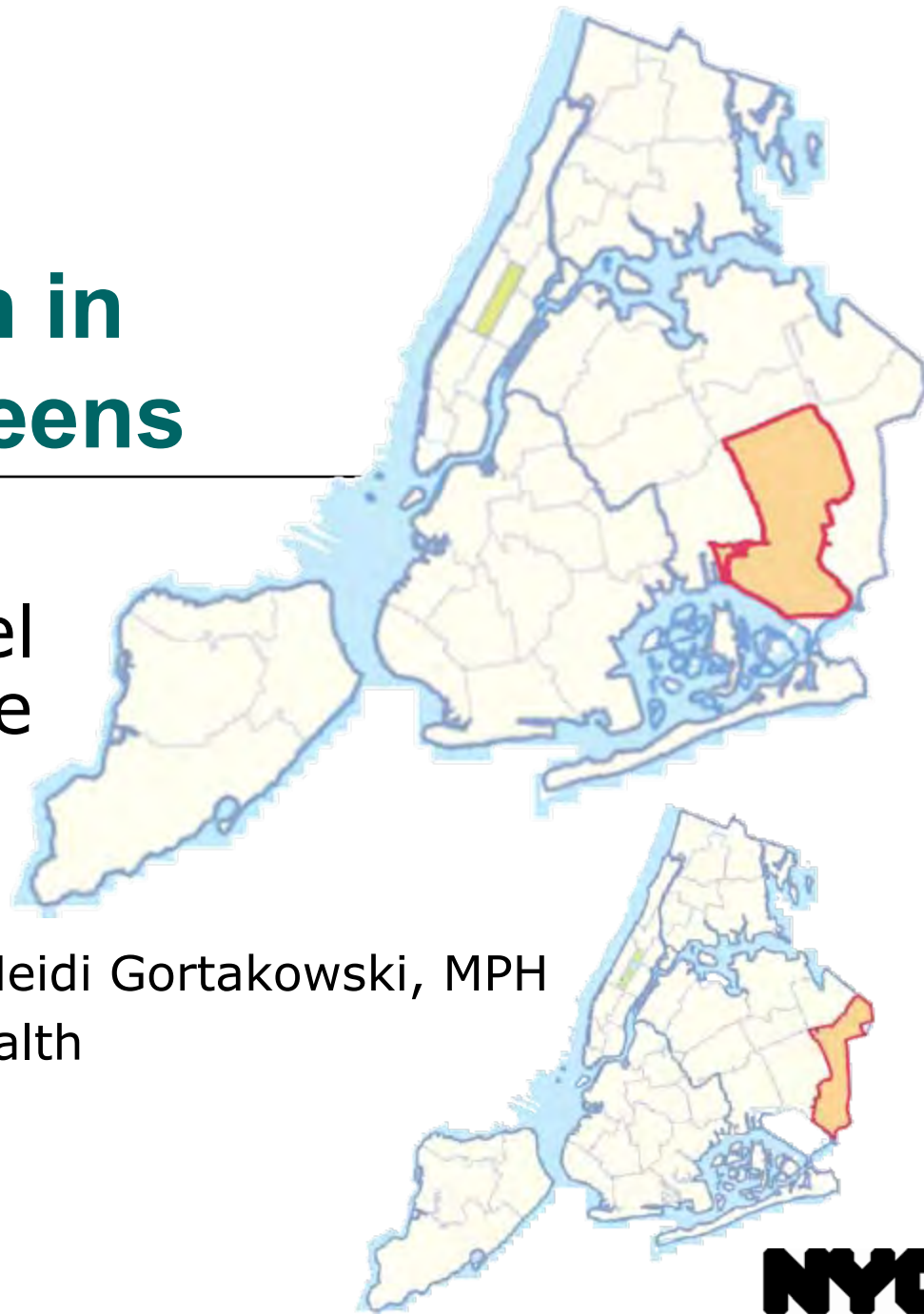


# Public Health in Jamaica, Queens

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Using  
community-level  
data to prioritize  
health issues

Cari Olson, MPH, and Heidi Gortakowski, MPH  
NYC Department of Health  
and Mental Hygiene  
*November 10, 2010*



# Overview

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- Community Epidemiology at the Health Department
  - Defining a neighborhood
- Take Care New York
- Health highlights from Jamaica and Southeast Queens
- Accessing health data resources online





*Health Department Mission:*

# To protect and promote the health of all New Yorkers

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1. **Surveillance:** Understanding NYC's most pressing public health problems
2. **Outbreak Response:** Detecting and responding to infectious disease cases and outbreaks
3. **Systems Change:** Focusing resources on preventable health issues which are amenable to change, using outreach, programs and policy to impact health care quality and delivery
4. **Direct Health Care Delivery:** Targeting delivery of services to underserved populations and those with high morbidity and mortality



# Communicating Our Data

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- We believe ...
  - That health data becomes valuable when it is used to inform public health policy and program development and evaluation.
- We want ...
  - To increase access to our data, while maintaining data validity and confidentiality.
- We hope ...
  - That NYC professionals can access and use our data to further their own work to better the quality of life of New Yorkers.



# Goals of Community Epidemiology

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- Compile health information



- Focus on **preventable** causes of illness and death
- Identify disparities between communities and among subpopulations
- Bring data to communities to help improve health and reduce inequities



# How can health data be used?

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- Prioritize health concerns at the population level
- Put numbers to impressions
- Strengthen grants and project proposals
- Guide program planning
- Research, educate and advocate around public health issues



# Defining Communities

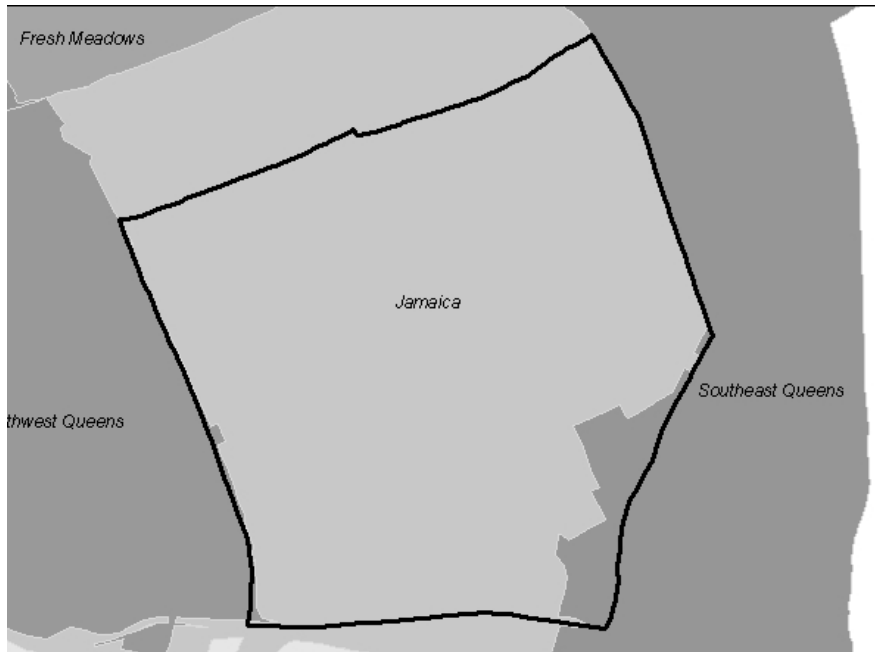
- Most common geographic indicator in health data:
  - zip codes
    - United Hospital Fund neighborhoods – aggregations of zips
- Jamaica: 11412, 11423, 11424, 11425, 11430, 11431, 11432, 11433, 11434, 11435, and 11436
- Southeast Queens: 11001, 11004, 11005, 11040, 11411, 11413, 11422, 11426, 11427, 11428, and 11429



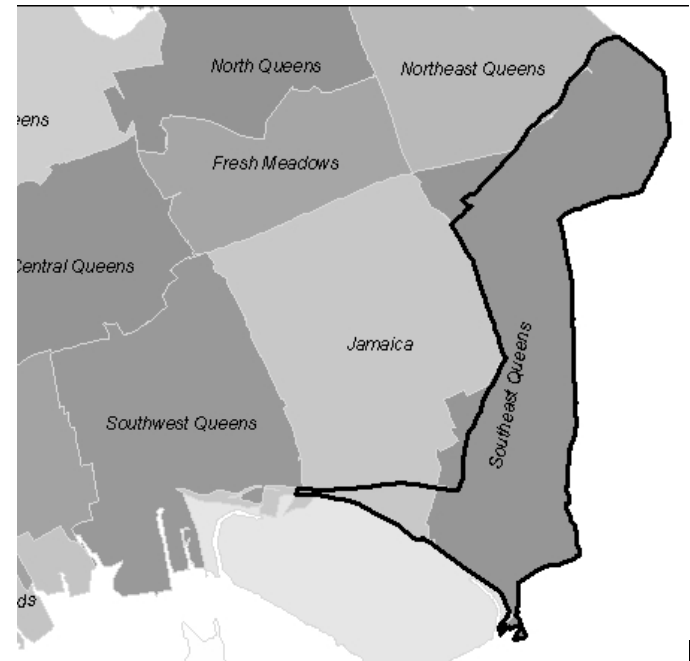
# Community Boards 12 and 13

- Unfortunately, many data sources cannot be aggregated by political boundaries

CB12  $\approx$   
Jamaica UHF



CB13  $\approx$   
SE Queens UHF





# U.S. Census

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- Describe a neighborhood
- Denominators!
- Invaluable source of basic demographics
- Zip-code and census-block levels
- Problem: OLD DATA – 2000
  - DOHMH intercensal estimates



# Jamaica & SE Queens at a Glance

**Total Population:**  
**Jamaica – 285,637 & SE Queens – 203,655**

	Jamaica	SE Queens	Queens	NYC
<i>Race/Ethnicity</i>				
White, non-Hispanic	9%	19%	34%	36%
Hispanic	15%	10%	25%	27%
Black, non-Hispanic	62%	57%	20%	25%
Asian	11%	11%	19%	10%
Other	3%	2%	1%	1%
<i>Living Below Federal Poverty Level*</i>	16%	7%	15%	21%
<i>Foreign-born*</i>	38%	39%	46%	36%

Sources: 2008 NYC DOHMH Intercensal Estimates ; \*2000 Census





# Take Care New York

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A Citywide Health Policy



# Take Care New York 2010

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- 10 priority health issues
- Large burden, killing thousands of NYers and causing hundreds of thousands of **preventable** illnesses each year
- Three-pronged approach:
  - Policies
  - Prevention, Quality and Access
  - Health Promotion
- Best addressed through coordinated action by City agencies, health care providers, community organizations, businesses, individuals



# Policy for a Healthier New York City



1. Promote quality health care for all
2. Be tobacco free
3. Promote physical activity and health eating
4. Be heart healthy
5. Stop the spread of HIV and other sexually transmitted infections
6. Recognize and treat depression
7. Reduce risky alcohol use and drug dependence
8. Prevent and detect cancer
9. Raise healthy children
10. Make all neighborhoods healthy places



# How do we measure population health?

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- Interview every person (U.S. Census)
- Population-based surveys
- Health registries
- Administrative data



# A Health Data Tasting Menu...

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- General health survey data
- Injury data
- Vital Statistics data
- Hospitalization administrative data
- Pregnancy/Birth/Infant Mortality data
- World Trade Center Health Registry data
- HIV/AIDS data
- STD data
- Childhood Lead Poisoning data
- Communicable disease data
- Environmental Health data





# Health Highlights

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Jamaica and Southeast Queens





# Primary health concerns in Jamaica and SE Queens

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*Jamaica:* Diabetes

*SE Queens:* Injury from motor-vehicle crashes




# Community Health Profiles: A good overview

## Community Health Profiles

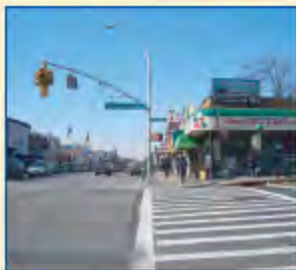
New York City Department of Health and Mental Hygiene

SECOND EDITION – 2006



 **TAKE CARE**  
Jamaica

Queens



## Community Health Profiles

New York City Department of Health and Mental Hygiene

SECOND EDITION – 2006



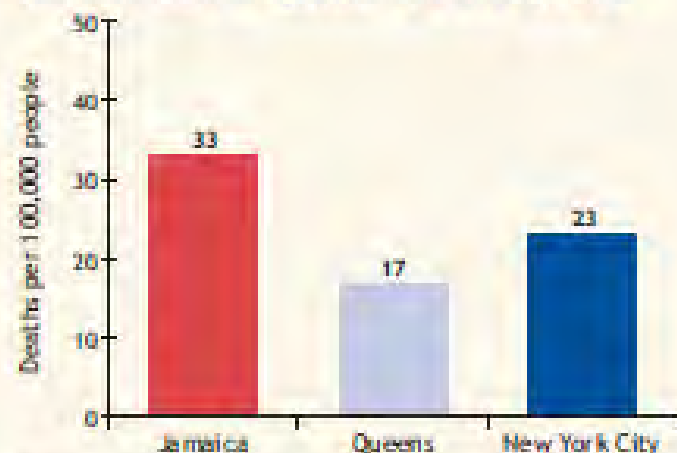
 **TAKE CARE**  
Southeast  
Queens

*(Including Cambria Heights,  
Glen Oaks, Laurelton,  
Queens Village, and Rosedale)*



# Neighborhood Health Highlight: Diabetes

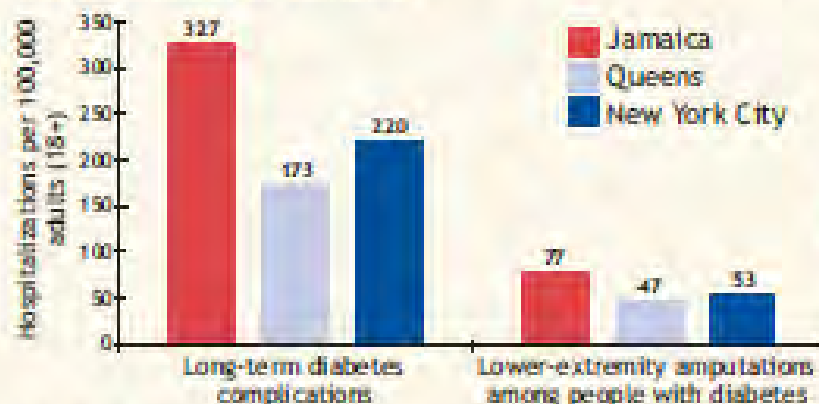
The death rate due to diabetes is higher in Jamaica than in Queens and NYC overall



Rates are age-adjusted.

Data Sources: Bureau of Vital Statistics, NYC DOHMH, 2003-2004; U.S. Census 2000/NYC Department of City Planning

Hospitalizations for long-term diabetes complications and lower extremity amputations are more common in Jamaica



Rates are age-adjusted.

Data Sources: New York State Department of Health Statewide Planning and Research Cooperative System, 2004; U.S. Census 2000/NYC Department of City Planning

Every New York City neighborhood has different health concerns. Here we highlight diabetes in Jamaica.

The epidemic of diabetes in New York City parallels the epidemic in the U.S. Diabetes greatly increases an individual's risk of heart disease, kidney disease and amputations. Jamaica has a higher death rate due to diabetes than both Queens and New York City overall.

With the help of a health care provider, individuals with diabetes can manage their condition to decrease or eliminate the need for hospitalization. For this reason, hospitalizations for some types of diabetes-related illness can indicate poor access to health care. In Jamaica, the hospitalization rates for both long-term diabetes complications and lower-extremity amputation among people with diabetes are higher than the rates in NYC overall, suggesting inadequate access to health care among people with diabetes in this community.

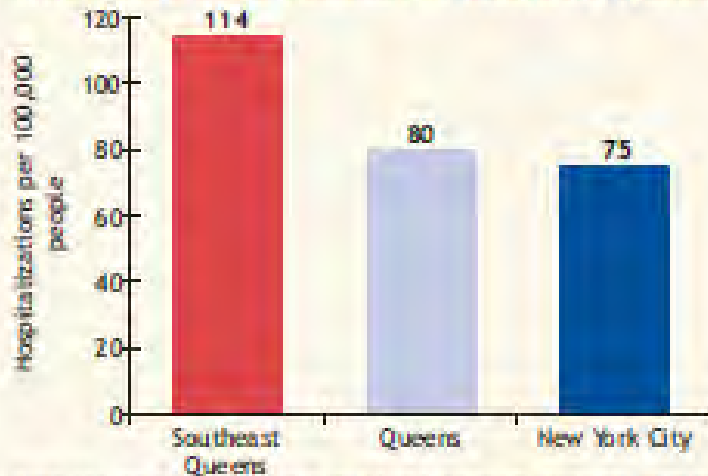
## TAKING ACTION

Although diabetes is a serious and costly illness, it is largely preventable. Excess weight (obesity) is the major modifiable risk factor for diabetes, and regular physical activity and modest weight loss can help prevent it and/or limit its negative effects. Individuals with diabetes can benefit from numerous resources to help them manage the condition.

For more information on diabetes, call 311.

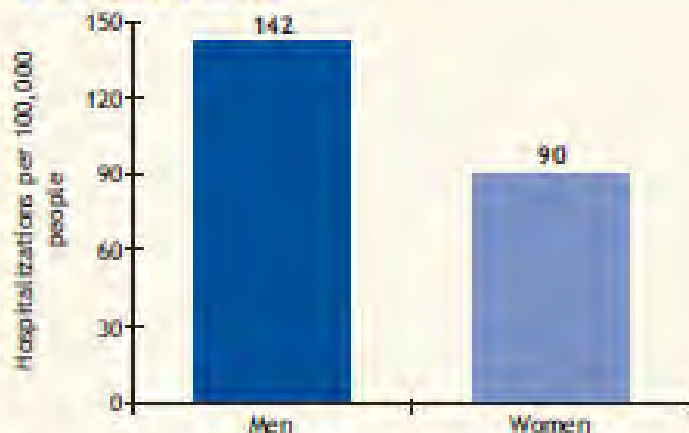
# Neighborhood Health Highlight: Injury from Motor-Vehicle Crashes

## Hospitalizations due to motor-vehicle traffic crashes are more common in Southeast Queens



Rates are age-adjusted and include injured occupants, bicyclists, pedestrians and others.  
Data Sources: New York State Department of Health Statewide Planning and Research Cooperative System, 2003-04; U.S. Census 2000/ NYC Department of City Planning

## Men are more likely to be hospitalized due to motor-vehicle traffic crashes than women in Southeast Queens



Rates are age-adjusted and include injured occupants, bicyclists, pedestrians and others.  
Data Sources: New York State Department of Health Statewide Planning and Research Cooperative System, 2003-04; U.S. Census 2000/ NYC Department of City Planning

Every New York City neighborhood has different health concerns. Here we highlight injuries from motor vehicle traffic crashes in Southeast Queens.

Motor-vehicle crashes are a major cause of injury and the leading cause of death among children in the U.S. In Southeast Queens, there are more than 230 hospitalizations due to injuries in motor-vehicle crashes each year, and 16% of those hospitalizations are among residents younger than 19. The rate of hospitalizations for injuries due to traffic crashes is more than 40% higher in this community than in Queens and New York City overall (114/100,000 vs. 80/100,000 in Queens and 75/100,000 in NYC).

Men are more likely than women to be involved in motor-vehicle crashes. In Southeast Queens, men are about 50% more likely to be hospitalized with injuries from crashes than women (142/100,000 vs. 90/100,000).

### TAKING ACTION

Following traffic laws is one easy way for drivers, bicyclists and pedestrians to reduce their risk of injury due to a motor-vehicle crash. Small children should ride in car safety seats; all occupants should wear seat belts; drivers should obey speed limits; and pedestrians and bicyclists should obey traffic signals. Alcohol- and drug-impairment can also lead to traffic crashes; drivers should only operate vehicles when sober.

For more information on safety on the road, call 311.

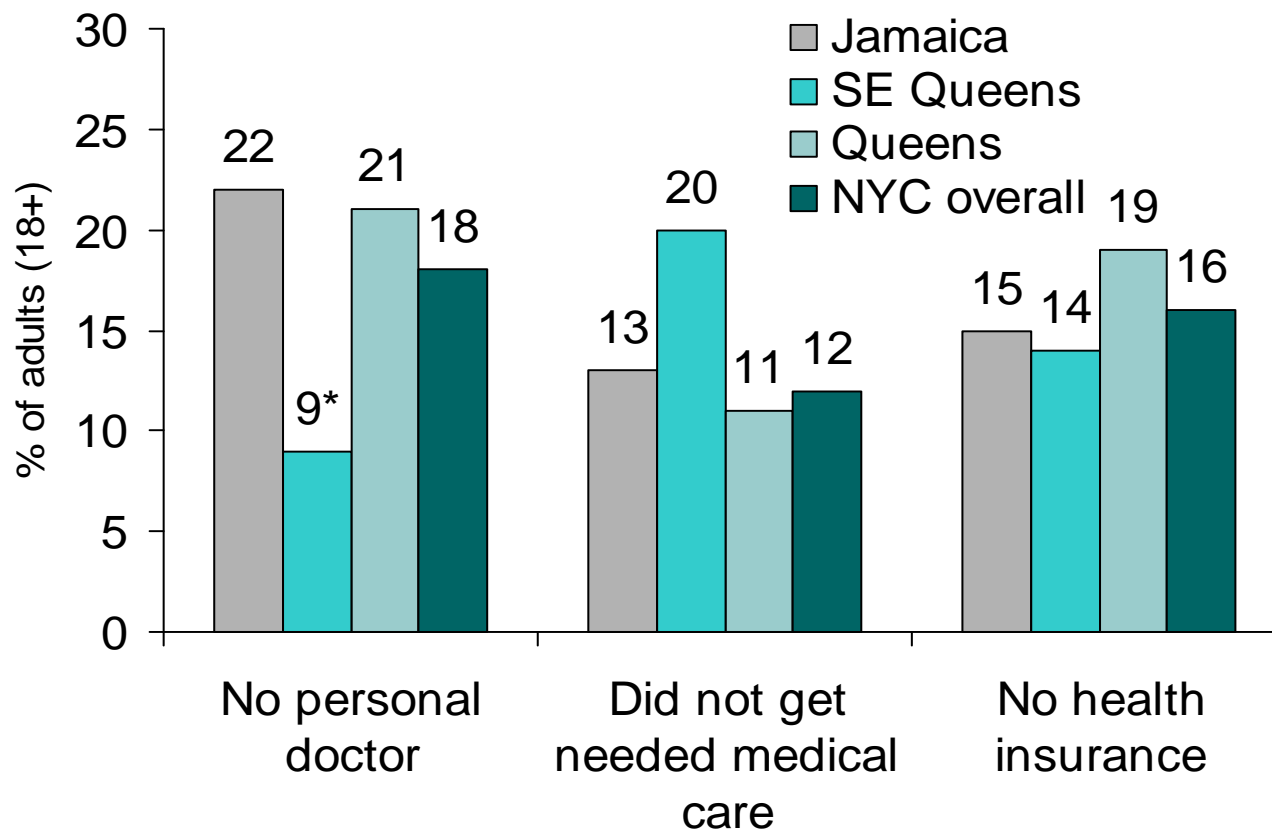


# Overall Health and Health Care Access

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# Access to care



NYC Community Health Survey 2009

\*Estimate should be interpreted with caution due to small sample size.



# Leading Causes of Deaths, 2007: NYC, Queens, Jamaica, SE Queens

NYC	Queens	Jamaica	SE Queens
Heart Disease	Same as NYC	Same as NYC	Same as NYC
Cancer	Same as NYC	Same as NYC	Same as NYC
Flu/Pneumonia	Same as NYC	Same as NYC	Same as NYC
Stroke	Same as NYC	Same as NYC	Same as NYC
Chronic lower respiratory disease (CLRD)	Same as NYC	Diabetes	Same as NYC
Diabetes	Same as NYC	CLRD	Accidents
HIV	Accidents	Accidents	Diabetes
Accidents (unintentional injury, excl. drug overdose)	HTN/Renal	HIV	Assault (Homicide)
Drug-related	Drug-related	HTN/Renal	Alzheimer's Disease
Essential Hypertension (HTN)/Renal Disease	Suicide	Drug-related	HTN/Renal



Source: 2007 Vital Statistics EpiQuery; \*age-adjusted death rates

# Leading Causes of Death, 2007: JAMAICA

Cause	# of Deaths	Deaths/ 100,000*
Heart Disease	712	274
Cancer	377	142
Flu/Pneumonia	88	31
Stroke	57	22
Diabetes	51	18
Chronic Lower Respiratory Diseases	38	14
HIV/AIDS	19	10
Essential Hypertension and Renal Diseases	24	9



Source: 2007 Vital Statistics EpiQuery; \*age-adjusted death rates



# Leading Causes of Death, 2007: SOUTHEAST QUEENS

Cause	# of Deaths	Deaths/ 100,000*
Heart Disease	392	214
Cancer	242	122
Flu/Pneumonia	37	21
Stroke	30	16
Chronic Lower Respiratory Diseases	23	12
Unintentional injuries (excl. drug poisoning)	20	11
Diabetes	18	9
Assault (Homicide)	12	6



Source: 2007 Vital Statistics EpiQuery; \*age-adjusted death rates



# Leading Causes of Hospitalization, 2006: JAMAICA

Cause	#	Rate/ 100,000*
Heart Disease	4,167	1,877
Injury and Poisoning	2,388	1,092
Mental disorders (excl. alcohol, substance abuse)	1,885	868
Cancer	1,315	587
Alcohol-related	1,024	470
Diabetes	1,018	460
Stroke	1,011	457
Infectious disease (excl. HIV, STDs, flu/pneumonia)	899	412
Influenza/pneumonia	861	393

Source: 2006 NYS DOH Statewide Planning and Research Cooperative System (SPARCS), updated August 2007 & NYCDOHMH neighborhood population estimates 2006; \*age-adjusted



# Leading Causes of Hospitalization, 2006: SOUTHEAST QUEENS

Cause	#	Rate/ 100,000*
Heart Disease	2,645	1,667
Injury and Poisoning	1,657	1,070
Mental disorders (excl. alcohol, substance abuse)	1,402	939
Cancer	1,045	652
Stroke	630	400
Diabetes	553	348
Influenza/pneumonia	484	312
Infectious disease (excl. HIV, STDs, flu/pneumonia)	458	296
Alcohol-related	320	205



Source: 2006 NYS DOH Statewide Planning and Research Cooperative System (SPARCS), updated August 2007 & NYCDOHMH neighborhood population estimates 2006; \*age-adjusted



# Leading Causes of Hospitalization among older adults (65+), 2006:

Cause	Jamaica Rate/ 100,000	SE Queens Rate/ 100,000
Heart Disease	6,130	6,265
Disease of digestive system	3,543	3,722
Injury and Poisoning	2,347	2,739
Stroke	1,740	1,636
Cancer	1,661	2,176
Infectious disease (excl. HIV, STDs, flu/pneumonia)	1,571	1,017
Influenza/pneumonia	1,280	1,143
Diabetes	1,242	927
COPD/bronchiectasis	681	626

Source: 2006 NYS DOH Statewide Planning and Research Cooperative System (SPARCS), updated August 2007 & NYCDOHMH neighborhood population estimates 2006

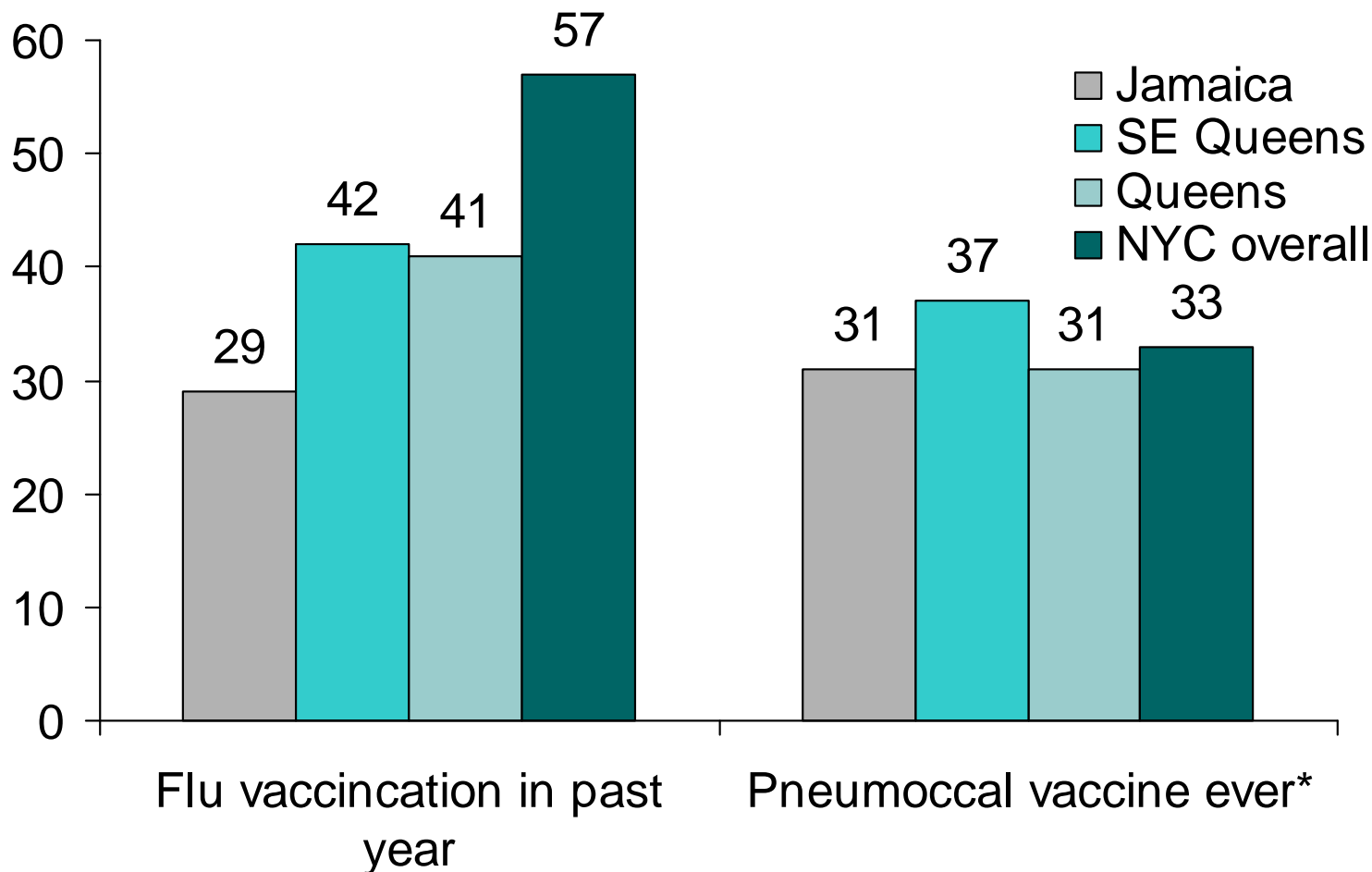


# Flu/Pneumonia

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# Influenza and pneumonia vaccines among adults 50+



# More data on older adults



## Health of Older New Yorkers

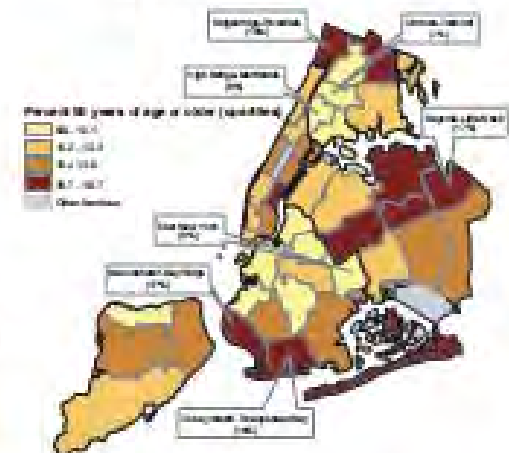
**N**ew Yorkers are living longer than ever before. Increased life expectancy combined with the aging of the "baby boomer" generation will result in an unprecedented number of older New Yorkers. In 2000, there were nearly one million New Yorkers 65 years of age or older. By 2030, this number is projected to be 1.35 million.

Because the burden of illness increases with age, public health efforts are increasingly needed to promote healthy aging, manage chronic illness, reduce injury risk and help older adults maintain their independence. This report describes older New Yorkers (65 years of age or older) and their current health status. Recommendations for improving older adult health are on page four.

## Number of older adults in New York City has increased 67% since 1950

- In 2007, there were about 1,013,000 (12%) older New Yorkers compared with 605,000 (8%) in 1950.
- The majority of older New Yorkers (61%) were women.\*
- The percent of older New Yorkers varied by race/ethnicity, with 18% of white, 11% of black, 9% of Asian and 8% of Hispanic New Yorkers ages 65 years or older, as well as by neighborhood (see map).\*
- Three quarters of older New Yorkers (75%) were retired or homemakers, 16% were still employed and 9% were unemployed or unable to work.\*\*
- More than one-quarter (27%) of older New Yorkers lived below 100% of the federal poverty level.\*\*
- While 44% of older New Yorkers were married or partnered, most were not; 31% were widowed, 15% were divorced/separated and 10% were never married.\*\*

Percent of New Yorkers ages 65 years or older by New York City neighborhood, 2007\*



Sources: \* NYC DOHMH neighborhood population estimates, modified from US Census Bureau, Vintage population estimates, 2007  
\*\* NYC DOH 2007

<http://nyc.gov/html/doh/downloads/pdf/survey/survey-2010seniors.pdf>





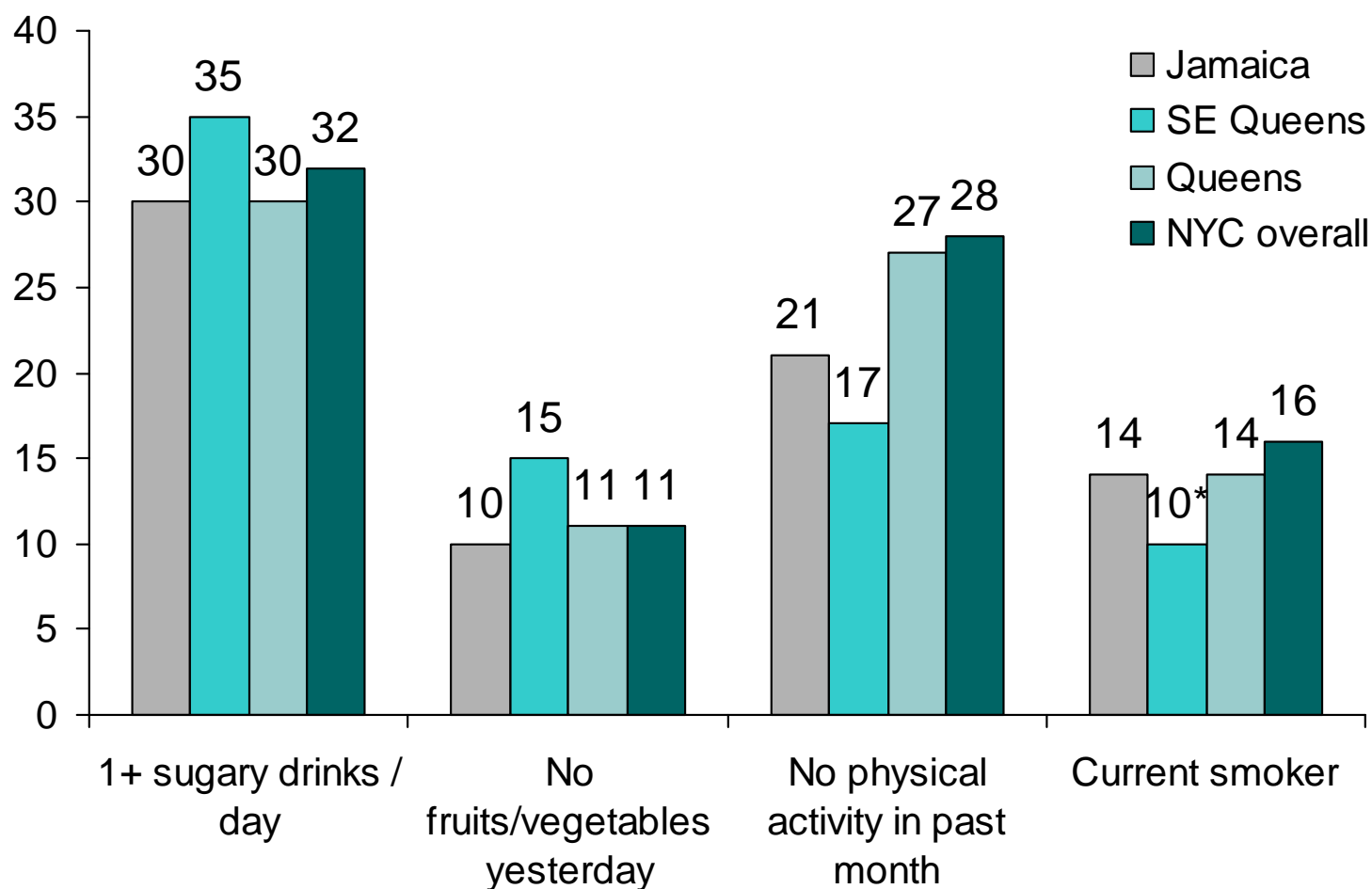
# Heart Disease and Diabetes

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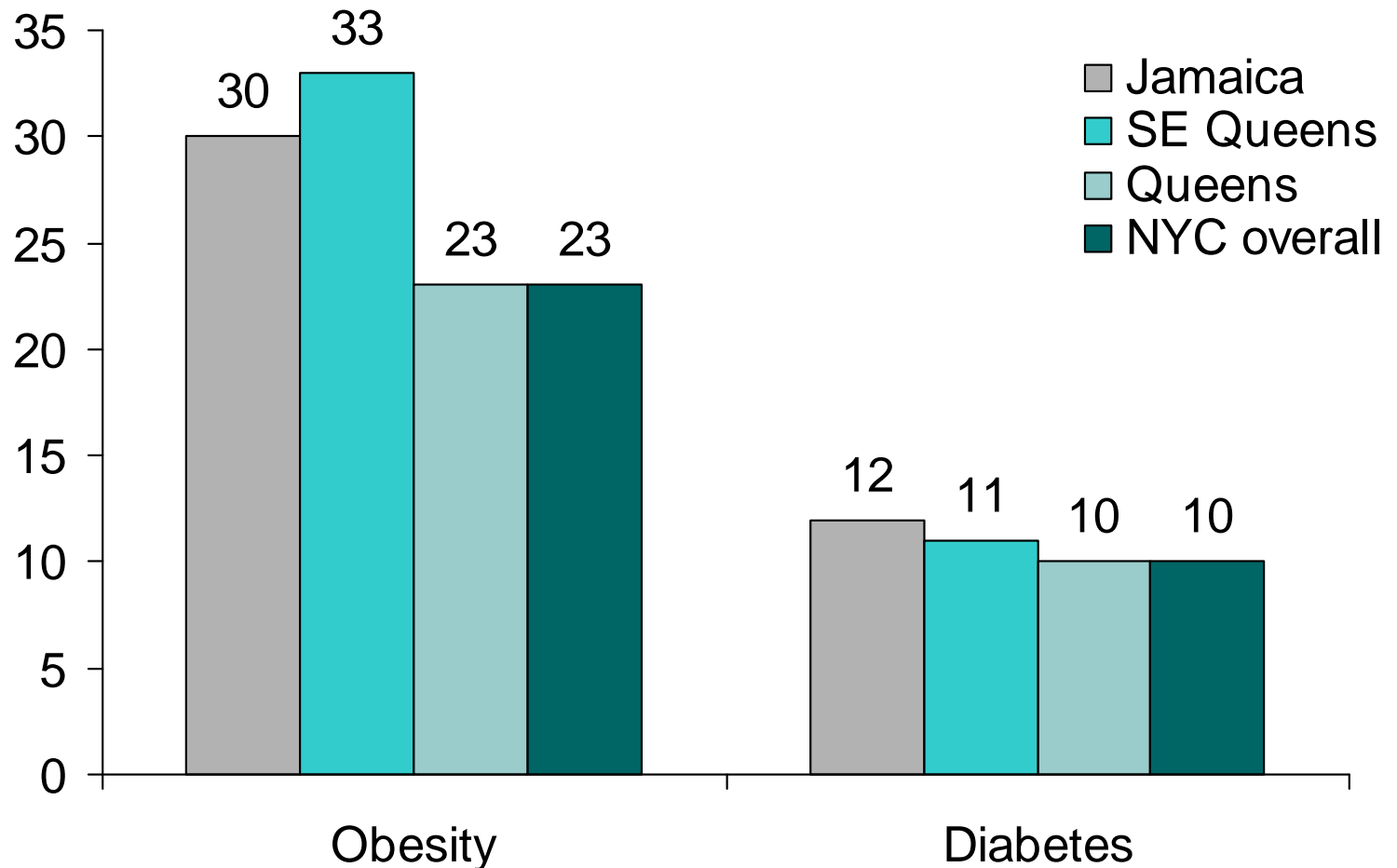


# Nutrition, physical activity, and smoking



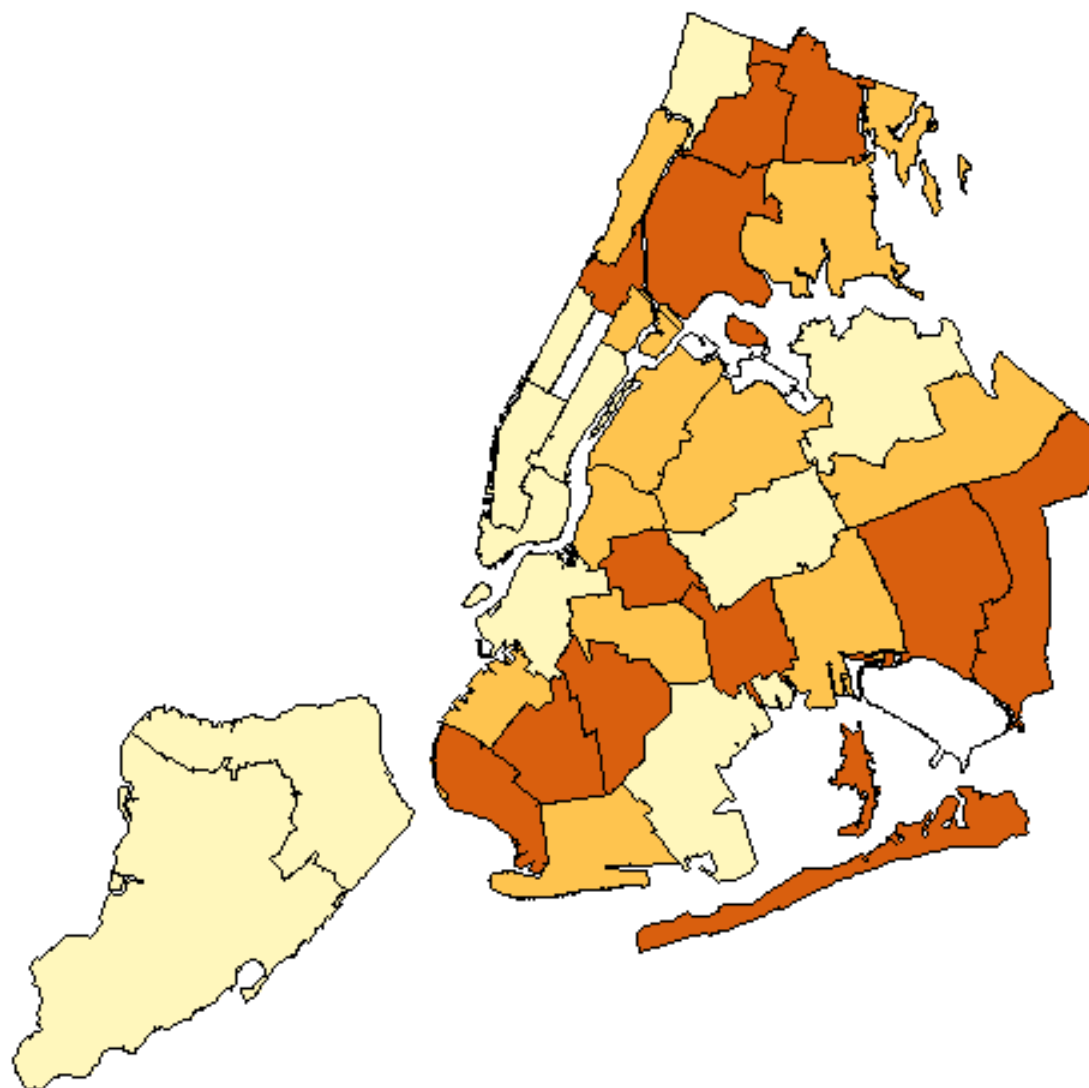
NYC Community Health Survey 2009; \*Estimate should be interpreted with caution due to small sample size.

# Obesity and Diabetes

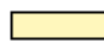


# NYC Community Health Survey 2009

Percentage ever been told high blood pressure by neighborhood



Percent of Total Frequency



15.2 - 25.9



26.6 - 30.1



30.4 - 41.9

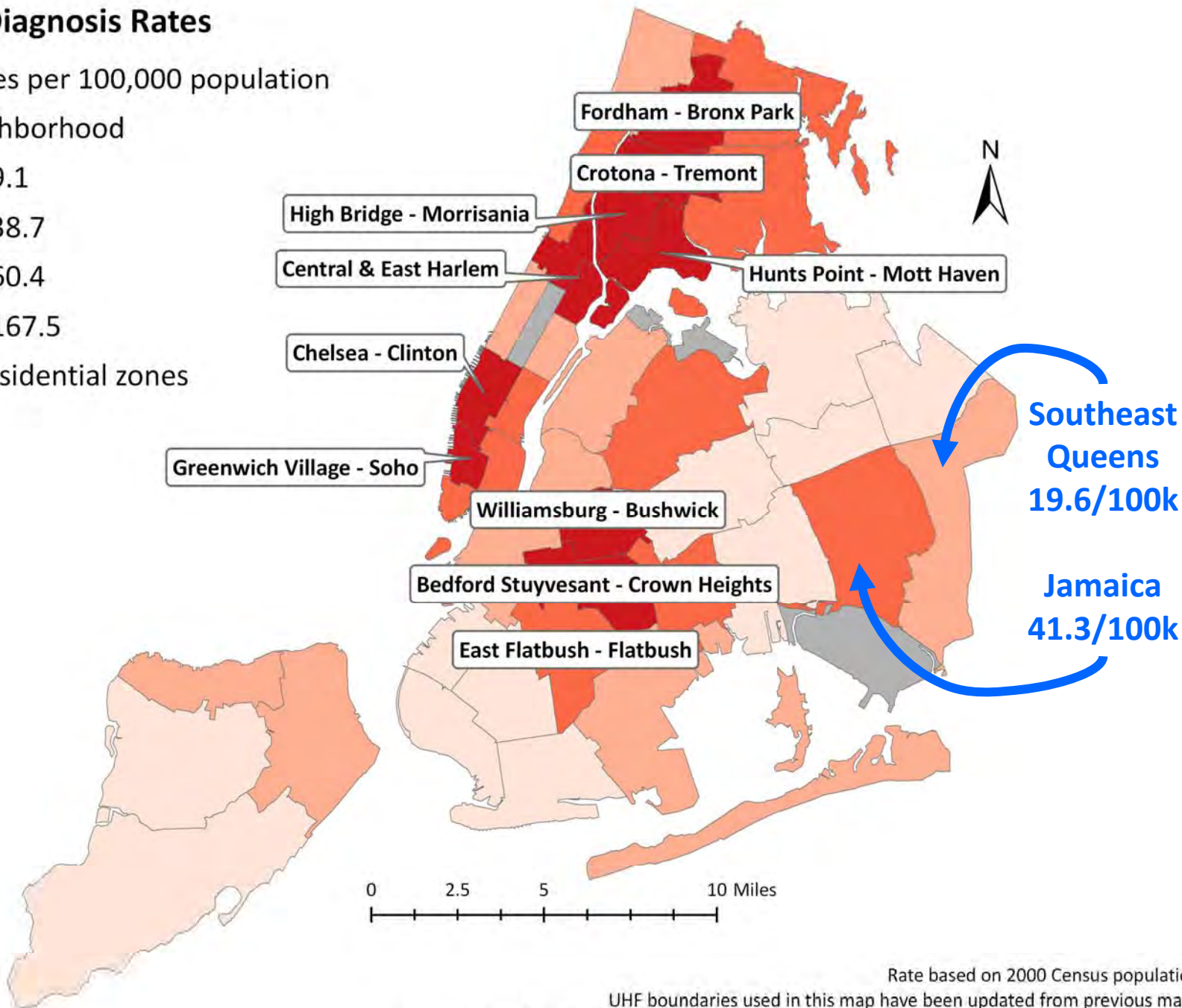
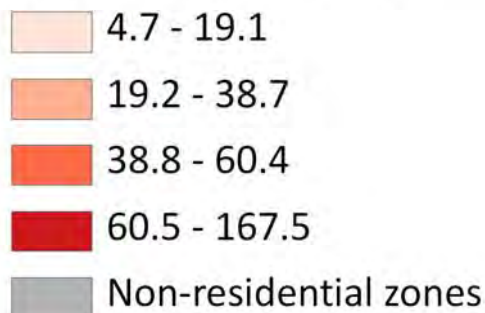
# HIV/AIDS

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## 2008 HIV Diagnosis Rates

HIV diagnoses per 100,000 population  
by UHF Neighborhood



Rate based on 2000 Census population.

UHF boundaries used in this map have been updated from previous maps.

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2009.

# HIV/AIDS in 2008

	Residence at diagnosis <sup>1</sup>			
	Jamaica	SE Queens	Queens Overall	NYC
HIV Diagnoses	118	40	604	3,809
Without AIDS	88	26	461	2,871
Concurrent with AIDS <sup>2</sup>	30	14	143	938
AIDS Diagnoses <sup>3</sup>	86	38	453	3,126
Persons living with HIV/AIDS	2,731	1,038	14,894	105,633
Deaths <sup>4</sup>	53	10	226	1,920

**Jamaica and SE Queens accounted for 26% of new HIV diagnoses and 31% of concurrent diagnoses in Queens.**

<sup>1</sup> Residence based on ZIP code reported at diagnosis.

<sup>2</sup> AIDS diagnosed within 31 days of HIV diagnosis.

<sup>3</sup> Includes concurrent HIV/AIDS diagnoses.

<sup>4</sup> Includes deaths from any cause in persons with HIV/AIDS.

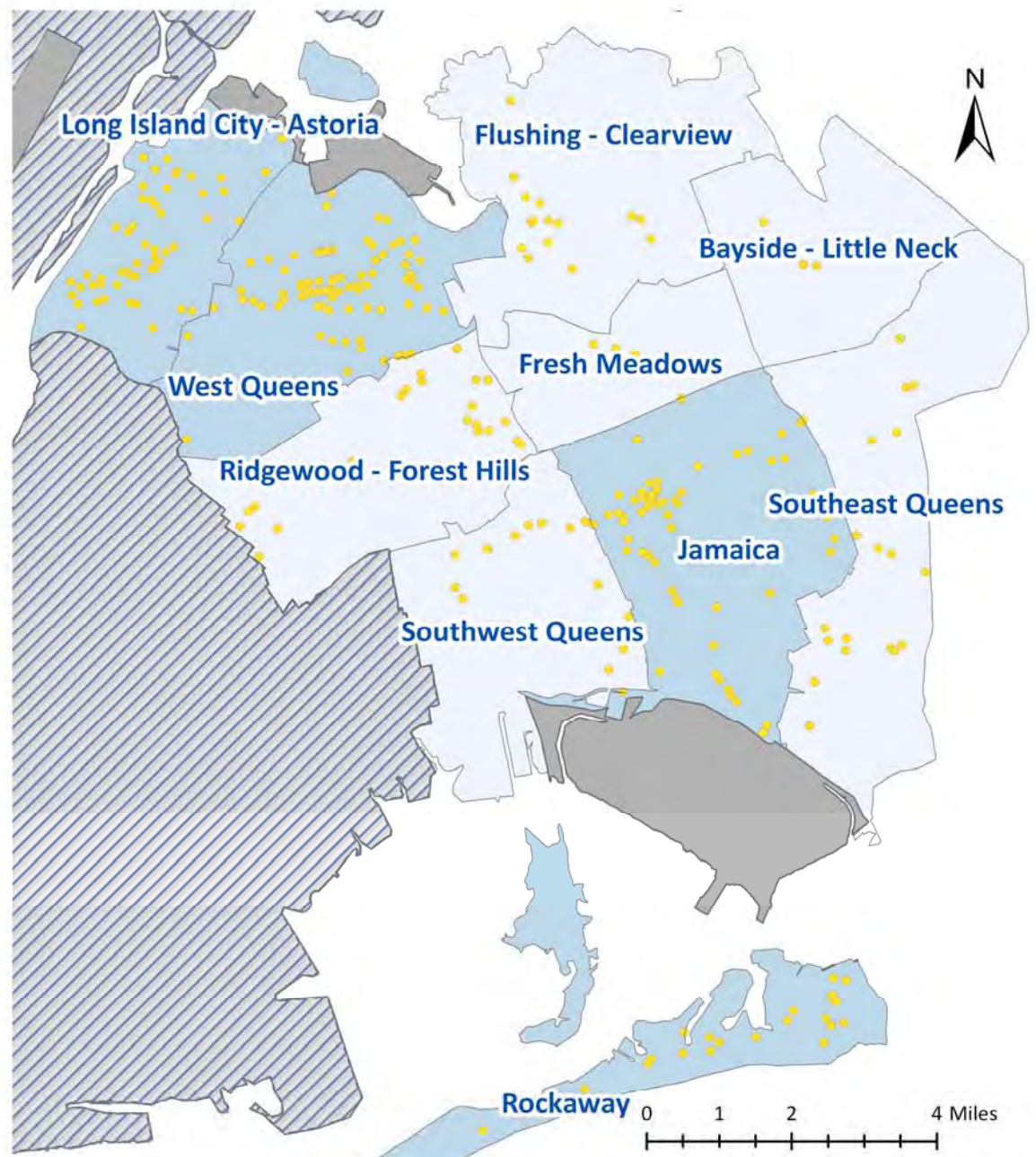
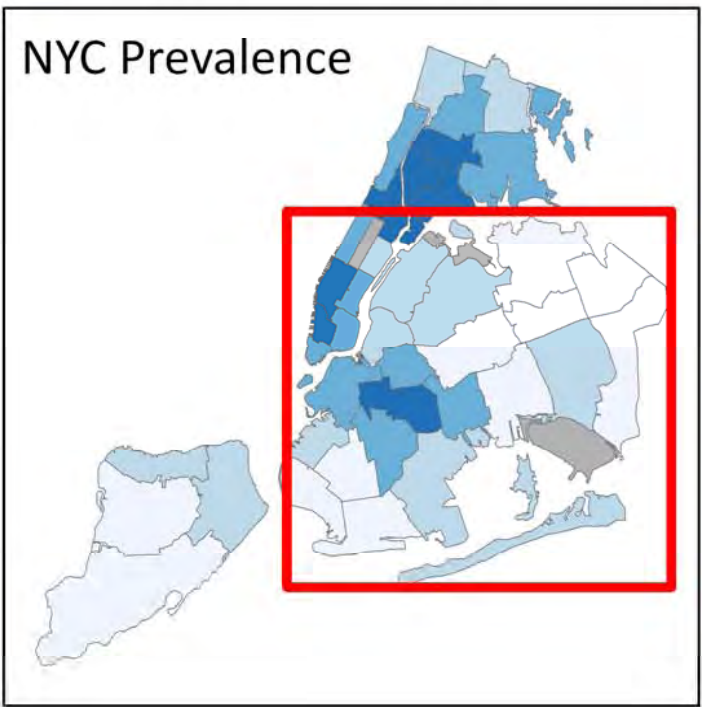




# Queens Condom Distribution & 2008 HIV Prevalence

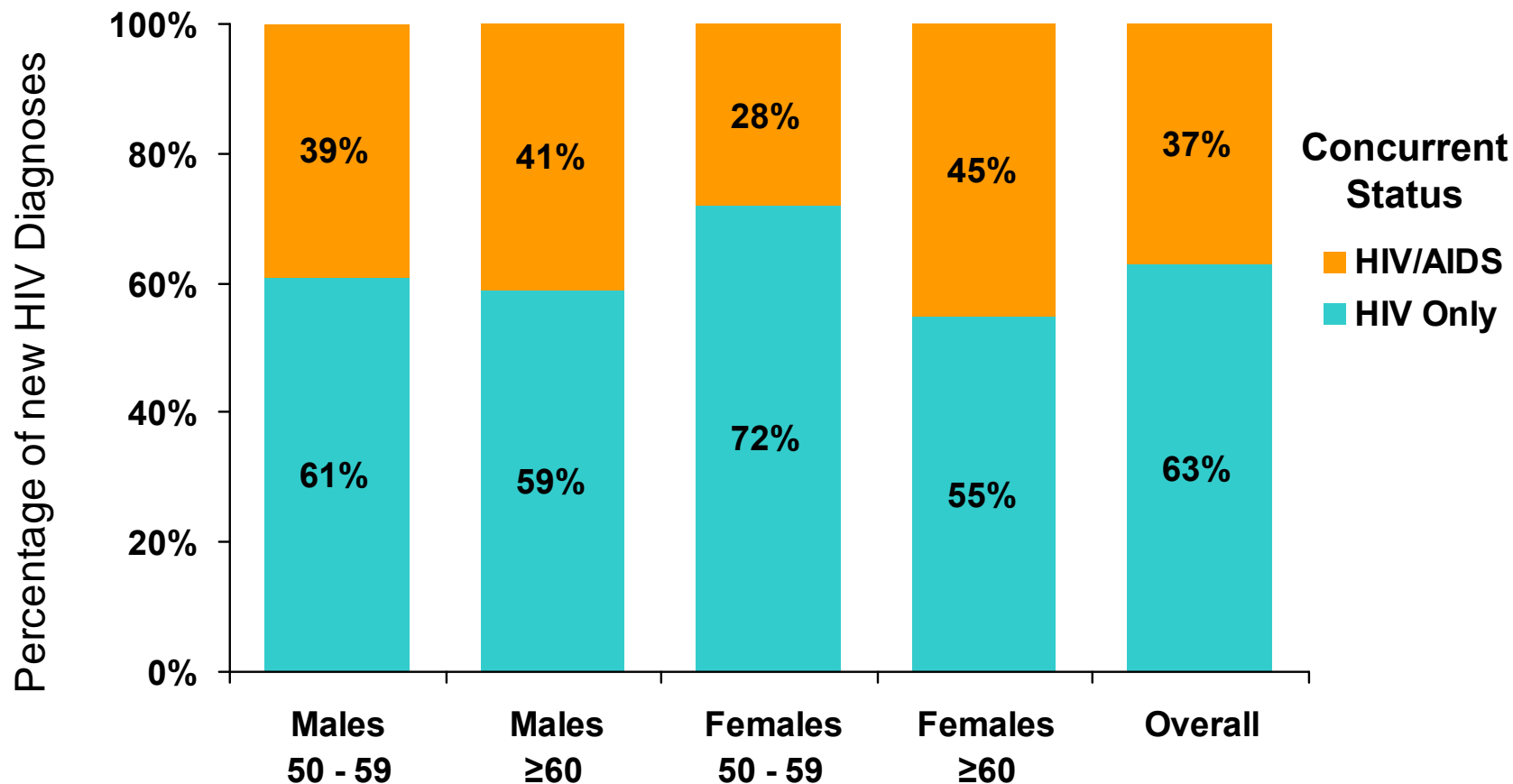
PWHA as a percent of population  
by UHF Neighborhood

- 0.20 - 0.50%
- 0.51 - 1.00%
- 1.01 - 1.80%
- 1.81 - 4.80%
- Non-residential zones
- All Condom Distribution Sites (n=398)



Denominators for prevalence based on 2000 Census population.  
UHF boundaries used in this map have been updated from previous maps.  
PWHA = Persons With HIV/AIDS alive at any time January1, 2008 - December 31, 2008.  
As reported to the New York City Department of Health and Mental Hygiene by September 30, 2009.

# New HIV Diagnoses among Persons 50 and Older in NYC by Sex and Concurrent Status, 2008

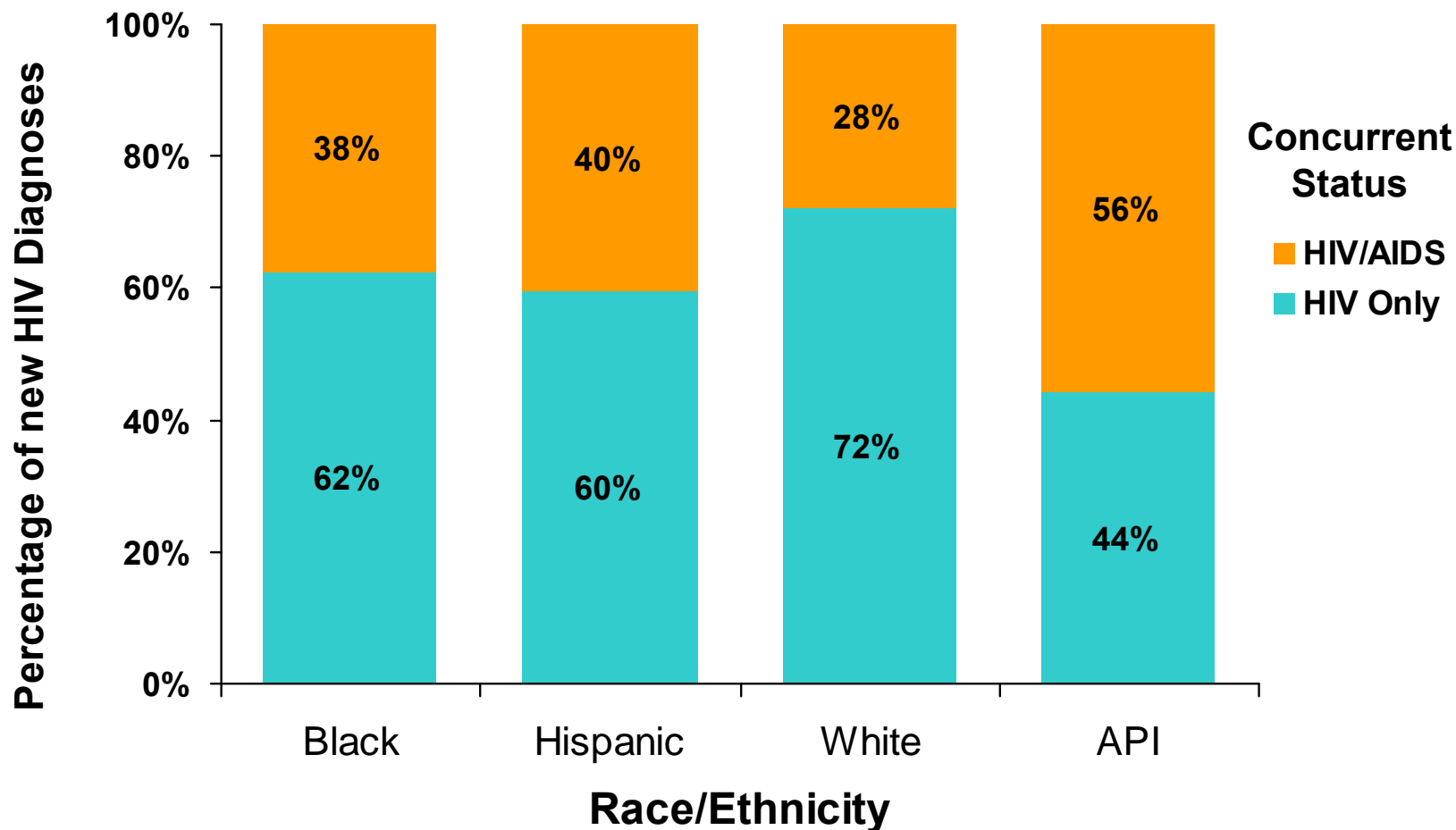


**The proportion of concurrent diagnoses was highest among males and persons 60 and older.**





# New HIV Diagnoses among Persons 50 and Older in NYC by Race/Ethnicity and Concurrent Status, 2008



**The proportion of concurrent diagnoses was higher among Hispanics (40%) and Blacks (38%) than among Whites (28%).**

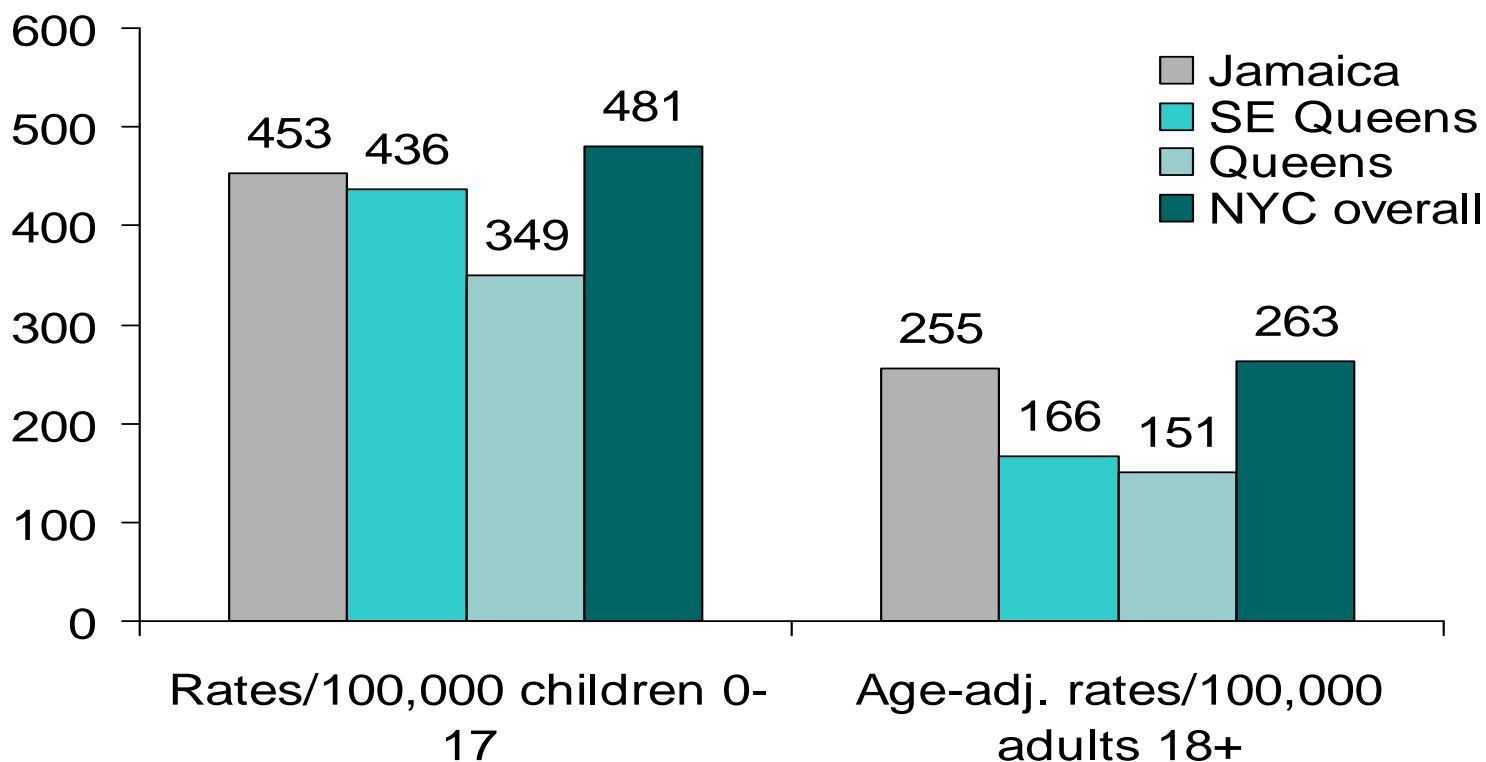


# Asthma

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# Child and adult asthma-related hospitalizations



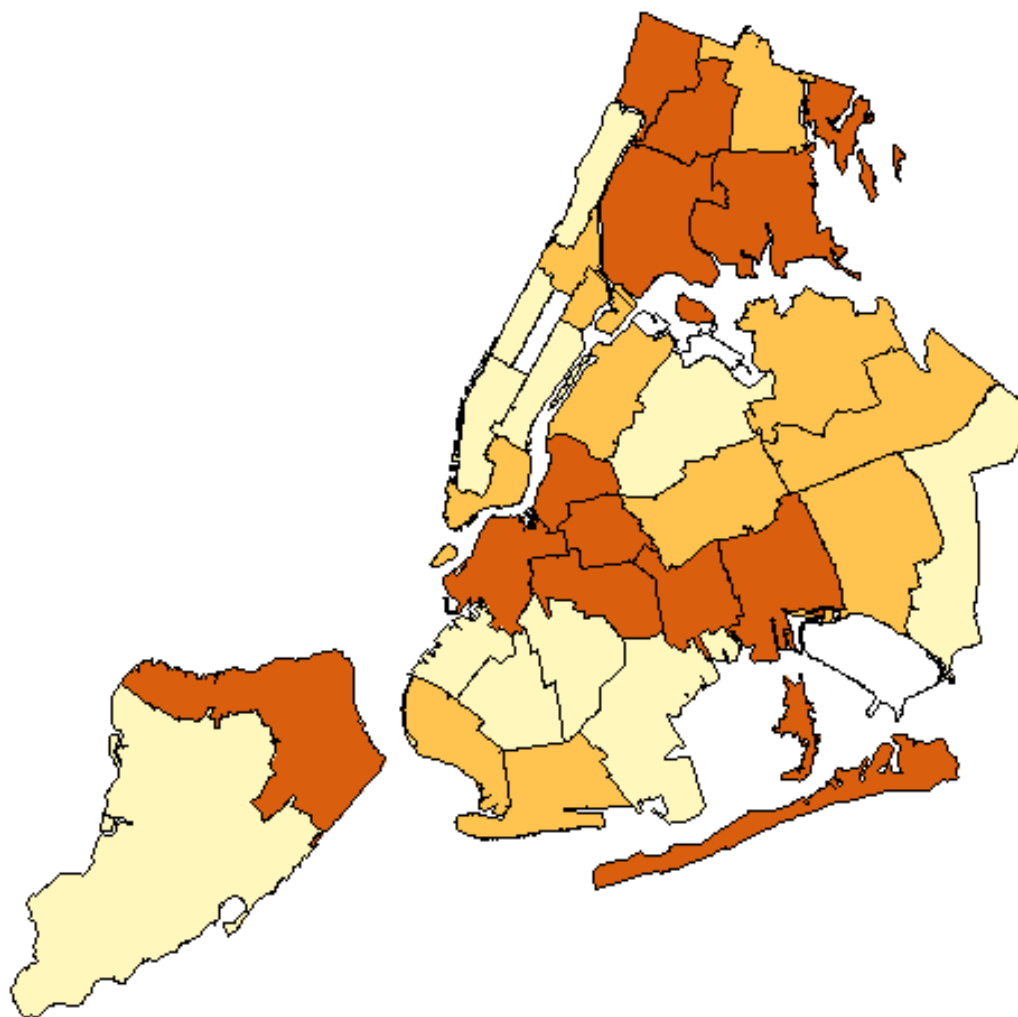
Source: 2006 NYS DOH Statewide Planning and Research Cooperative System (SPARCS), updated August 2007 & NYCDOHMH neighborhood population estimates 2006



# Current asthma among adults

NYC Community Health Survey 2009

Percentage having an asthma attack in the last year by neighborhood



Percent of Total Frequency

0.8 - 2.8

2.9 - 5.7

5.7 - 11.5

neahrn



# Current asthma among children

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- 6.1% of NYC children ages 0-12 had an asthma attack in the past year, according to their parents
  - 2009 Child Health Survey (data not available by neighborhood)
- 32.2% of NYC public high school students and 32.0% of Queens public high school students report an asthma attack in the past year
  - 2009 Youth Risk Behavior Survey (data not available by neighborhood)



# Sickle cell disease and Lupus

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# Sickle cell anemia and Lupus hospitalizations

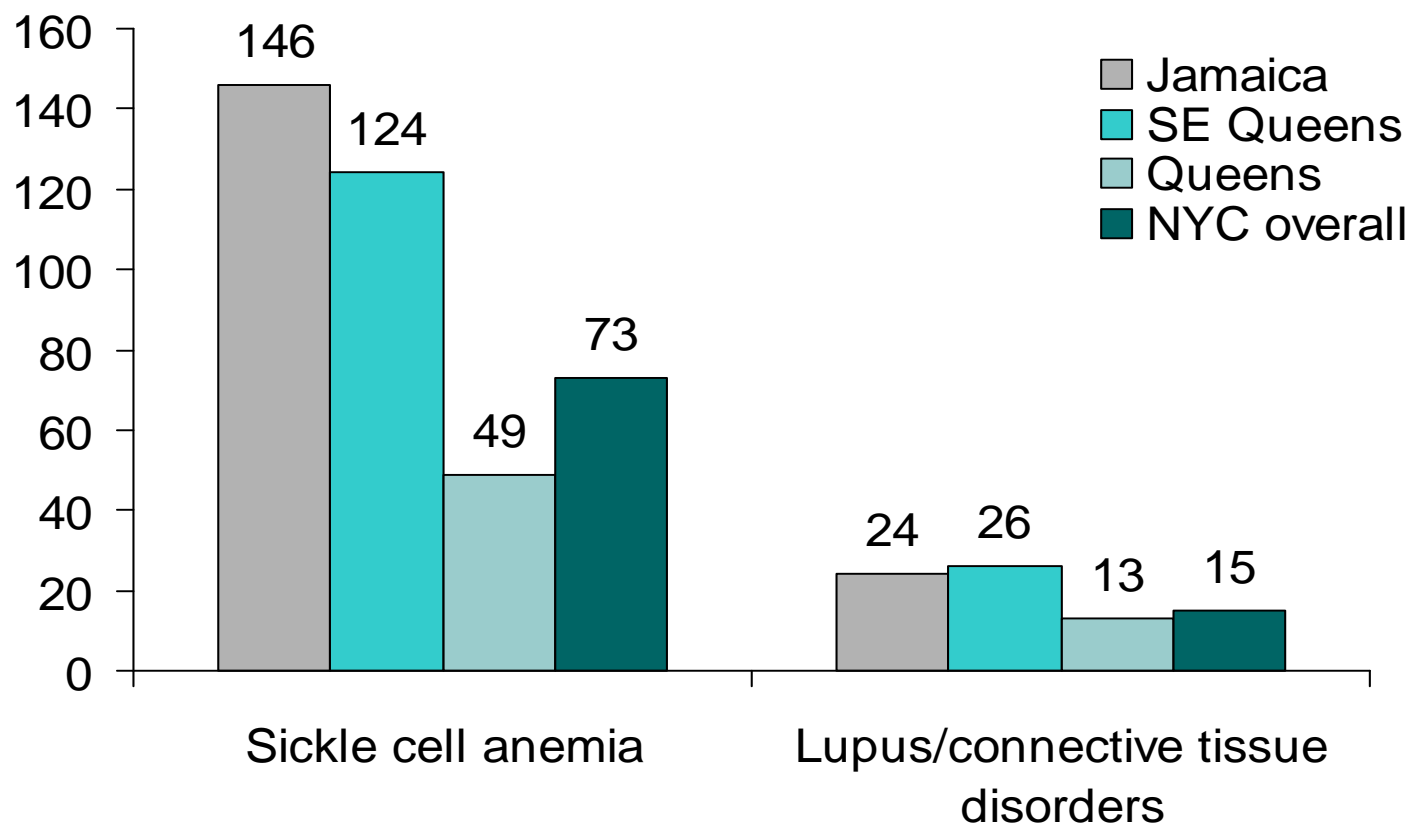
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- Sickle cell anemia (2004-06):
  - 1,237 hospitalizations with a primary diagnosis of sickle cell anemia among Jamaica residents
  - 701 among SE Queens residents
- Systemic lupus erythematosus and connective tissue disorders (2004-06):
  - 206 hospitalizations with a primary diagnosis of sickle cell anemia among Jamaica residents
  - 152 among SE Queens residents

Source: 2004-06 NYS DOH Statewide Planning and Research Cooperative System (SPARCS), updated August 2007 & NYCDOHMH neighborhood population estimates 2004-06; age-adjusted rates among all residents



# Age-adjusted hospitalization rates per 100,000 residents, 2004-06

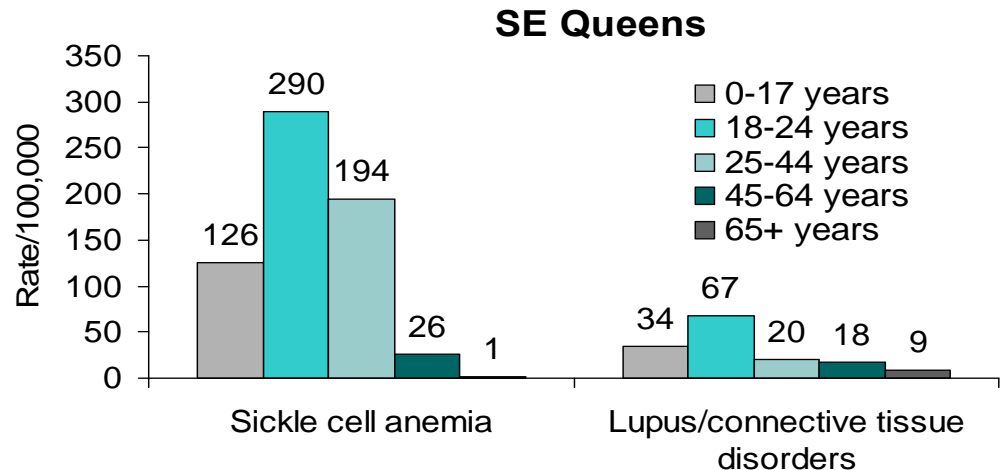
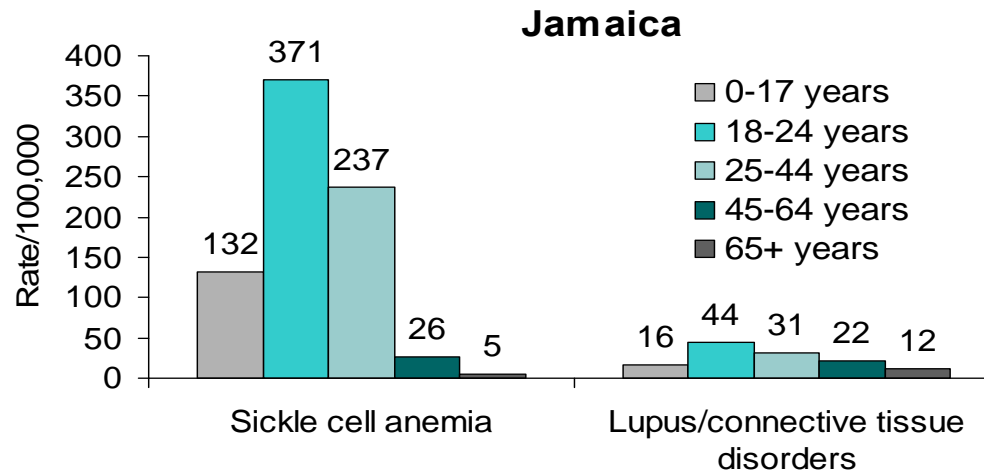


Source: 2004-06 NYS DOH Statewide Planning and Research Cooperative System (SPARCS), updated August 2007 & NYCDOHMH neighborhood population estimates 2004-06; age-adjusted rates among all residents





# Both lupus and sickle cell hospitalization rates are higher among young adults



Source: 2004-06 NYS DOH Statewide Planning and Research Cooperative System (SPARCS), updated August 2007 & NYCDOHMH neighborhood population estimates 2004-06





# Using public health data

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Accessing DOHMH data online




# Ways to Access DOHMH Data

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- Website resources:  
“My Community’s Health: Data and Statistics”
- EpiQuery: Online system for running your own data analyses
- Public Use Datasets, questionnaires, methodology, data tables
- Publications / Data&Surveillance Reports
- Data Requests




# One-stop Data Shop: MY COMMUNITY'S HEALTH at [nyc.gov/health](http://nyc.gov/health)



NEW YORK CITY DEPARTMENT of HEALTH and MENTAL HYGIENE


[Sign up for Health Emails](#)



\* Submit comments about the website.

→ Search [Advanced]

- DOHMH MENU
- My Health
- **My Community's Health: Data and Statistics**
- Health Topics A-Z
- Career Opportunities
- Contracting



You'd never **EAT 16 packs** of sugar.

**Health Department's New Anti-Obesity Video Shows What it Means to Drink Sugar**

In a continuing effort to educate New Yorkers about the potentially serious health effects of consuming sugary drinks, the Health Department has launched the second Internet video

- Health Care Providers
- Emergency Preparedness
- Media

→ Announcements

**EMAIL UPDATES**

Sign up for Email Updates from the Health Department, including health news, press releases, newsletters and publications.

⏮ 5 of 5 ⏭

→ Services

- ▶ Crisis Intervention (1-800-LIFENET)
- ▶ Beach Status
- ▶ Birth Certificate





# My Community's Health

## Ready for Requests.

Ask your own health questions.

## Ready to Read.

Info plus thoughtful analysis.

### EpiQuery:

### NYC Interactive Health Info System

This interactive system will help you answer health-related questions about your neighborhood, borough and New York City overall with many different types of data. Learn about death rates, obesity, smoking rates and much, much more!

### Data on the Health of New Yorkers

- **NEW!** NYC Environmental Public Health and Sustainability Tracking Portal: Access to data and information about the environment and health in New York City. Create reports, tables, charts and maps for NYC and its neighborhoods.
- **NEW!** NYC Community Health Atlas 2008: More than 40 multi-colored, thematic New York City maps showing the neighborhood distribution of various health indicators.

### Health Publications

### Special Reports

- **NEW!** Health Disparities in New York City: New publication series from the Health Department
- **NEW!** Results of the 2008 Cell Phone Pilot: Including New Yorkers who can be reached only by cell phone in the Community Health Survey
- Teen Pregnancy in New York City: 1997-2007 (PDF)
- Intimate Partner Violence Against New York City Women (PDF)
- Health Care Access Among Adults in New York City (PDF)
- Bicyclist Fatalities and Serious Injuries in New York City (PDF)
- Diabetes in New York City (PDF)
- Immigrant Health Report (PDF)
- Women at Risk (PDF)
- Homeless Health Report (PDF)
- Health Disparities Report (PDF)



# EpiQuery

NYC Interactive Health Data

[nyc.gov/health/EpiQuery](http://nyc.gov/health/EpiQuery)

Percent of  
New Yorkers  
Who Are  
Current Smokers

11%–14%  
15%–19%  
20%–23%  
24%–33%



- Web-based, interactive query system
- Ask & answer your own questions about the health of New Yorkers
  - Neighborhood maps, data tables, charts
- EpiQuery
  - [nyc.gov/health/epiquery](http://nyc.gov/health/epiquery)  
(or click on “EpiQuery” at My Community’s Health: Data and Statistics)



# What's on EpiQuery?

- CHS 2002 - 2009
- NYC HANES 2004
- YRBS 1997-2009 (*odd yrs, trends*)
- Vital Statistics:
  - Deaths 2000-2007
  - Death Trends 1994-2007
  - Births 2000-2007
- Communicable Disease Surveillance System (CDSS) 2000-2008
- World Trade Center Health Registry
- Environmental EpiQuery
- Census 1990-2000
- NYC Population Estimates 2000-2008
- **Coming soon:** Child Health Survey, SPARCS, STD Registry data





# NYC EPHT Portal:

## [nyc.gov/health/tracking](http://nyc.gov/health/tracking)

- Five topic areas
  - Neighborhood, Housing and Water Quality
  - Outdoor Air and Weather
  - Health Outcomes and Human Exposure
  - Pests and Pesticides
  - PlaNYC Sustainability Indicators
- Explore the environmental health of your neighborhood (Quick View)



The screenshot shows the NYC EPHT Portal website. At the top, there is a header with the NYC Health logo on the left and the PlaNYC logo on the right. Below the header, the title "Environmental Public Health and Sustainability Tracking Portal" is displayed. A banner image shows a park scene with a bridge in the background. Below the banner, a paragraph states: "This site provides access to data and information about the environment, health and sustainability in New York City. It allows you to create reports, tables, charts and maps on these topics:". Below this, there are five topic areas listed in two columns: "Neighborhood, Housing and Water Quality", "Outdoor Air and Weather", "Health Outcomes and Human Exposures", "Pests and Pesticides", and "PlaNYC Sustainability Indicators". Below the topic areas, there are three main buttons: "Quick View" (with a sub-link "To view environmental and health profiles of NYC neighborhoods, click here"), "Enter Tracking Portal" (with a sub-link "To explore data and create tables, maps, and time trend charts, click here"), and "Environmental EpiQuery" (with a sub-link "To explore data by individual characteristics, click here"). At the bottom, there is a "What's New" section with a paragraph about the addition of a sustainability component to the portal in recognition of Earth Day 2010.

**NYC Health** **PlaNYC**

**Environmental Public Health and Sustainability Tracking Portal**

This site provides access to data and information about the environment, health and sustainability in New York City. It allows you to create reports, tables, charts and maps on these topics:

- ▶ **Neighborhood, Housing and Water Quality**
- ▶ **Outdoor Air and Weather**
- ▶ **Health Outcomes and Human Exposures**
- ▶ **Pests and Pesticides**
- ▶ **PlaNYC Sustainability Indicators**

**Quick View**  
To view environmental and health profiles of NYC neighborhoods, [click here](#)

**Enter Tracking Portal**  
To explore data and create tables, maps, and time trend charts, [click here](#)

**Environmental EpiQuery**  
To explore data by individual characteristics, [click here](#)

**What's New**

To celebrate Earth Day 2010, the Tracking Portal has added a sustainability component, in recognition of the role that environmental sustainability plays in maintaining physical, mental and social well-being in NYC. For more information on PlaNYC - the city's blueprint for long-term planning and sustainability, [click on the link below](#). For more information on the national Environmental Public Health Tracking program, [click on the link to the CDC Tracking Portal](#).





# What you can do on the EPHT Portal

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- View data tables at the city, borough or neighborhood level
- View trends over time
- View neighborhood maps
- Build a table of selected indicators
- View indicator disparities
- View associations between selected indicators in a graph format
- Export data for your own use



# GIS Center of Excellence

(and shapefiles...)



- Collaborative effort to centralize GIS resources in Health Department
  - Data, maintenance, and reduces redundancy
- Provides broad access to GIS data and services
- Common infrastructure to build and deploy applications
- Training, consulting and implementation assistance

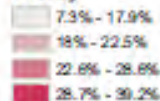


# NEW YORK CITY COMMUNITY HEALTH ATLAS

2007

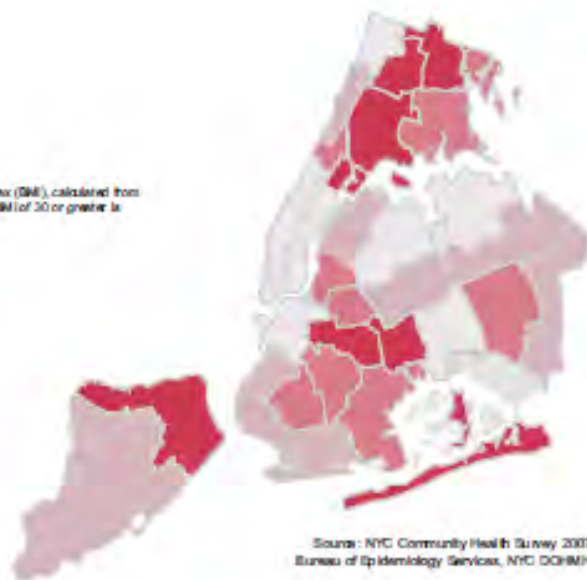


## Obesity



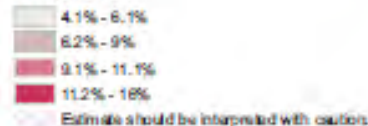
\*Percentages are age adjusted.

Obesity is based on Body Mass Index (BMI), calculated from self-reported weight and height. A BMI of 30 or greater is classified as obese.



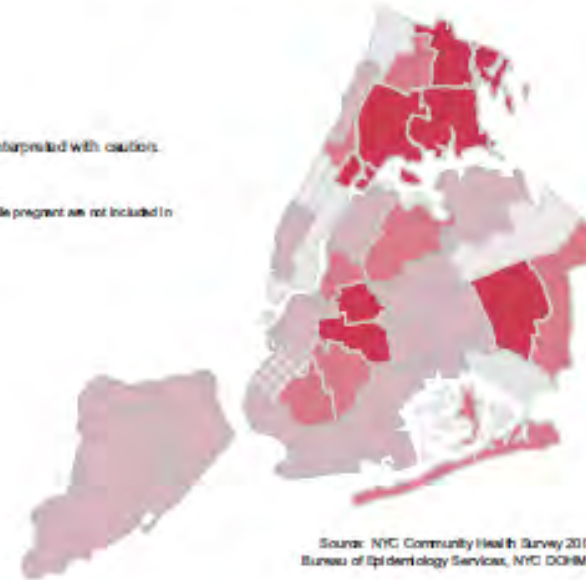
Source: NYC Community Health Survey 2007  
Bureau of Epidemiology Services, NYC DOHMH

## Diabetes ever



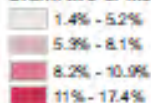
\*Percentages are age adjusted.

Women who had diabetes only while pregnant are not included in these prevalence estimates.



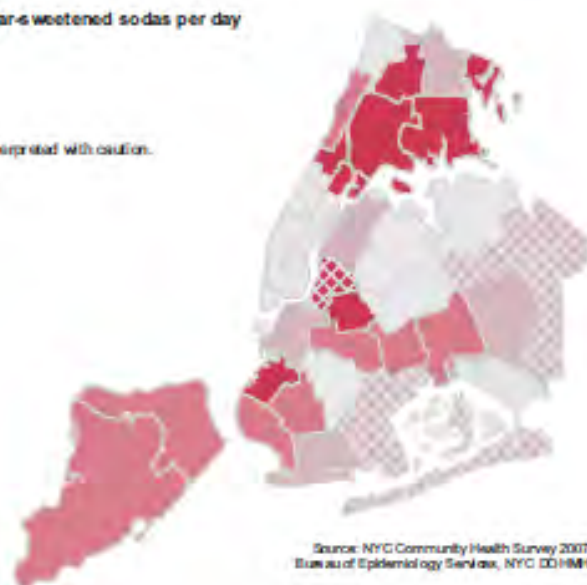
Source: NYC Community Health Survey 2007  
Bureau of Epidemiology Services, NYC DOHMH

## Drank two or more sugar-sweetened sodas per day



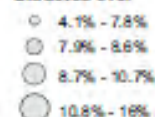
Estimate should be interpreted with caution.

\*Percentages are age adjusted.



Source: NYC Community Health Survey 2007  
Bureau of Epidemiology Services, NYC DOHMH

## Diabetes ever



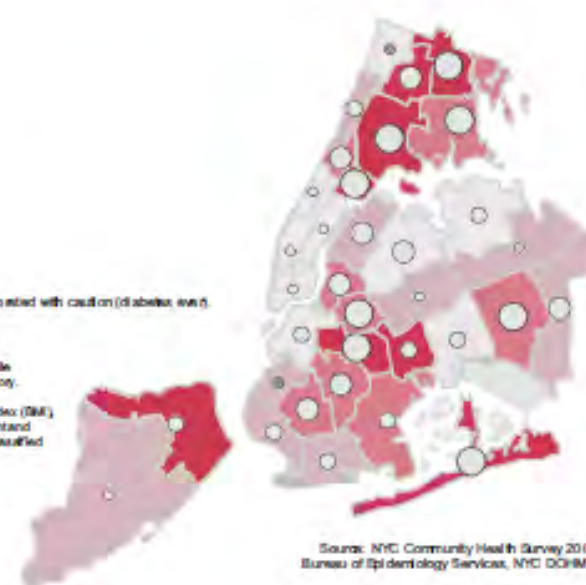
## Obesity



\*Percentages are age adjusted.

Women who had diabetes only while pregnant are included in 'no' category.

Obesity is based on Body Mass Index (BMI), calculated from self-reported weight and height. A BMI of 30 or greater is classified as obese.



Source: NYC Community Health Survey 2007  
Bureau of Epidemiology Services, NYC DOHMH

# Other data sources

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- Health Disparities Reports and other data publications
- Disease registry data
  - STDs
  - HIV/AIDS
  - Reportable communicable diseases
- Childhood lead poisoning
- Rat Portal
- Resources all available online...





# My Community's Health

## Ready for Requests.

Ask your own health questions.

## Ready to Read.

Info plus thoughtful analysis.

### EpiQuery:

#### NYC Interactive Health Info System

This interactive system will help you answer health-related questions about your neighborhood, borough and New York City overall with many different types of data. Learn about death rates, obesity, smoking rates and much, much more!

### Data on the Health of New Yorkers

- **NEW!** NYC Environmental Public Health and Sustainability Tracking Portal: Access to data and information about the environment and health in New York City. Create reports, tables, charts and maps for NYC and its neighborhoods.
- **NEW!** NYC Community Health Atlas 2008: More than 40 multi-colored, thematic New York City maps showing the neighborhood distribution of various health indicators.

### Health Publications

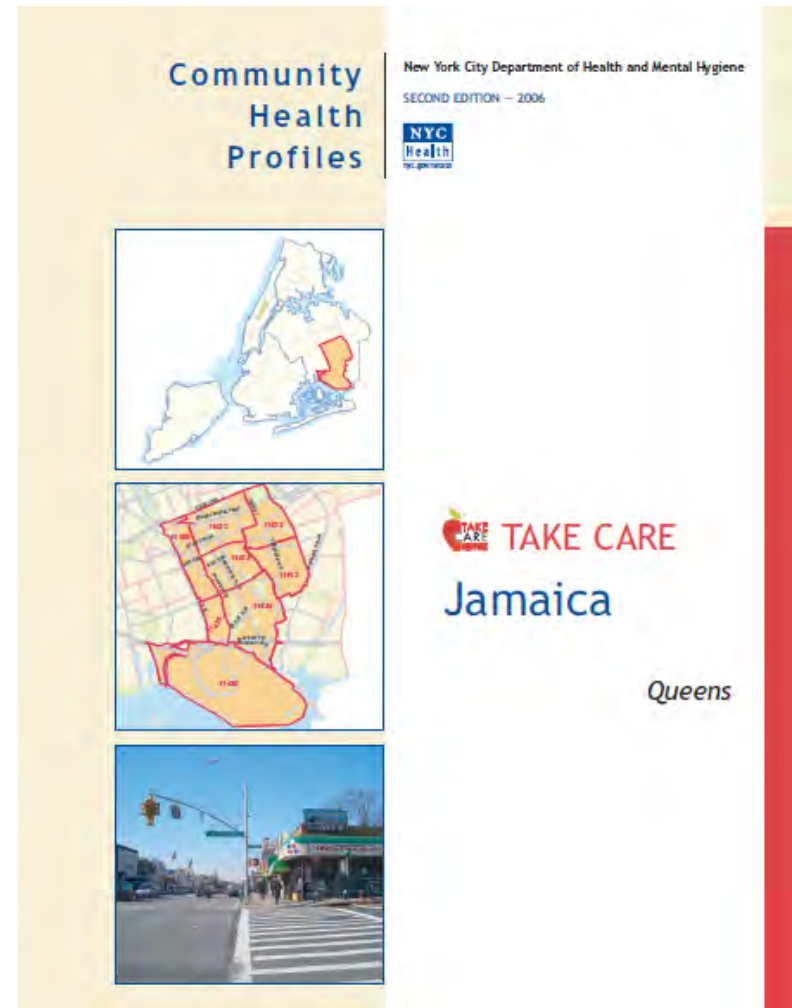
#### Special Reports

- **NEW!** Health Disparities in New York City: New publication series from the Health Department
- **NEW!** Results of the 2008 Cell Phone Pilot: Including New Yorkers who can be reached only by cell phone in the Community Health Survey
- Teen Pregnancy in New York City: 1997-2007 (PDF)
- Intimate Partner Violence Against New York City Women (PDF)
- Health Care Access Among Adults in New York City (PDF)
- Bicyclist Fatalities and Serious Injuries in New York City (PDF)
- Diabetes in New York City (PDF)
- Immigrant Health Report (PDF)
- Women at Risk (PDF)
- Homeless Health Report (PDF)
- Health Disparities Report (PDF)



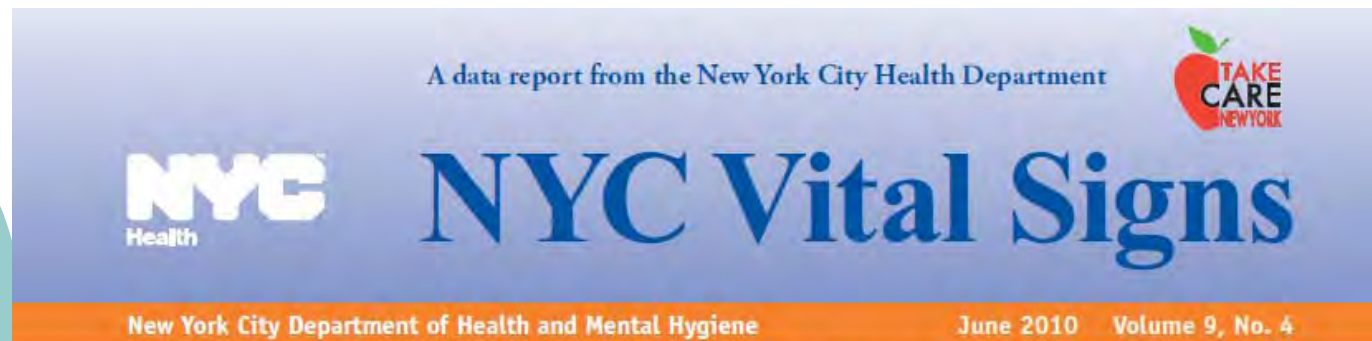
# Health Data Publications

- **Vital Signs:** Brief reports on important health topics in New York City
- **Special Reports:** Longer, in-depth publications combining multiple data sources on special health topics and NYC populations
- **Community Health Profiles:** Neighborhood-specific health reports for 42 NYC neighborhoods





# Vital Signs Publications



## Men's Health in New York City: Premature Death Due to Homicide and Heart Disease

**N**ew Yorkers are living longer than ever before. Those born in 2007 can expect to live 79 years, which is an increase of more than six

years since 1990. Substantially fewer deaths occurred during this period.

Despite this improvement, on average, six years less than half of men die. More than one third of deaths happen prematurely (before age 65), with less than one quarter occurring before age 45.

A number of complex factors contribute to shorter life expectancy and health, including health behavior

environment, and health care access and quality. Yet many premature deaths among men can be prevented.

Heart disease is the leading cause of death after



## Women, Unprotected Anal Sex and HIV Risk

**U**nprotected anal sex can put both partners at high risk for HIV, especially "receiving" partners. This is true not only for men who have sex with men, but also for women. In addition, people having unprotected anal sex are at risk for rectal gonorrhea, chlamydia, and anal warts and anal cancer from human papillomavirus (HPV) infection. In contrast to tissue in the vagina and mouth, anal tissue is very fragile, making receptive anal sex much riskier

even one time are about 30 times more likely to get HIV than if they had unprotected vaginal sex once.<sup>2-4</sup>

In New York City, 943 women were newly diagnosed with HIV infection in 2008. Women infected with HIV through heterosexual intercourse represent a large and increasing percentage of all women newly diagnosed with HIV. It is unclear whether women are aware of the risks of unprotected anal sex.





# Special NYC Reports

## Health Care Access Among Adults in New York City

### Health Disparities in New York City



#### Health Disparities in Life Expectancy and Death

##### MIND THE GAP: What are health disparities?

**H**ealth disparities are differences in health outcomes between groups that reflect social inequalities. Health disparities result in more avoidable illnesses and deaths in one group of people than another and arise from a variety of causes, not all of which are fully understood. Some factors hypothesized to influence disparities include:

- Social and physical environmental conditions, opportunities, and stressors that impact health
- Limited access to primary and preventive health care
- Quality of health care received

Differences in health based on race, ethnicity, or economics can be reduced. Reducing health disparities requires government policymakers, health professionals, researchers, and community groups to work together. Specific and achievable goals must be set across a range of disciplines, including but not limited to health, housing, education and criminal justice.

This issue of "Health Disparities in New York City" focuses on health differences among racial/ethnic and income groups using three general measures of population health—life expectancy, overall mortality (or death), and premature death. This report concludes with strategies to help reduce these health disparities.

##### Health Disparities

*in New York City* is a new publication series from the Health Department. The goals for this series are to inspire action by documenting current health disparities in the city, as well as changes over time, and identifying community- and policy-based solutions to close the health gaps among New Yorkers.

##### Coming Next:

- Disparities in Breast, Colorectal, and Cervical Cancers

#### POVERTY AND RACE IN NEW YORK CITY

New York City residents are, on average, poorer than people nationwide. In 2000, the city's poverty rate was nearly twice the national rate (21% vs. 12%). Poverty in NYC is concentrated geographically, with the poorest neighborhoods in the South Bronx, East and Central Harlem, and North and Central Brooklyn.\* These areas also have the highest proportions of black and Hispanic residents.

##### Percent of residents living in poverty

- Very Low Poverty (<10%)
- Low Poverty (10%-<20%)
- Moderate Poverty (20%-<30%)
- High Poverty (>30%)



Source: U.S. Census 2000

##### Percent of black and Hispanic residents (quartiles)

- < 10%
- 10% - 30%
- 30% - 50%
- > 50%



Source: NYC 2000 neighborhood population estimates, 2000.

\*For a description of how neighborhood poverty is defined, please see the methodology section on page eight.

## Other Reports:

**Bicyclist Fatalities  
And Serious  
Injuries in NYC**

**The Health of  
Homeless Adults in  
NYC**

**The Health of  
Immigrants in New  
York City**

**Women at Risk: The  
Health of Women in  
NYC**

**And more...**



## What's in this report?

Highlights from the First Half of 2005.....	1
Distribution of AIDS Diagnoses by Sex, New York City 1981 – 2004.....	1
Reported HIV/AIDS Diagnoses and Deaths, January – June 2005, and PLWHA as of June 30, 2005.....	2
Which HIV-Related Events are Reportable?.....	2
Reported HIV/AIDS Diagnoses and Deaths, January – June 2005, and PLWHA as of June 30, 2005, by Sex.....	3
Assessing HIV-Related Population Health Using Surveillance Indicators....	4

**Publication schedule:** This report reflects events occurring through June 30, 2005, and reported by March 31, 2006, unless otherwise stated. It represents diagnoses made through nine months prior to the publication date because case reporting is 85% complete by that time. Because cases continue to be reported for many months, the final numbers can be expected to be higher.

**Special announcement:** The HIV Epidemiology Program Report will now be published semiannually rather than quarterly. Due to this new reporting format, we will begin a new numbering scheme with this issue (Vol. 1, No. 1).

To receive this report via e-mail, send an e-mail request to:

## HIGHLIGHTS FROM THE FIRST HALF OF 2005

- **Total Diagnoses and Deaths:** The total number of HIV (non-AIDS) diagnoses was essentially stable between the first half of 2004 and the first half of 2005. Slight declines in diagnoses of concurrent HIV/AIDS, AIDS and deaths were observed.
- **Sex:** In the first half of 2005, the number and proportion of new HIV (non-AIDS) diagnoses in men grew for the first time since 2001.
- **Race/Ethnicity:** Between the first half of 2004 and the first half of 2005, new diagnoses of HIV (non-AIDS) increased in blacks (673 to 691) and Asians (25 to 36). The proportion of new diagnoses in blacks rose from 51% to 53%, reflecting an increase in diagnoses among black men and a decrease among black women. The number and proportion of new diagnoses of concurrent HIV/AIDS and AIDS declined or remained stable in all racial groups.
- **Transmission Risk:** The number of new HIV diagnoses in men who have sex with men (MSM) increased from 479 in the first half of 2004 to 507 in the first half of 2005, and the

[CME/CNE Activity Inside and Online](#)

*Valid Until September 30, 2009*



# City Health Information

**September 2008**      **The New York City Department of Health and Mental Hygiene**      **Vol. 27(8):63-70**

## INFLUENZA PREVENTION AND CONTROL: 2008-2009

- **Vaccination is now recommended for all children aged 6 months through 18 years.**
- **Every adult who wants to be immunized should receive an annual influenza vaccination unless there are contraindications.**
- **All health care workers should be vaccinated every year; make sure you and your staff get influenza shots early in the season.**
- **Vaccination should continue throughout the influenza season.**

Influenza is a serious illness that results in approximately 36,000 deaths and 226,000 hospitalizations annually in the United States (US),<sup>1,2</sup> with an

### WHO SHOULD BE VACCINATED AGAINST INFLUENZA?

- Anyone who wishes to reduce the risk of becoming

# Additional Data Publications

- HIV Epidemiology Program Reports and powerpoint presentations
- Summary of Vital Statistics
- Bureau of Sexually Transmitted Disease Reports
- CHI bulletins (City Health Information)
- And so much more...



# Consultations & Data Requests

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- Consultation
  - Designing or implementing a study and need expert epidemiological input
- Data Requests
  - Data not found on My Community's Health or EpiQuery (including specialized maps)
- Email us at [query@health.nyc.gov](mailto:query@health.nyc.gov)



# THANK YOU!

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[nyc.gov/health](http://nyc.gov/health)

## My Community's Health: Data and Statistics

[http://www.nyc.gov/html/doh/html/community/  
community.shtml](http://www.nyc.gov/html/doh/html/community/community.shtml)

## More Information or Questions?

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**212-788-9810**

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**212-442-3518**

