessible to the community.

Grants

The ECOHE has two main types of grant programs and services: internal ECOHE grant programs and pilots to improve health disparities and external grant technical assistance to community organizations engaging in health equity work. The ECOHE provides free grant-related technical assistance to local community-based organizations and groups serving minority, marginalized, and underserved communities in Erie County. The Erie County Health Equity Act of 2021 empowers the ECOHE to pilot models and programs to improve health disparities. Organizations that are rooted in the community and are experts in the work that is needed to help achieve health equity in Erie County often do not have the funding, staff, or other resources required to meet community needs. Grant technical assistance services and resources further the mission of the ECOHE by helping build the capacity of these organizations.

The ECOHE's grant technical assistance services also include one-on-one technical assistance with finding grants, applying for grants, data and evaluation support (via the ECOHE epidemiology team), and grant reporting. In 2024, these services also included a group workshop, Let's Talk About Grants, which was developed in 2023. The Let's Talk About Grants workshop provides an introduction to grants and covers the basics of grant writing. Five Let's Talk About Grants workshops were conducted in 2024, reaching a total of 109 participants. Four workshops were held in-person in the 14208, 14211, 14213, and 14052 ZIP codes. One was presented virtually.

Organizations who received grant technical assistance in 2024 serve a variety of communities, including racial minority communities, rural communities, LGBTQ+ communities, older adults, children and youth, refugees and immigrants, and people with disabilities. In 2024, the ECOHE provided 120 hours of one-on-one technical assistance, helping 53 community-based organizations and groups in Erie County apply for millions of dollars in grant funding from government and foundation funders. \$1,870,000 has been awarded to community-based organizations in Erie County at the time of this report. Many 2024 grant funding applications are still pending. In 2024, about 25 hours of technical assistance were also provided in response to requests from various Erie County departments and offices. As of December 2024, the ECOHE has provided a total of 342 hours of one-on-one technical assistance with 107 community-based organizations in Erie County. Through grant technical assistance and collaborative partnerships, the ECOHE has helped bring over \$30 million in grant funding awards to Erie County organizations since these services began in 2023, the vast majority of which was awarded directly to community-based organizations.

In 2024, the ECOHE also applied for and received a \$99,708 grant award from the U.S. Department of Agriculture for a Farmers Market Promotion Program (FMPP). The FMPP grant will be implemented in 2025 and 2026 in partnership with the Food Policy Council of Buffalo (FPC) and Erie County and 211 WNY. The ECOHE will work with 211 WNY and the FPC to connect residents with local farmers and farmers markets for fresh foods. Grant activities include creating a promotional campaign for farmers markets within low food access communities and utilizing 211 WNY's information text services to help Erie County residents find nearby locations selling fresh produce using a live database of local fresh food purchasing locations. This pilot program is designed to improve health outcomes and food access while supporting our local agricultural community.

100% of Let's Talk About Grants workshop attendees who completed a feedback survey following their participation said that the program was helpful or very helpful. 100% also reported that they would be very likely to both use and share strategies they learned during the workshop. Feedback included that the workshop was "very helpful and informative." Other participant quotes: "So much information in a small amount of time! Thank you it was great!" "It was fantastic. I have felt lost when even thinking about grants, and this was broken down so clearly. Thank you so much. This is invaluable information." Requests to register for Let's Talk About Grants workshops continued after the conclusion of the workshop series. As a result, the ECOHE produced a recorded video series based on the Let's Talk About Grants workshop that is available to watch on demand on the ECOHE website as of February 2025. Additionally, Let's Talk About Grants workshop participants identified a need for a similar workshop on grants management to assist them in navigating these systems after they have received grant funding. In response to this feedback, the ECOHE is developing a grants management workshop for implementation in 2025.

In 2024, the ECOHE's Holistic Healing Pilot Program was selected as a Model Practice by the National Association of County and City Health Officials (NACCHO) through a peer review process. NACCHO selects Model Practices that demonstrate initiative in response to a local public health need. Implemented by the ECOHE in 2023 and 2024, the Holistic Healing Pilot Program was a series of free holistic mental health interventions including healing circles, yoga workshops, and art workshops to residents of Buffalo's East Side in response to the racially motivated mass shooting at Tops supermarket on May 14, 2022. Funded by the New York State Office of Minority Health and Health Disparities Prevention, the Holistic Healing Pilot Program was designed to create safe spaces for residents of Buffalo's East Side to express themselves as they move through their healing journeys and explore a variety of holistic strategies to aid in coping with and healing from individual and collective trauma. The ECOHE's Holistic Healing Pilot Program was recognized as a Model Practice during the NACCHO360 conference in July of 2024.

Recommendations for the future of the ECOHE's grant programs and services include increasing technical assistance capacity. Continued demand for assistance in 2024 demonstrated that there is a significant community need for grant-related technical assistance among community-based organizations and groups serving minority, marginalized, and underserved communities in Erie County. Grant technical assistance requests are anticipated to increase further as government grant funding decreases because of federal policy changes. The creation of an additional staff position within the ECOHE would help meet this need.

COMMUNICATIONS & PUBLICATIONS

Communications & Language Access

In 2024, the ECOHE reaffirmed a commitment to offering publications, media, and education that is legible for most and translated for many. The ECOHE consistently works to meet people where they are at in terms of communications. The ECOHE continues to expand the collective understanding of effective communication styles, plain language, accessible visual displays of data, visually diverse imagery, preparing documents for translation, and ADA compliance.

These efforts have helped increase the ECOHE's reach in communities with low literacy levels and communities that speak languages other than English, pushed the ECOHE to better understand cultures represented in Erie County, and provided support to populations that are eager to receive materials that they can understand and access.

With recognition of the literacy rate in Erie County, the ECOHE focuses on plain language communication. This style of writing and speaking meets Erie County residents and visitors where they are at regardless of educational attainment level or English language comprehension status. All educational publications that the ECOHE distributes are developed within grade 4-7 reading levels using the Flesch-Kincaid Grade Level test. All acronyms, jargon, and complex terms are defined using simple phrases and commonly understood words. This allows for greater comprehension for many, including those learning English or reading translated materials. In 2024, the ECOHE expanded this plain language effort to include social posts, program advertisements, and some reports. ECOHE also spent time urging other Erie County departments and divisions to simplify and translate their publications.

In response to a diverse population speaking over 80 languages countywide, the ECOHE offers materials in the top languages spoken and understood in Erie County and in-person Spanish language trainings, including Spanish Mental Health First Aid. Using a combination of U.S. Census data, ECOHE data, and community feedback, the ECOHE plans to determine and review a list of top languages annually and revise as needed or in accordance with any language access policies Erie County puts in place. The ECOHE also employs design standards that aim to visually represent a wide audience of individuals by ensuring diversity of skin tone, body type, age appearance, physical ability, family makeup, and more.

In 2024, the ECDOH and several other individual County staff members consulted with the ECOHE on the office communications review process, plain language, and diversity in design standards. This type of consultation expanded outside of the County as well. ECOHE was able to offer technical support to UBMD, the University at Buffalo's physician's group, on the pamphlets they offer to new parents and people living with substance use disorders. The communications standards that the ECOHE implements are easily replicated, making them a great tool for any Erie County division, department, or community organization.

In Erie County, understanding health information and accessing health care are nearly impossible without English language proficiency, making the very first steps into the health care system

extremely difficult for populations with Limited English Proficiency (LEP). To these ends, the ECOHE has consulted with ECDOH on important health issues and ensured a wide reach through diverse visuals and plain language communication for events such as:

- A lead contamination issue involving cinnamon products sold at discount variety stores in Erie County
- Extreme winter weather and extreme heat advisory communication planning
- International Breastfeeding and Chestfeeding Day and breastfeeding/chestfeeding awareness
- Emergency preparedness communications
- Harm Reduction communications
- A community resource fair held in a community known for a concentration of Bengali families and another known for a concentration of Burmese and Karen families

ဘတ်ဖလိုမြို့နယ်အိမ်ရာဆိုင်ရာအာဏာပိုင်နှင့် အီရီကောင်တီ ကျန်းမာရေးစောင့်ရှောက်မှု တန်းတူညီမျှမှုရုံးတို့မှ တင်ဆက်သည်။

မိသားစုများအတွက်

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BMHA **HIGHMARK** **ကျန်းမာရေးတန်းတူညီမျှရေးရုံး**
 Erie County Department of Health **FiveWell**
www.erie.gov/health-equity **BURMESE**

Above: Burmese translation of a flyer for an ECOHE event held in conjunction with Buffalo Municipal Housing Authority

Right: Examples of social posts

LET'S GET READY FOR SUMMER HEAT

Summers in Erie County are getting hotter. Planning for hot weather will keep you cool, safe and healthy this summer.

ERIE.GOV/HEALTH-EQUITY

TELL YOUR PROVIDER ABOUT YOUR FAMILY'S LEAD EXPOSURE RISKS

I would like a lead screening for my child...

...we recently learned that the cinnamon we use at home was found to contain lead.

ERIE.GOV/HEALTH-EQUITY

As the ECOHE analyzes information collected in the 2024 Community Health Assessment and moves to make recommendations and pilot models and programs for Erie County, the office will ensure Erie County's diverse populations and those with LEP are not left behind. Public awareness is not possible without materials and messaging that is understandable and accessible for all Erie County residents.

The ECOHE team works hard to accomplish communication goals and to provide information in a way that is intentionally evolving to reach and understand Erie County residents, exactly as they are. While there is minimal community feedback for the Communications Review process or the ECOHE's multilingual offerings, many positive sentiments have been captured at community engagement events and by way of community-based agency staff. Comments noting that it is very helpful that ECOHE offers materials in other languages, that the ECOHE is reaching more people by working at communication, and that the ECOHE team is appreciated for their efforts to translate and provide effective materials are often shared at staff meetings.

Moreover, several healthcare and community-based agencies have approached the ECOHE for access to the Office's straightforward and multilingual offerings. These agencies have requested copies of ECOHE publications and access to digital offerings to utilize with patients, constituents, and their internal teams.

Moving forward, the ECOHE will maintain a standard of communication that evolves with the needs of County residents, is reflective of the County's diverse populations, and is compliant with ADA standards.

The ECOHE will continue to offer technical support and guidance to agencies choosing to offer materials in languages other than English, promote translation and interpretation to agencies who serve populations with limited English proficiency, and advocate for agencies to increase their reach by designing materials reflective of the communities they aim to serve. These measures will result in populations that are more readily connected to public health information. The impacts of this interconnectivity can be measured in public health outcomes over time, through the 2024 Community Health Assessment and related focus groups, as well as the qualitative feedback ECOHE receives.

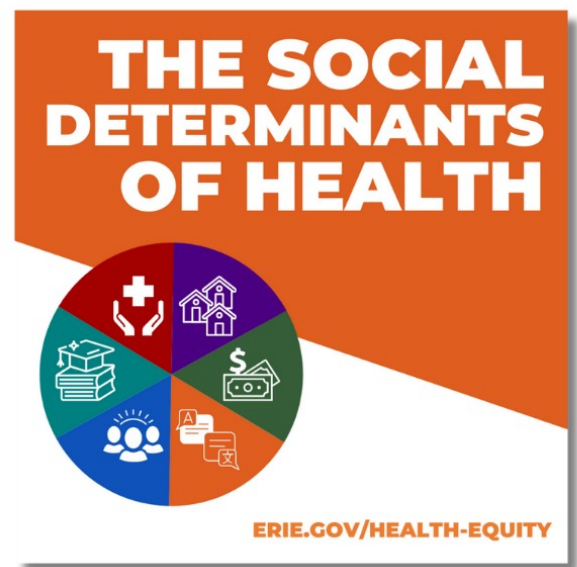
Additionally, the ECOHE will continue to advocate for plain language communication among all County departments and local healthcare agencies. This work is integral to maintaining a standard of public health communication that reaches many.

Publications

In 2022, ECOHE launched a series of publications that are designed to inform, remind, and connect communities in Erie County to resources and knowledge relating to the social determinants of health. Each edition is titled *Let's Talk About [a topic]*, with the intent of inspiring Erie County residents to begin or deepen the conversations they have around that topic. Topics include food access, mental health, economic stability, chronic disease, and emergency preparedness. ECOHE publications offer upstream support that addresses health equity issues by putting the power of information in the hands of the residents of Erie County in a way that is positive, inviting, culturally connected, and representative of a diverse population.

The *Let's Talk About* series is distributed in the top languages spoken and understood in Erie County, including but not limited to Arabic, Bengali, Burmese, English, Spanish, and Swahili. This series is distributed primarily in digital formats on www.erie.gov, through the ECOHE email newsletter, and Erie County social media outlets. Additionally, over 15,000 print copies of each edition are sent out to community-based organizations across Erie County. Print copies are distributed at locations where Erie County residents and visitors come together within their community, including public libraries, health centers, community centers, and nonprofit service providers.

The *Let's Talk About* series is intended to be culturally responsive and is written in plain language to meet Erie County residents where they are at in terms of identity and literacy, respectively. This work aims to “eliminate racial, economic, sexual/gender, and geographic-based health inequities that shorten or negatively-impact lives by changing the social and economic conditions that cause illness and shorten lives.” [1]. For example, in editions such as *Let's Talk About Vaccines*, information that is often stigmatized and misinterpreted is simplified in a way that makes it accessible and understood by more people. Additionally, in *Let's Talk About Health Equity* and *Let's Talk About Diabetes*, the ECOHE explains that health behaviors are not the only factor that contribute to a person's health status and normalizes exploring the typical symptoms of chronic illness. These publications connect the reader to information and support that is welcoming to all and easily understood by many. Other educational tools covering chronic illness tend to focus on concerning test results such as high blood sugar and cholesterol and center recommendations on individual health behaviors, without regard to an individual's access to support, services, or care.



Above left: Examples of ECOHE publications

Above right: Example of ECOHE social post

Figure 8: Distribution of Health Equity Publications 2022-2024

Edition Name	Number of Print Copies	Number of Digital Email Sends
2022	37793	1658
Let's Talk About Mental Health	4412	3
Let's Talk About Grief	6545	83
Let's Talk about Food Access	7266	302
Let's Talk About Living with Disabilities	5888	310
Let's Talk About Working in Government	6841	479
Let's Get Ready for Winter	6841	481
2023	62268	3405
Let's Talk About Mental Health	2130	-
Let's Talk About Grief	513	-
Let's Talk about Food Access	870	-
Let's Talk About Living with Disabilities	575	-
Let's Talk About Working in Government	845	-
Let's Get Ready for Winter	767	-
Do You Know Your Health Numbers?	8833	494
Let's Talk About Pregnancy	11188	546
Let's Get Ready for Summer Heat	12579	631
Let's Talk About Lead	10834	761
Let's Talk About Grants	13134	973
2024	59381	3689
Let's Talk About Mental Health	3233	-
Let's Talk About Grief	882	-
Let's Talk about Food Access	604	-
Let's Talk About Living with Disabilities	34	-
Let's Talk About Working in Government	155	-
Let's Get Ready for Winter	7090	-
Do You Know Your Health Numbers?	148	-
Let's Talk About Pregnancy	464	-
Let's Get Ready for Summer Heat	543	-
Let's Talk About Lead	761	-
Let's Talk About Grants	239	-
Let's Talk About Health Equity	15876	1067
Let's Talk About Diabetes	13887	1201
Let's Talk About Vaccines	15465	1421

Figure 9: Distribution of Printed Health Equity Publications: Partner Organizations 2022-2024

Edition Name	Number of Partner Organizations Distributing Publications
2022	
Let's Talk About Mental Health	94
Let's Talk About Grief	94
Let's Talk about Food Access	102
Let's Talk About Living with Disabilities	102
Let's Talk About Working in Government	106
Let's Get Ready for Winter	106
2023	
Do You Know Your Health Numbers?	106
Let's Talk About Pregnancy	102
Let's Get Ready for Summer Heat	128
Let's Talk About Lead	134
Let's Talk About Grants	150
2024	
Let's Talk About Health Equity	151
Let's Talk About Diabetes	150
Let's Talk About Vaccines	155

In 2024, the ECOHE focused on expanding the reach of the *Let's Talk About* series across Erie County. Two NYS Public Health Fellows completed outreach tasks to community-based organizations (CBOs) and faith-based institutions in Erie County that resulted in over 50 new subscribers in both digital and print publications. The ECOHE Public Health Educators and Outreach Aide led community development efforts that grew the digital subscriber list, increased awareness of the publications among CBOs and put physical copies into the hands that needed them the most. This work resulted in the reach of the *Let's Talk About* series growing to over 17,000 people per edition.

An additional outcome from the community development work was identifying the need for complementary materials. The ECOHE launched another series of “allies” sheets that included service provider phone numbers relevant to ECOHE publications and programming. “Mental Health Allies” and “CYSHCN Allies” were both released in 2024, offering additional support in mental health and wraparound services. A digital birth plan template was also developed and translated to complement *Let's Talk About Pregnancy*.

ECOHE publications have received numerous accolades from local service providers, community members, and educators, citing plain language and appealing design as achievements in government and public health communications. The Erie County Department of Health received the Excellence in

Communication Award for Local Health Departments at the New York State Public Health Association annual meeting (pictured below). Its nomination cites its publications and written reports in “delivering useful, impactful information around health topics and health disparities.”

The Kidney Foundation of WNY posted about *Let’s Talk About Diabetes* on ECDOH social media, stating: “Thanks for raising awareness of this concern and serious issue! Among other health benefits, controlling blood sugar helps to protect kidney function.”



Above: ECOHE team with the Excellence in Communication Award for Local Health Departments



Right: Social posts on Kidney Foundation of WNY social media page

The *Let’s Talk About* series was set to produce four editions in 2024. In 2022 and 2023, this initiative was largely carried out by New York State Public Health Fellows, resulting in the production of 13 editions during that two-year time period. When the fellowship program was scaled back in 2024, staffing waned and production slowed. In 2024, the ECOHE produced and distributed three editions: *Let’s Talk About Health Equity*, *Let’s Talk About Diabetes*, and *Let’s Talk About Vaccines*. *Let’s Talk About Heart Health* was drafted in 2024 but was not fully edited, translated, or distributed until 2025.

The *Let’s Talk About* series digital distribution reached approximately 1,500 individual email subscribers as well as countless website and social media visitors in 2024. Print distribution of ECOHE publications reached approximately 17,000 visitors to libraries, health centers, community centers, and nonprofit service providers. In print, the 2024 *Let’s Talk About* series reached 28 ZIP codes and an average of 152 unique locations, per edition.

It is difficult to definitively measure the total number of people served as the distribution of these ECOHE publications has a snowball effect, with more and more groups and organizations sharing this content digitally and photocopying and printing their own copies to distribute. For example, in 2024:

Neighborhood Health Center, Jewish Family Services, Highmark, Independent Health, and Legal Aid Bureau of Buffalo regularly use an array of ECOHE publications in their training of staff, consultation of healthcare patients, immigrants and refugees new to Erie County, and legal clients, respectively.

Nurses and discharge planners at ECMC and Catholic Health hospitals offer ECOHE publications to patients to complement their care. Catholic Health is exploring adding ECOHE publications to EPIC, their electronic medical records platform for emergency medical services (EMS), so providers can easily access and print relevant information for patients at the direct point of care.

The Erie County Department of Personnel and Erie County Department of Social Services regularly print their own copies of *Let's Talk About Working in Government* for outreach at job fairs across the county and each new Erie County employee receives a copy of this edition at orientation.

The Food Policy Council of Buffalo & Erie County utilized *Let's Talk About Food Access* in their summer and fall outreach events.

The International Institute of Buffalo uses an array of ECOHE publications in outreach to community partners as a best practice example of public communications that are well-suited for populations with Limited English Proficiency (LEP) or who speak a language other than English at home.

The Clean Air Coalition utilizes ECOHE publications at the regular NYS Department of Environmental Conservation East Side Environmental Forums.

The Erie County Executive's Office implemented content from *Let's Get Ready for Winter* as key information paired with winter emergency preparedness kit distributions across Erie County.

Several libraries continue to reach out when their regular supply of ECOHE publications runs low.

The social determinants of health connect the vast corners of our lives to our overall well-being. The potential for the ECOHE to publish information regarding the social determinants of health is great. ECOHE publications are responsive to a variety of needs of residents and visitors in Erie County. These publications offer a wealth of information and connections to valuable resources. For these reasons, the ECOHE recommends continuing to produce these publications in perpetuity, at a frequency that complements staffing availability, and with the understanding of a need to collaborate with Erie County departments and CBOs that offer relevant programs and services.

It is a goal of this program to ensure that all areas of Erie County that are experiencing health disparities have access to ECOHE publications. In 2025, the ECOHE will work to expand distribution, focusing on digital distribution and connections to CBOs.

It is also a goal of this program to ensure that all ECOHE publications are accessible and meet community members where they are in terms of literacy and English language comprehension. In 2025, ECOHE will work to increase the number of types of media ECOHE publications are accessible

on by creating audio and video versions of existing publications for YouTube. The ECOHE will work to expand the number of languages each publication is translated into. The ECOHE will also work to meet new ADA compliance guidelines for digital media.

MENTAL HEALTH

Mental Health First Aid (MHFA)

Mental health plays an important role in physical health as well as a person's capacity to participate in their community. Research shows that people are less likely to receive high-quality mental health care if they are members of racial or ethnic populations, have lower socio-economic status, or reside in a rural community [7]. According to the NYS Behavioral Risk Factor Surveillance Survey (BRFSS), adults who identify as LGBTQ+ were significantly more likely to experience frequent mental distress, were more often diagnosed with a depressive disorder, report heavy or binge drinking, and were less likely have no personal healthcare provider [14]. According to the ECOHE's *Health Equity in Erie County: 2023 Annual Report*, 73% of respondents who indicated that they were transgender or nonbinary reported having anxiety or depression [8]. This is much higher than the percentages of respondents who indicated they were cisgender men (22%) or women (34%).

Intersectionality is an important factor when understanding health disparities based on gender identity along with other identities, such as race. These factors can compound and interact, resulting in additional health disparities. For example, a study in the American Journal of Preventative Medicine highlighted that Black LGBTQ+ individuals were more likely to report longer periods of being physically or mentally unwell than Black individuals who are heterosexual and cisgender [15].

In 2024, the ECOHE continued facilitating Mental Health First Aid (MHFA) trainings throughout Erie County as a part of the Office's efforts to address health disparities and service gaps. When it comes to mental health, many health disparities exist, and the prevalence of mental health distress is higher within the marginalized and minoritized communities named in the Health Equity Act of 2021, including racial and ethnic minority groups, sexual and gender minority groups, and residents of rural areas. Though the prevalence of mental health distress is high, there are not enough providers to meet the demand for mental health services, particularly in the City of Buffalo, which remains a HRSA-designated Health Professional Shortage Area (HPSA) for mental health. MHFA trainings increase the number of community members that are equipped to identify and respond to someone experiencing a mental health or substance use challenge, working in concert with efforts to increase the number of local qualified mental health professionals to help address mental health in Erie County.

Many people are not prepared to assist someone who may be experiencing a mental health or substance use challenge. MHFA teaches participants how to recognize signs of mental health or substance use challenges, how to offer and provide help, and how to guide a person toward appropriate care. This learning opportunity helps community members become better prepared to start conversations about mental health or substance use by increasing understanding and providing

an action plan. The ECOHE continued to offer both Adult MHFA classes (for adults interacting with other adults) and Youth MHFA classes (for adults interacting with youth ages 12-18) in 2024.

By the end of 2024, the ECOHE trained approximately 646 community members in Mental Health First Aid (MHFA). The figures below show MHFA participation by year and type of training. The total number of community members trained decreased slightly in 2024 compared to 2023. This is due to the completion of the ECOHE’s instructor training test phase during which Erie County employees were trained and reflects a shift in focus to conducting MHFA with the ECOHE’s populations of focus and community organizations that work directly with these populations.

Figure 10: Number of Participants of Each Type of Mental Health First Aid

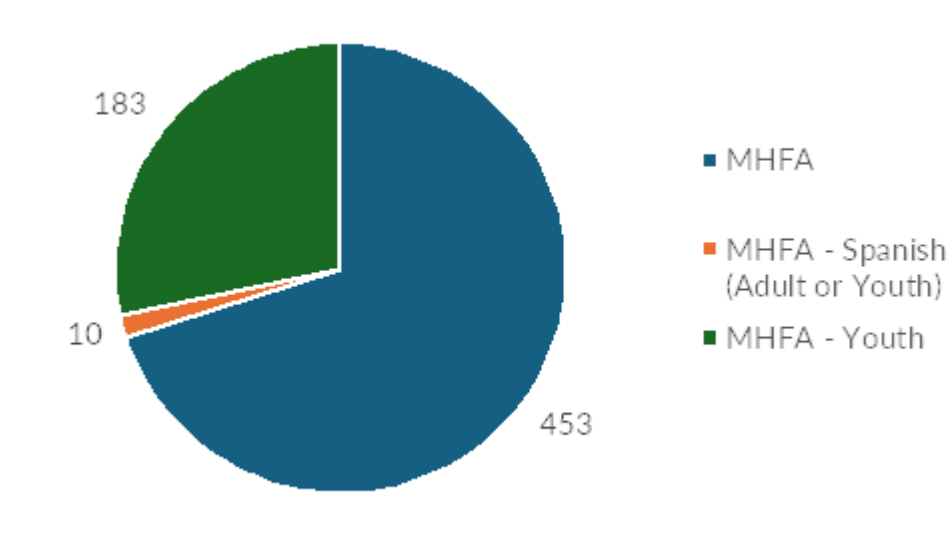


Figure 11: Number of MHFA Participants by Year

Year	Number of Participants
2023	721
2024	646

The number of participants is an approximate count of attendees, as some participants register but do not show, or attend only one day of the multi-day training.

2024 MHFA participants were demographically diverse in many ways, including age, education, gender, race, sexual orientation, and residential location. 2024 MHFA participant demographic data is shown in the figures in the pages that follow. Note: The following data represents only the 601 out of 646 MHFA participants who completed the demographic form.

Figure 12: Number of MHFA Participants by Erie County ZIP Code

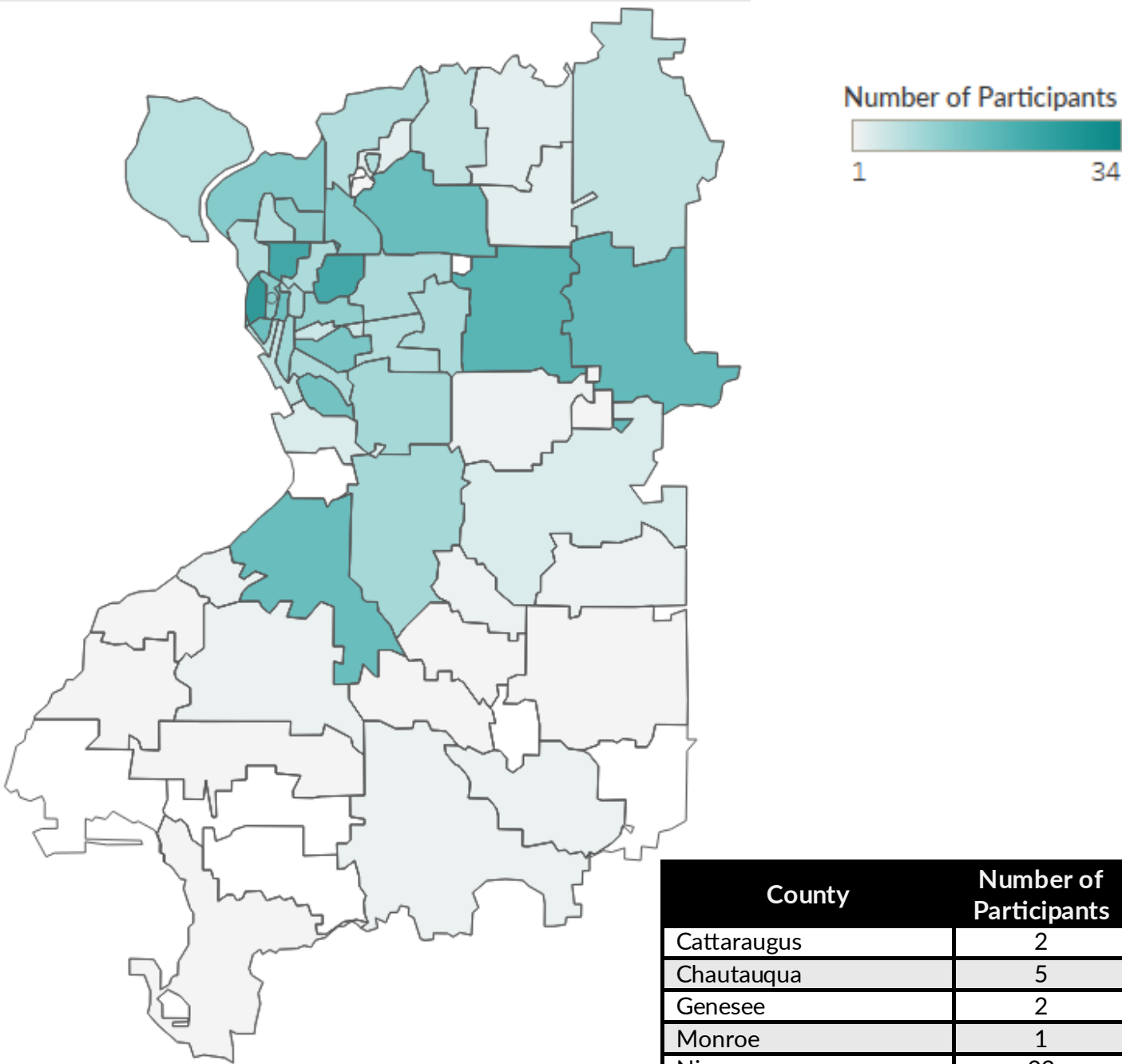
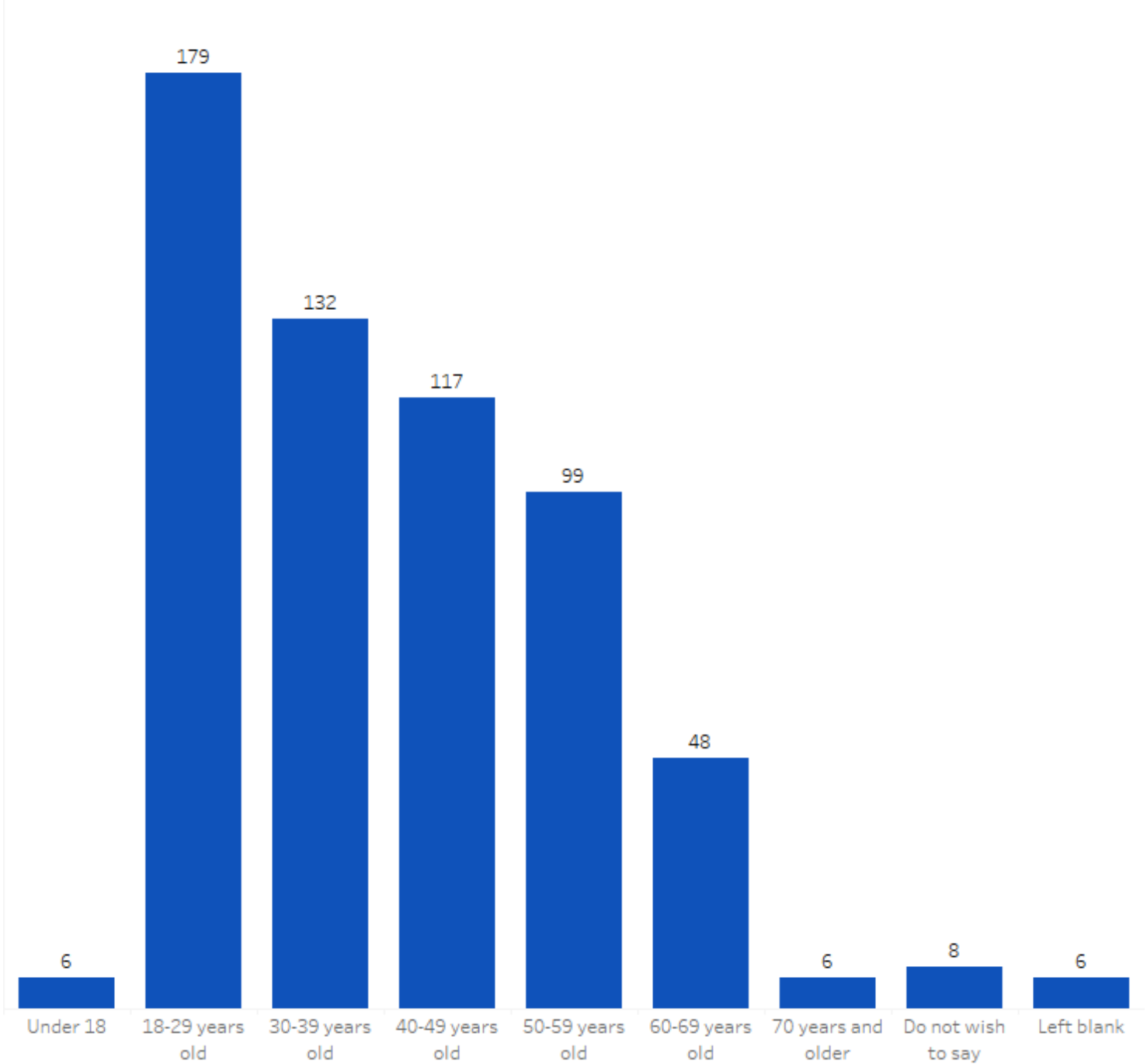


Figure 13: Number of MHFA Participants Who Live Outside of Erie County by County of Residence

County	Number of Participants
Cattaraugus	2
Chautauqua	5
Genesee	2
Monroe	1
Niagara	23
Warren Co., PA	1
Wyoming	3

Figure 14: Number of MHFA Participants by Age Group



Some participants reported home addresses outside Erie County, reflecting individuals who work or study in Erie County. Notably, in 2024, MHFA certification increased among younger residents, particularly those aged 18–29. This trend may reflect the growing importance of mental health awareness and stigma reduction among younger generations. The diversity among MHFA participants emphasizes the fact that the ECOHE has continued to prioritize the creation of safe spaces for all community members that are interested in participating.

The figures below and on the opposite page compare the demographic data of MHFA participants by year. The majority of Mental Health First Aiders certified by the ECOHE have been women. In 2024, the ECOHE worked to encourage MHFA training participation among men and people of other genders. As a result, there was an increase in MHFA certification among men and people of other genders in 2024 compared to 2023.

Figure 15: Percent of MHFA Participants by Gender and Year

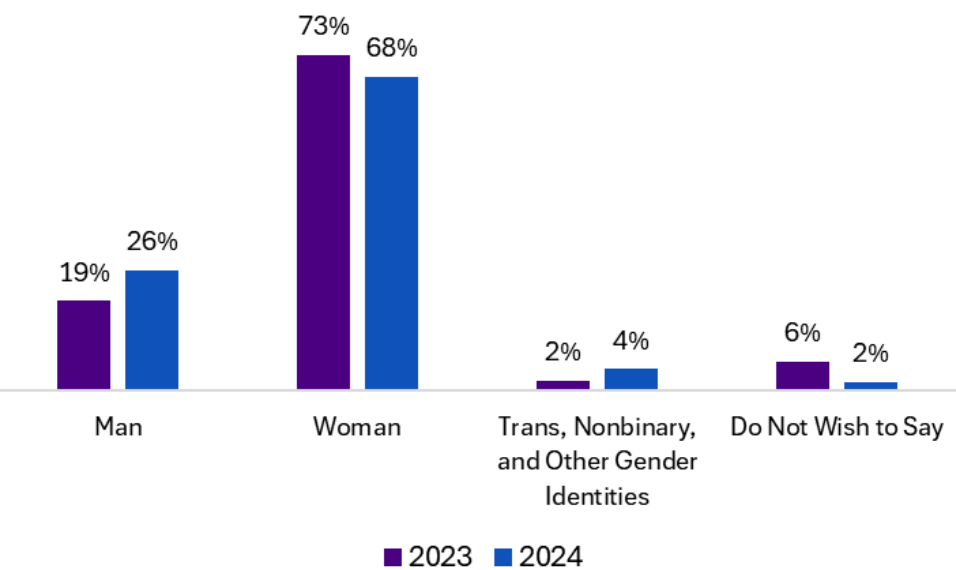
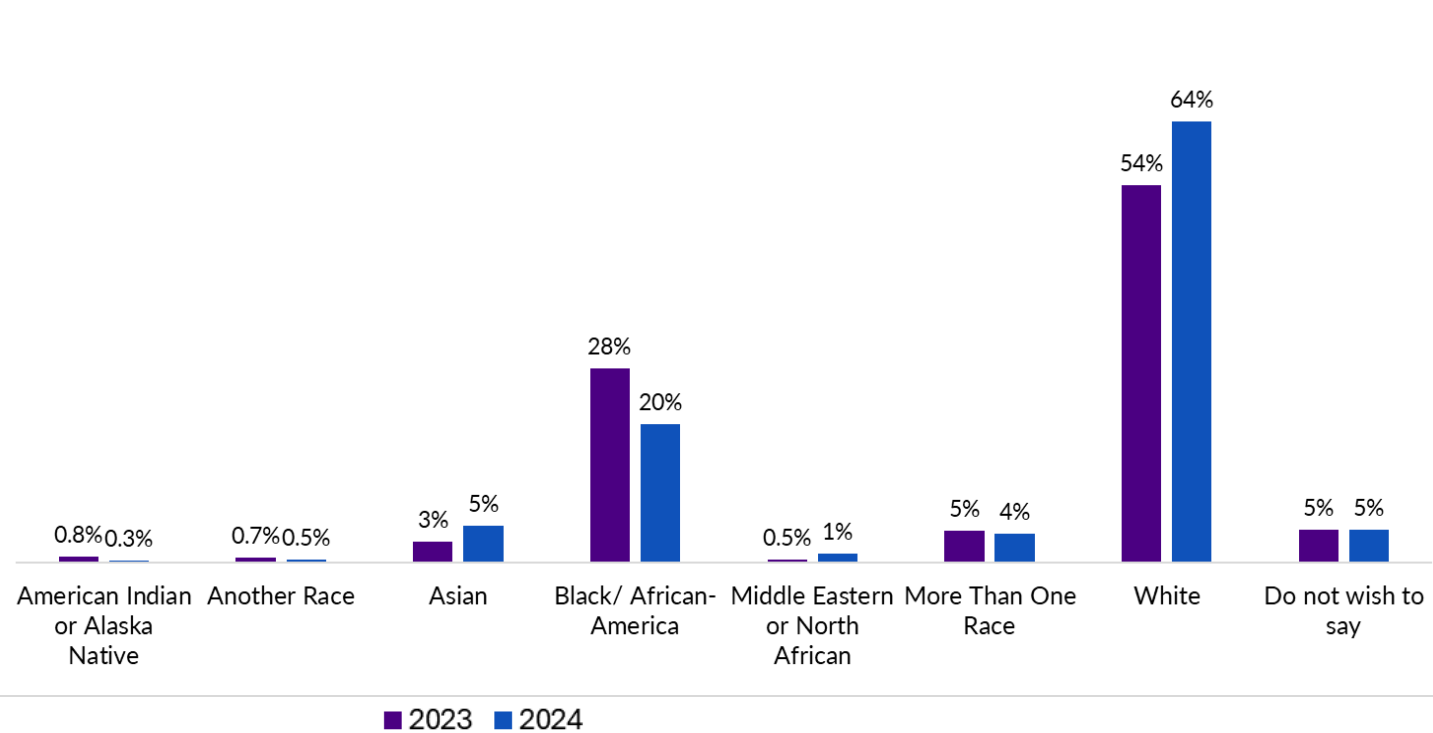
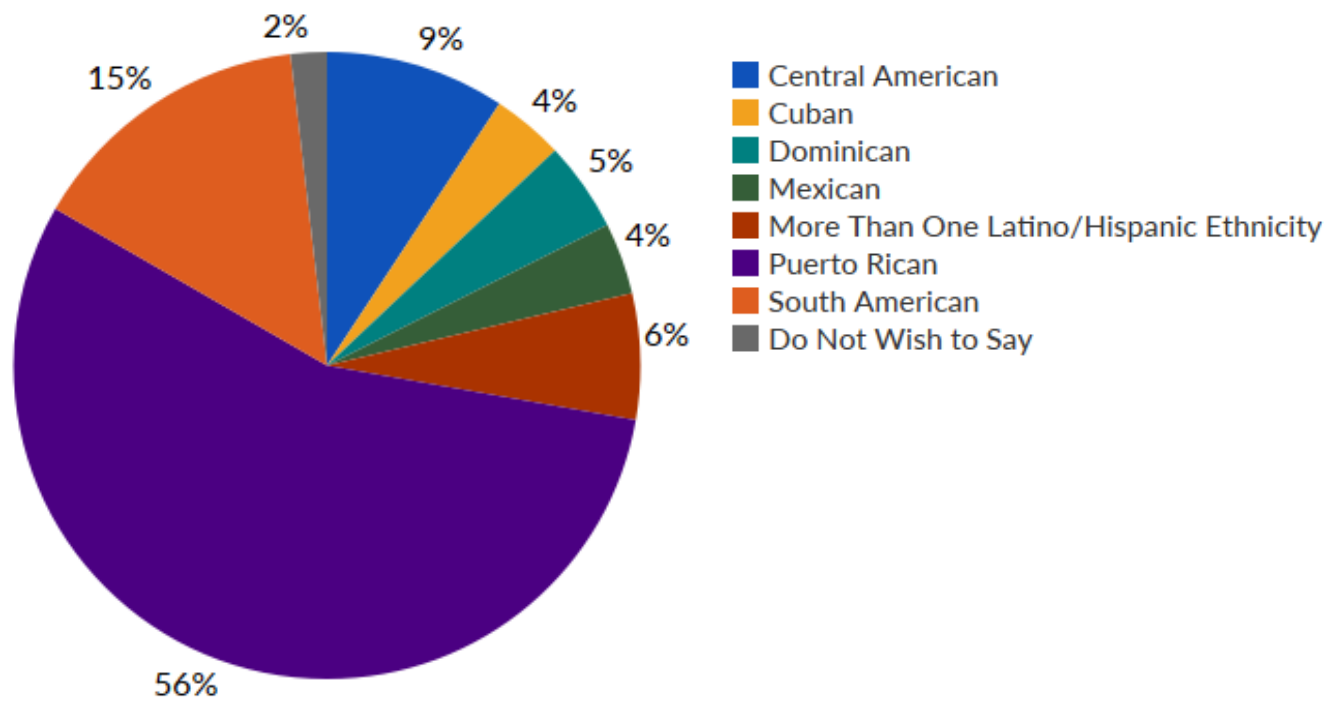


Figure 16: Percent of MHFA Participants by Race and Year



In 2024, 12% of all MHFA participants indicated that they are Hispanic or Latino. The following chart illustrates how MHFA participants who indicated they are Latino/Hispanic responded in terms of their ethnic backgrounds.

Figure 17: Percent of Latino/Hispanic MHFA Participants by Country of Origin



The ECOHE strives to create safe spaces for open and honest discussions during MHFA trainings to help reduce stigma around mental health. This allows the ECOHE to receive feedback from community members about community needs and barriers, including government mistrust due to previous negative experiences and historical injustices.

Feedback received from certified Mental Health First Aiders has been overwhelmingly positive. One participant expressed: “We learned a lot from this training, especially how to deal with crisis situations.”

“We learned a lot from this training, especially how to deal with crisis situations.”

A Hispanics United of Buffalo staff member shared: "I have a lot of patients/clients that don't complete their treatment plans or adhere to the physician's treatment plan because they can't afford to miss work for sessions, or the medication stopped being effective or the medication is actually bringing other side effects, and instead of booking an appointment with their physicians or psychiatrist, they just stop showing up. So, their recovery process looks like they didn't care, but in reality, it's the lack of communication, lack of time from work to be able to complete their recovery plan. This Mental Health training is showing me how important it is to speak life into my client because they need it and encouragement goes a long way. They have to hear it that they can make it through their treatment plans and recover."

Providing reliable information is a key part of the MHFA action plan. Each Mental Health First Aider received a copy of the MHFA manual and participant processing guide for the training they completed at no cost, as well as resource lists and other helpful information that can be shared with others. Instructors ensure that participants have accurate details about available resources and services, including other ECOHE and Erie County Department of Health (ECDOH) programs.

The ECOHE will continue to provide MHFA programming as part of the Office's efforts to strengthen community resilience among Erie County's minority, marginalized, and underserved populations. The ECOHE's goal is to expand community-based support and resilience by certifying more Mental Health First Aiders each year, particularly in minority and rural communities. The ECOHE will also focus on expanding MHFA training for employers across Erie County to promote workplace equity.

Spanish Mental Health First Aid

A total of 35 individuals were trained in Spanish Mental Health First Aid in 2024. Trainings were delivered to community members as well as to staff members from organizations that work directly with the Latino/Hispanic community. Based on community feedback, some of the challenges to successful delivery of Spanish Mental Health First Aid trainings were cultural norms and stigma, scheduling challenges, and economic stability as a social determinant of health.

In 2024, the ECOHE began planning changes to adapt to the needs of community members and address barriers to engagement. Moving forward, the ECOHE will work collaboratively with community leaders and elders and trusted community organizations to promote the benefits of mental health awareness and treatment. Based on community feedback, training and workshops after work hours or during the weekends are more accessible to community members. The ECOHE will work with community agencies to deliver trainings on evenings and weekends.

Although enrollment in Spanish MHFA was lower than anticipated in 2024, feedback from participants who completed the training was very positive. Spanish MHFA feedback included: "I was excited to find out that this training was available in Spanish. Finally, there is training in my native language."

"There are many cultural norms regarding health, especially mental health, that are not understood across different races and ethnicities. Some of us grew up being open about mental health, while in other families, such discussions may not be welcomed. It is essential to meet the needs of families while also respecting their wishes and boundaries. This Mental Health First Aid training in Spanish should be available to all families so they can better understand its importance."

Mindfulness

In Erie County, 16.3% of adults reported frequent mental distress during the past month [16]. Additionally, 16.3% of Erie County adults report poor mental health for 14 or more days in the past month [10]. According to the ECOHE's *Health Equity in Erie County: 2023 Annual Report*, the most reported health condition was "Anxiety or Depression," with 1 in 3 survey respondents selecting this response option [8].

The ECOHE's mindfulness program is a series of free workshops that help people from minority, marginalized, and underserved populations in Erie County learn about mindfulness. The mindfulness program explains what mindfulness is and some of the benefits of mindfulness. It includes basic mindfulness techniques they can use for their own practice or share with others, such as blowing bubbles to practice mindful breathing. It is important to provide inviting methods of introducing mindfulness such as blowing bubbles due to the stigma around addressing mental health. The program is offered in two ways: through a formal class with a slide presentation and through casual conversations in community settings like health fairs.

The ECOHE mindfulness program helps people in Erie County who may have fewer chances for good health learn about mindfulness. Mindfulness may help people feel less anxious or sad, sleep better, focus more, and be more able to deal with pain. Mindfulness, a form of self-care, can help address social and community context as a social determinant of health.

In 2024, the ECOHE taught mindfulness to about 344 Erie County residents at 24 community events. Many of the participants were from minority and marginalized populations and included older adults and people with lower incomes. Each program participant received a mindfulness activity packet and a bottle of bubbles. Programs were held for Buffalo Public Schools Say Yes Buffalo, Buffalo Public Schools Adult Education Division, the Erie County Department of Senior Services University Express, and the Pride Center of Western New York.

The mindfulness program goal for 2024 were to teach 2 formal mindfulness programs to school children, 2 to adult groups, 1 to a group of summer camp staff, and 1 to a group of Buffalo Public Schools staff, all with participants who are either from marginalized groups or work with marginalized groups. The chart on the following page shows the number of programs completed in 2024 as well as the number of participants and partner organizations.

Figure 18: Number of Mindfulness Programs and Participants

Audience	Number of Programs	Number of Participants
Adults (Buffalo Public School Adult Education ESL/GED Students)	10	203
Camp Staff (Delavan Grider Community Center)	1	5
Health Equity Ambassadors	1	15
Older Adults (Erie County Senior Services University Express Program)	3	37
School Children (1st, 2nd, 4th, Buffalo Public School #37)	5	55
School Staff (Buffalo Public Schools)	1	14
High School Students (Buffalo Public Schools)	1	4

Feedback on the mindfulness program has been positive. When asked what they thought of the mindfulness activities, many participants stated that they feel “relaxed.” One participant shared that they were happy to have an activity packet to remind them of things they can do. Participants frequently shared that they love the idea that they can use bubbles to relax.

Next steps are to create a webpage on the ECDOH website that explains what mindfulness is, its benefits, and activities that people can do to enhance their quality of life. Additionally, content from the mindfulness program may be integrated into future versions of the ECOHE’s *Let’s Talk About Mental Health* publication.

LIVE WELL ERIE FRAMEWORK

Children and Youth With Special Health Care Needs (CYSHCN)

Children and adolescents face unique health related challenges. In Erie County, like many other areas of the country, youth are more diverse and therefore more likely to belong to a racial or ethnic minority community or to be foreign born compared to older individuals. This often puts them at risk for poor health outcomes [7]. Financial stability can be a major barrier to a healthy childhood and, in Erie County, 19.0% of children under the age of 18 live in poverty [10]. In the ECOHE's *Health Equity in Erie County: 2023 Annual Report*, survey respondents reported numerous challenges to finding child care including affordability, availability and the quality of care [8]. Additionally, 25% of respondents who have young children report that lack of child care is a challenge to accessing health care.

The Erie County Children and Youth with Special Health Care Needs (CYSHCN, pronounced "shin") Program seeks to improve the coordination of care for children and youth who have special health care needs. This program serves families with infants, children, and youth from birth to 21 years old who have serious or chronic medical, physical, behavioral, emotional, or developmental conditions. A diagnosis is not required for enrollment in the Erie County CYSHCN Program.

The CYSHCN Program matches families with community resources and provides referrals to community programs. The CYSHCN Program can also help by providing advocacy with health care providers and school districts, linkage with medical providers and specialists, and assistance with health insurance. The CYSHCN Program can assist with linkage to special education services, support groups, play groups, educational resources, and job and vocational counseling. The CYSHCN Program can also assist older youth with the transition to adult services.

CYSHCN programs are administered by local health departments in 56 out of 62 counties in New York State. Because of its unique location within the ECOHE, Erie County's CYSHCN Program is setting the standard for navigating special health care needs through an equity lens. This includes addressing the social determinants of health and structural barriers such as racism and other forms of discrimination that affect CYSHCN and their families. In 2024, 49 new families were enrolled into the Erie County CYSHCN program, increasing the total enrollment to 99 families. The figures on the next page show 2024 participant demographic data for the Erie County CYSHCN Program.

Figure 19: Gender, Primary Language, and Age of Participants in Erie County CYSHCN in 2024 Compared to NYS CYSHCN in 2022

Participants in Erie County CYSHCN in 2024 Compared to NYS CYSHCN in 2022		
	Erie County 2024	NYS 2022
Gender		
Male	60%	55%
Female	40%	45%
Households With English as the Primary Language	93%	89%
Age		
0-5	45%	18%
6-11	32%	35%
12-17	17%	47%
18-21	5%	

Participants in Erie County CYSHCN in 2024 Compared to NYS CYSHCN in 2022		
	Erie County 2024	NYS 2022
Gender		
Male	60%	55%
Female	40%	45%
Households With English as the Primary Language	93%	89%
Age		
0-5	45%	18%
6-11	32%	35%
12-17	17%	47%
18-21	5%	

Figure 20: Erie County CYSHCN Participants in 2024 by Race and Ethnicity

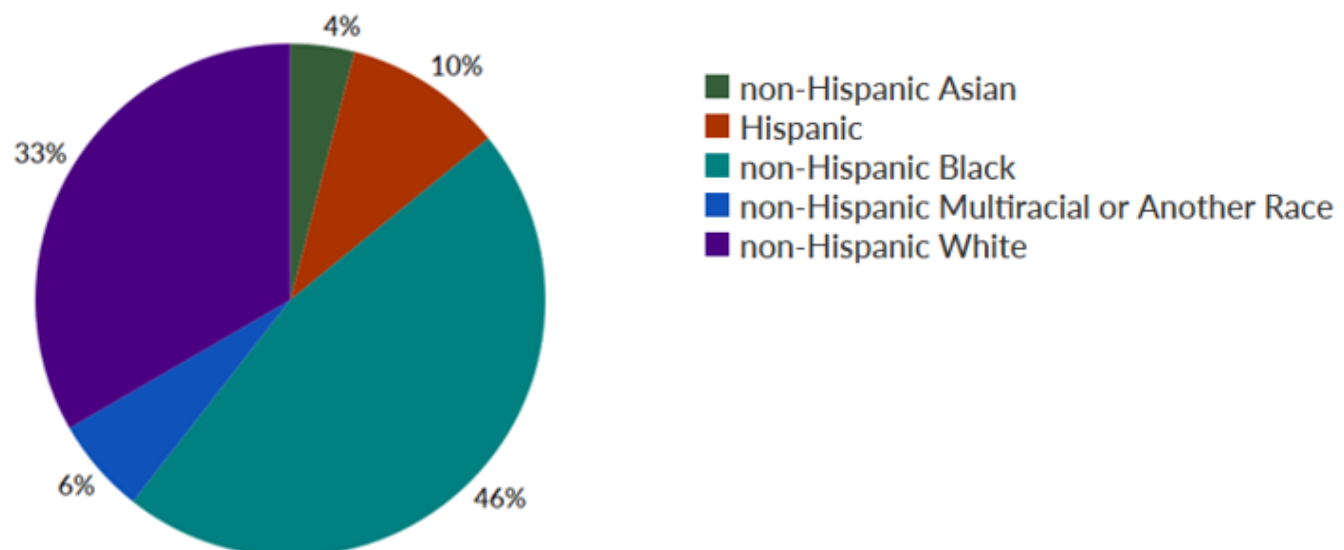


Figure 21: NYS CYSHCN Participants in 2022 by Race and Ethnicity

- Latino/Hispanic
- Non-Latino/Hispanic Asian
- Non-Latino/Hispanic Black/African American
- Non-Latino/Hispanic Multiracial or Another Race
- Non-Latino/Hispanic White

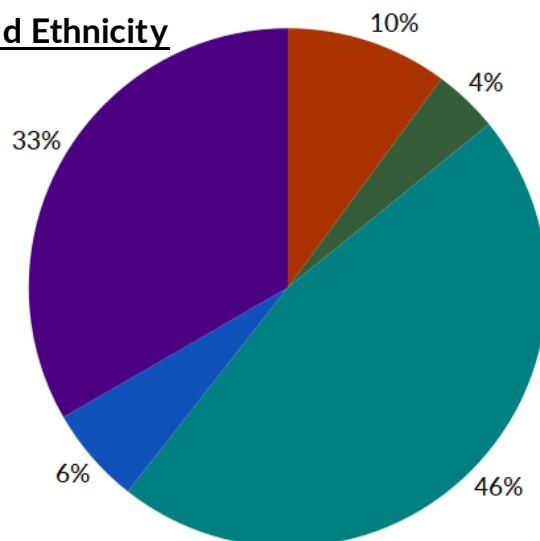


Figure 22: Erie County CYSHCN Participants in 2024 by Insurance Coverage

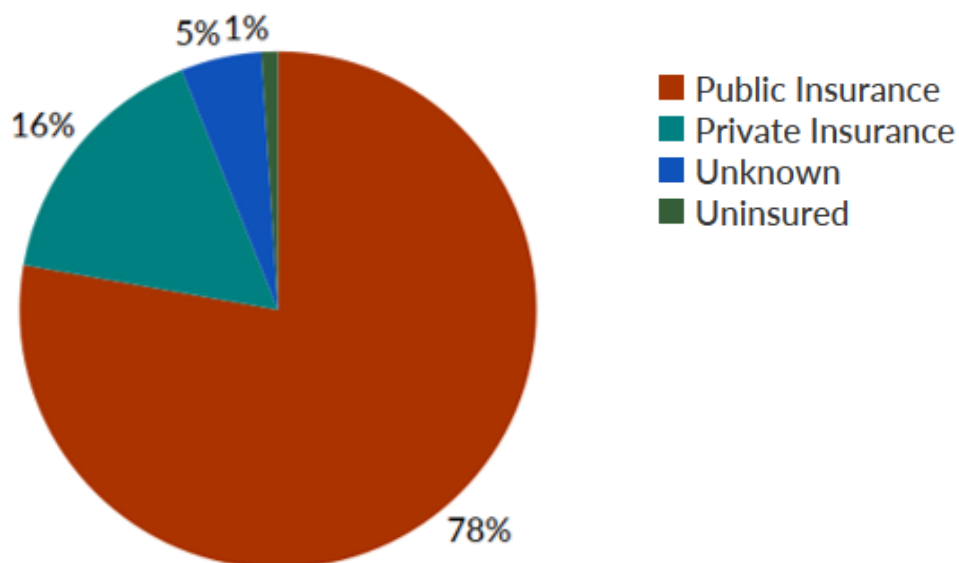
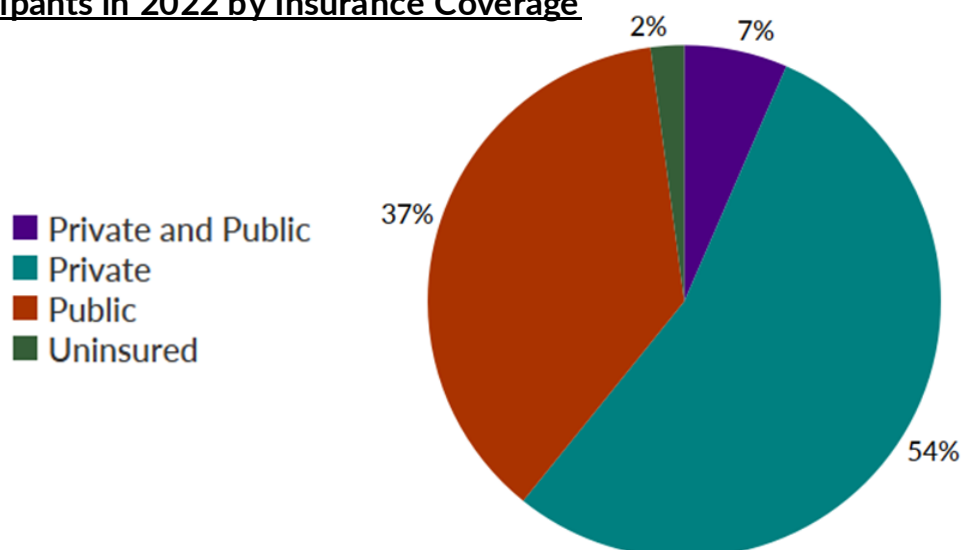


Figure 23: NYS CYSHCN Participants in 2022 by Insurance Coverage



Feedback from families enrolled in the Erie County CYSHCN Program has been positive.

"I want to give you a shout out, but you're my number one supporter."

"Thank you for all your help and love when we spoke a few weeks ago."

"After a long 6 months of back and forth with the district, school, and various doctors' offices, [my daughter] did get an official IEP and is doing really, really well in kindergarten. I am so proud of her and just as thankful for the support and resources you provided to our family."

"Thank you so much for sending a care package to my wife and daughter. My wife is sending you out a thank you card but I wanted to personally reach out and thank you. This made both of their days!! God bless you and thank you again."

A priority for the Erie County CYSHCN Program in 2024 was to ensure that families with CYSHCN had opportunities to connect with resources and services that meet their needs. To facilitate this, the CYSHCN Program hosted the Spring into CYSHCN Family Resource Fair in April 2024 at Explore & More, the Ralph C. Wilson, Jr. Children's Museum. Spring into CYSHCN was designed to assist families with accessing resources while offsetting childcare costs. The event created an environment where a variety of organizations and agencies were available to families all in one location. There were 25 community organizations in attendance. These organizations provided resources and information about mental health care, child care, health insurance, health care, dental care, parent support, legal support, workforce development, recreation, and more. While their children played, families were able to fill out intake forms for programs like SNAP and WIC, ask questions, and find out about new services and organizations. A registered dietician presented about nutrition and suggested healthy snacks that they could be purchased with SNAP, WIC, or Double Up Food Bucks.

It was crucial that Spring into CYSHCN address barriers experienced by families with CYSHCN. To address the issue of transportation, families were provided with free NFTA day passes, and a nutritious meal to help address the social determinants of health that impact CYSHCN and their families. Restrictions, allergies, and accommodations were addressed.

The Spring into CYSHCN event was well-received by attendees and featured in the June 2024 NYS OPH (Office of Public Health) Connects newsletter. Feedback from families included:

"I loved seeing families playing together and exploring."

"I enjoyed speaking with the vendors."

"This event was wonderful! There were so many meaningful community partners in attendance and lots of resources to learn about. The museum itself was a very fun environment with plenty of



"I loved seeing families playing together and exploring."

opportunities for young people to explore and enjoy themselves. You really took the time to make sure the event was as inclusive as possible for families. Thanks for pulling this together!!”

“Great location for the event, very easy to get in and out.”

“[I liked] all of the great information that was provided. Loved the place and the food!”

The Erie County CYSHCN Program continues to focus on outreach and community engagement to identify and reach families who may be eligible for services but are not currently aware of or enrolled in the CYSHCN Program. This was accomplished through presentations and participation in community activities. Erie County CYSHCN attended 14 community events in 2024 and presented to the Children's Advisory Committee with Highmark and Amerigroup, the Buffalo Public Schools Health and Wellness Team, and the Erie County Early Intervention (EI) service coordinator meeting.

Additionally, to raise community awareness about the Erie County CYSHCN Program, a 2024 NFTA bus and bus shelter advertisement campaign was created promoting the CYSHCN Program in the top eight languages spoken in Erie County. Bus shelters with ads in languages other than English were selected near community and cultural hubs for the speakers of each language.

In 2024, the Erie County CYSHCN Program developed a resource guide, “CYSHCN Allies,” to provide families with connections and resources to community agencies and organizations. This resource guide was translated into the top 8 languages spoken in Erie County.

The Erie County CYSHCN program addressed the social determinants this year by:

- Connecting families with resources for affordable housing, home ownership, job fairs, and childcare services (Economic Stability)
- Translating documents into the top 8 languages spoken in Erie County other than English and offering interpretation services (Language Access)
- Presenting to school districts and family support centers, and participating Saturday Academies, and serving on the steering committee of Erie 1 BOCES WNY SMART (Supporting Mental Health and Accessing Resources Together) (Education)
- Advocating for families with health care providers and engaging health care providers in rural Erie County to promote the CYSHCN Program (Health Care System)
- Distributing winter preparedness kits, providing families with localized community services and resources, and participating in community events (Neighborhood and Built Environment)
- Connecting families with peer support organizations and community resources and providing an opportunity for social connection through the Spring into CYSHCN event (Social and Community Context)

The Erie County CYSHCN Program strives to advance health equity by reducing structural barriers, including racism and other forms of discrimination, that impact the health and wellbeing of children and youth with special health care needs and their families and will continue to advocate for an equity-centered approach to services and care. In 2024, the Erie County CYSHCN Program was asked to present as a best practice program at the annual convening of New York State CYSHCN programs.

In the future, the Erie County CYSHCN Program will continue to connect with community organizations and partners, such as school systems, childcare providers, and medical providers to identify unmet needs and challenges for CYSHCN and their families. The CYSHCN Program aims to improve outreach and engagement to reach eligible families and to use data to improve service design. The CYSHCN program also strives to provide trauma-informed, culturally specific, gender-responsive, timely, and tailored services to the community's needs and involve caregivers in planning. A new outreach position will be created in 2025 to support these goals.

Breastfeeding, Chestfeeding, and Lactation Friendly Erie County

The goal of Breastfeeding, Chestfeeding, and Lactation Friendly Erie County is to create more equitable systems of support and protection for breastfeeding and chestfeeding in Erie County, particularly among marginalized and underserved populations and communities. This initiative is a partnership with Catholic Charities WIC and the United Way of Buffalo & Erie County and is funded through the NYS Department of Health's Breastfeeding, Chestfeeding, Lactation Friendly New York (BFFNY) grant. The initiative recruits and establishes New York State designated Breastfeeding, Chestfeeding, and Lactation Friendly Worksites across Erie County, providing support for employees to express milk at work. Grant funds can be used to help a worksite acquire necessary lactation room items such as a mini-refrigerator, door lock, table, chair, or room dividers. The initiative also provides community education around breastfeeding, chestfeeding, and lactation, with a focus on marginalized and underserved populations and communities. The cities and towns in Erie County covered by the BFFNY Grant are Buffalo, Lackawanna, Tonawanda, Brant, Cheektowaga, Collins, and Concord.

Breastfeeding, chestfeeding, and lactation have health benefits for both babies and parents. Babies who drink human milk have a lower risk of asthma, obesity, and type 1 diabetes. Breastfeeding, chestfeeding, and lactation can also reduce a parent's risk of breast and ovarian cancer, type 2 diabetes, and high blood pressure [17].


According to the *Erie County Community Health Assessment (CHA) 2022-24*, disparities in breastfeeding and chestfeeding exist by race, income, and place of residence [18]. Rates of exclusive breastfeeding and chestfeeding were lower among non-Hispanic Black families and Hispanic families than among families of other races. Exclusive breastfeeding and chestfeeding rates were also lower among low-income families. The lowest percentages of exclusive breastfeeding occur in more rural and more highly urban areas of Erie County. Barriers to breastfeeding and chestfeeding for parents who were unable to for as long as they wanted or at all included access to lactation education, professional support, peer support, workplace support, and free or low-cost supplies.

In 2024, the ECOHE, the United Way of Buffalo & Erie County, and Catholic Charities WIC worked together to plan a panel discussion about breastfeeding, chestfeeding, and lactation. Deputy County Executive Lisa Chimera was the guest speaker. There were panelists from the NYS Department of Labor, Kaleida Health, National Fuel Gas, Buffalo Prenatal-Perinatal Network, and Catholic Charities WIC. Local businesses and organizations were invited to come and learn about the updated NYS Labor Law Section 206-c, the ECDOH's process for designating workspaces, the benefits of having lactation spaces for employees, and how to set up a lactation program. Resources distributed at the

event included the ECOHE's *Let's Talk About Pregnancy* and *Let's Talk About Mental Health* publications. The ECOHE's goal was to have at least 16 organizations attend the panel discussion. A total of 20 people from 17 organizations joined the event. One organization applied for and received the designation soon after attending the program.

The ECOHE's 2024 goal was to designate 10 worksites. In 2024, eleven worksites were designated: 9 in Buffalo, 1 in Cheektowaga, and 1 in North Collins. The designated sites are: Basco-Schmidt - API Heat Transfer, Belmont Housing Resources for WNY – Central Office, BestSelf Behavioral Health (8 worksites), and Parent Network of WNY. For a full list of Breastfeeding, Chestfeeding and Lactation Designated Worksites in Erie County, visit: <https://www3.erie.gov/health/breastfeeding-chestfeeding-and-lactation-designated-worksites-erie-county>

Feedback from employees of Breastfeeding, Chestfeeding and Lactation Designated Worksites in Erie County is included below.



“Having a comfortable private space at work to be able to express breastmilk has made me feel incredibly supported as a new mother and valued as an employee. The ability to easily pump at the office has helped me keep up my breastfeeding journey for 21 months and counting.”

“Becoming a new mom is hard, but on top of that is managing going back to work and finding this balance of work, home, and now life with a new baby. I’m fortunate I was able to come back part time, but I still needed to pump. BrightPath gave me a safe space to do so, as well as accommodating pump time and how many or long I needed it for. I’ve had great amounts of support throughout my journey, and couldn’t have felt more relieved to not have to worry about space or time.”

“It is a great opportunity to be able to pump in a breastfeeding friendly space at work. It is nice to have a safe space to continue to provide the best nutrients for my baby while also being a working mom. There is a safe, judgement-free, comfortable space for me to be able to go to pump and it is an extremely important and amazing opportunity for all the working moms who want to continue their breastfeeding journey such as myself.”

“Being a mom isn’t easy, especially a career mom. Add in the need to pump at work and you may start feeling lost and alone. But not at BrightPath! I’ve worked for companies that had blatant disregard for the laws protecting nursing mothers, and would outright shame their employees. When I took my maternity leave I knew I’d be returning to an employer that made me feel empowered. I’m able to pump as often as needed, not just by the minimum state standards. As a seasoned breastfeeding mother, I feel comfortable nursing anywhere – but BrightPath offers me an area where I feel safe to pump in private.”

“Having a comfortable private space at work to be able to express breastmilk has made me feel incredibly supported as a new mother and valued as an employee. The ability to easily pump at the office has helped me keep up my breastfeeding journey for 21 months and counting!”

“Well I have been currently breastfeeding for over 3 years straight as I have a 3-year-old and a now 10-month-old without [stopping] in between them. If I was not able to pump while working I would have never have been able to provide them with the milk and extra nourishment they have received. I’m glad to work in a place where a room and system was in place to allow me this opportunity.”

“As a first-time mom returning to the office, I was initially concerned about balancing motherhood and work, especially with pumping. However, the lactation room that Harmony arranged made it much easier. Its proximity to the bathroom facilitated bottle cleaning, and the fridge ensured the milk stayed cold throughout the day. The available info pamphlets were a nice touch. I’m grateful for the support it offers to working mothers like myself.”

Another 2024 ECOHE goal was to make a sample lactation policy that employers can use or customize for their worksites. The Erie County template is based on a template provided by the New York State Department of Labor (NYSDOL). The Erie County template features more inclusive language than the NYSDOL version. To create the lactation policy, a chart was made to help employers use more inclusive words for breastfeeding, chestfeeding, and human milk feeding. The chart compares inclusive terms with gendered terms and explains why it is important to use inclusive words. Using inclusive and affirming language makes lactation policies more equitable and ensures that all parents feel safe and comfortable, especially during pregnancy and postpartum care. The Erie County lactation policy template was utilized successfully by one of the worksites designated in 2024.

In 2025, Breastfeeding, Chestfeeding, and Lactation Friendly Erie County will continue to prioritize site designation for workplaces that recruit employees from marginalized groups, as well as to concentrate efforts in Brant, Collins, Cheektowaga, Tonawanda and Lackawanna because these places have few or no special worksites.

Brain Health

Alzheimer's and other dementias disproportionately affect Black, Latino/Hispanic, Asian, and American Indian/Alaska Native individuals as well as members of the LGBTQ+ community [19]. Black individuals are about two times more likely and Latino/Hispanic individuals about 1.5 times more likely than White individuals to have Alzheimer's and other dementias. Challenges with economic stability and neighborhood and built environment, including neighborhood disadvantages and persistent low wages, have been linked with higher dementia risk.

In early 2024, the NYS Department of Health (NYSDOH) invited Erie County to participate in a pilot project regarding brain health. The ECOHE was tasked with supporting NYSDOH activities for the Building Our Largest Dementia Infrastructure for Alzheimer's Act (BOLD). A planning team consisting of members from NYSDOH, Alzheimer's Association of WNY, ECDOH, ECOHE, and SUNY University at Albany was assembled to carry out the pilot.

BOLD is a federal law that directs the CDC to strengthen the U.S. public health infrastructure. Through BOLD, the CDC has allocated funding to the states to create a strong public health infrastructure that supports and promotes dementia risk reduction, early detection and diagnosis, prevention of avoidable hospitalizations, and dementia caregiving. The BOLD Infrastructure for Alzheimer's Act is designed to promote implementation of the CDC's Healthy Brain Initiative State and Local Road Map for Public Health, 2023–2027, and the Healthy Brain Initiative Road Map for American Indian and Alaska Native Peoples. NYSDOH received funding from the CDC to pilot BOLD initiatives across NYS in partnership with the Alzheimer's Association. NYSDOH chose Erie County as the first pilot location for this project.

The activities outlined in BOLD are designed to create a strengthened national public health infrastructure with a focus on:

- Reducing risk
- Increasing early detection and diagnosis
- Preventing avoidable hospitalizations
- Supporting dementia caregiving

On September 18, 2024, NYSDOH and the Alzheimer's Association of WNY held a training titled Advancing Brain Health and Risk Reduction Strategies: A Public Health Approach to Alzheimer's Disease and Other Dementias (ADRD). The planning team set up a half-day long training on Erie County property. This training was in person and included lunch. The ECOHE recruited key ECDOH staff as well as members from other Erie County departments to participate and provide feedback on training content. The training included pre- and post-surveys intended to capture the current and expanded knowledge of participants as well as any suggestions they may have regarding content and delivery of the material. NYSDOH collaborated with SUNY Albany to assist with the evaluation piece of the pilot. The ECOHE organized the training and the Alzheimer's Association carried out the curriculum. The planning team worked together to carry out post-evaluations and will continue to collaborate in 2025, following up with participants 6 and 12 months after the training.

The ECOHE expanded training recruitment beyond the suggested ECDOH team to include key Erie County departments identified as working with populations who can benefit from the dementia risk reduction strategies outlined in the training. Thirty-three County employees attended the training. These employees came from the Department of Senior Services, Department of Social Services, Department of Personnel, and Department of Health including the ECOHE.

The half-day training was informative and thorough. The group in attendance was engaged and interactive. Focal points were the emphasis on reaching populations experiencing significant health disparities, making materials accessible for populations speaking languages other than English, and incorporating scenarios into the training agenda. Both NYSDOH and the Alzheimer's Association deemed the pilot a successful endeavor.

During the training, a need for a follow-up workgroup was identified. The ECOHE recruited and assembled a small group of 8 individuals to participate in further discussions. This group planned to meet in early 2025 to discuss health equity, plain language, and the overall flow of the curriculum. The planning committee created a list of priority action items for this smaller group and the ECOHE assisted with meeting planning. Topic areas for follow up work included:

- Defining and discussing “caregiving” as it looks different across diverse cultures
- Adding more visuals to the presentation overall
- Focusing on the “10 Tips” style of flyers and publications

The planning committee also decided to carry out the following activities:

- ECDOH
 - Convene the planning committee on regular intervals to check in on the progress of BOLD associated tasks.
 - Add a brain health subpage to erie.gov
- ECOHE
 - Develop *Let’s Talk About Brain Health*, an ECOHE publication utilizing Alzheimer’s Association content, to be released for the 2025 Brain Health Awareness Month.
 - Connect Alzheimer’s Association with the ECOMH to include their material on Erie Path.
- Alzheimer’s Association
 - Invite ECDOH to a community forum in February
 - Invite ECOHE to a caregivers conference in February
- NYSDOH
 - Continue the pilot and carry out post evaluations

The ECOHE team that attended the training had a great deal of positive feedback and constructive criticism for the BOLD team. SUNY Albany found that more than half of the participants found the training to be, “relevant to what they might be expected to do as part of their work.” When tested on their knowledge following the training, many (44.8%) improved their understanding of the relationship between Alzheimer’s and dementia, several (24.1%) were able to correctly identify characteristics of dementia, and almost all (96.6-100%) understood the basic risk factors for brain disorders and the basics of preventing dementia. It was also found that while many increased their perceived confidence levels in the understanding of dementia overall, there were still a number of participants (44.8%) that were unsure of their intention to include dementia prevention in their work. This will be considered by the work group in 2025.

This pilot program far exceeded the goals that were set before its onset, resulting in several side projects and new relationships being built between the Alzheimer’s Association and ECDOH.

CHA/CHIP

All counties in New York State are required to complete a Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) every six years. (Previously, this was required every three years.) Erie County is partnering with local hospital systems for the 2025-2030 CHA. Staff from Kaleida Health, Catholic Health, Erie County Medical Center (ECMC), Bertrand Chaffee Hospital, and the ECOHE began meeting in July 2024. Leaders from community groups, health clinics, and schools will also be involved in a CHA-CHIP workgroup.

The CHA will examine health needs, assets, and disparities in Erie County using existing data and community research. Some information is gathered from sources such as the U.S. Census Bureau website and County Health Rankings & Roadmaps. To gather information directly from the people who live, work, or go to school in Erie County for the CHA, the ECOHE developed a community survey and a medical provider survey.

The community survey asks respondents about their demographics, health, access to care, and what health conditions and health factors they feel should be prioritized in the CHIP. The medical provider survey asks respondents where in Erie County they practice care, what types of health care they feel their patients have challenges accessing, and what health conditions and health factors should be focused on in the CHIP. The community survey has been translated into Arabic, Bengali, Burmese, Spanish, and Swahili. Survey responses were collected between October and January 2025.

A total of 2,501 community members completed the community survey, and 140 medical providers completed the provider survey. This was achieved with the help of the staff from 30 community organizations who signed up to participate in the CHA-CHIP process. QR codes to survey links and paper copies were hand delivered to 30 local organizations, schools, and businesses. These materials were also e-mailed to 232 staff of local organizations, schools, and businesses.

The goal for surveys is always to get as many as possible. The aim for the CHA surveys was at least 1,000 community responses and 100 provider responses. The ECOHE exceeded these goals for the 2025-2030 CHA.

ECOHE will strive to work with every community in Erie County throughout the CHA-CHIP process. CHA efforts in 2025 will include focus groups with community-members and interviews with medical providers to gain more in-depth insights into the results from the surveys. Findings from the CHA will inform the development of the CHIP. With the hospital systems and community groups onboard, the CHA-CHIP is on track to be completed by the end of 2025.

CHRONIC DISEASE

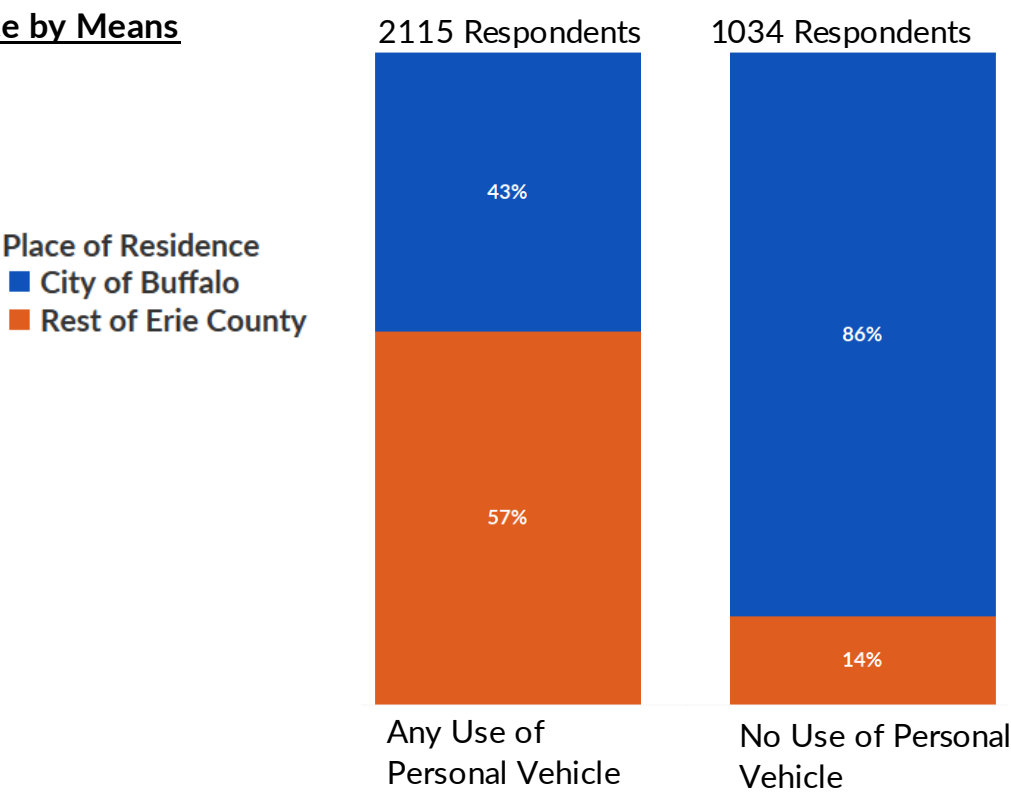
Year 12 Performance Incentive Program

In 2012, New York State changed Article 6 of the Public Health Law to include statewide programs that provided an incentive award for county health departments who met set deliverables related to a statewide goal set by the NYSDOH. In 2024, ECDOH completed these deliverables and was granted a Year 12 award. The statewide goal of the Year 12 Performance Incentive Program was to prevent long-term health problems by encouraging people to be physically active in their communities.

In Erie County, only about 75% of adults participate in any leisure -time physical activity [16]. Barriers to exercise can include cost, lack of access to gym, feeling unsafe to exercise, lack of time, pre-existing medical conditions, lack of exercise knowledge, or lack of interest. According to the ECOHE’s *Health Equity in Erie County: 2023 Annual Report*, survey respondents who had no access to a personal vehicle were much more likely to report that lack of gym access is a barrier to exercise [8].

The goal of the Year 12 performance incentive program was to work with teams from different areas to assess how the community is set up for physical activity and create a plan to improve at least one area in Erie County. The team used modules to evaluate the current built environment, identify problems, and suggest improvements. For the action plan, the ECOHE focused on neighborhood and built environment as an SDOH. This includes things like transportation and parks. Having access to transportation can affect a person’s ability to reach places that are important for good health. According to the ECOHE’s *Health Equity in Erie County: 2023 Annual Report*, 57% of those surveyed with no use of a personal vehicle experienced at least one challenge to exercise. Shown in the chart below, 86% of those surveyed who do not have use of a personal vehicle live in the City of Buffalo [8]. This amplifies barriers including access to exercise.

Figure 24: Place of Residence by Means of Transportation



18% of people who did not report any use of a personal vehicle reported that lack of transportation is a barrier to recreation. Therefore, improving access for residents in Erie County and addressing transportation issues can help promote physical activity in safe outdoor spaces. Many communities experiencing this challenge are in the city of Buffalo, which is home to a diverse group who are often overlooked.

With the \$24,486 award Erie County received from this incentive program, the ECOHE will focus on raising awareness, improving transportation access, and supporting events that encourage healthy living in underserved communities. The plan includes several steps, such as promoting the Adventure Bus Program in Erie County through community involvement, working with Senior Services and the Parks Department to make Buffalo more accessible and increase physical activity, and teaming up with the Parks Department to promote the Playground for All at Tow Path Park, which was designed for all ages and opened in May 2024.

Year 13 of the Performance Incentive Program, which focuses on climate change and public health, is currently being planned for 2025. The ECOHE is eager to help raise awareness and promote topics related to climate and health. The ECOHE is working to make sure these programs are available to everyone, especially those in underserved communities, to improve health and wellness for all.

Self-Management Programs

Chronic pain and chronic diseases such heart diseases, respiratory diseases, and diabetes greatly impact the health of Erie County residents. Black and Latino/Hispanic residents are hospitalized with these conditions at much higher rates than White residents. For example, diabetes hospitalizations for White residents are 123.9 per 10,000 population while the rate for Latino/Hispanic residents is 244.8 and for Black residents is 374.8 per 10,000 population [10].

Self-management programs are based on research and designed to help adults manage their health conditions in their own way and at their own speed. The goal of self-management programs is for participants to learn skills that can improve their health and quality of life.

Chronic disease self-management programs are managed by the Western New York Integrated Care Collaborative (WNYICC). In 2024, ECOHE helped run two programs: the Chronic Pain Self-Management Program (CPSMP) and the Diabetes Self-Management Program (DSMP). The CPSMP is for people experiencing ongoing pain and looking for support and advice. The DSMP is for people with diabetes who want to learn skills to help manage their condition. The ECOHE co-led the programs with Erie County Department of Senior Services. Both programs were run for older adults who are members of minority and marginalized populations, including racial and ethnic minority groups, LGBTQ+ populations, and low income communities. Each program lasts six weeks with one 2.5-hour session each week. The workshops were held in local community places. *Let's Talk About Diabetes*, *Know Your Health Numbers*, *Let's Talk About Mental Health* publications and Mental Health Allies resource lists were set out at the resource table for participants. Participants received a free book and relaxation CD. One bottle of bubbles was distributed to each DSMP participant as a self-care and mindfulness tool.

One DSMP group participant who was recently diagnosed with diabetes shared that she was happy to learn she didn't have to change her diet completely. She shared that the class taught her that as long as she checks her blood sugar and follows the rule "everything in moderation," she can still enjoy the foods she loves.

The ECOHE's goal for 2024 was to teach one Chronic Pain Self-Management Program (CPSMP) and one Diabetes Self-Management Program (DSMP). In 2024, a CPSMP program was facilitated with 6 community members at the Northwest Buffalo Community Center and a DSMP program was facilitated for 8 community members at the Buffalo Federation of Neighborhood Centers Life Center.

Goals for 2025 include continuing to partner with WNYICC to deliver the Chronic Pain Self-Management Program (CPSMP), Diabetes Self-Management Program (DSMP) and Chronic Disease Self-Management Program (CDSMP) to help disadvantaged, marginalized and diverse populations in Erie County achieve maximum health and wellness.

OTHER ACTIONS & RECOMMENDATIONS

Food Policy Council of Buffalo & Erie County

In Erie County, 12.3% of the population did not have access to a reliable source of food during the past year [10]. Only 51.1% of adults in Erie County with an annual household income of less than \$25,000 have perceived food security [16]. Additionally, 33% of adults in Erie County report consuming no fruits or vegetables daily [10]. When asked about challenges to eating healthy in the 2022 ECOHE Community Survey, affordability was listed as a challenge by 38% of Latino/Hispanic respondents. Additionally, the survey found the 57% of respondents from racial and ethnic minority groups indicated that they use SNAP/WIC to buy food compared to only 38% of White respondents [8].

The Food Policy Council of Buffalo and Erie County (FPC) is an advisory body seated within Erie County government and comprised of appointed members and community stakeholders. This group of County staff, food system professionals, and community leaders makes policy recommendations, shares important food system knowledge, advises on key food access issues across Erie County. The body is lead by chairperson Sarah Gatti, Principle Planner in the Erie County Department of Environment and Planning (DEP), with staff support from the Erie County Office of Health Equity (ECOHE), Erie County Department of Social Services, Erie County Senior Services, Erie County Board of Health, and the Deputy County Executive's Office.

In 2024, the FPC set goals focused on emergency food, food access, and farmland protection. Employing a series of working groups, the FPC set out to make state and county policy recommendations, provide feedback on county services, and work on social media-based community development. To ensure the FPC's work was well-rounded, the council recruited new members, filling long empty seats with expertise from the Department of Social Services and Senior Services, rural Erie County stakeholders, foundations doing food system work, and professionals working in emergency food.

The FPC has representation from a large number of community organizations and institutions including but not limited to:

- Buffalo Bills Foundation
- Buffalo Go Green
- City of Buffalo Office of Strategic Planning
- Cornell Cooperative Extension of Erie County
- Double Up Food Bucks via Field and Fork Network
- FeedMore WNY
- Food For All
- FreshFix Buffalo
- Greater Buffalo Urban Growers Group
- Groundwork Market Garden
- Harvest NY
- Kubed Root
- Massachusetts Avenue Project
- Springville Board of Trustees
- University at Buffalo
- WeRadiate
- WNY 211
- WNY Food as Medicine Coalition

In 2024, the FPC worked with the ECOHE to submit a \$1.2 million dollar grant proposal to the New York State New York Food for New York Families (NYFNYF) fund. This proposal will allow the FPC and ECOHE to bring fresh, locally produced food products to daycares in Erie County. The focus of this proposal was support families with no income, low income, or ALICE (asset limited income constrained and employed) households with fresh food options. If funded, the grant will increase food access for these families through August, 2025.

Also in 2024, the FPC created a campaign for an emergency food cookbook. This campaign ran for two months and collected over 25 recipes, submitted by community members. The resulting product, Emergency Eats, is a cookbook designed to support families experiencing emergencies in their home such as extreme weather. This collection of recipes are focused on shelf-stable pantry goods utilizing simple equipment and techniques. Awards were offered for recipes that were low cost, filling, and culturally-relevant. Cookbooks were distributed digitally and in print. They are available on erie.gov/fpc.

In the spring of 2024, the FPC, ECOHE, and DEP hosted a Local Government Food Systems Summit at the Rural Outreach Center in Aurora, NY. This event brought together elected officials, urban planners, and other municipal staff to learn about the food system and the current state of food access in their respective localities. The FPC partnered with The University at Buffalo Food Systems and Healthy Communities Lab, Cornell Cooperative Extension, and Rural Outreach Center to plan and carry out this event. Speakers included food system professionals and academics that study food policy. Participants were offered a package containing food system maps of their municipality, complete with key data from ECOHE and DEP surveys and studies. The day-long event wrapped with a tour of Providence Farm Collective, a collective farming model, based in Erie County's south towns that provides farmland and food access to various immigrant and refugee communities.

Throughout 2024, the FPC built a collection of digital resources, aimed at supporting Erie County in times of emergency. These resources inform the County on how to respond when the power is out or other emergencies keep us in our homes for periods of time. Social campaigns around keeping food at safe temperatures during power outages, planning your pantry for instances where we are homebound, and learning how to recoup after emergencies deplete or destroy food stores were shared through the FPC and DOH social media channels. These resources are also available on erie.gov/fpc. These campaigns nearly doubled the number of social followers the FPC has on Facebook and Instagram and also allowed for many collaborations online with the ECDOH, DSS, and DEP.

To complement the existing Erie County Business Assistance Resources, the FPC created a food business guide. This guide supports Erie County in navigating the development of food-based retail, including starting a food truck or small grocery store, purchasing land to grow food on, and/or launching a food production business. The FPC intends to expand this resource in 2025 to include value-based food procurement guidelines for schools, institutions, and small businesses.

In 2024, the FPC also worked on submitted policy recommendations. The first recommendation was put forth by the Emergency Food Working Group (EFWG) to amend the County's emergency food boxes, stored in the County warehouse. These boxes contain shelf-stable, nutrient dense food. In

2023, it was discovered that the food in these boxes is often not easily utilized by the individuals who receive them. The FPC created a memorandum, sent to the Deputy County Executive, requesting additional items be purchased that are nutrient dense, appropriate for a wide range of cultures, easily accessible to people with disabilities, and that do not require cooking equipment.

It is recommended that the FPC continue to work with the ECOHE, other Erie County Departments, and the County Executive's office to expand food access, influence food policy, and provide food system outreach, technical support, and education for Erie County residents and visitors.

Live Well Erie Implementation Team

Live Well Erie (LWE) is a collaborative vision in which Erie County government and our many partners will work together to develop community strategies to help residents be healthier and better able to realize their full potential. It is designed to focus on meaningful improvements in the social determinants of health and wellbeing in three populations: children, working families, and seniors.

The LWE Implementation Team is comprised of leadership positions, chairs, and co-chairs of each working group. The LWE Implementation Team sets the vision, coordinates meetings, reviews process and metrics, and provides any other needed support to operations of LWE.

The ECOHE has two staff members that sit on the LWE Implementation Team. These staff ensure that LWE maintains a clear focus on health equity and the social determinants of health, and that no Erie County resident, especially those from marginalized or minority groups, are left behind. ECOHE staff on the LWE Implementation Team also provide data expertise to help decision making, goal and progress tracking, and accountability.

Recommended Actions for Organizations

Under the Erie County Health Equity Act of 2021, the ECOHE is tasked with understanding and connecting factors that contribute to health outcomes and making recommendations for improving delivery and access to health services. The ECOHE recommends the following actions and policies to address SDOH factors driving Erie County's health outcomes.

Use Plain Language in Communications

Using plain language communication in publications, media, and materials can increase an organization's reach in communities with low literacy levels or limited English proficiency. Plain language communications support populations that are eager to receive materials that they can understand and access. This style of writing and speaking meets Erie County residents and visitors where they are at regardless of their level of formal education. The ECOHE recommends developing materials at grade 4-7 reading levels using tools like the Flesch-Kincaid Grade Level test. A plain language best practice is to define all acronyms, jargon, and complex terms using simple phrases and commonly understood words. This allows for greater comprehension for many, including those learning English or reading translated materials.

The ECOHE encourages community organizations to simplify or utilize plain language standards in written and spoken communications and materials.

Reduce or Eliminate Formal Education Requirements for Employment

The extremely strong association between formal educational level and nearly every SDOH factor reflects the multitude of ways that formal education has traditionally impacted the lives of individuals. Formal educational requirements are very often a barrier to employment. These requirements disproportionately impact members of ethnically and racially minoritized communities and other minority groups. While other means to increasing education can take time and significant investments, the process of evaluating the requirements of job positions and reducing or removing educational requirements when appropriate could be an interim solution. One way to reduce educational requirements is to equate education levels with corresponding values of lived experience for job positions that do not require formal licensure or credentials. Employers should undertake these types of reviews periodically and rewrite job positions and requirements. Here is an example of wording that allows for the consideration of experience and education as minimum qualifications:

1. Graduation from a regionally accredited or New York State registered college or university with a Master's degree and one (1) year of experience in public health, or;
2. Graduation from a regionally accredited or New York State registered college or university with a Bachelor's degree and three (3) years of experience in public health, or;
3. An Associate's degree or 60 semester credit hours from a regionally accredited or New York State registered college or university and five (5) years of experience in public health, or;
4. An equivalent combination of education and experience of as defined by the limits of 1, 2, or 3 above.

Create or Update Workplace Lactation Policies

The Erie County Office of Health Equity (ECOHE) manages Breastfeeding, Chestfeeding, and Lactation Friendly Erie County across Erie County, certifying worksites as safe and welcoming environments for employees who choose to lactate when they return to work. Breastfeeding or chestfeeding helps combat risk factors for certain health conditions in people who breastfeed or chestfeed and their babies [20]. Human milk provides unique nutrients and antibodies that help protect babies from diseases such as ear infections, lower respiratory infections and diarrhea, and decrease the risk for asthma, diabetes, and obesity later in life. For the lactating parent, breastfeeding or chestfeeding lowers the risk for certain cancers and diabetes.

Among those surveyed for the *Erie County Community Health Assessment (CHA) 2022-24* who identified a factor that might have contributed to their success in breastfeeding for a longer period, workplace support was cited by 25.3% of respondents as influential in their decision to breastfeed [18]. Erie County employers should create or revise existing employee lactation policies that are inclusive of any employee that has the right to access breastfeeding, chestfeeding, and lactation services in reference to New York State Labor Law Section 206-c. This law guarantees breastfeeding employees the right to pump milk at work for three years after the birth of a child. The language used in lactation policies is often not inclusive of all employees who may be lactating in the workplace and have the right to access breastfeeding, chestfeeding, and lactation services under Labor Law Section 206-c. Not all lactating employees are moms, women, or have given birth.

Creating or updating workplace lactation policies using inclusive language promotes equity in the workplace and prevents an employer from misrepresenting an employee. It can also impact health

outcomes for employees and their families directly and by addressing Economic Stability and Social and Community Context as SDOH.

Consider Adopting or Expanding Paid Parental Leave Policies

Paid parental leave policies increase employee health outcomes, increase workforce diversity, and save employers money by increasing employee retention. Paid parental leave policies have the potential to protect the long-term health of employees. Research indicates that the transition to parenthood may have a critical impact on an individual's mental and physical health in midlife and beyond, and that a lack of access to protected, paid time off from employment may exacerbate any physical and mental health problems experienced during the transition to parenthood [21]. Systematic reviews conclude that paid parental leave improves maternal and infant health and decreases rates of infant mortality. One study found that the introduction of paid parental leave in five states led to a reduction in low birth weight and preterm births, especially for Black infants, and those who were able to take paid leave were half as likely to be re-hospitalized, as were their infants, compared to parents who were only able to take unpaid leave or no leave [22]. Research shows that paid leave policies especially help minority women, unmarried women, and employees with less formal education to be able to take leave when they need it [23].

Providing new parents with paid time off to care for newborn or recently adopted children contributes to healthy development, improves maternal health, and enhances families' economic security [24]. Available evidence indicates that paid parental leave policies of up to one year may yield health benefits for parents and children in the short and long term [25]. Employers in Erie County, including those eligible to provide New York Paid Family Leave, should consider adopting, opting in to, or expanding paid parental leave policies to increase health equity among employees and their families.

Revise Gender Identity Policies in Compliance with GENDA

In 2019, the New York State Human Rights Law was amended through the Gender Expression Non-Discrimination Act (GENDA) to explicitly add gender identity or expression as a protected category. Discrimination on the basis of gender identity or expression is prohibited in all areas covered by the Human Rights Law [26]. Gender identity or expression means a person's actual or perceived gender-related identity, appearance, behavior, expression, or other gender-related characteristic regardless of the sex assigned to that person at birth, including, but not limited to, the status of being transgender. Unlawful discrimination based on gender identity or expression can include questions about gender identity or medical history in a job or housing interview, refusing to hire for a job or rent an apartment, terminating employment or housing, denying the use of restrooms or locker rooms, and requiring dress codes or appearance standards based on sex stereotypes.

Discrimination and stigma related to gender identity and expression fall within the Social and Community Context domain of the SDOH and can negatively impact health and health outcomes, and access to an affirming workplace falls under the Economic Stability domain. Employers in Erie County should consider adopting revising existing policies to ensure compliance with the Human Rights Law and to further health equity among employees.

Utilize Language Access Resources

Language access is a significant SDOH challenge for immigrant and refugee communities that negatively impacts their health outcomes. Widespread use of translation and interpretation resources by community organizations can help address language access challenges and barriers for Erie County residents with limited English proficiency. A best practice is to utilize both translation services for written communication and interpretation services for spoken communication. The ECOHE's Language Access Allies resource guide includes both free and at-cost interpretation and translation services available to health care providers, community organizations, and community members. Resources include in-person, virtual, and app-based interpretation and translation services.

The ECOHE encourages community organizations to utilize resources such as those named in the Language Access Allies resource guide to help address language access barriers in both spoken and written communication in the languages that are most commonly spoken and understood by Erie County residents with limited English proficiency.

Disaggregate Minority Populations When Collecting Data

Populations that have been traditionally grouped—such as Asian, Latino/Hispanic, Black/African American, LGBTQ+, and immigrants and refugees—should be provided with the ability to identify as more specific populations. The ECOHE has consistently received positive feedback from the public on the use of a more inclusive and disaggregated demographic collection tool. In addition to the community feeling heard, the broad use of expanded demographic options increases the ability to draw more accurate and specific conclusions on the communities and populations any program or service wishes to serve.

The ECOHE will continue to incorporate community feedback into the ways data on specific populations is collected, grouped, and presented and encourages Erie County organizations to do the same.

Use More Specific Language Around Employment and Unemployment

The 2022 ECOHE Community Survey asked respondents to provide a reason for unemployment [8]. This question provided extremely valuable information on sub-categories of unemployed respondents, but deeper questions on this topic could have been even more enlightening. Programs and services that wish to understand the employment status of their clients or community should use expanded options for employment that go well beyond the binary of employed or unemployed. Asking the reason for unemployment can offer additional insight into unemployment. Furthermore, asking those who are employed additional questions would provide far more detail on work quantity and work desires. These questions could include:

- Do you work multiple jobs?
- Are you underemployed?
- How many hours a week do you work?
- Would you like to work more hours each week?

Expand Opportunities for Community Input and Feedback

Meeting the community where they are by interacting, speaking, and engaging directly with the community in the community has generated invaluable information for the ECOHE. The information available in the ECOHE's reports could not have been collected without this additional effort. The ECOHE plans to use this information to create meaningful and impactful changes to reduce health disparities in the community, focusing on the areas that were found to be most important to the community. Organizations or groups should only make decisions that impact the community if they collect meaningful feedback and input from the community. This should become an expectation of the process of working with communities. This could be accomplished through activities such as creating community advisory boards, using community panels, conducting town halls, and leading community conversations.

Of additional note, the community's opinions, experiences, and knowledge are an asset. As such, the community should be compensated for their time and expertise. Groups are recommended to create policies and standards that routinely compensate the community when their time and expertise are utilized. Furthermore, the input provided by communities must be incorporated into practice. The step of community consultation should not be taken simply for the sake of optics or "checking a box."

Expand Financial Planning and Education

According to *Health Equity in Erie County: 2023 Annual Report*, survey respondents from racially and ethnically minoritized groups reported significantly more financial challenges and barriers to economic stability [8]. Many groups would benefit from programming that increases knowledge of finances, financial planning, and overall financial literacy. Many of these types of programs exist throughout the community but are often under-resourced or limited in their scope. Programs that are more comprehensive and designed and implemented for multiple age groups are needed. For example, programs that provide good foundational knowledge to young adults while also offering services and programs to middle-aged and older adults. It would also be advisable to include financial literacy programs in K-12 education in public school systems. Programs addressing financial literacy should adequately address misinformation, bad information, and nuanced processes. These programs should help reframe the way many people think about their financial situation and the impact they can have upon it.

Increase Enrollment in Higher Education and Trades

Many Erie County residents lack higher levels of formal education. Programs aimed at increasing enrollment of residents from ethnically and racially minoritized groups into higher education programs would help address the educational gap. These programs could be facilitated by forming partnerships between the county government and local colleges and universities to build stronger pipelines from predominantly minority high schools. Additional programs that connect the community to nontraditional educational options, such as trade schools, should also be implemented. Many education programs and career centers exist within Erie County, but efforts should be made to better support these programs and make these programs available at locations and hours convenient to the people and communities they serve.

Develop Social Connections for Practical Support

One of the most consistent findings of *Health Equity in Erie County: 2023 Annual Report* was that practical help from friends and family was the lowest reported social support [8]. These low levels were often more pronounced among minority communities. This could be addressed through programming aimed at increasing social connections within these communities. For example, programs could be designed to build community support and networking within LGBTQ+ communities, rural populations, and Black and Hispanic communities. These types of programming could be placed in accessible anchor institutions, such as libraries, schools, and community centers.

Expand Transportation Options and Services

According to *Health Equity in Erie County: 2023 Annual Report*, 34% of survey respondents who answered the question “How do you get around?” did not report any use of a personal vehicle [8]. These respondents reported more SDOH and health behavior (diet and exercise) challenges than those with use of a personal vehicle. Programs and services should increase their focus on ensuring that the need for transportation is considered when arranging services. In addition, more services and programs should be expanded or made available in rural areas of the county. Policies should incentivize establishing rural locations for services and or mobile services. Furthermore, expanding public transportation into suburban parts of Erie County may be warranted to increase access to employment opportunities and health care options. Programs that eliminate the need for transportation, such as telehealth or mobile health care units, mobile markets, or remote work options should be considered to minimize transportation barriers.

Provide Supports for Caregivers

According to *Health Equity in Erie County: 2023 Annual Report*, survey respondents who reported having young children or living with an adult who requires constant care reported more challenges to healthy living, less adequate financial situations, and less social support than those who were not in either of those categories [8]. Programs that promote financial stability and respite to those struggling to balance the care of a loved one, household finances and upkeep, and self-care would be worthwhile. This may include workshops to educate caregivers on what options already exist for these types of support.

Pair Social Supports With Other Services

In the ECOHE’s *Health Equity in Erie County: 2023 Annual Report*, social supports were almost universally reported at low levels [8]. This finding justifies a need for policy-level solutions to increase how communities can get support for practical needs like child care and transportation as well as for emotional support and for relaxation and fun. One solution could be pairing social supports with other services. For example, a medical group could provide a neighborhood-based cancer screening or vaccination event that also offers entertainment for children. This type of event could both fill a need for a community networking event as well as help parents to overcome the challenge of finding child care that may prevent them from receiving medical care. Other social supports, such as emotional support, could be implemented in workplaces. This could be achieved through a combination of employer-encouraged training sessions on mental and emotional health, support

groups, team building efforts, and leave policy reform. While this is already occurring in some workplaces in Erie County, making it a standard practice would benefit more residents.

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APPENDICES

APPENDIX A: ACCESSIBILITY TABLES

Figure 3: Location of Community Events by ZIP Code

ZIP Code	Number of OHE Events
12110	1
14001	2
14004	3
14052	4
14065	1
14072	1
14075	4
14086	1
14127	1
14141	1
14150	1
14201	21
14202	14
14203	17
14204	15
14206	5
14207	20
14208	5
14209	13
14210	4
14211	17
14212	11
14213	15
14214	10
14215	19
14216	2
14218	5
14219	1
14220	2
14221	2
14224	2
14225	2
14226	1
14228	4
14260	4
14303	1

Figure 4: Percentage of Events That Reached Each Priority Population

Priority Population Reached	Percentage of Events
CYSHCN population	10%
Ethnic minority	20%
Gender expression or identity minority (Trans, non-binary, etc.)	11%
Other	2%
Racial minority	21%
Rural populations	4%
Sexual-orientation minority (Gay, lesbian, queer, etc.)	12%
Socio-economic disadvantaged	20%

Figure 6: Emergency Kit Distribution by Urban, Suburban, and Rural

Region	Percentage of Kits
Rural	6%
Urban	10%
Suburban	84%

Figure 7: Emergency Kits by Location of Distribution

ZIP Code	Number of Kits Distributed
14001	100
14052	150
14075	50
14111	100
14127	50
14141	100
14201	300
14202	270
14203	75
14204	188
14206	150
14207	211
14208	225
14209	175
14210	150
14211	325
14212	175
14213	375
14214	545
14215	485
14218	304
14224	50
14225	100
14228	50

Figure 10: Number of Participants of Each Type of Mental Health First Aid

Program	Number of Participants
MHFA	453
MHFA - Spanish (Adult or Youth)	10
MHFA - Youth	183

Figure 12: Number of MHFA Participants by Erie County ZIP Code

ZIP Code	Number of Participants	ZIP Code	Number of Participants
14001	7	14201	20
14004	22	14202	8
14006	1	14203	7
14025	1	14204	12
14031	3	14206	18
14032	3	14207	9
14033	1	14208	10
14043	10	14209	20
14047	1	14210	10
14051	7	14211	14
14052	4	14212	6
14055	2	14213	34
14057	2	14214	10
14059	2	14215	29
14068	3	14216	29
14070	1	14217	9
14072	8	14218	4
14075	21	14220	19
14080	1	14221	21
14085	2	14222	15
14086	24	14223	15
14102	1	14224	11
14111	1	14225	10
14127	11	14226	16
14139	2	14227	9
14141	2	14228	9
14150	16	14260	1
14170	2		
Do not wish to say	4	Left Blank	16

Figure 14: Number of MHFA Participants by Age

Age Group	Number of Participants
Under 18	6
18-29 years old	179
30-39 years old	132
40-49 years old	117
50-59 years old	99
60-69 years old	48
70 years and older	6
Do not wish to say	8
Left blank	6

Figure 15: Percent of MHFA Participants by Gender and Year

Gender	2023	2024
Man	19%	26%
Woman	73%	68%
Trans, Nonbinary, and Other Gender Identities	2%	4%
Do Not Wish to Say	6%	2%

Figure 16: Percent of MHFA Participants by Race and Year

Race	2023	2024
American Indian or Alaska Native	0.8%	0.3%
Another Race	0.7%	0.5%
Asian	3%	5%
Black	28%	20%
Middle Eastern or North African	0.5%	1%
More Than One Race	5%	4%
White	54%	64%
Do not wish to say	5%	5%

Figure 17: Percent of Latino/Hispanic MHFA Participants by Country of Origin

County of Origin	Percent of Hispanic Latino Participants
Central American	9%
Cuban	4%
Dominican	5%
Mexican	4%
More Than One Hispanic-Latino Ethnicity	6%
Puerto Rican	56%
South American	15%
Do Not Wish to Say	2%

Figure 20: Erie County CYSHCN in 2024 by Race and Ethnicity

Race and Ethnicity	Percent of Participants
Non-Hispanic Asian	4%
Hispanic	10%
Non-Hispanic Black	46%
Non-Hispanic Multiracial or Another Race	6%
Non-Hispanic White	33%

Figure 21: NYS CYSHCN Participants in 2022 by Race and Ethnicity

Race and Ethnicity	Percent of Participant
Another Race or More Than One Race	8%
Non-Hispanic Asian	3%
Hispanic	26%
Non-Hispanic Black	13%
Non-Hispanic White	50%

Figure 22: Erie County CYSHCN Participants in 2024 by Insurance Coverage

Insurance Type	Percent of Participants
Public Insurance	78%
Private Insurance	16%
Unknown	5%
Uninsured	1%

Figure 23: NYS CYSHCN Participants in 2022 by Insurance Coverage

Insurance	Percent of Participants
Private and Public	7%
Private	54%
Public	37%
Uninsured	2%

Figure 24: Place of Residence by Means of Transportation

Place of Residence	Any Use of Personal Vehicle	No Use of Personal Vehicle
City of Buffalo	43%	86%
Rest of Erie County	57%	14%
Number of Respondents	2115	1034

APPENDIX B: COALITION, COMMITTEE, WORKGROUP, AND TASK FORCE LIST

OHE Participation in Coalitions, Committees, Workgroups, and Task Forces

1115 Waiver
African American Health Equity Task Force
Birth Equity Task Force
BPS Immunization Task Force
CHAN Project-Best Practices
CHW Stakeholder Group
Clarence Family Support Center Advisory Meeting
Climate Change Action Plan - Environmental Justice Committee
COAD
COAD: Communications Sub Workgroup (Additional focused committee)
COAD: Preparedness Sub Workgroup
COAD: Recovery Sub Workgroup
COAD: Response Sub Workgroup
Community Health Needs Assessment Work Group
Commuter Coalition
CTSI CAB
East Buffalo Environmental Forum
East Side Transformation Project
ECLIPSE
Extreme Temperature Plan Steering Committee
Food as Medicine Think Tank - Symposium Planning Committee
Food Policy Council (FPC) Voting member
FPC Emergency Preparedness Working Group
FPC Executive Committee
FPC Governance Committee
FPC Outreach Committee
FPC Procurment Working Group
Gun Violence Prevention Task Force
Gun Violence Prevention Task Force
HealthELink & LHD
HealtheLink Regional Health
HealthelLink Maternal Health
Healthy Community Store Initiative (HCSI)
Igniting Hope Conference Planning Committee
Lackawanna Stakehold Coalition
Lackawanna Stakehold Coalition Government Subcommittee
Language Access Working Group
Lead Poisoning Prevention Task Force
Leadsafe Erie County

OHE Participation in Coalitions, Committees, Workgroups, and Task Forces, cont'd

Leadsafe Erie County
LGBTQ+ Shelter
Live Well Erie Children's Working Group
Live Well Erie Implementation Team
Live Well Erie: Older Adults
Live Well Erie: Working Families
MHFA Instructors Group via Compeer (formerly MHFA Collaborative)
New York State Cardiovascular Health Program and Learning Collaborative
PREPARE CAB
Starting Line Healthy Births Coalition
Starting Line Healthy Births Coalition Worksite Implementation Team
Starting Line Healthy Births Coalition: Breastfeeding Friendly Erie County Subcommittee
Suicide Prevention Colalition
Talk Saves Lives-Latinx WNY Chapter
UB Psychiatry CAB
United Way: Startline_Youth Access Coalition
Upstate NY Black and Latino Pride Board
Vaccines (COVID Clinics)
Witness Cares CAB
WNY Food as Medicine Symposium Steering Committee
WNY Food as Medicine Think Tank
WNY Public Health Alliance Public Health Staff
WNY Refugees with Disabilities Task Force
WNY Refugees with Disabilities Task Force Family & Education subcommittee
WNY SMART Collaborative
Women's Health
Workgroup for Advancing Brain Health
Youth Mental Health Project Workgroup

APPENDIX C: ERIE COUNTY HEALTH EQUITY ACT OF 2021

COUNTY OF ERIE

LOCAL LAW INTRO. NO. **3-1** -2021
LOCAL LAW NO. _____ -2021

THE ERIE COUNTY HEALTH EQUITY ACT OF 2021

A Local Law establishing an Office of Health Equity in the Erie County Department of Health dedicated to supporting, educating, and planning for the provision of public health to persons from disadvantaged backgrounds, including, but not limited to, racial and ethnic minorities, as well as persons from rural areas.

BE IT ENACTED BY THE LEGISLATURE OF THE COUNTY OF ERIE AS FOLLOWS:

Section 1. Legislative Findings and Intent

Erie County is ranked in the bottom 25% of counties in New York State for health outcomes. A county's health outcome ranking is determined by the average life expectancy of county residents, the self-reported health status of individuals, and the percentage of low-birth weight newborns.

Within Erie County, there is a significant disparity between the health outcomes of white residents and residents of color. More than 50% of the minority population in Erie County die prematurely, whereas only 35% of the white population in Erie County die prematurely.

The health disparities between races is further exemplified when accounting for the cause of death, as the racial disparities between disease-related deaths as compared to injury-related deaths are significant, and persons of color die from disease-related factors at a much greater rate than corresponding white persons.

These disparities are just some of the factors that led the Center for Disease Control and Prevention (CDC) to declare racism a serious public health threat this year. Racism's impact on public health is not limited to discrimination based on the color of a person's skin, as it includes the structural barriers that have been constructed over years of segregation and inequitable investment of public dollars.

In addition to mortality and disease related data, there are also significant disparities in participation in public health programs and services. This is currently being seen in COVID-19 vaccination rates where vaccination rates for persons of color and positive COVID cases and COVID-related deaths appear to have correlations (i.e. persons of color have lower vaccination rates and COVID factors are disproportionately affecting persons of color).

In 2019, the New York State Department of Health reported that in the East Side of Buffalo and Western Cheektowaga, elevated numbers of colorectal, kidney, prostate, oral, esophageal and lung cancers were present among residents. A higher use of tobacco, as well as obesity, lack of

physical activity and alcohol consumption, which are also more common in the area, may also have contributed to the cancer cluster.

Residents of rural areas also suffer from health inequities which contribute to premature death and poorer life outcomes. Factors contributing including lifestyle, as well as a shortage of health professionals and the effects of poverty.

LGBTQ (lesbian, gay, bisexual, transgender, queer/questioning, and intersex) persons experience health disparities, especially among youth. The effects of these disparities are seen in the areas of behavioral health, physical health, and access to care and are closely tied to sexual and social stigma.

According to CDC's 2017 Youth Risk Behavior Survey (YRBS), sexual minorities were more likely to report experiencing bullying, felt sad or hopeless, seriously considered suicide, used illicit substances, misused prescription drugs, and being forced to have sex (<https://www.cdc.gov/healthyyouth/disparities/health-disparities-among-lgbtq-youth.htm>).

According to CDC, Gay men are at higher risk of HIV and other STIs, especially among communities of color, and are less likely to have health insurance than heterosexual or LGB individuals.

Transgender individuals have a high prevalence of HIV/STIs, victimization, mental health challenges, and suicide. Youth who identified as transgender in the CDC YRBS were more likely to report violence victimization, substance use, suicide risk, and sexual risk behaviors.

Although resources exist in Erie County to address health and social needs of some LGBTQ residents, a concerted effort to measure these health disparities in Erie County and collaboratively address these disparities and services gaps among Erie County agencies does not exist.

The University of Buffalo's Community Health Equity Research Institute was established in 2019 "in response to the crisis of race-based health disparities, especially in African Americans who live on the city's East Side. Remarkably, compared to White residents of Buffalo, life expectancy of African Americans is 12 years shorter, and serious, chronic, and often preventable diseases, like heart disease, diabetes, asthma and cancer are 300% greater. The primary reason for these disparities is the social determinants of health, which refer to the conditions in which people live, work, learn, play and worship."

A partner organization, the Buffalo Center for Health Equity, was also created in 2019 to act on the pioneering work of the African American Health Equity Task Force. The Center for Health Equity's mission is to "eliminate race, economic, and geographic-based health inequities in Western New York by changing the social and economic conditions that cause illness and shorten lives among the sickest of the region."

It is the intent of this legislation to create an Office of Health Equity ("OHE") within the Erie County Department of Health as well as to establish an Erie County Health Equity Advisory Board. This will establish a foundation for Erie County as a place where every resident has the opportunity to attain their full health potential and no one is disadvantaged in achieving this potential because of social position or any other socially defined circumstance.

The OHE will help ensure all minority and disadvantaged residents have equal access to preventive health care and to seek ways to promote health and prevent diseases and conditions that are prevalent among minority, marginalized, and disadvantaged populations. The OHE provides access to health care, health care education, and preventive care resources to underserved and marginalized communities and communities of color.

There is an urgent need to work to eliminate racial, economic, sexual/gender, and geographic-based health inequities that shorten or negatively-impact lives by changing the social and economic conditions that cause illness and shorten lives.

Section 2. Definitions

1. Racial/Ethnic Minority or Person of Color: A person or persons who identify as a member of one of the following:
 - a. Black or African-American having origins in any of the Black African racial groups;
 - b. Hispanic/Latino persons of Mexican, Puerto Rican, Dominican, Cuban, Central or South American of either Indian, African or Hispanic origin;
 - c. Native American or Alaskan native persons having origins in any of the original peoples of North America;
 - d. Asian and Pacific Islander persons having origins in any of the Far East nations, South-East Asia or Pacific Islands.
2. Sexual/Gender Minority: A person or persons who identify as a member of one of the following:
 - a. LGBTQ: Individuals who identify as gay, lesbian, bisexual, transgender, or queer/questioning
 - b. Gay/bisexual: Persons who are attracted to or have sexual contact with someone of the same sex.
 - c. Transgender: Individuals whose current gender identity differs from the sex they were assigned at birth.
3. Disadvantaged or Marginalized Person or Community: A group whose members have been subjected to prejudice based on their race, ethnicity, gender, socio-economic, sexual orientation, gender expression and identity, or other prejudice because of their identity as members of the group without regard to their individual qualities.
4. Health Disparity: A preventable difference in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by disadvantaged persons or populations.
5. OHE: The Erie County Department of Health's Office of Health Equity.

Section 3. Amending Article 5 of the Erie County Administrative Code

Erie County Local Law No. 1-1960, as amended, constituting the Erie County Administrative Code, is hereby amended at Article 5 to add a new Section 5.08 to read as follows:

Section 5.08 Office of Health Equity.

There shall be within the Erie County Department of Health's Division of Health an Office of Health Equity headed by a Director of Health Equity. The Director of Health Equity shall assist the Erie County Commissioner of Health in carrying out the following functions of the Office of Health Equity:

- a. Analyze disparities in health, health care, and availability/accessibility to health care services among disadvantaged and marginalized Erie County populations.
- b. Understand and connect factors that contribute to health outcomes including the physical environment, the social determinants of health, access to clinical care, and health behaviors;
- c. Make recommendations for improving delivery and access to health services for disadvantaged and marginalized populations working within the Live Well Erie framework and supporting Live Well Erie objectives for improving the social determinants of health to relevant local health care agencies, and to the County Executive, County Legislature, and Commissioner of Health.
- d. Pilot models and programs to improve health disparities
- e. Promote public awareness and coordinate educational events in partnership with other health agencies with the goal of supporting healthy lifestyles in disadvantaged and marginalized communities and groups.
- f. Publish an initial needs assessment report within 18 months of the effective date of this Local Law. Such report shall present baseline data describing health disparities among racial and sexual minority populations in Erie County. The report will highlight gaps in available data and services. On an annual basis thereafter, the Commissioner of Health shall deliver to the County Executive and County Legislature a report of OHE's achievements, including but not limited to programs and services provided to advance health equity, data on populations served via OHE's outreach, and the Office's goals for the upcoming year. This annual report shall include disaggregated data to account for identifiers, including but not limited to race and zip code. The report shall also identify outcomes achieved in the context of race and zip code.
- g. Collaborate with the ECDOH Community Health Assessment (CHA) to develop a specific health disparities report as part of ECDOH's CHA prepared every three years as required by NYS and to monitor and incorporate other health disparity data already collected in the region by organizations including (but not limited to) the University at Buffalo and the Buffalo Center for Health Equity.

Section 4. Vision Statement and Mission Statement

Vision Statement:

The Office of Health Equity's vision is for all disadvantaged, marginalized, and diverse populations in Erie County, who presently experience higher rates of poor health outcomes, to achieve maximum health and wellness.

Mission Statement:

The Office of Health Equity's mission is to evaluate a wide variety of specific health outcomes among diverse populations to fully understand the depth of health disparities in Erie County and to partner with community members, healthcare providers, faith and philanthropic leaders, and organizations to enact programs that help disadvantaged, marginalized, and diverse populations in Erie County achieve maximum health and wellness.

Section 5. Erie County Health Equity Advisory Board

There shall cause to be created an Erie County Health Equity Advisory Board ("Board"). The seven (7) member Board shall serve as an advisory board to the OHE Director and the Erie County Commissioner of Health. The members of the Board shall advise Erie County in best practices on administering health care, fiscal allocations of health resources and health education to disadvantaged communities and communities of color.

Membership:

A. All appointees shall have worked in/on health issues for minorities or disadvantaged persons or have special knowledge or experience with minority or disadvantaged health issues. The Board members shall include at least one person with a medical degree or master's degree in public health.

B. The Board shall consist of seven (7) members to be appointed by the County Executive subject to confirmation by the County Legislature as follows:

1. Two (2) members to be recommended for appointment by the County Executive.
2. One (1) member to be recommended by each of the County Legislators whose legislative districts have the two highest rates of poverty according to the most recent US Bureau of the Census data.
3. One (1) member to be recommended for appointment by the Dean of the University of Buffalo's School of Public Health and Health Professions.
4. One (1) member to be recommended for appointment by the National Medical Association - Buffalo Chapter.

5. One (1) member to be recommended for appointment by a community organization in Erie County with a recognized public health focus in its mission. Such organization shall submit its recommendation by letter of consideration directed to the Erie County Legislature.

C. All members of the Board shall serve three-year terms.

D. Any vacancy on the Board shall be recommended for filling by the appropriate recommending authority within 30 days of the position becoming vacant. The County Executive must appoint and County Legislature must act on the appointment within 30 days of the County Executive receiving the recommendation to fill the vacancy.

Section 6. Effective Date

This Local Law shall take effect upon filing with the New York State Secretary of State.

Section 7. Severability

If any clause, sentence, paragraph, subdivision, section or part of this law or the application thereof to any person, individual, corporation, firm, partnership, or business shall be adjudged by any court of competent jurisdiction to be invalid or unconstitutional, such order or judgment shall not affect, impair or invalidate the remainder thereof but shall be confined in its operation to the clause, sentence, paragraph, subdivision, section or part of this law, or in its specific application.

Sponsors:

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