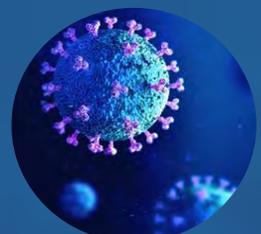
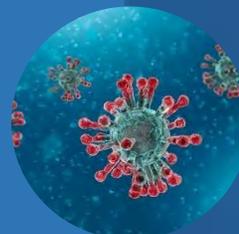
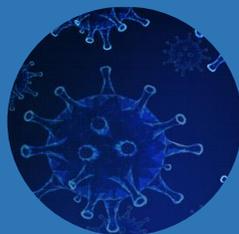




FULMONT COMMUNITY ACTION AGENCY 2020 NEEDS ASSESSMENT

ASSESSMENT OF THE COVID 19 EPIDEMIC
FULTON COUNTY & MONTGOMERY COUNTY, NY
AUGUST 14, 2020

STATUS
TRENDS
NEEDS
ACTIONS





2020 FULMONT COMMUNITY ACTION AGENCY
CORONAVIRUS (COVID-19) COMMUNITY NEEDS ASSESSMENT





2020 FULMONT COMMUNITY ACTION AGENCY
CORONAVIRUS (COVID-19) NEEDS ASSESSMENT
AUGUST 2020

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BACKGROUND

information to describe the scope of this crisis in Fulton and Montgomery counties and to support the many different responses that will be required to address emerging and still evolving needs. More data is available every day from hundreds of sources as more families face ever changing issues. Some of the observations in this assessment are data driven and others are anecdotal based on staff and agency leadership experience.

The needs assessment will inform services to those affected by the crisis. It is significant to note that Congressional action will permit FY 20 and special supplemental CSBG funding to serve families at or below 200% of the federal poverty level (as defined by [the US Census Bureau](#)). In Fulmont’s service area that opens opportunity for 16,600 people who have family income between 125% and 200% of the federal poverty level.

Population in Fulmont’s Service Area	# below 125% (CSBG standard)	# below 200% (updated CARES standard)	Additional # eligible to be served (# below 200% - # below 125%)
Fulton County	10,717	19,378	8,661
Montgomery County	12,952	20,903	7,951
TOTAL	23,669	40,281	16,612

Specific programs or strategies will target the demographic groups most affected. Given that persons of color are being disproportionately affected by both the health crisis and by the resulting economic disruption, an equity lens must be used to view current and emergent needs related to this crisis. Battling COVID-19 and supporting families begins by understanding the things that are making people, families, and neighborhoods **vulnerable** and engaging with support and services to help them.

Fulmont’s new complete community needs assessment addresses a wide range of social and community characteristics. They are the same indicators that the Centers for Disease Control uses in its Social Vulnerability Mapping – the key drivers to community sustainability and resilience in the face of disasters like COVID-19: work and the economy, education, family characteristics, housing, language, race and ethnicity and vehicle access. <https://svi.cdc.gov/prepared-county-maps.html>

Local Public Health Response

This needs assessment describes the appearance of the virus and the local public health response, and describes policies and limitations put in place. The virus appeared in Fulton and Montgomery Counties of New York in early March 2020, consistent with the pattern of spread across New York State. Since local Boards and Departments have continually assessed local needs and have spearheaded contact tracing.

Governor Andrew Cuomo and New York State Agencies assertively drove the use of social distancing and numerous other regulations and standards by Executive Order that must be enforced locally. While the ramp up was quick, with New York one of the first states to face a surge in cases, local officials had more of a role implementing than legislating locally. All NY Executive Orders are listed at <https://ocfs.ny.gov/main/news/COVID-19/>.



FULMONT 2020 NEEDS AND APPROACH BY CORE PROGRAM AREAS

Program Area	Indicators and Trends
Program Area: Fulton County Senior Transportation	
<p>A joint program between Fulmont and Fulton County Office for Aging to provide free transportation to Fulton County senior citizens for medical appointments, daycare, food sites, shopping, banking, and social events.</p>	<p>Seniors are one group at high risk. Transportation staff will be called on to address social isolation and provide information and offer reassurance. Seniors may fear exposure, not go shopping, lack technology/telemedicine. Programs they use may be closed or operating on reduced hours. As families stress level increases risk of adult abuse increases.</p>
Transportation Actions	
Program Area: Early Childhood Services	
<p>Early Childhood Services Program provides parent-driven pre-school to children ages 3-5 and services to their families including education, health, nutrition, and support for disabilities.</p>	<p>Needs observed by Head State before the epidemic such as need for behavioral and mental health support will increase significantly. Families may be more concerned about sending kids to care. Indicators show children are not at lower risk and children of color are at increased risk.</p>
Early Childhood Actions	
Program Area: Community Services	
<p>Food pantries, clothing, and information & referrals for to Fulmont programs and partner services including education, weatherization, emergency food and shelter, employment support, tax preparation, etc.</p>	<p>This is the front line of defense for consumers. The services are challenging to deliver online or by telephone. Families may be afraid of public transportation, going to a grocery store or pharmacy, sending children to school. Increasing eligibility to 200% of poverty may hold off crisis but adds 16,600 eligible people who may need care. All indicators show highest risk in the cities. Services may need to be delivered differently to meet these needs</p>
Community Services Actions	



Program Area: Energy Services	
Provides Energy Services to HEAP eligible households - both homeowners and renters.	Both Counties report high levels of cost burdened renters and owners - largely in the cities. Owners may- miss mortgage payments and renters are at increased risk of eviction. Indicators show the epidemic is ongoing and that challenges paying household expenses including heat will continue.
Energy Services Actions	
Program Area: Women, Infants & Children (WIC)	
WIC supports pregnant, breastfeeding, and postpartum Women, Infants & Children up to the age of 5 by providing nutrition education and nutritious foods.	Research is clear that children are at as much risk of exposure and illness as adults. Finding childcare - even to run errands or access services - is harder as some services and private providers have reduced hours. Going to the grocery or pharmacy puts mother and baby at more risk making access to food WIC supports essential. Consumers may need assistance using online food delivery or quick pick up options.
WIC Actions	
Program Area: Administration	
Fulmont employs 115 people across five main program areas with a mission to support people to be self-sufficient - including those most vulnerable to COVID-19.	Indicators show the virus is spreading in both counties. The pandemic establishes that community needs expand faster than agency capacity and/or funding. They will last longer than many people hope. Staff are juggling their own needs and needs of a larger and needier consumer base.
Administrative Actions	
Focus in on the most critical needs to support first time customers and people eligible who earn up to 200% of poverty. Some families will need support over upcoming years.	
Understand our financial situation, cash flow, grant access and compliance over the next two years at least.	
Communicate a and engaged staff, board members and volunteers who juggle their own needs, their consumers need and live with a high level of stress and fear.	
Participate in local and regional interagency groups to plan a continuing response to COVID-19	



FULMONT COVID-19 ASSESSMENT SUMMARY NEEDS TABLE

The following summary table indicates whether specific needs identified in the template apply to the Fulmont Community Action Agency service area in Fulton and Montgomery counties of New York State as of July 2020.

FULMONT COMMUNITY ACTION AGENCY COVID-19 ASSESSMENT - JULY 2020		
COMMUNITY NEED IN RESPONSE TO COVID-19	Applies to Area	May Not Apply
HEALTH IMPACTS		
Individuals over 65 including those in congregate care are at risk for severe health implications.	YES	
Health resources will be stretched thin and care for people with needs not related to COVID-19 will be limited including Intensive Care and hospital services.		TBD
Increased and/or new behavioral health resources are needed to help people deal with stressors/traumas (domestic violence, elder abuse, child abuse, drug abuse, etc.)	YES	
Nutrition for school-aged children previously accessing free/reduced breakfast, lunch, and snacks not available due to school closures.	YES	
EMPLOYMENT IMPACTS		
Employment impacts of the pandemic such as unemployment claims confirm a significant emerging need in employment.	YES	
Health care workers are at high-risk of exposure, under tremendous stress and in close, frequent contact with vulnerable individuals.	YES	
Education providers are working remotely. Lower-wage workers are vulnerable to layoffs and may lack technology resources in their home to work remotely.	YES	
Individuals in the service, retail and gig economy face sudden unemployment.	YES	
EDUCATIONAL IMPACTS		
Closing schools impacts education and those with less access to resources (internet, computers/tablets, language barriers) are at risk of learning loss.	YES	
Caregivers of school-age children must secure day care. Parents with limited resources face challenges and educational outcomes will be affected.	YES	
IMPACTS ON HUMAN SERVICES PROVISION		
Services to vulnerable populations are not operating or were altered, leaving some family needs unmet. Providers must adapt in ways that require additional resources.	YES	
COMMUNITY RESOURCE IMPACTS		
There is a reduction in availability of services and scarcity of some resources (health care, food, and emergency supplies) and/or needs for new or expanded resources.	YES	
There is urgent need for collaboration among public sector, health, first responders, educators, business community, faith community and many others.	YES	
ANTICIPATED NEAR-TERM AND LONG-TERM IMPACTS		
Disruptions in service delivery are expected to continue for a substantial time.	YES	
Renters may lack funds to pay rent; homeowners may miss mortgage payments.	YES	
Assistance will be needed to help customers reconnect to the workforce.	YES	
Providers must interact with customers with social distancing for an extended period.	YES	
Community coordination needs are presumed to continue into the long-term.	YES	



INTRODUCTION TO FULTON AND MONTGOMERY COUNTIES

Community Resilience

Community resilience is the capacity of individuals and households to absorb, endure, and recover from the health, social, and economic impacts of a disaster such as a hurricane or pandemic.

When disasters occur, recovery depends on the community’s ability to withstand the effects of the event. To facilitate disaster preparedness, the Census Bureau has developed new small-area estimates, identifying communities where resources and information may effectively mitigate the impact of disasters. Some groups are less likely to have the capacity and resources to overcome the obstacles presented during a hazardous event.

Resilience estimates can aid stakeholders and public health officials in modeling these differential impacts and developing plans to reduce a disaster’s potential effects. The census reports that “Although relevant for all types of disasters, the resilience factors use issues associated with COVID-19 to identify populations with risk levels that are low (0 risk factors), medium (1-2 risk factors) and high (3 or more risk factors).”

The following risk factors are used:

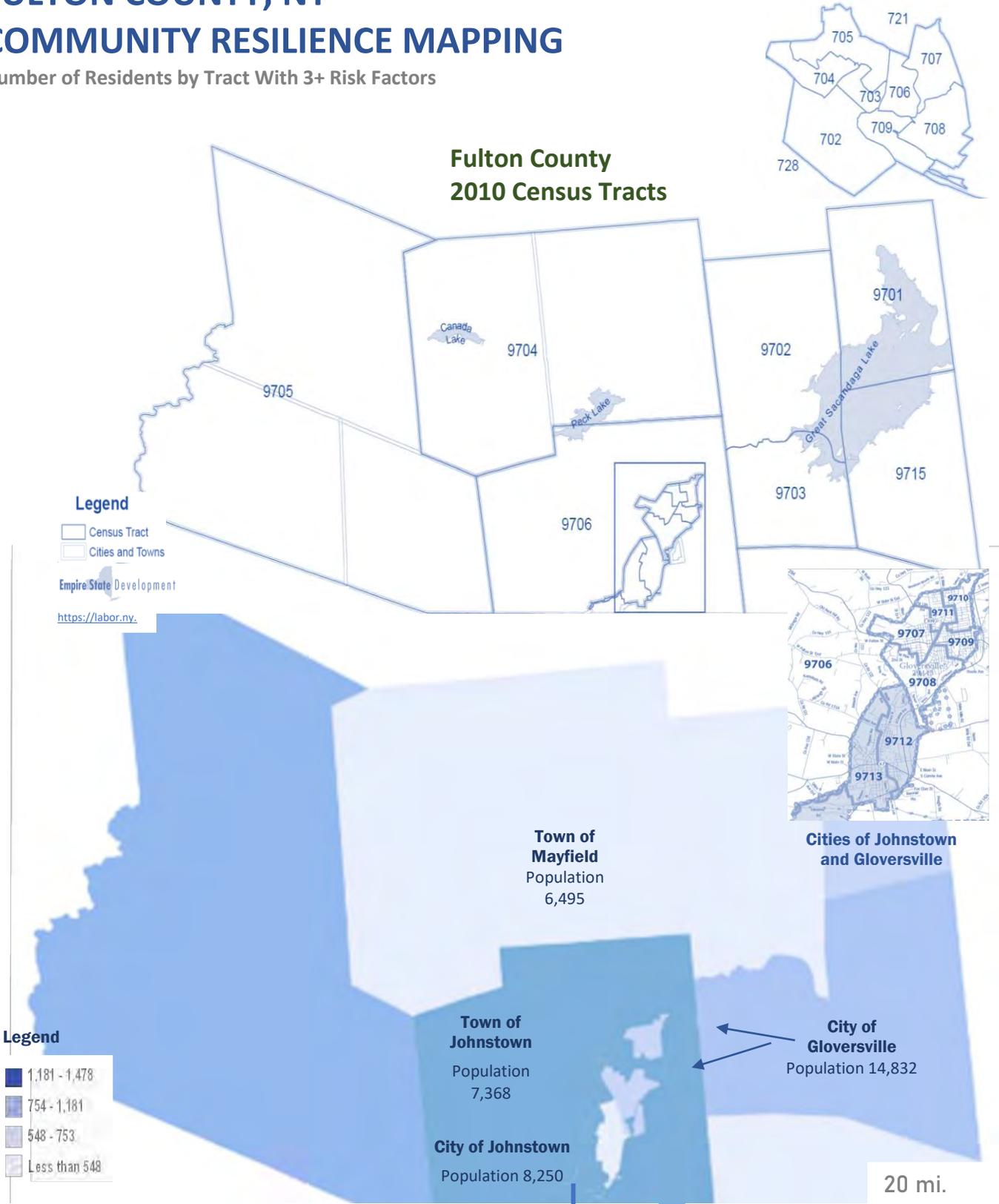
- Population age 65 and older
- Low income household
- Single caregiver household
- Communication or language barrier
- Employment status
- Disability status
- Physical crowding
- Lack of health insurance
- Respiratory disease, heart disease and/or diabetes

FULTON COUNTY CENSUS TRACTS WITH 3+ RISK FACTORS			MONTGOMERY COUNTY CENSUS TRACTS WITH 3+ RISK FACTORS		
Census Tract #	Tract Population 3+ Risk Factors	% of Tract Pop. 3+ Risk Factors	Census Tract	Tract Population 3+ Risk Factors	% of Tract Pop. 3+ Risk Factors
9701	717	28%	702	638	21%
9702	447	17%	703	608	24%
9703	852	23%	704	1,275	51%
9704	299	18%	705	606	24%
9705	975	24%	706	1,460	36%
9706	1,407	22%	707	2,048	50%
9707	1,388	40%	708	557	14%
9708	589	20%	709	1,156	33%
9709	1,318	37%	721	1,442	41%
9710	626	25%	722	927	26%
9711	654	24%	723	1,218	32%
9712	519	14%	724	1,859	48%
9713	1,286	28%	725	777	20%
9714	539	16%	726	1,761	46%
9715	857	17%	727	1,363	35%
			728	719	19%
Total/Avg	12,473	24%		18,414	33%



FULTON COUNTY, NY COMMUNITY RESILIENCE MAPPING

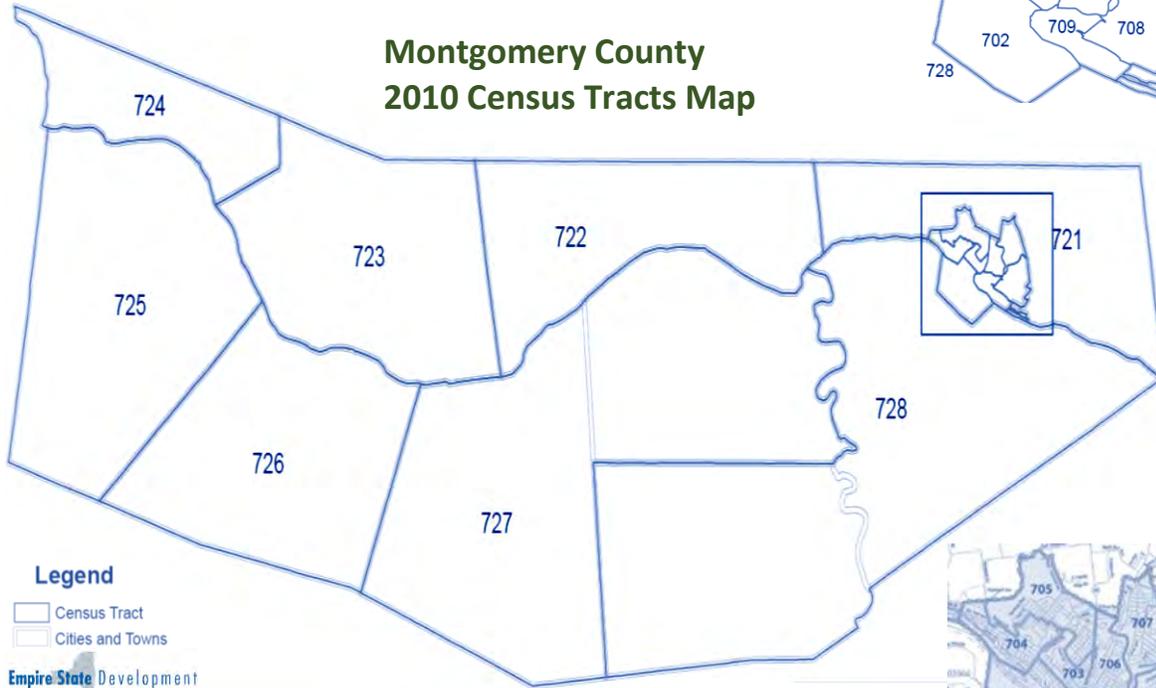
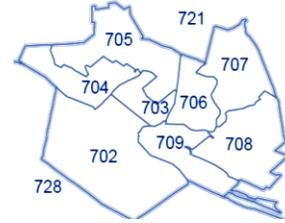
Number of Residents by Tract With 3+ Risk Factors





MONTGOMERY COUNTY, NY COMMUNITY RESILIENCE MAPPING

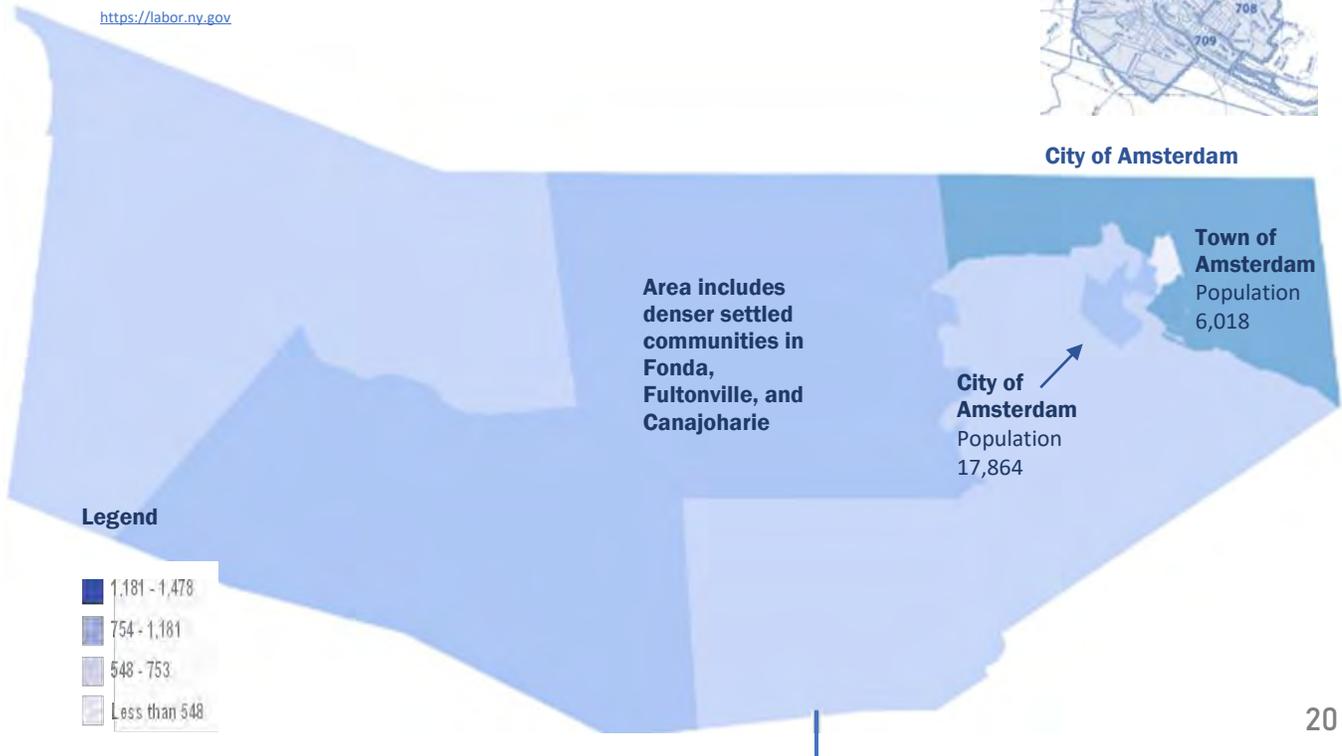
Number of Residents by Tract With 3+ Risk Factors



Legend
 Census Tract
 Cities and Towns
 Empire State Development
<https://labor.ny.gov>



City of Amsterdam





Immediate Impacts on the Fulmont Service Area

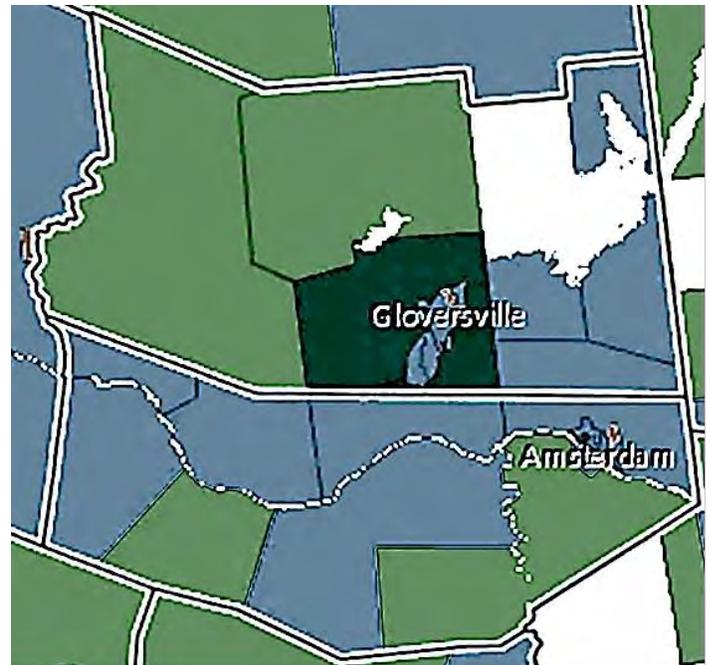
National Community Action Partnership guidance indicates that the “immediate impacts of COVID-19 have been felt across all sectors of society. Some of the greatest impacts relevant to the Community Action Network have been in the areas of health, education, employment, human services provision, and community resources.” The Engagement Network is a national platform that provides public and custom tools produced by the Center for Applied Research and Engagement Systems (CARES) at the University of Missouri. The COVID-19 Vulnerability Footprint identifies vulnerable communities across the nation, defined as having high concentrations of older populations, the uninsured, and high population density (<https://engagementnetwork.org/COVID-19/>).

Understanding Vulnerability

Both counties show concentrations of the highest vulnerability areas in the cities of Amsterdam and Gloversville, the location of many of Fulmont’s poorest consumers, most services as well as a concentration of lower wage retail employment severely impacted by the pandemic, and the largest concentration of affordable and public housing. These are also areas with the highest concentration of minority neighborhoods.

VULNERABILITY FOOTPRINT

“Understanding social and geographic vulnerability is key to building community resilience. Research shows that social factors like age, race, and ethnicity are often highly predictive of certain health outcomes. For the current COVID-19 pandemic, the social factor most associated with the disease is age, with older populations most at risk for severe outcomes, including hospitalization and death. Other factors like health insurance status can impact a community, as lack of health insurance often results in delayed medical care. Finally, with contagious disease, geographic factors like population density and proximity to health resources can influence how a disease spreads and is managed.”

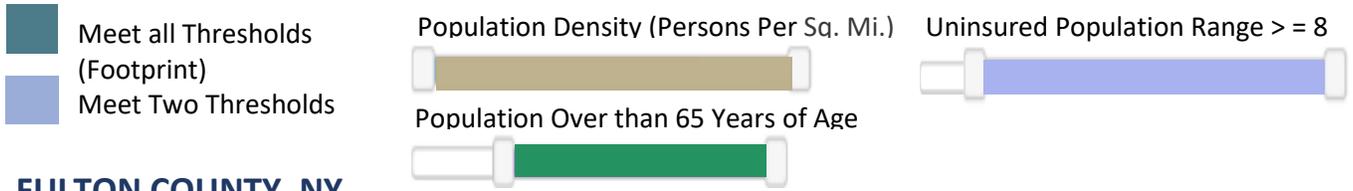


The blue shading shows areas exceeding the Population Density threshold (alone); the yellow shading shows areas exceeding the Uninsured Population (%) threshold (alone); the purple shading shows areas exceeding the Age 65 % threshold (alone). Areas exceeding two thresholds are shaded in dark orange; and areas exceeding all three thresholds are shaded in dark red - the dark red areas are referred to as the "footprint."

The mapping clearly illustrates that the three cities in the area – Amsterdam, Johnstown, and Gloversville – are the geographic locations with the highest vulnerability.



LEGEND

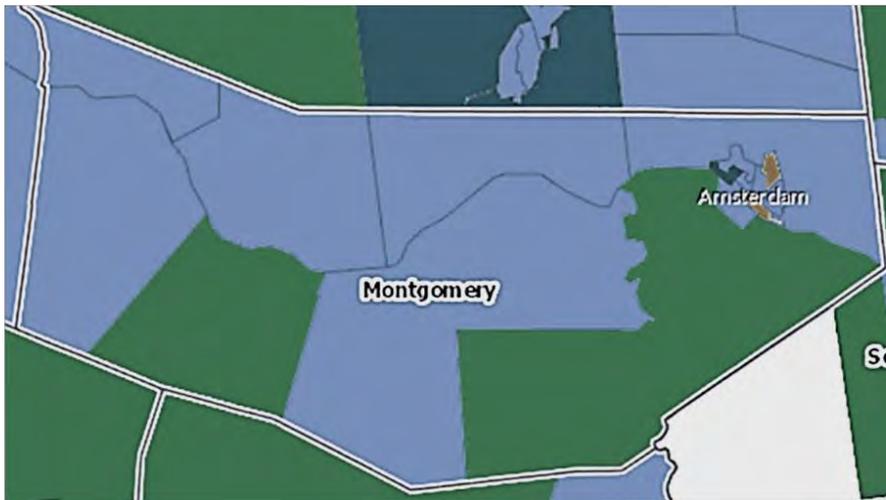


FULTON COUNTY, NY



High Vulnerability Footprint:
Cities of Johnstown and Gloversville

MONTGOMERY COUNTY, NY



High Vulnerability Footprint:
City of Amsterdam



AREA DISADVANTAGES

The Area Deprivation Index (ADI) includes measures created by the Health Resources & Services Administration to report the average (population weighted) Area Deprivation Index and rank neighborhoods by socioeconomic status and disadvantages. ADI scores range from 1 to 100, with 1 representing the least disadvantaged areas.

Many local providers including health care systems can use the ADI target program delivery on the area of greatest disadvantage. ADI has been used to document how equitably COVID-19 services are allocated and to understand the relative burden and health risk faced by low income people and people of color. The ADI rates are very high for both counties, with Fulton County at 64 and Montgomery County at 68 (compared to NY'S at 37). <https://www.neighborhoodatlas.medicine.wisc.edu/>

AREA DEPRIVATION INDEX		
Poverty by Ethnicity	Hispanic or Latino	Hispanic or Latino (%)
Fulton County	423	27.90%
Montgomery County	2,738	41.00%

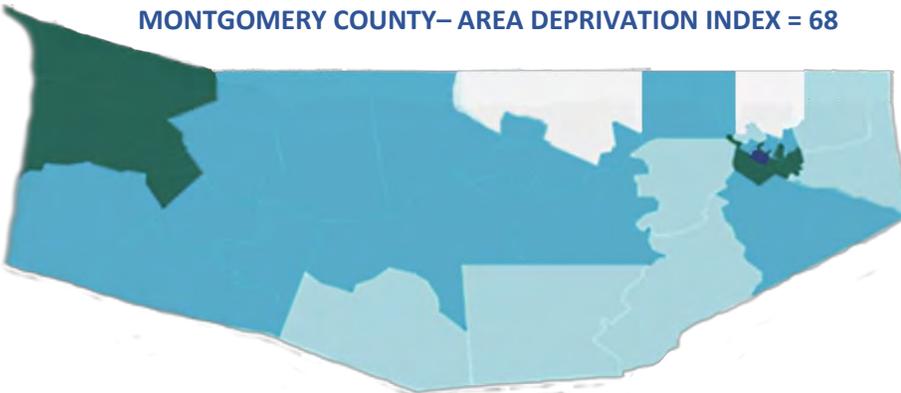
HEALTH INDICATORS



FULTON COUNTY – AREA DEPRIVATION INDEX = 64



MONTGOMERY COUNTY – AREA DEPRIVATION INDEX = 68



Cities of Gloversville and Johnstown



City of Amsterdam



THE SOCIAL VULNERABILITY INDEX

ISSUE: Research is showing that some populations are particularly vulnerable including low income families, people with underlying health conditions, the elderly, communities of color and people with limited English language ability. Social vulnerability refers to the resilience of communities when confronted by external stresses on human health, stresses such as natural or human-caused disasters or disease outbreaks. Reducing social vulnerability can decrease both human suffering and economic loss. The social vulnerability a community faces and the degree to which it exhibits certain social conditions, including high poverty, low percentage of vehicle access, or crowded households, may affect that community’s ability to prevent human suffering and financial loss in the event of disaster.

Social Vulnerability Index	Fulton County	Montgomery County
Socioeconomic Score	0.55	0.74
Household Score	0.68	0.85
Minority Status Score	0.28	0.67
Housing and Transportation Score	0.40	0.71
Social Vulnerability Index Score	0.50	0.83

CDC's Social Vulnerability Index (SVI) uses 15 U.S. Census variables at tract level to help local officials identify communities that may need support in preparing for hazards or recovering from disaster. The index is a measure of the degree of social vulnerability in counties and neighborhoods across the United States, where a higher score indicates higher vulnerability.

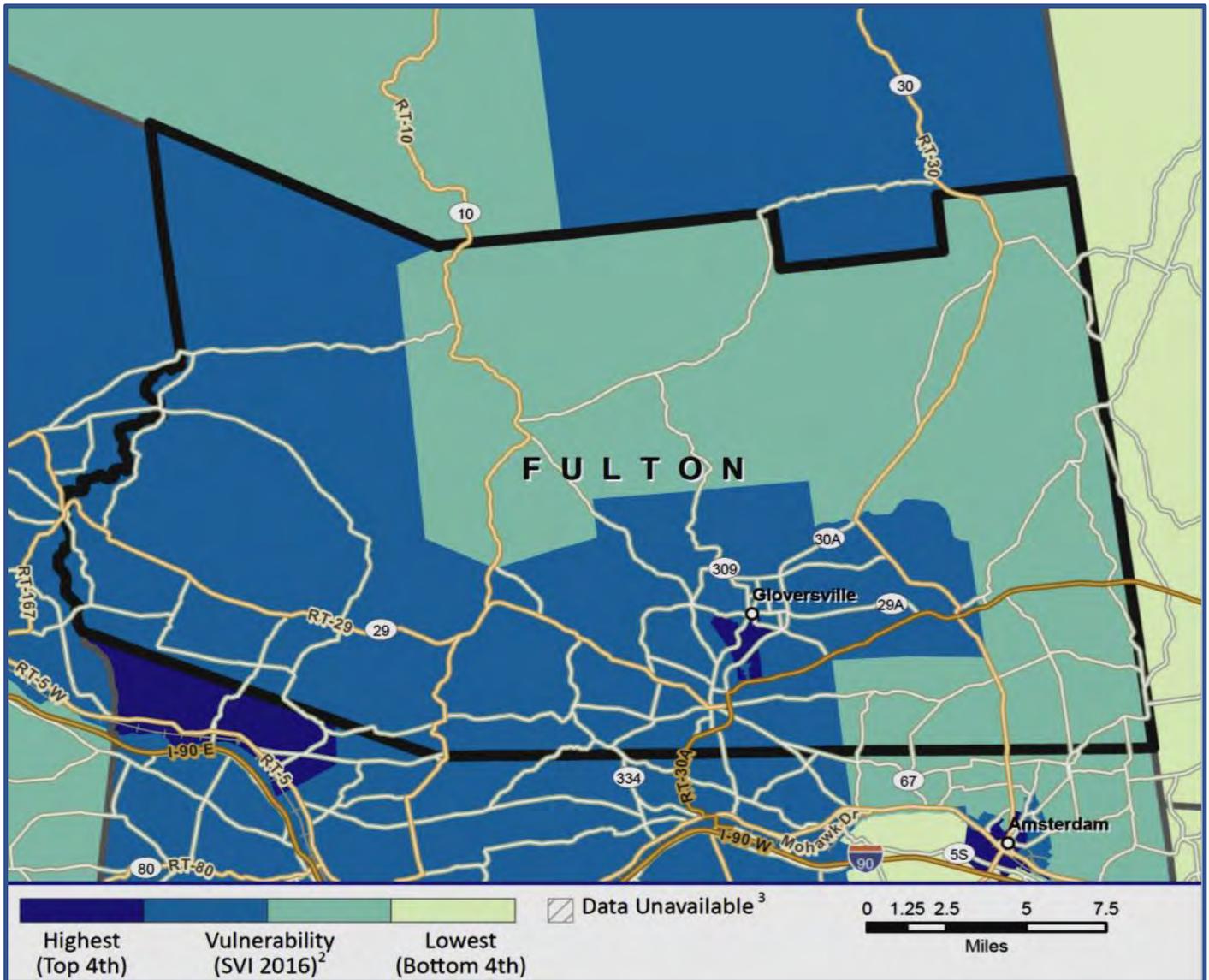
The Social Vulnerability Index County Map depicts the social vulnerability of communities, at census tract level, within a specified county. SVI 2016 groups fifteen census-derived factors into themes that summarize the extent to which the area is socially vulnerable to disaster: Race/Ethnicity/Language, Household Composition/Disability, and Housing /Transportation themes are shown in the three smaller maps in the graphic that follows.

The CDC has applied the SVI to the study of COVID-19 cases across the country. People in the most vulnerable counties had 4.94- and 4.74-fold greater risks of COVID-19 diagnosis and death, respectively, when considering only the minority status and language domain. Among urban counties alone, these trends persisted. Among rural counties alone, the risk of COVID-19 diagnosis was increased for the most vulnerable counties by minority status and language, while associations with overall SVI and other domains were not significant.

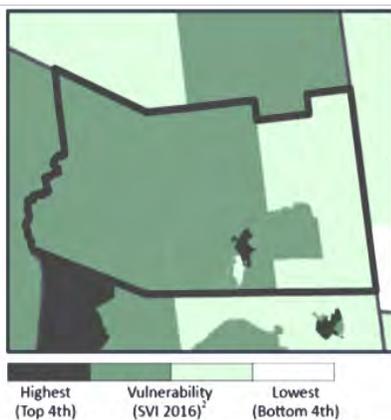
Overall Social Vulnerability							
Housing & Transportation	Cost Burden	Minority Status and Language Access	Race	Household Composition and Disability	< Age 65	Socio Economic Status	Below Poverty
	Homeless		Ethnicity		> Age 17		Unemployed
	No Vehicle		Language		Disabled		No Diploma
	Crime		Immigration		Single Parent		Uninsured

The social vulnerability score for Fulton County is much higher than Montgomery County at 0.83%. This indicates that it will likely take longer to rebound from COVID-19 impacts and residents may need more intensive support for a longer time. Montgomery County reports a social vulnerability score of 0.50 which is well below Fulton County and slightly below the State as a whole (0.55).

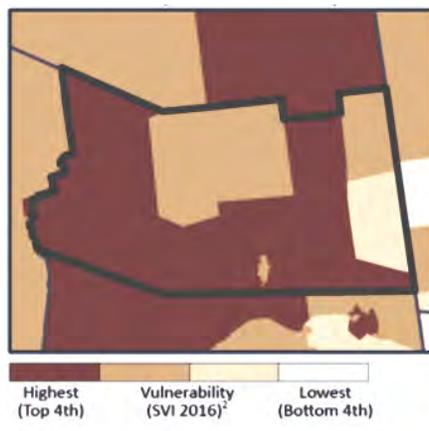
The areas in dark blue (maps follow) face the greatest social vulnerability and include the Cities of Johnstown, Gloversville and Amsterdam as well as the area including and surrounding the Villages of Fonda and Fultonville in the northwest corner of Montgomery County.



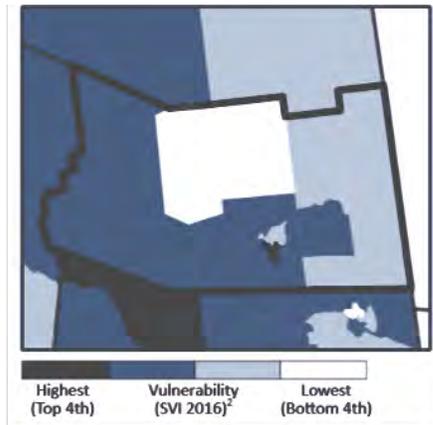
Race/Ethnicity/Language¹

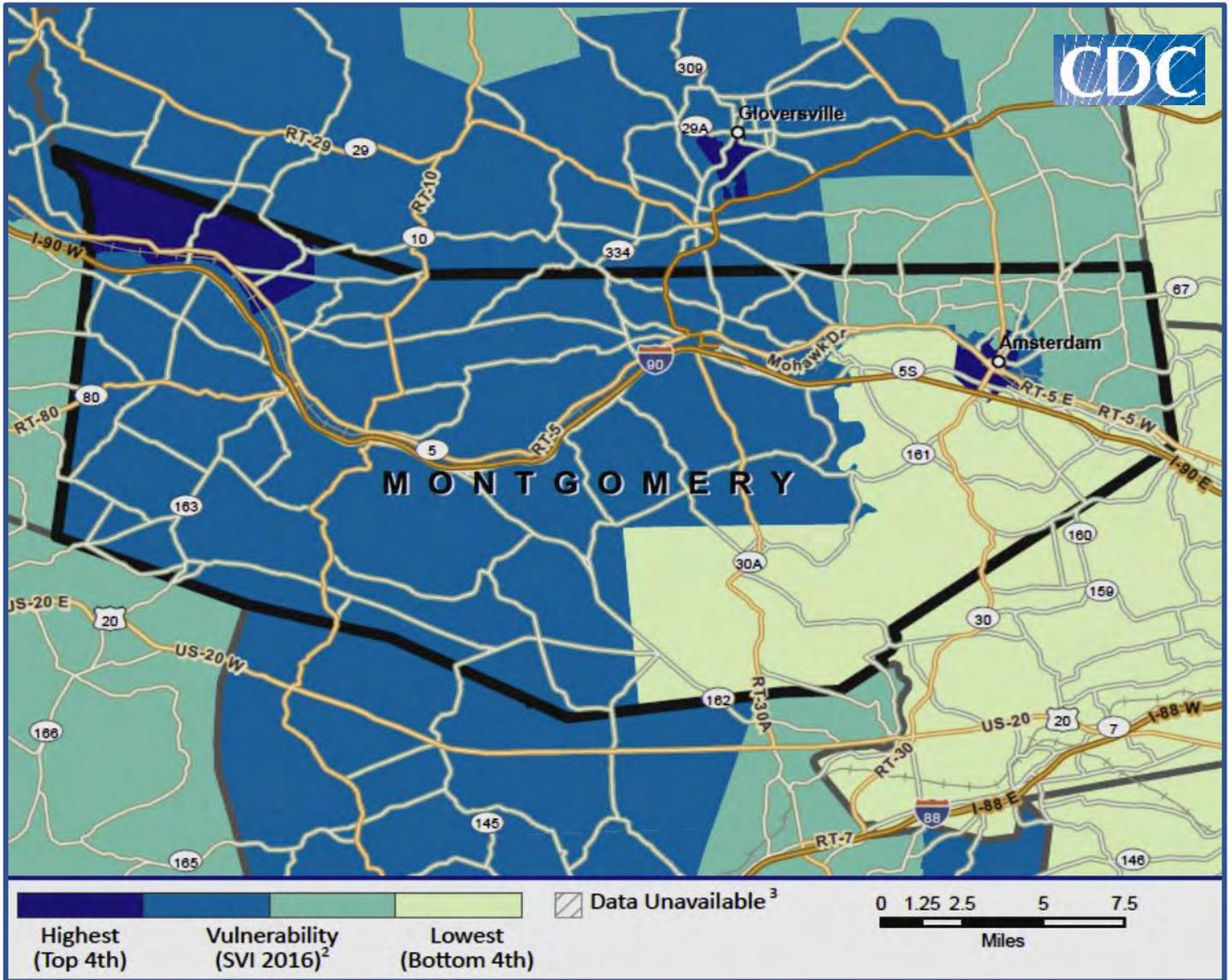


Household Composition/Disability

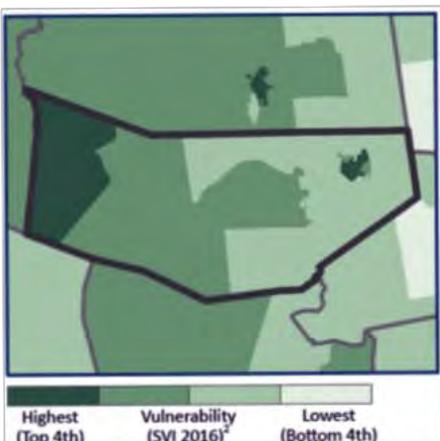


Housing/Transportation

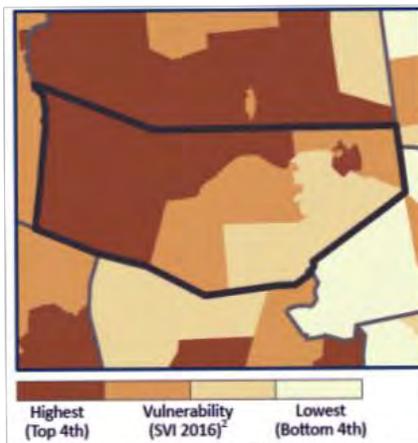




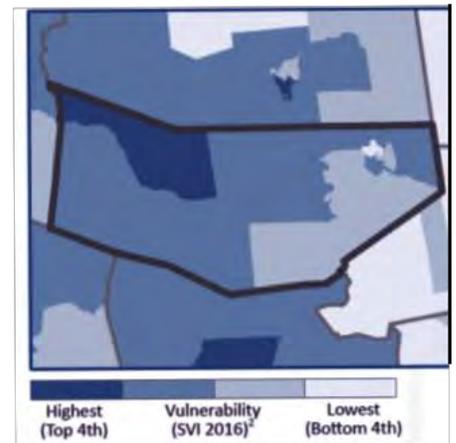
Race/Ethnicity/Language



Household Composition/Disability



Housing/Transportation





COVID 19 TRENDS - Real Time ArcGIS

ESRI and Urban Observatory defined five trends using the most recent 10 to 21 days of new cases and the corresponding number of cases per 100,000 people.

Emergent	Spreading	Epidemic	Controlled	End Stage
Early stages of outbreak.	Early stages: with local capacity may be a manageable rate of spread.	Uncontrolled spread.	Average less than 0.5 new cases per 100,000 people for 21 days.	Average less than one new case every five days for 42 days.



After **Emergent** the goal is to move as soon as possible to **Controlled**. However, COVID-19 is highly contagious and many areas will move to the **Spreading** and **Epidemic** trends. Once **Controlled**, eliminating new cases will initiate the **End Stage** trend.



FULTON COUNTY: Spreading

STATUS: August 9, 2020 – Spreading For 71 Days -Stable with moderate growth new cases for 1 weeks

CASES

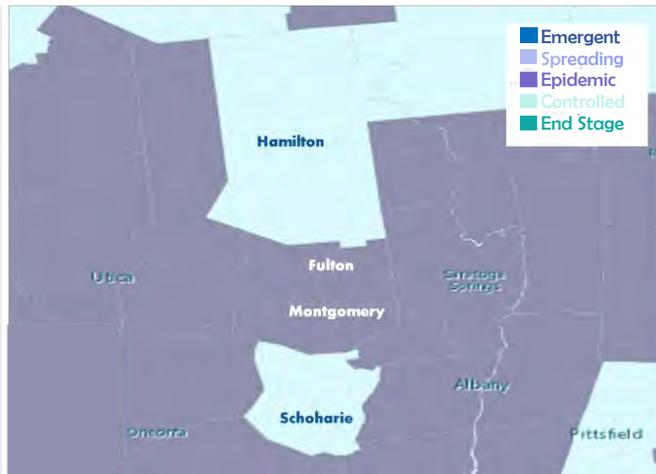
Cases: **27** (Estimated)
Total Cases: **297**
49 per 100,000 persons
2019 Est. Population: 55,358

DEATHS

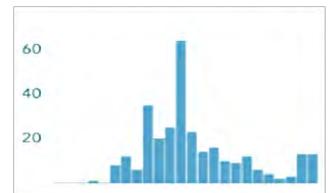
Deaths: **24** (8.08% of Cases)

NEW CASES

Days since last new case: **0**
27 cases confirmed in the past **14** days



Trend History Through 9/9/20



Date	Trend
May 30, 2020	Spreading
May 11, 2020	Epidemic
May 08, 2020	Spreading
May 03, 2020	Epidemic
April 01, 2020	Spreading
March 31, 2020	Controlled
March 29, 2020	End Stage
March 19, 2020	Emergent
February 01, 2020	Zero Cases

MONTGOMERY COUNTY: Spreading

STATUS: August 9, 2020 – Spreading For 129 -STRONGLY WORSE for new cases for 1 weeks

CASES

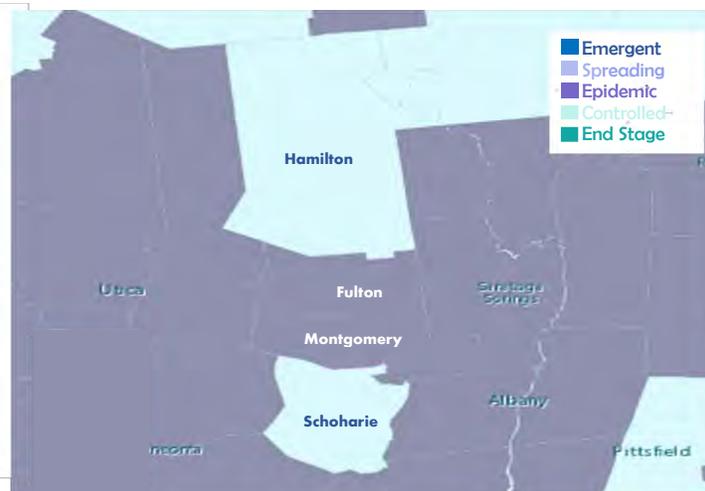
Active Cases: 30 (Est.)
Total Cases: **177**
61 per 100,000 persons
2019 Est. Pop.: 49,801

DEATHS

Deaths: **4** (2.26% of Cases)

NEW CASES

Days since last new case: **0**
29 cases confirmed in the past **14** days



Trend History Through 9/9/20



Date	Trend
April 02, 2020	Spreading
March 26, 2020	Controlled
March 25, 2020	Spreading
March 24, 2020	Controlled
March 14, 2020	Emergent
February 01, 2020	Zero Cases



PEOPLE

A total of 53,743 people lives in the 495.46 square miles in Fulton County and a total of 49,426 people lives in the 403.12 square mile of Montgomery County. Before COVID-19 hit the counties, Fulmont was already addressing high rates of poverty, an aging population, severe lack of personal and public transportation family and child hunger, healthcare shortages and a significant rate of cost and rent-burden and shortage of decent affordable housing. These needs have become more acute and the demands placed on the Agency and its staff have increased significantly.

County	Total Population	Total Land Area (Sq. Mi.)	Population Density (Per Sq. Mi.)
Montgomery County	49,426	403.12	122.61
Fulton County	53,743	495.46	108.47

People by Age Groups

Seniors make up over 18% of the population in each county: the largest population segment of local residents. The median age in the counties served is 42.6 – significantly higher than the NY’S median age of 39 years. The counties are losing young families and school aged children, due largely to a shortage of living wage jobs. Nearly 30% of the population is in their peak earning years between 45 and 65. These families are more likely to have savings and other resources to resiliently ride out the COVID-19 pandemic.

Age Groups	Age 0-4	Age 5-17	Age 18-24	Age 25-34	Age 35-44	Age 45-54	Age 55-64	Age 65+
Fulton County	2,677	8,300	4,166	6,407	6,208	8,041	7,963	9,981
	4.98%	15.44%	7.75%	11.92%	11.55%	14.96%	14.82%	18.57%
Montgomery County	3,034	8,251	3,928	6,248	5,600	6,382	7,018	8,965
	6.14%	16.69%	7.95%	12.64%	11.33%	12.91%	14.20%	18.14%

Race and Ethnicity

The CDC reports the stunning statistic that that Black or African American people are dying at 2.5 times the rate of White people (June 2020). See <https://covidtracking.com/race>.

Population by Race	White	Black or African American	Native American /Alaska Native	Asian	Native Hawaiian /Pacific Islander	Other Race	Multiple Races
Fulton County	50,849	1,085	382	192	15	468	752
Montgomery County	43,412	1,007	71	420	0	3,059	1,457

Population by Ethnicity	Total Population	Hispanic or Latino Population	% Hispanic or Latino Population	Non-Hispanic Population	% Non-Hispanic Population
Fulton County	53,743	1,581	2.94%	52,162	97.06%
Montgomery County	49,426	6,766	13.69%	42,660	86.31%



VULNERABILITY OF SENIORS TO COVID-19

ISSUE: John’s Hopkins researchers report that “older people are especially vulnerable to severe illness. Research is showing that adults 60 and older, especially those with preexisting medical conditions, especially heart disease, lung disease, diabetes or cancer are more likely to have severe — even deadly — coronavirus infection than other age groups.” In addition, seniors have become socially isolated due to social distancing. Many are fearful of leaving the house, lack nutritious food and in some cases put off health care visits due to travel or exposure concerns and lack of capacity to participate in telemedicine.

There are 8,965 people over the age of 65 in Montgomery County (18.1% of the population) and 9,981 in Fulton County (18.5% of population). The U.S. Census Dashboard Impact Planning Report (attached) reports 646 Montgomery County seniors over 65 and 383 Fulton County seniors living in group quarters which includes a range of adult care facilities including nursing homes. See the Census site at <https://COVID19.census.gov/>. It’s important to understand the number of older adults in the Fulmont service area because this population has unique needs which should receive special focus and coordination among providers.



Lower levels of health insurance create trepidation for families about visiting health care providers due to their inability to pay for services or manage the co-payment. Some health outreach programs are on hold as medical offices and hospitals focus on critical care services.

Experts from the healthcare industry, epidemiology and the education system’s testimony at a Senate Special Committee on Aging reinforced that “Elderly Black and Latino Americans are more likely to get



infected and die from COVID-19, often due to historic distrust of the healthcare system, and may be less likely to get vaccinated when a vaccine is ready.” According to the data from the Centers for Disease Control and Prevention, 80% of COVID-19 deaths in the United States have been adults over 65.

	Age 65+	Total Population	Population Age 65+	
Fulton County		53,743	9,981	18.57%
Montgomery County		49,426	8,965	18.14%

"COVID-19 has exposed our healthcare system vulnerabilities and revealed our inability to respond effectively to a pandemic," said Rodney B. Jones, president and chief executive officer at Atrium Health, a healthcare provider covering North and South Carolina. "It also highlighted the fact that low-income older adults and older adults of color suffered in significantly greater proportion than their white counterparts."

Mercedes Carnethon, a professor of epidemiology at Northwestern University offered important testimony for community providers like Fulmont: "Without building rapport and trust in these communities, there is no guarantee that the highest risk populations will get the vaccine or that they even want the vaccine" and "One of the most challenging features is that we've got to try to build trust in an urgent situation where the very individuals who are experiencing the worst outcomes are the most concerned about trust within the healthcare system."

Age 65+ By Race	White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Other Race	Multiple Race
Fulton County	9,831	84	0	32	0	0	34
Montgomery County	8,490	131	20	102	0	176	46

Age 65+ By Ethnicity	Hispanic or Latino	Not Hispanic or Latino	Percent Hispanic or Latino	Percent Not Hispanic or Latino
Fulton County	83	9,898	5.25%	18.98%
Montgomery County	559	5,823	8.26%	13.65%

PEOPLE LIVING IN POVERTY

ISSUE: Poverty is considered a *key driver* of health status and COVID-19 vulnerability. Poverty creates barriers to access including health services, healthy food, and other necessities that contribute to poor health status.

- Within Montgomery County, 19.93% or 9,649 individuals are living in households with income below the Federal Poverty Level (FPL).
- Within Fulton County, 15.46% or 8,119 individuals are living in households with income below the FPL.

	Total Population	Population in Poverty		Male in Poverty	Female in Poverty	Families Living in Poverty	Children Under 18 Living in Poverty
Fulton County	52,533	8,119	15.46%	14.04%	16.86%	9%	22%
Montgomery County	48,412	9,649	19.93%	18.10%	21.71%	15.3%	25%

The 2020 threshold of poverty in the U.S. for a household with two adults and two children is \$26,200. In the Fulmont Service Area, 35.9% or 17,768 individuals are living in households with income below the Federal Poverty Level (FPL).

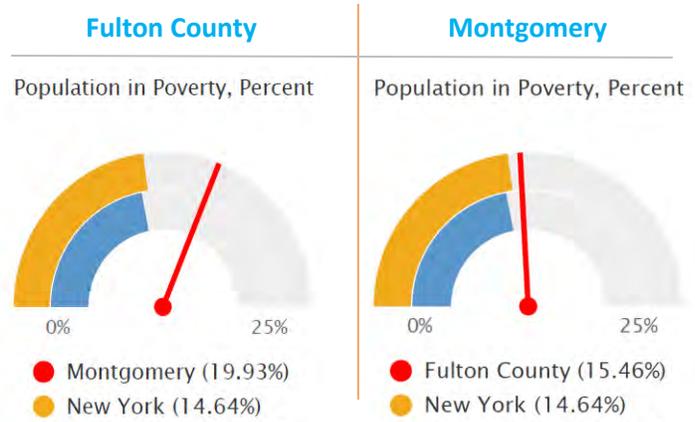


Children under 18 years make up approximately 22% of the population in Fulton and Montgomery Counties and 25% of those children are living in poverty. Some community initiatives under the federal CARES Program allow Fulmont to serve individuals earning up to 200% of poverty in response. In the Fulmont Service area 36.89% or 19,378 individuals are living in households with income below 200% of the Federal Poverty Level (FPL).

Poverty by Race and Ethnicity

Long-standing systemic health and social inequities have put many racial and ethnic minority groups at increased risk of getting sick and dying from COVID-19. People of color and non-Caucasian ethnicity are at higher risk for exposure to COVID-19 and more likely to be admitted to the ICU typically because lack of transportation or resources delayed them seeking care.

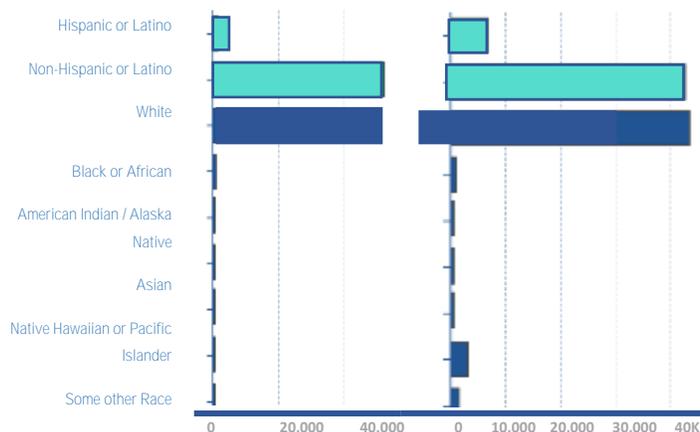
	Total Population	Population Below 200% FPL	
Fulton County	52,533	19,378	37%
Montgomery County	48,412	20,903	43%



In a July 2020 research letter published in *JAMA Network Open* and summarized in *Time Magazine*, senior author Andrea Troxel, director of the division of biostatistics at the New York University Grossman School of Medicine reports that “Poverty is one of the clearest consequences of structural racism, and one of the easiest to link to health inequity. You can trace an unbroken line from racist real estate and employment policies to the struggle of many Black and brown families to afford things like fresh food, insurance and quality medical care. These disadvantages always have a direct impact on health—but especially during a pandemic.” For more information see: <https://time.com/5872676/covid-19-racial-disparity/>.

The new study found that people living in substantially non-white communities were significantly more likely to contract and die from the novel coronavirus, no matter how affluent their community. “COVID-19 death rates were about nine times higher in lower-income, predominantly non-white communities, compared to lower-income, mostly white communities, according to the study. Even in richer areas, coronavirus death rates were almost three times higher if the county was predominantly non-white, versus heavily white.”

HISPANIC ORIGIN AND RACE





When it comes to COVID-19, the type of job someone holds also matters—probably as much, if not more than, their income. Essential workers who must physically report for duty each day are at greater risk and data shows that Black Americans disproportionately hold essential jobs in fields like transportation, health care and childcare. For more information see:

<https://time.com/5872676/COVID-19-racial-disparity/>.

PEOPLE WITH LIMITED ENGLISH ABILITIES

ISSUE: Residents with language access issues are at higher risk of exposure and negative medical outcomes. Limited English proficiency data measures report the percent of the population aged 5 and older who speak a language other than English at home and speak English less than "very well."

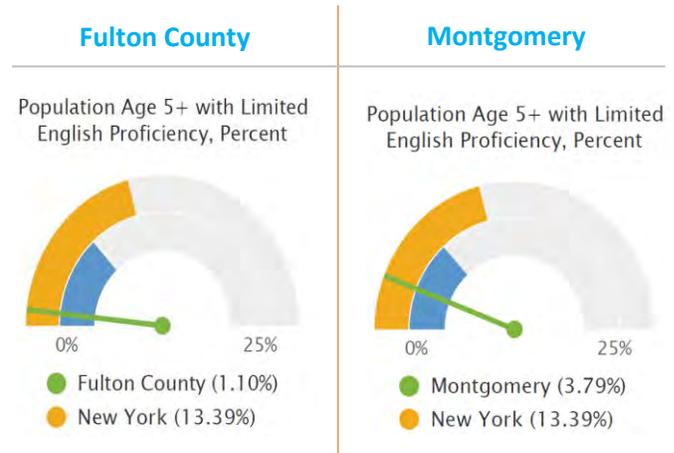
Limited English Proficiency	Population Age 5+	Population Age 5+ with Limited Proficiency	
Fulton County	46,392	1,756	3.79%
Montgomery County	51,066	560	1.10%

Concerns about language access during the pandemic extend beyond health care facilities. The New York Times reports that “Advocates say that with news and official guidance on the coronavirus evolving so quickly, it’s crucial that this public health information is widely accessible in other languages, especially because mass cooperation from the public is seen as essential to curbing the spread.” Local providers can make use of the CDC, which publishes coronavirus guidance for health care workers, businesses, schools, and the public in languages other than English.

Limited English Ability by Race and Ethnicity

Though Fulmont has bilingual (English/Spanish) interpretation available, consumers are having a harder time accessing services. Dr. Alegría, Chief of the Disparities Research Unit at the Massachusetts General Hospital and the Mongan Institute reports that “people with limited English proficiency do not receive adequate health information. This information gap can worsen health disparities.” Her research shows that many patients don’t know what the symptoms of COVID-19 are, where to go for testing or how to access the health care system when they need it. Without interpreters, they can’t understand what their doctors and nurses are telling them, and they can’t make informed decisions about their own medical care. Once hospitalized they may not be accompanied by family members who can help.

Limited English Proficiency by Race	White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Other Race	Multiple Race
Fulton County	355 0.73%	0 0.00%	0 0.00%	89 0.18%	0 0.00%	116 0.24%	0 0%
Montgomery County	962 17.09%	20 31.34%	0 15.63%	116 22.76	0 0	600 43.75%	58 46.95





She adds that “... many people fear that seeking medical care will result in their immigration status or that of a family member being reported to the government.” She sums up that “In a public health crisis like COVID-19, everyone must know what’s going on to protect themselves, their families, and their communities. It’s the only way we all get through it together.” For more information see <https://thehill.com/changing-america>.

Limited English Proficiency by Ethnicity	Hispanic or Latino	% Hispanic or Latino	Not Hispanic or Latino	% Not Hispanic or Latino
Fulton County	161	399	11.21%	0.80%
Montgomery County	1,257	499	20.56%	1.24%

Language Spoken at Home

US World and News Report writes that “roughly 25 million people in the U.S. speak no or limited English, and language access has been a long-simmering problem in medical offices, hospitals and the public health field at large where sick people don't always have access to interpreters, and interpreters don't always have access to crucial protective gear like masks.”

Language Spoken at Home	Spanish	Other Indo-European	Asian and Pacific Island	Other Language
Fulton County	1,286	336	72	62
Montgomery County	199	218	92	51

HEALTH ISSUES AND HEALTH CARE SYSTEM CAPACITY

ISSUE: The National Community Action Partnership COVID-19 Community Needs Assessment Update Template & Data Resource Guide identifies the following potential needs related to health care that may need to be addressed in meeting the local COVID-19 challenges.

Potential Health Issues to be Addressed
1. Individuals over 65 including those in congregate care are at risk for severe health implications.
2. Health resources will be stretched thin and care for people with needs not related to COVID-19 will be limited including Intensive Care and hospital services.
3. Increased and/or new behavioral health resources are needed to help people deal with stressors/traumas (domestic violence, elder abuse, child abuse, drug abuse, etc.)
4. Nutrition for school-aged children previously accessing free/reduced breakfast, lunch, and snacks not available due to school closures.

COVID-19 In Fulton And Montgomery Counties

In the case of New York State, the typical comparisons to the state average are not relevant given the enormous impact of cases in New York City and nearby counties. While the number of cases and the attributed deaths may seem low, Fulton and Montgomery County residents have lived under a tight set of federal, state and local mandates that have helped flatten the curve in occurrence, but left people vulnerable to increased violence, hunger, eviction, childcare crises and losses of education and work opportunities.



Johns Hopkins and the CDC report that healthcare access can also be limited for these groups by many other factors, such as lack of transportation, child care, or ability to take time off of work; communication and language barriers; cultural differences between patients and providers; and historical and current discrimination in healthcare systems. See <https://www.cdc.gov/coronavirus>. The following tables summarizes data from the CARES Network at the University of Minnesota COVID-19 County Vulnerability Indicator Hub at <https://apps.cares.missouri.edu>.

COVID-19 Cases

There have been 270 cases of COVID-19 in Fulton County and 152 cases in Montgomery County as of July 2020. The rate of confirmed cases is 513.15 per 100,000 population.

The COVID Real Time Tracker (see page 12) classifies the virus trend as “spreading” for the past 71 days and classified as a “moderate level” with 29 cases confirmed cases in the 14 days prior to August 9, 2020. In Fulton County. In Montgomery County the virus trend is also “spreading” for the past 129 days and classified as “strongly worse in the past one week” with 29 cases confirmed in the 14 days prior to August 9, 2020. Note that over the same timeframe. Note that adjacent Hamilton County and Schoharie County which don’t have densely clustered cities are classified as “controlled.”

Deaths from COVID-19

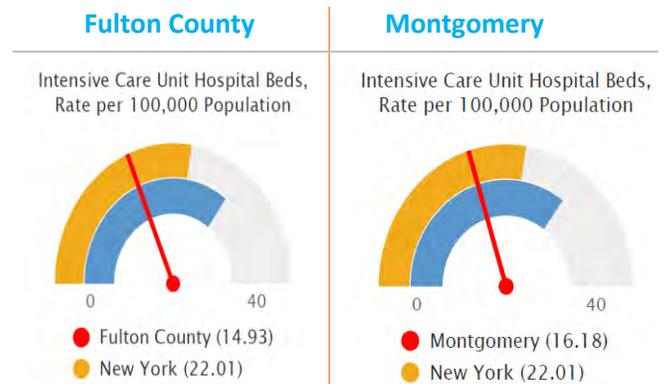
In Fulton County, there have been 24 deaths among patients with confirmed cases of COVID-19. The mortality rate in the report area is 44.78 per 100,000 population. In Montgomery County, there have been 4 total deaths among patients with confirmed cases of COVID-19. The mortality rate in the report area is 8.09 per 100,000 population.

	Total Cases	Total Deaths Attributed to the Virus	New Cases 7-15-20 to 7-29-20
Fulton County	270	24	4
Montgomery County	152	4	11

Access to Health Care

In small rural counties, the health care services in the Fulmont service area are more limited than in other parts of the state. Data about availability of hospital beds/ICU beds is critical to understand the care capacity of hospitals. Care capacity may be needed to support COVID-19 patients from outside of the counties should a hot spot occur in the region.

The area is designated as a physician shortage or medically underserved area for some practitioners. As the pandemic has unfolded many private and public health care providers have made the move to using telemedicine. With one-quarter of residents lacking a computer at home and/or broadband access this approach is a significant obstacle for many local families.





	Total Population	# of Facilities	# of Providers	Rate per 100K Pop.
Fulton County	53,777	13	44	81.82
Montgomery County	49,216	13	33	67.05

The four hospitals in the service area are reportedly licensed for 194 beds. The facility can support 158 beds at current maximum staffing levels. It is not known if the 36-bed difference represents physically set up and available beds or excess capacity that would be more difficult to mobilize. The typical utilization rate is significantly higher in Montgomery County at 62.1%. There are only 16 ICU beds reported at the area's four hospitals.

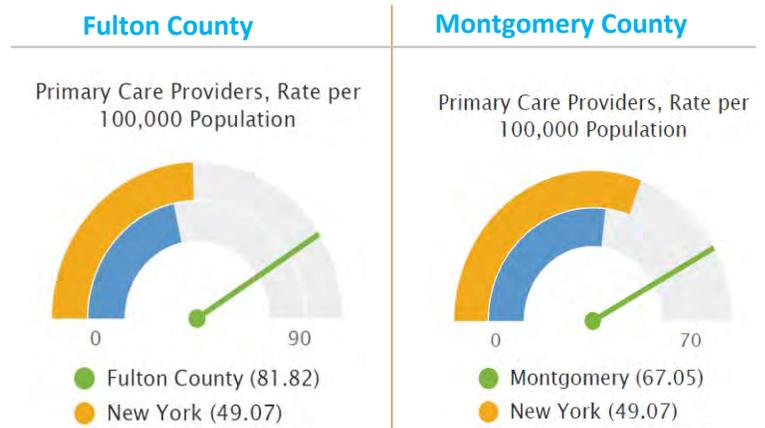
Hospitals	Hospitals	Licensed Beds	Staffed Beds	ICU Beds	ICU Beds per 100K Pop.	Utilization Bed Rate
Fulton County	Johnstown Hospital and Nathan Littauer Hospital (Gloversville)	74	58	8	14.93	36.3
Montgomery County	Amsterdam Memorial Hospital and St Mary's Hospital (Amsterdam)	120	100	8	16.18	62.1

While the facilities have managed the COVID-19 case load to date, there may be concern regarding the lack of ICU beds should the rate of cases increase (as it has been doing in both counties over the past 14 days.)

Primary Care Providers

Primary health providers include practicing physicians specializing in general practice medicine, family medicine, internal medicine, and pediatrics. Doctors classified as "primary care physicians" by the AMA include: General Family Medicine MDs and DOs, General Practice MDs, and DOs, General Internal Medicine MDs, and General Pediatrics MDs.

Both counties have high percentages of residents with conditions that may make them more vulnerable to complications from COVID-19 like high cholesterol, asthma, cardiovascular disease, tobacco use, high blood pressure and diabetes.



Uninsured People

The lack of health insurance is considered a *key driver* of health status and a primary barrier to regular primary care, specialty care and other health services. Uninsured people are delaying and forgoing care due to concerns about unexpected costs. This has serious consequences for both their health and efforts to control the pandemic. In early August 2020, the federal government agreed to reimburse hospitals' COVID-19 related costs at Medicare (not Medicaid) rates specifically to care for uninsured Americans who have a primary diagnosis of COVID-19 (meaning people who need health care for other conditions will not qualify for assistance).

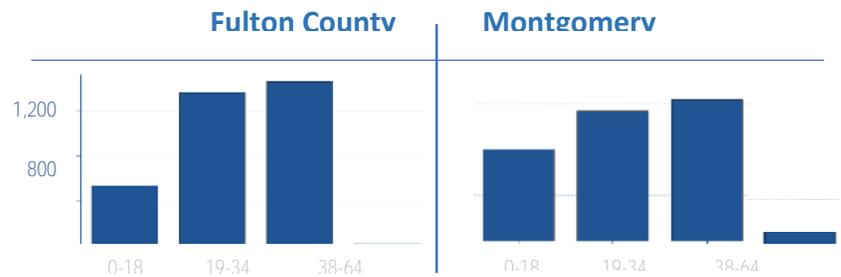
The program is voluntary and there is concern that small hospitals may not have the administrative capacity to participate. Challenges remain including limited transportation and language limitations.



Perhaps the biggest challenge is getting the word out to uninsured people given disrupted client interactions. Undocumented residents, who typically seek care in much lower numbers, may be harder to convince.

The Census reports that the 6.3% of the total population in each of the counties lack health insurance coverage, with the largest segments being children and youth under age 18 and residents over 65 years of age.

PEOPLE WITH NO HEALTH INSURANCE BY AGE



Uninsured Population	Total Population	Uninsured Population		Uninsured Underage 18	Age 18 - 64	Age 65 +
Fulton County	52,990	3,340	528	2,812	0	528
		%	4.62%	8.82%	0%	4.62%
Montgomery County	48,655	3,214	805	2,373	0	805
		%	6.78%	8.37%	0.43%	6.78%

Uninsured People by Race and Ethnicity

Documentation is building that low-income people and people of color face poorer health outcomes and higher ICU occupancy because they delay care and are sicker when they do go to the doctor or hospital.

Uninsured Population by Race	White	Black or African American	Native American or Alaska Native	Asian	Native Hawaiian or Pacific Islander	Other Race	Multiple Race
Fulton County	3,087	152	0	19	8	32	8
	6.24%	17.45%	0%	5.01%	53.33%	7.21%	1.11%
Montgomery County	2,765	22	0	0	0	266	61
	6.95%	2.34%	0%	0%	No data	8.73%	4.22%

With record high unemployment rates many people are losing their insurance coverage because they are ineligible for or cannot afford to pay for their insurance cost under COBRA.

Uninsured Population by Ethnicity	Hispanic or Latino	Not Hispanic or Latino	% Hispanic or Latino	% Not Hispanic or Latino
Fulton County	66	3,274	4.29%	6.36%
Montgomery County	370	2,844	5.49%	6.79%

Behavioral Health

People will need ongoing assistance to manage the many different stressors/traumas caused by the pandemic, especially its impact over an extended time. Issues such as domestic violence, elder abuse, child abuse, drug abuse, suicide and other indicators of behavioral health issues are a concern in this community.



Mental health resources will need to be available in new and increased ways to deal with the many different stressors/traumas caused by the pandemic.

Fulmont Staff have expressed increasing concerns about behavioral health issues among their consumers prior to COVID-19 and the inability to access treatment and care. It is reasonably assumed that these issues will increase as families are more isolated, accessing care is more difficult and chronic overcrowding due to doubling up in residences and rent and cost burden continue over the coming months. New York State Community Health Indicator Reports (CHIRS) at <https://www.health.ny.gov/statistics> report the higher than the state average incidence of injury deaths, firearm fatalities and disconnected youth, for example. The counties both show a lack of mental health practitioners.

Lack of Adequate Support (Adults)	Total Population Age 18+	Estimated Pop. Without Adequate Social / Emotional Support	Estimated % of County Population
Fulton County	43,018	7,442	17.30%
Montgomery County	38,238	8,106	21.10%

U.S. Health and Human Services Health Indicators Warehouse (<http://healthindicators.gov>) provides data on the percentage of adults aged 18 and older who self-report that they receive insufficient social and emotional support all or most of the time. With nearly one fifth of the population routinely reporting needs it is reasonable to expect this need will be significantly higher and local providers will need to coordinate closely to gain access to mental health professionals.

Access to Mental Health Providers

ISSUE: This analysis compares the rate of the county population to the number of mental health providers including psychiatrists, psychologists, clinical social workers, and counsellors that specialize in mental health care. The potential need for mental health providers to support residents is more than double in Fulton County than in Montgomery County (see the University of Wisconsin Population Health Institute, County Health Rankings. 2019 at <https://datascience.wisc.edu/COVID-19/#model>.)

Mental Health Care	Population	# of Mental Health Providers	Ratio of Providers to Population	Mental Health Care Provider Rate (Per 100,000)
Fulton County	53,591	101	530.6	188.5
Montgomery County	49,455	42	1,177.5	84.9

EMPLOYMENT ISSUES RELATED TO COVID-19

The National Community Action Partnership COVID-19 Community Needs Assessment Update Template & Data Resource Guide identifies the following potential needs related to employment that may need to be addressed in meeting the local COVID-19 challenges.

Employment impacts of the pandemic have been immediate and profound. Anecdotal information as well as early data about unemployment claims from March and April confirm a significant emerging need in employment. Local indicators show that national patterns of unemployment are being seen in this community. Individuals in the health care field are at high-risk of exposure to COVID-19 and are under tremendous stress due to additional work hours and challenging work conditions. Many of the lowest income workers endure the greatest exposure.



Potential Employment Issues to be Addressed

1. Employment impacts such as unemployment claims confirm a significant emerging need in employment.
2. Health care workers are at high-risk of exposure, under tremendous stress and in close, frequent contact with vulnerable individuals.
3. Education providers are working remotely. Lower-wage workers are vulnerable to layoffs and may lack technology resources in their home to work remotely.
4. Individuals in the service, retail and gig economy face sudden unemployment.

Johns Hopkins and the CDC reports that people from some racial and ethnic minority groups are disproportionately represented in essential work settings such as healthcare facilities, farms, factories, grocery stores, and public transportation. Some people who work in these settings have more chances to be exposed to the virus that causes COVID-19 due to several factors, such as close contact with the public or other workers, not being able to work from home, and not having paid sick days. Over 1% of the population works in retail. People with limited job options likely have less flexibility to leave jobs which put them at a higher risk of exposure to COVID-19. They cannot afford to miss work, even if they're sick, because they do not have enough money saved up for essential items.

There are 14,448 employed persons in Fulton County at 1,174 establishments. There are 15,151 employed persons in Montgomery County at 1,074 establishments. The workforce is employed in the following industries according to the US Bureau of Labor Statistics.

	Total Workers	Agriculture, Forestry or Mining	Construction	Manufacturing	Retail
Fulton County	18,205	1.37%	5.62%	10.92%	15.45%
Montgomery County	19,507	2.00%	5.26%	16.79%	15.57%

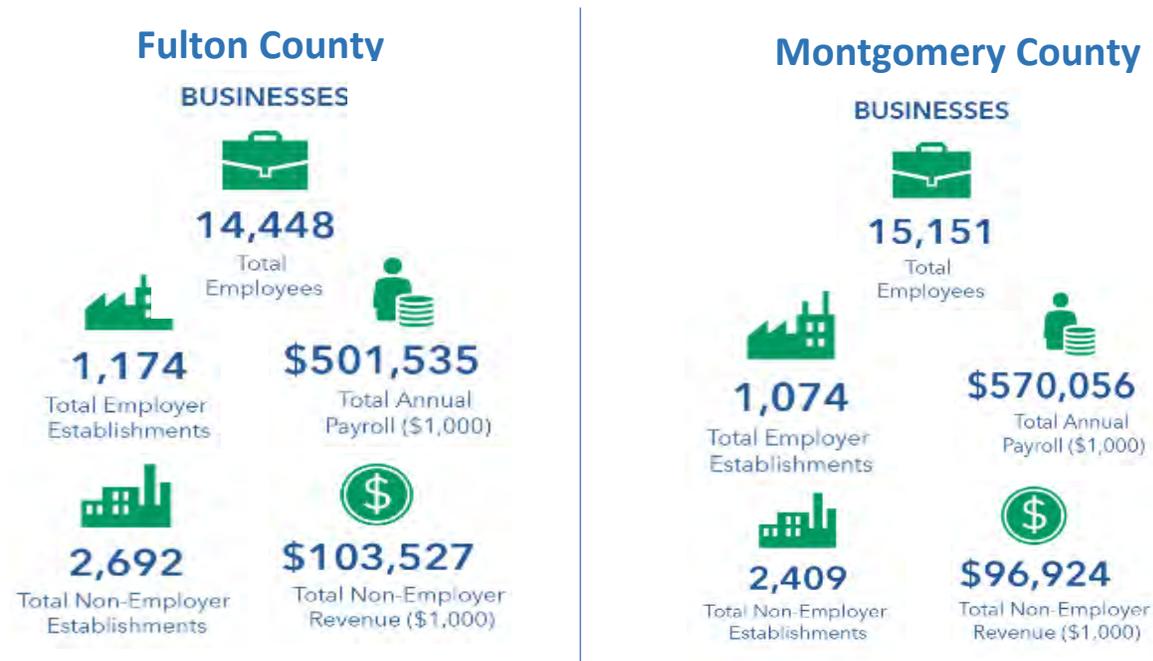
Unemployment Related to COVID-19

The findings back up other reports that show that lower-income Americans, as well as Black and Hispanic people, are bearing the brunt of the outbreak's financial fallout. They are more likely to work in sectors that are laying off or furloughing workers, such as food services. More than one in five Americans have filed initial jobless claims since the pandemic began. From the start of March through early April 2020, 19% of adults said they lost a job, were furloughed, or had their hours reduced, the Fed report found. See for more information:

<https://www.cnn.com/2020/05/14/economy/low-income-layoffs-coronavirus/index.html>.

Local Unemployment

June 2020, unemployment in both counties is over 11%, down from highs of 14-15% in April 2020. For June 2020, Fulton County reported an 11.3% unemployment rate (37th of NY's 62 counties) and Montgomery County reported an 11.6% unemployment rate (42nd of 62 NY counties). Since the 20 NY counties with the highest unemployment rates are largely in/around NYC, the Fulmont service area unemployment rates are very troubling. It's important to note that the area offers significant seasonal employment and many of those employers are closed or operating on a reduced schedule. This will result in a loss of essential income in second or third jobs and severely impact youth employment.



CNN reports that “lower-income people are getting slammed. Nearly 40% of those with a household income below \$40,000 reported a job loss in March, according to the Economic Well-Being of US Households report. By contrast, 19% of those with family income between \$40,000 and \$100,000 reported a job loss, and only 13% earning more than \$100,000 did, according to the Federal Reserve.”

Average Annual Unemployment Rate, 2009-2019

Fulton and Montgomery Counties have been making significant progress jumpstarting the economy including new business park development and successful corporate recruitment which brought their unemployment rate to just over 5% in 2019.

Average Unemployed	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Fulton County	9.6%	11%	10.6%	11.0%	9.5%	7.7%	6.4%	5.7%	5.8%	5.1%	5.0%
Montgomery County	9.5%	10%	10.2%	10.4%	9.2%	7.5%	6.6%	5.7%	5.7%	5.2%	5.1%

Average Monthly Unemployment Rate, May 2019 - May 2020

2019 – early 2020 marked the lowest unemployment rates in each county since 2009.

Average Monthly Unemployment	May 2019	Jun. 2019	Jul. 2019	Aug. 2019	Sep. 2019	Oct. 2019	Nov. 2019	Dec. 2019	Jan. 2020	Feb. 2020	Mar. 2020	Apr. 2020	May 2020
Fulton County	4.4%	4.4%	5.0%	4.9%	4.4%	4.3%	4.7%	5.5%	6.2%	6.1%	6.2%	15%	11%
Montgomery County	4.3%	4.5%	4.7%	4.7%	4.4%	4.5%	4.7%	5.5%	5.8%	5.8%	5.8%	15%	11%



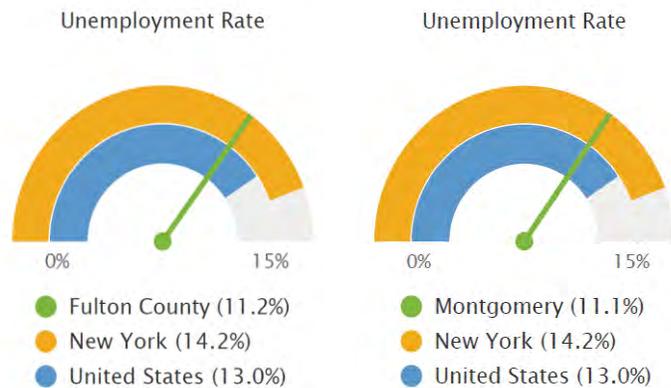
Individuals in the service, retail and gig economy faced sudden unemployment. Around one third of workers in each county are reported to be employed at grocery/pharmacy operations which are essential services in NY. Around 15% of workers in each county are reported to be employed in retail, which will take longer to recover. Jobs within this industry are often characterized by minimal pay, benefits, and hours. Consumers working in this industry may have been struggling to make ends meet prior to the COVID-19 pandemic, and for many families the situation has worsened significantly.

Technology Access	% of Households with a Computer	% of Households with Broadband Internet
Fulton County	83.7%	73.3%
City of Gloversville	79.8%	67.3%
City of Johnstown	90.1%	82.0%
Montgomery County	81.1%	71.9%
City of Amsterdam	79.1%	69.1%

Education providers are working remotely. Lower-wage workers are vulnerable to layoffs and may lack technology resources in their home to work remotely – between 20 and 30% of the service area population lack a computer at home and/or broadband internet.

Although the exposure, case number and deaths attributed to COVID-19 are far lower than many counties, the communities that Fulmont serves also suffer a shortage of primary care and skilled medical providers – so even a small number of medical staff being ill or unavailable because they must attend to family needs stresses the system.

Health care workers are at high-risk of exposure, under tremendous stress and in close, frequent contact with vulnerable individuals. For a combined population of 103,000 people, there are reported to be 44 primary care providers in Fulton County and 33 primary care providers in Montgomery County. Two hospitals serve the area, and both have incorporated all mandated protections for staff including visitor limitations and increased telehealth visits. While in-hospital services remain available at their normal level, most community health education programs offered by the hospital have been canceled or postponed.



Total Estimated Low-Income Jobs Lost

The neighborhoods hardest hit by COVID-19 job losses are home to workers in industries like tourism and transportation, which are bearing the brunt of the economic shutdown. The Urban Institute tracks losses of low-income jobs monthly. Low income jobs are defined as having annual earnings below \$40,000, and exclude some workers, such as independent contractors and those working in the gig economy. Job with hours reduced or pay cuts are not included therefore actual losses are greater. The neighborhoods hardest hit by COVID-19 job losses are home to workers in industries like tourism and transportation, which are bearing the brunt of the economic shutdown.

The estimates are based on the US Bureau of Labor Statistics (BLS) Current Employment Statistics data. The Urban Institute examines employment change at all income levels by industry, adjusts the data to align to state-level BLS data on employment change, and applies it to the census tract-level. The Urban institute recommends interpreting the data as relative job loss levels for planning efforts.

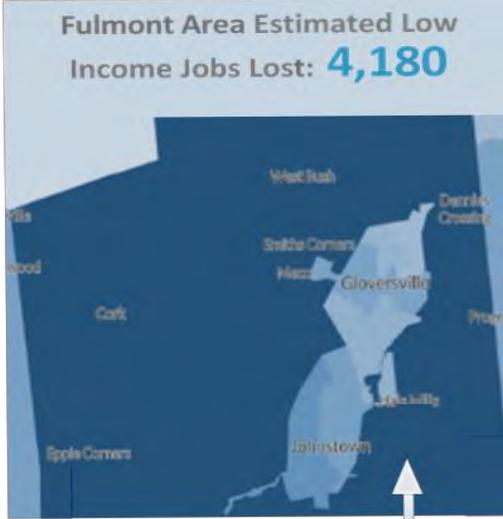


The local estimates are significant – the Urban Institute estimates just under 4,180 lost low-income jobs – 2,263 in Fulton County and 1,913 in Montgomery County. Both counties saw losses in the same industries: Accommodation and food service, health care and social assistance, retail trade, manufacturing, transportation and warehousing, and other services. The most concentrated losses were in and surrounding the Cities of Johnstown and Groversville.

FULTON COUNTY Estimated Low Income Jobs Lost: **2,263**



MONTGOMERY COUNTY Estimated Low Income Jobs Lost: **1,913**



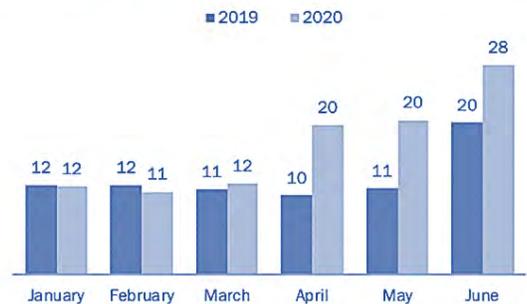
<https://www.urban.org/features/where-low-income-jobs-are-being-lost-COVID-19>

PEW reports that “The steep increase in youth detachment from February to June is fairly widespread. It includes both men and women, each major racial and ethnic group, those living in metropolitan and rural areas, and high school and college-aged students (16 to 19 and 20 to 24, respectively).”

Like other indicators, the PEW research found that “The coronavirus has narrowed the gap in rural and metropolitan areas. In the last few years, young people in rural areas have been more likely to be out of work or school than their metropolitan counterparts. However, in 2020, the difference between rural and metropolitan youth has narrowed from a difference of 4 percentage points in February to less than 1 in June.”

By June 2020, nearly three-in-ten U.S. youths were neither in school nor working

% of 16- to 24-year-olds neither enrolled in school nor working





They conclude that “More than 4 million fewer youths were employed in June 2020 compared with a year earlier due to a large decline in employment. The share of youths enrolled in school or college in both 2019 and 2020 was 39%. Earlier Pew Research Center analyses have shown that young adults are among the most likely to have suffered virus-related job loss.”

For more information see <https://www.pewresearch.org/fact-tank/2020/07/29/amid-coronavirus-outbreak-nearly-three-in-ten-young-people-are-neither-working-nor-in-school/>.

Mobility

The US Department of Transportation daily travel data shows that approximately 24% of residents are staying home in July 2020. The rate of people driving and the distance they drive has decreased. The CARES Network reports resident mobility by county, which indicates the percent of travel people are taking for various goods, services, and events. The reduction in mobility for residents in Fulmont’s service area is significant, with 7% fewer trips to access retail and 52% fewer trips to access a workplace in Fulton County. In Montgomery County there is a 9% reduction for retail trips and 51% loss in travel to work. The reduced travel to work is close to the State average, which is concerning given that NY’s mobility losses include high density downstate counties and NYC boroughs.

EDUCATION AND CHILDCARE ISSUES

ISSUE: The National Community Action Partnership COVID-19 Community Needs Assessment Update Template & Data Resource Guide identifies the following potential needs related to education and childcare that may need to be addressed in meeting the local COVID-19 challenges.

Potential Education Issues to be Addressed

1. Closings schools impacts education and those with less access to resources (internet, computers/tablets, language barriers) are at risk of learning loss.
2. Caregivers of school-age children must secure day care. Parents with limited resources face challenges and educational outcomes for will be affected.

Caregivers of school-age children must secure day care arrangements for their children or sacrifice employment to care for their children. These same caregivers are also expected to be primary teachers for their children during the period of the closure. Parents with limited resources face numerous challenges because of this situation and educational outcomes for their children will be affected. Nutrition for school-aged children previously accessing free/reduced breakfast, lunch, and snacks is impacted as many are now removed from that food source due to school closures.

Children Are Not Immune

The New York Times reports in August 2020 that the assumption that young children are mostly spared by the coronavirus and don’t seem to spread it to others may be incorrect. “In the last two weeks of July, nearly 100,000 children in the United States tested positive for the coronavirus, according to data from the American Academy of

The rise in detachment from work or school has been widely shared across the nation’s youth

% of 16- to 24-year-olds neither enrolled in school nor working





Pediatrics and the Children’s Hospital Association. Recent research suggests that children can carry at least as much of the virus in their noses and throats as adults do, even if they have only mild or moderate symptoms. That has prompted fears that students who become ill at school may spread the virus to their older relatives.

But it’s not just older people who are at risk — in some rare cases, a child’s health can be severely affected. Nearly 600 young people in the U.S., from infants to 20-year old’s, have developed an inflammatory syndrome linked to COVID-19, the Centers for Disease Control and Prevention reports. Most of the children required intensive care. Children younger than age 5 may host up to 100 times as much of the virus in the upper respiratory tract as adults, the authors found. For more information see <https://www.nytimes.com/2020/07/30/health/coronavirus-children.html>.

COVID-19 rates are significantly higher among minority children and those from lower socioeconomic backgrounds, [according to a new study](#). The study of 1,000 patients tested at a Children's National COVID-19 testing site in Washington D.C. found that just 7.3% of White children tested positive for coronavirus, in contrast to 30% of Black children and 46.4% of Hispanic children. Three times as many Black children reported known exposure to the virus as White children, the researchers reported in the journal Pediatrics. For more information see <https://www.cnn.com/2020/08/05/health/covid-rates-minority-study-trnd/index.html>.

School District Issues

It is expected that distance education will continue in many districts for at least some students. Fulton and Montgomery counties report between 20% and 25% of families do not have home internet.

Though access has improved, cost is often prohibitive and because low-income families tend to be more smartphone-dependent, they often lack access to multiple internet-enabled devices (e.g., tablets, PCs or laptops) to get online, according to a study by the Pew Research Center. Its estimated that over 10,000 residents have limited English proficiency which is a challenge to delivering successful distance learning.

NYS Health Department Guidance

The NYS Health Department has established Guidance for In-Person Instruction at Pre-K to Grade 12 Schools during the COVID-19 Public Health Emergency (“Interim COVID-19 Guidance for Schools”) to “provide all elementary (including pre-kindergarten), middle, and high schools, as well as their employees, contractors, students, and parents/legal guardians of students with precautions to help protect against the spread of COVID-19 for schools that are authorized to provide in-person instruction in the 2020-2021 school year.”

School districts, boards of cooperative educational services (BOCES), charter schools, and private schools must develop individual plans for reopening and operating during the COVID-19 public health emergency. Each plan must meet the minimum standards “including but not limited to administrators, faculty, staff, students, parents/legal guardians of students, local health departments, local health care providers, and, where appropriate, affiliated organizations (e.g., union, alumni, and/or community-based groups).” The plans must include, at minimum the approach to:

- Education delivery including in person, remote learning, or a hybrid approach.
- Reopening of school facilities for in-person instruction, remote learning, and hybrid approaches
- Monitoring of health conditions
- Containment of potential transmission of the 2019 novel coronavirus (COVID-19) and
- Closure of school facilities and in-person instruction, if necessitated by widespread virus transmission.



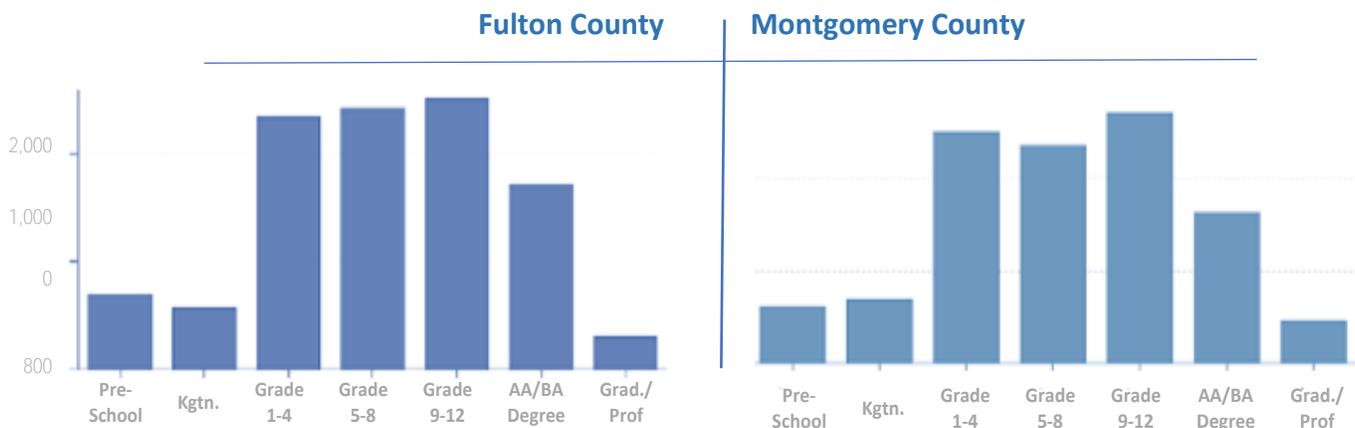
For more information see [https://www.governor.ny.gov/sites/governor.ny.gov/files/atoms/files/Pre-K to Grade 12 Schools MasterGuidance.pdf](https://www.governor.ny.gov/sites/governor.ny.gov/files/atoms/files/Pre-K%20to%20Grade%2012%20Schools%20MasterGuidance.pdf).

As of August 10, 2020, the State identified 107 of the 749 School Districts in NY that have not filed required plans. Without an approved plan a district will not be allowed to begin classes. Districts within Fulmont’s service area on the list include Broadalbin-Perth, Mayfield, Amsterdam, Canajoharie and Fort Plain as of August 11, 2020. See <https://www.governor.ny.gov/news/governor-cuomo-announces-friday-deadline-school-districts-have-not-submitted-plans-person>. Other information regarding education resources is available at <https://nyshealthfoundation.org/resource/covid-19-resources-for-grantees/>.

Childcare Access

The Fulmont area has a variety of childcare options available to parents. See the full 2020 Needs Assessment for more details. While more open each month and many are enrolling children for the 2020-2021 school year (including Fulmont Head Start) some providers have reduced capacity and hours of service. Informal childcare arrangements that many low-income families rely on have been significantly impacted. It is unclear whether before or after school programs will be available. Since so many lower income residents are essential employees with nearly one-third employed in grocery/pharmacy the need is urgent.

SCHOOL ENROLLMENT (AGE 3 AND OVER)



As Head Start begins transitioning to center-based programming, several concerns have been identified:

- Ability to address new and changing childcare needs in the community as people can return to work, if only part time.
- The staffing impact, staff availability and payroll costs to meet required standards.
- Cost of and ability to purchase needed supplies, especially cleaning supplies.
- Physical space requirements to accommodate social distancing or other best practices.

Food and Nutrition Issues

The US Census COVID-19 Dashboard reports that 3,237 families in Fulton County and 3,978 families in Montgomery County receive SNAP and/or Food Stamps assistance. Feeding America’s Map, the Meal Gap demonstrates food insecurity and food costs at the local level (2018). In Fulton County, there are 6,650 food insecure people or 12.4% of the population. In Montgomery County, there are 6,710 food insecure people or 13.6% of the population. According to the



New York State Community Action Association (NYSCAA), 4,333 households in Fulton County and 4,267 households in Montgomery County received SNAP benefits in 2019.

Fulton County has seen a significant 329% increase in solely Black or African American households and 36.6% increase in households of ‘some other race alone’ receiving SNAP benefits since 2015. The increase for the same families in Montgomery County was 128.5%. While some food support is available, early childcare, PreK and school districts facing closures and disruption interfere with access for many families. Fulmont Staff report very high demand at food pantries. A severe shortage of transportation complicates the search for nutritious food to feed vulnerable families.

HOUSING ISSUES

ISSUE: The National Community Action Partnership COVID-19 Community Needs Assessment Update Template & Data Resource Guide summarizes: “Due to the immediate economic impact of the COVID-19 pandemic, renters face one or more months where they may lack the funds to pay rent; homeowners with a mortgage may miss mortgage payments.”

Johns Hopkins and the CDC reports that some people from racial and ethnic minority groups live in crowded conditions that make it more challenging to follow prevention strategies. In some cultures, it is common for family members of many generations to live in one household. In addition, growing and disproportionate unemployment rates for some racial and ethnic minority groups during the COVID-19 pandemic may lead to greater risk of eviction and homelessness or sharing of housing. <https://www.cdc.gov/coronavirus>

The Fulmont service area has a shortage of decent affordable housing, and high percentages of cost and rent burdened households even before the pandemic. Some apartment complexes are holding units vacant and units planned to come online are stalled. Fulmont staff have reported concerns that families are doubled up, creating a vulnerable situation. It’s expected that eviction will be a serious issue across New York State and unclear whether prohibitions that protect many families will remain in place long enough for them to restore employment.

Of the 19,665 total households in in Montgomery County, 6,314 or 32.11% of the population live in cost burdened households. Of the 22,439 total households in Fulton County, 6,334 or 28.23% of the population live in cost burdened households according to the U.S. Census Bureau American Community Survey (ACS) 2014-2018 5-year estimates.

Cost burdened **rental households** represent 45.03% of all the rental households in Fulton County and 50.59% of all the rental households in Montgomery County. Cost burdened **owner households who** have a mortgage represent 25.58% of all the rental households in Fulton County and 27.71%% of all the rental households in Montgomery County.

	RENTER OCCUPIED HOUSEHOLDS		OWNER OCCUPIED HOUSEHOLDS			
	Renter Households	% Renters That are Cost Burdened	Owner Households (w/ Mortgage)	% Owners w/Mortgages That Are Cost Burdened	Owners (w/ No Mortgage)	% Owners (w/No Mortgage) That Are Cost Burdened
Fulton County	6,403	45.03%	8,609	25.58%	7,427	16.82%
Montgomery County	6,290	50.59%	6,915	27.71%	6,460	18.82%



Owner occupants with no mortgage are less likely to face COVID-19 housing issues even if they pay more than 30% of their income for housing costs. They may have more ability to reduce costs compared to owners with a mortgage. Owner occupants with no mortgage make up 16.82% of households in Fulton County and 18.82% in Montgomery County. The many residents who are doubled and tripled up in units due to costs and shortages and homeless people are not reflected in these numbers and are at high risk of displacement and eviction.

COMMUNITY RESOURCES ISSUES

ISSUE: The National Community Action Partnership COVID-19 Community Needs Assessment Update Template & Data Resource Guide identifies the following potential needs related to community resources that may need to be addressed in meeting the local COVID-19 challenges.

Potential Community Resource Issues to be Addressed
1. There is a reduction in availability of services and scarcity of some resources (health care, food, and emergency supplies) and/or needs for new or expanded resources.
2. There is urgent need for collaboration among public sector, health, first responders, educators, business community, faith community and many others.

The impacts of COVID-19 on community resources are numerous and include a reduction in the availability of resources (access to group activities, commercial services); a scarcity of some resources (health care, food and emergency supplies); and/or needs for the broad impacts of COVID-19 on this community have created an even more urgent need for coordination and collaboration of resources among the public sector, the public health sector, first responders, educators, the business community, the faith community and many others.

There is growing concern that the novel coronavirus will continue to necessitate significant changes in work, school, and service delivery for the foreseeable future. New York State’s fiscal crisis is enormous, and the State has frozen awarded grants and payments to municipalities. Municipalities themselves are approving lean budgets to reserve financial resources to meet ongoing pandemic related needs. Other businesses including health care providers are focused on providing critical care and some preventative health programming is on hold.

Fulmont has experienced an increased need for assistance by customers who have lost their jobs or had hours cut, including those who have not used services previously and have a “learning curve” regarding eligibility, etc. Fulmont expects a surge in the longer-term needs moving forward even as the economy slowly re-opens.

HUMAN SERVICES ISSUES

ISSUE: The National Community Action Partnership COVID-19 Community Needs Assessment Update Template & Data Resource Guide identifies the following potential needs related to provision of human resources that may need to be addressed in meeting the local COVID-19 challenges. Fulmont will continually monitor local needs, examine its policies and practices, and make modifications, as necessary.

Potential Human Services to be Addressed
1. Services to vulnerable populations are not operating or were altered, leaving some family needs unmet. Providers must adapt in ways that require additional resources.



The National Community Action Partnership is focusing attention on the COVID-19 issue for CAA's, concluding that "Across the Community Action Network our ability to weather this storm hinges on ensuring that we work closely together, communicate regularly and effectively, and move resources quickly so community action staff on the front lines can function immediately in a rapidly changing environment while planning and preparing for the lengthy rebuilding process that will follow." For more information see <https://communityactionpartnership.com/>.

They have outlined a set of Guiding Principles for the Community Action Network During COVID-19 Response and Recovery which Fulmont is embracing:

- 1. Plan and Coordinate Together:** To achieve timely, efficient, and effective delivery of COVID-19 response and recovery efforts, all members of the Community Action Network should coordinate and plan together.
- 2. Maximize Flexibility to Respond Creatively:** Community Action Network members should seek to maximize local flexibility to respond to families' and communities' emerging needs stemming from the immediate crisis and the eventual recovery.
- 3. Protect Customers and Staff:** Protect the physical health and emotional well-being of customers and staff is critical.
- 4. Deliver Impact:** All members of the Community Action Network have a role to play in delivering impact for individuals, families, and communities and everyone should be committed to delivering, capturing, and highlighting that impact.

**WHAT NATIONAL RESEARCH SAYS
COMMUNITY MEMBERS ARE ASKING
FOR:**

- Food
- COVID-specific (testing, information)
- Support housing (shelter, rent assistance)
- Mental health care and counseling
- Financial assistance
- Assistance with unemployment
- Internet access
- Utilities assistance
- Childcare or childcare-related items
- Health care
- Transportation
- Minutes for cellular telephones
- Prescription assistance

Services to vulnerable populations are being curtailed or drastically changed. Some service providers are not operating, leaving gaps in services to the community. Other service providers have had to alter their service provision in significant ways, leaving some family needs unmet. For those service providers continuing to operate, the changed circumstances have required significant, immediate adaptations that will require additional resources to support over a longer period. Dozens of national social, human service and charitable organizations have surveyed communities large and small and the results are incredibly consistent. Community members and agencies look for this:

ANTICIPATED NEAR-TERM AND LONG-TERM IMPACTS

ISSUE: The National Community Action Partnership COVID-19 Community Needs Assessment Update Template & Data Resource Guide identifies the following anticipated near-term and long-term impacts related to provision of human resources that may need to be addressed in meeting the local COVID-19 challenges.

Potential Near and Long-Term Issues to be Addressed

1. Disruptions in service delivery are expected to continue for a substantial time.
2. Renters may lack funds to pay rent; homeowners may miss mortgage payments.
3. Assistance will be needed to help customers reconnect to the workforce.
4. Providers must interact with customers with social distancing for an extended period
5. Community coordination needs are presumed to continue into the long-term.



The needs above are already established through initial data and anecdotal reports from customers, staff, board members and community stakeholders. It is likely that there will be near-term (1-3 months) and longer-term (greater than 3 months) impacts that that require immediate planning. A partial, but not complete, list of the anticipated impacts includes:

- **Prolonged service disruptions** - The disruptions in service delivery to customers are expected to continue for a substantial time. This is likely to lead to ancillary challenges for customers that may become long-term issues.
- **Prolonged employment issues** – Sudden layoffs and other employment disruptions are addressed by emergency response measures, but it is anticipated that long-term recovery efforts will be required to help customers reconnect to the workforce.

WHAT NATIONAL RESEARCH SAYS COMMUNITY MEMBERS ARE EXPERIENCING AND CONCERNED ABOUT:

- Increase in depression, anxiety or other mental health
- Being fired from their jobs
- Unable to obtain COVID-19 test, despite being sick
- Fear of seeking services and/or being denied services because they are undocumented
- required to work in unsafe environment where their employer is not enforcing requirements
- Becoming homeless or otherwise unstably housed
- Landlord threatening eviction
- unable to obtain needed medicine or prescriptions
- increased experiences of violence in their home
- Being subject to discrimination for any other reason
- Having their utilities shut off

- **Prolonged agency capacity issues** - Policies limiting in-person staff/customer interactions may be in place for an extended period of time and agencies will need to maintain remote work and remote customer-interaction infrastructure to be responsive to these needs in a more sustainable capacity.
- **Prolonged community resource/coordination issues** - The short-term community coordination needs cited in this Assessment are presumed to continue into the long-term.

WHAT NATIONAL RESEARCH SAYS COMMUNITY SERVICE PROVIDERS NEED

- Emergency financial support (by far the greatest need)
- Reliable and up-to- date information about area resources
- Access to hardware, including laptop computers or other devices
- Other tools to assist us in communicating with stakeholders
- Access to software for videoconferencing, or other software
- Information about COVID testing

Current conditions may persist for an extended period; recovery efforts will require coordination; ongoing community preparedness to guard against a future outbreak will also require ongoing convening and new community readiness strategies based on what is shown to be effective during the current crisis.

To provide both in-person and remote customer interaction in the manner that is safest, and most effective, efficient, and sustainable, it’s anticipated that information technology resources may be needed as staff and programs move back to full time operation while accommodating the need to provide online access and case management such as web cameras, headphones, team meeting software subscriptions (Zoom, Go to Meeting, etc.), and training of staff as necessary.



Identification of Local Needs

Like many CAA’s, Fulmont has identified the following potential intermediate- and long-term needs, which include but may not be limited to those listed in the call out box. These needs are documented in the 2020 Needs Assessment as especially important to the Fulmont Area.

To provide both in-person and remote customer interaction in the manner that is safest, and most effective, efficient, and sustainable, it’s anticipated that information technology resources may be needed as staff and programs move back to full time operation while accommodating the need to provide online access and case management such as web cameras, headphones, team meeting software subscriptions (Zoom, Go to Meeting, etc.), and training of staff as necessary.

A critical goal is to coordinate services, internally and across the provider network to ensure maximum support without duplication of resources. Specific strategies will target the demographic groups most affected by the pandemic. Whatever the data ultimately shows, Fulmont knows that the barriers of structural race, gender, and other inequities already present in the community are seriously amplified.

ADDRESSING EQUITY IMPLICATIONS

ISSUE: The National Community Action Partnership COVID-19 Community Needs Assessment Update Template & Data Resource Guide identifies the need to consider and address equity implications of meeting diverse community needs posed by the local COVID-19 challenges.

The template summarizes: “Though immediate data may not yet be easily obtained regarding the demographics of those most impacted by the COVID-19 epidemic, previous Community Assessments, as well as countless government and academic studies have established that structural racism, xenophobia, sexism, stigmatization and othering persist – and are often exacerbated – in times of crisis. Community Action recognizes the obligation to ensure that the barriers of structural race, gender, and other inequities are addressed during this time of crisis and beyond.”

There is increasing evidence that some racial and ethnic minority groups are being disproportionately affected by COVID-19. Johns Hopkins and the CDC reports that “long-standing systemic health and social inequities have put many people from racial and ethnic minority groups at increased risk of getting sick and dying from COVID-19. Inequities in the social determinants of health, such as poverty unstable housing, unsafe

IDENTIFICATION OF LOCAL NEEDS

OVERARCHING NEEDS

- Significant lack of access to transportation
- Food insecurity

HOUSING ASSISTANCE

- Rent/mortgage assistance
- Utility assistance
- Phone bill assistance
- Internet access
- Health & safety related home repairs

EMPLOYMENT ASSISTANCE

- Occupational training for unemployed and underemployed workers
- Career readiness class stipends

EDUCATION AND CHILDCARE ASSISTANCE

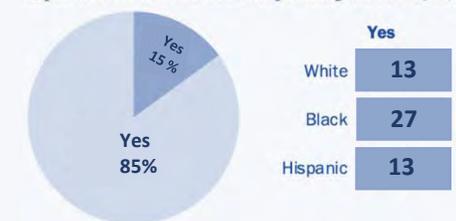
- Educational supplies, i.e., laptops/tablets to support home-based learning
- Childcare

HEALTH CARE ASSISTANCE

- Public health support activities/guidance and supplies
- Mental and behavioral health support

Black Americans far more likely to know someone who has been hospitalized or died as a result of having COVID-19

Do you personally know someone who has been hospitalized or died as a result of having COVID-19? (%)





neighborhoods, substandard education, and healthcare access, unfairly affect people of color and influence a wide range of health and quality-of-life outcomes and risks.”

To stop the spread of COVID-19 and move toward greater health equity, we must work together to ensure resources are available to maintain and manage physical and mental health, including easy access to information, affordable testing, and medical and mental health care. <https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/race-ethnicity.html>

A good place to start understanding equity in care is understanding the perspectives of people of color. The PEW Research Center reports that “about half of Hispanic adults (49%) are very concerned about unknowingly spreading COVID-19 to others, compared with 38% of black adults and 28% of white adults. Hispanics (43%) and blacks (31%) are far more likely than whites (18%) to be very concerned over getting COVID-19 and needing to be hospitalized.”

Their research finds “sharp racial disparities in personal experiences with knowing people who have had serious illnesses arising from COVID-19. Among the public overall, 15% say they personally know someone who has been hospitalized or died as a result of having COVID-19. However, about a quarter of black adults (27%) say they personally know someone who has been hospitalized or died due to having the coronavirus. By comparison, about one-in-ten white (13%) and Hispanic (13%) adults say they know someone who has been so seriously affected by the virus.”

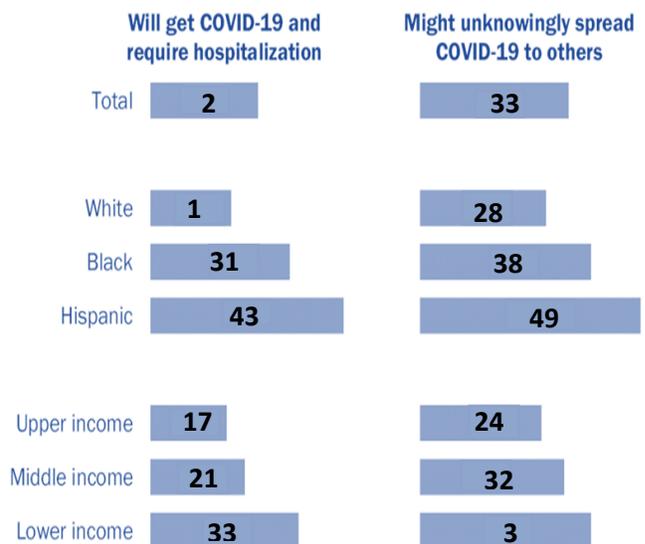
The Fulton and Montgomery County population remains primarily White (93% and nearly 82% respectively.) However, since the 2017 assessment, Fulton County has seen a 300% increase in the American Indian/Alaska Native population, 25% increase in Black or African American population and nearly 17% increase in ‘Asian alone’ population. Montgomery County has seen an increase by 11.4% of the Hispanic or Latino population and roughly 14% increase of the Asian population. The American Indian and Alaska Native population decreased by 50% in Montgomery County.

For more information see <https://www.pewresearch.org/politics/2020/04/14/health-concerns-from-COVID-19-much-higher-among-hispanics-and-blacks-than-whites/>

Many government and research sources establish the excessive burden and increased risks faced by low income families, especially people of color and those with limited English proficiency. Whether the challenges lie with maintaining housing, managing changing school schedules, or accessing health care these families are at greater risk than ever. As incentives through state and federal programs, like enhanced unemployment payments end, the coming months are full of uncertainty.

Racial and income differences in concerns over contracting COVID-19, spreading it to others

% who say they are *very* concerned that they ...





FULMONT COMMUNITY ACTION provides critical services for our communities.
Together we will get through this.



FULTON COUNTY, New York

KEY FACTS

53,743	22,439	2.34	43.8	75.5%
Total Population	Total Households	Average Household Size	Median Age	Internet At Home

ECONOMY AND BUSINESS

1,174	14,448	\$501,535	2,692	\$103,527
Total Employer Establishments	Total Employees	Total Annual Payroll (\$1,000)	Total Non-Employer Establishments	Total Non-Employer Revenue (\$1,000)

RISK FACTORS AND POVERTY

3,143	2,091	3,055	6,425	3,237
Households Below Poverty Level	Households Without Vehicle	Households w/Pop 65+ Living Alone	Households With Disability	Households Receiving Food Stamps/SNAP



WE'RE IN THIS TOGETHER



MONTGOMERY COUNTY, New York

KEY FACTS

49,426	19,665	2.46	41.4	74.6%
Total Population	Total Households	Average Household Size	Median Age	Internet At Home

ECONOMY AND BUSINESS

1,074	15,151	\$570,056	2,409	\$96,924
Total Employer Establishments	Total Employees	Total Annual Payroll (\$1,000)	Total Non-Employer Establishments	Total Non-Employer Revenue (\$1,000)

RISK FACTORS AND POVERTY

3,382	2,682	2,784	6,140	3,987
Households Below Poverty Level	Households Without Vehicle	Households w/Pop 65+ Living Alone	Households With Disability	Households Receiving Food Stamps/SNAP