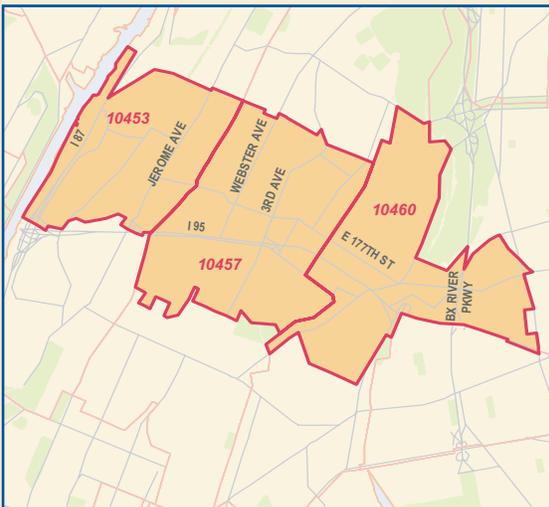


# Community Health Profiles

New York City Department of Health and Mental Hygiene

SECOND EDITION — 2006



## TAKE CARE Central Bronx

*(Including Bathgate,  
Bronx Park South,  
Crotona, Morris Heights,  
Mt. Hope, and Tremont)*

# Community Health Profile, Second Edition: The Central Bronx

New York City is the most diverse city in the U.S. — a fact reflected in the distinct character of each neighborhood. The second edition of the Community Health Profiles uses **Take Care New York** (TCNY), the city’s health policy, to examine preventable causes of illness and death in all of NYC’s 42 neighborhoods. This report updates the 2002 profile (available at [nyc.gov/health](http://nyc.gov/health)) by providing more recent and time-trend data, and a greater variety of health statistics. Key health issues in the **Central Bronx** include:

- Central Bronx residents experience more barriers to health care access than those in NYC overall, with more than one third without a regular doctor (36%) and a high proportion of residents (16%) visiting the emergency department for routine health care (page 5).
- Although death rates due to HIV disease have decreased during the past decade in the Central Bronx, they remain among the highest rates in the city (page 8).
- More than 6 in 10 adults in the Central Bronx are overweight or obese, increasing their risk of diabetes (pages 14).

**Methods:** While this report provides important information, it is not intended to be an exhaustive examination of the health of Central Bronx residents, as not all health problems and their causes could be covered. Only statistically significant findings are discussed in the text. For complete information on methods, see Technical Notes (page 15).

## The Central Bronx at a Glance

### Population

Total number of people living in the Central Bronx in 2000:

**199,500**

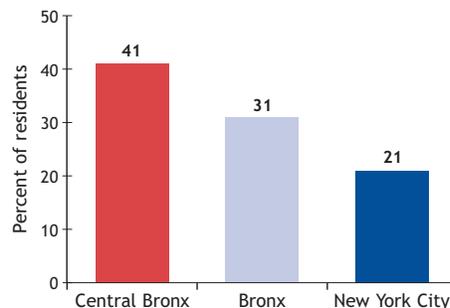
### Age

People in the Central Bronx are younger than in the Bronx and New York City overall

	Central Bronx	Bronx	NYC
0-17 years	35%	30%	24%
18-24 years	11%	10%	10%
25-44 years	31%	31%	33%
45-64 years	17%	19%	21%
65+ years	6%	10%	12%

### Poverty

In the Central Bronx, the percent of residents living below the poverty level is higher than in the Bronx and NYC overall



### Education

Central Bronx residents aged 25 and older have completed fewer years of education than those in the Bronx and NYC overall

	Central Bronx	Bronx	NYC
Up to 8th grade	21%	16%	12%
Some high school, no diploma	27%	22%	16%
High school diploma	24%	26%	25%
Some college, no degree	20%	22%	20%
College graduate	8%	14%	27%

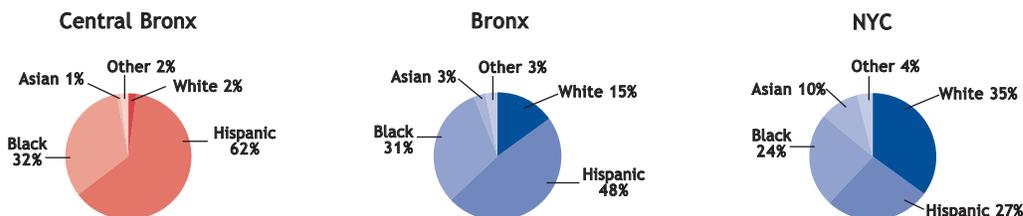
### Foreign-born

The percent of Central Bronx residents born outside the U.S. is lower than in NYC overall

Area	Percent
Central Bronx	30%
Bronx	29%
NYC	36%

### Race / Ethnicity

The Central Bronx has a higher proportion of Hispanic and a lower proportion of white residents than the Bronx and NYC overall



Data Source: U.S. Census 2000/NYC Department of City Planning

# Take Care Central Bronx



In 2004, the Health Department created a citywide health policy called **Take Care New York** (TCNY) to help improve the health of New Yorkers. TCNY identifies 10 key areas that cause significant illness and death but can be improved through intervention by individuals, health care providers, government agencies, and other organizations.

This report examines how well Central Bronx residents are doing on health indicators for each of the 10 TCNY goals. It examines areas in which the community is a health leader, as well as areas that need improvement. The TCNY report card below shows where the Central Bronx ranks among all 42 New York City neighborhoods. (See Technical Notes for information about how neighborhoods were defined and ranked.)

## Take Care New York report card

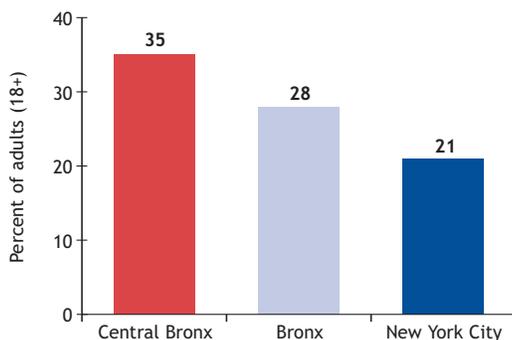
The Central Bronx ranks below average on most indicators when compared to the 41 other NYC neighborhoods

	Below Average (bottom 10)	Average (middle 22)	Above Average (top 10)
<b>Take Care New York Goals</b>			
1 Have a regular doctor	✓		
2 Be tobacco-free		✓	
3 Keep your heart healthy	✓		
4 Know your HIV status			✓
5 Get help for depression	✓		
6 Live free of alcohol and drugs	✓		
7 Get checked for cancer		✓	
8 Get the immunizations you need	✓		
9 Make your home safe and healthy	✓		
10 Have a healthy baby	✓		

## How Residents Rate Their Own Health

### Overall health

More than 1 in 3 adults in the Central Bronx consider themselves to be in fair or poor health



People are good at rating their own health. In general, when asked to rate their general health as excellent, very good, good, fair, or poor, those who say “fair” or “poor” are more likely to have health problems than those who report better health.

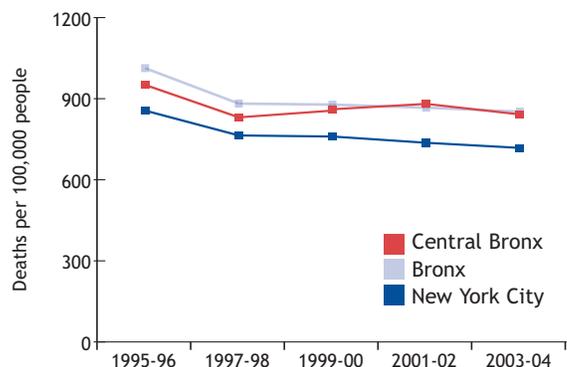
In the Central Bronx, residents are more likely to report being in fair or poor health (35%) than those in New York City overall (21%).

Percents are age-adjusted.  
Data Source: NYC Community Health Survey 2002-03-04

# Overall Death Rates in the Central Bronx

## Death rates

In the Central Bronx, death rates are higher than in NYC overall



Rates are age-adjusted.  
Data Sources: Bureau of Vital Statistics, NYC DOHMH, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning

The death rate in the Central Bronx has decreased by more than 10% in the past decade, mirroring the decline in the death rate in NYC overall. However, the Central Bronx rate has remained consistently higher than the New York City overall rate.

In 2003-2004, the average annual death rate in the Central Bronx was similar to the Bronx rate but more than 15% higher than the rate in New York City overall (837/100,000 vs. 852/100,000 in the Bronx and 718/100,000 in NYC). Throughout this profile, cause-specific death rates are provided for TCNY goals.

**Line graphs.** All time-trend data are presented as annual averages with 2 or 3 years of data combined. For example, in this graph, the first point on each line represents the average annual death rate for 1995 and 1996 combined.

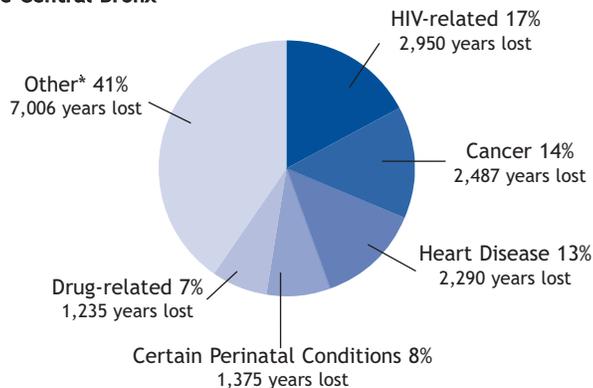
## Premature death

People who die before age 75 can be thought of as dying early, or prematurely. If a person dies early, their years of potential life lost (YPLLs) can be calculated by subtracting their age at death from 75 years to get a measure of premature death.

The causes of premature death differ across communities. The primary cause of premature death in the Central Bronx is HIV-related disease, while in both the Bronx and New York City overall, the primary cause is cancer.

### Top 5 causes of years of potential life lost

Death related to HIV causes the most years of potential life lost in the Central Bronx



\*Other includes Homicide (6%), Accidents (4%), Congenital Conditions (3%), Suicide (3%), Chronic Lower Respiratory Disease (2%), and Other (23%).

Data Source: Bureau of Vital Statistics, NYC DOHMH, 2002-04

### Death before age 75

The 2003-2004 average annual death rate for people younger than 75 years in the Central Bronx ranks 34th among 42 NYC neighborhoods



Data Sources: Bureau of Vital Statistics, NYC DOHMH, 2003-04; U.S. Census 2000/NYC Department of City Planning



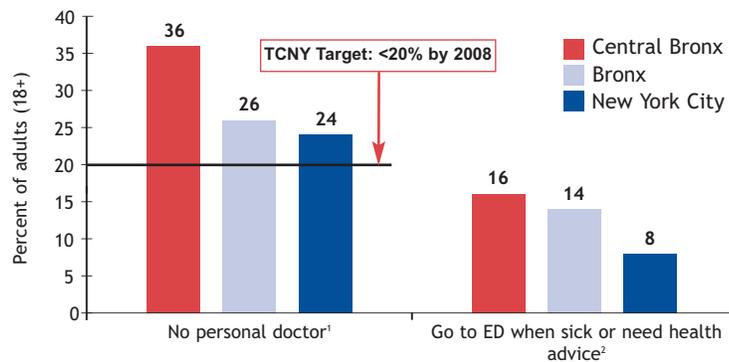
# Take Care New York Goals

## GOAL 1 Have a Regular Doctor or Other Health Care Provider

Access to good medical care helps people prevent illnesses, identify health conditions early, and treat health problems. Some conditions can and should be managed regularly outside the hospital. Higher rates of these avoidable hospitalizations can indicate reduced access to health care in a community. Having a “medical home” — a personal doctor or other health care provider and a regular place of care other than the emergency department (ED) — is a critical component of good health care access. Central Bronx residents are more likely to be without a regular doctor (36%) than those in both the Bronx (26%) and NYC overall (24%). Central Bronx residents are also twice as likely to go to the ED when they are sick or need health advice (16%) as those in NYC overall (8%).

### Access to care

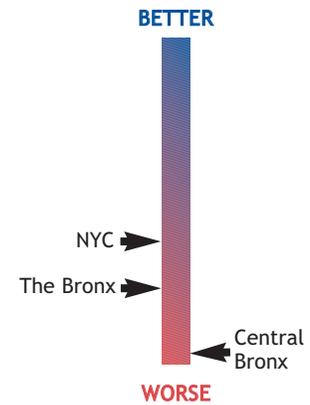
Without a primary provider, people may seek routine health care in the emergency department (ED)



Percents are age-adjusted.  
Data Sources: <sup>1</sup>NYC Community Health Survey 2002-03-04, <sup>2</sup>NYC Community Health Survey 2003-04

### Avoidable hospitalizations

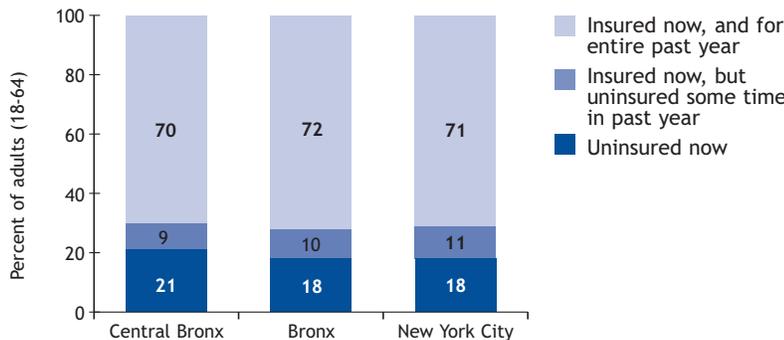
The 2004 avoidable hospitalization rate in the Central Bronx ranks poorly (40th) among 42 NYC neighborhoods



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

### Health insurance

Nearly 1 in 3 adults in the Central Bronx is uninsured or went without health insurance during the past year



Percents are calculated for adults aged 18-64 and age-adjusted.  
Data Source: NYC Community Health Survey 2003-04

Health insurance is important for access to health care. A similar proportion of residents in the Central Bronx (21%) and in New York City overall (18%) are currently uninsured. In addition, another 9% of residents in this community went without health insurance at some time during the past year.

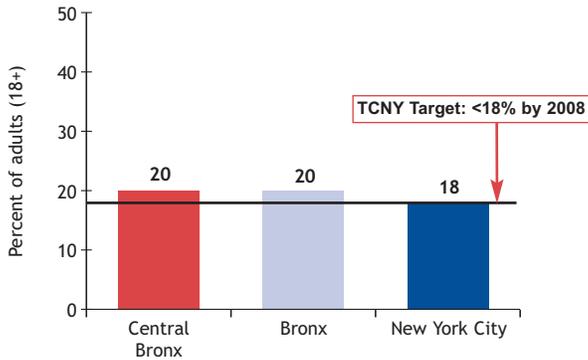


## GOAL 2 Be Tobacco-Free

Smoking is the leading cause of preventable death in New York City and the cause of many illnesses, including heart disease, stroke, emphysema, and lung cancer. One fifth of Central Bronx residents (20%) currently smoke. Many methods to quit smoking are available, and nearly 7 in 10 smokers in the Central Bronx (67%) are trying to kick the habit.

### Residents who smoke

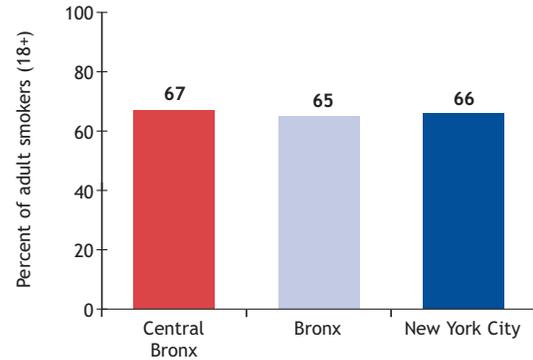
One in 5 adults in the Central Bronx smokes . . .



Percents are age-adjusted.  
Data Source: NYC Community Health Survey 2004

### Attempts to quit smoking in the past year

. . . but most smokers are trying to quit



Percents are age-adjusted.  
Data Source: NYC Community Health Survey 2004

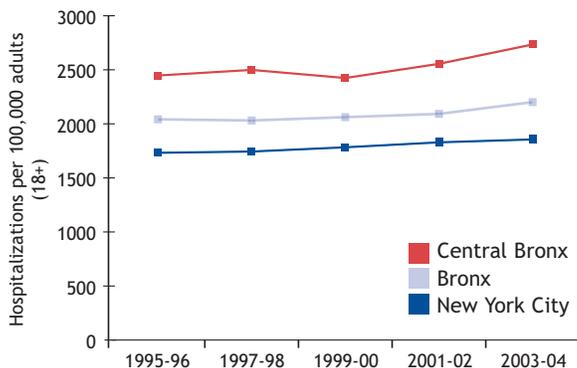


## GOAL 3 Keep Your Heart Healthy

Heart disease can cause severe illness and death. Central Bronx residents had an average annual heart disease hospitalization rate in 2003-2004 that was 25% higher than the Bronx rate and nearly 50% higher than the rate in NYC overall (2,734/100,000 vs. 2,201/100,000 in the Bronx and 1,856/100,000 in NYC). Also, the heart disease hospitalization rate in this community has increased by more than 10% in the past decade. In contrast, the heart disease death rate in 2003-2004 (240/100,000) was lower than the rates in the Bronx (313/100,000) and NYC overall (297/100,000).

### Heart disease hospitalizations

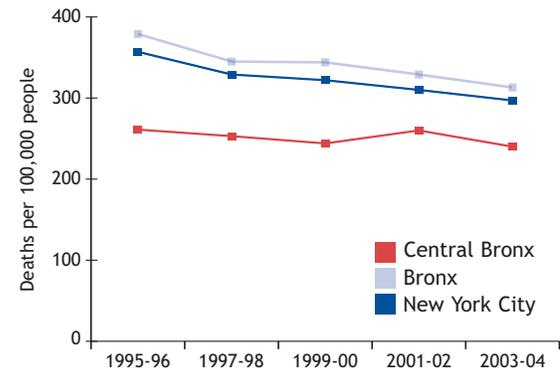
Heart disease causes a higher hospitalization rate in the Central Bronx



Rates are age-adjusted.  
Data Sources: New York State Department of Health Statewide Planning and Research Cooperative System, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning

### Deaths due to heart disease

Heart disease death rates are lower in the Central Bronx



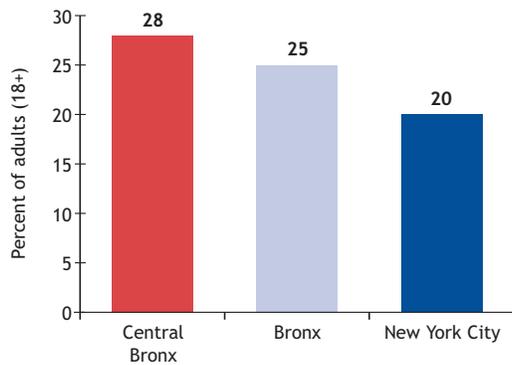
Rates are age-adjusted.  
Data Sources: Bureau of Vital Statistics, NYC DOHMH, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning

**High blood pressure and high cholesterol.** Both of these conditions contribute to heart disease. In the Central Bronx, 28% of adults were told by a health care professional that they have high blood pressure (similar to 29% in the Bronx and 26% in NYC overall), and one quarter (25%) were told that they have high cholesterol (similar to 24% in the Bronx and 26% in NYC overall).

Percents are age-adjusted. Data Source: NYC Community Health Survey 2002

## Obesity

More than one quarter of adults in the Central Bronx are obese



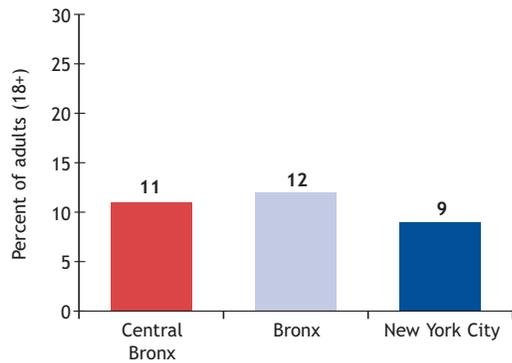
Obesity is defined as a body-mass-index (BMI) of 30 or greater. Percents are age-adjusted.  
Data Source: NYC Community Health Survey 2002-03-04

In addition to smoking, high blood cholesterol and high blood pressure, other factors that put people at risk for heart disease — lack of physical activity and obesity — can be prevented or controlled.

Obesity can lead to a variety of health problems, including heart disease and diabetes. Rates of obesity are increasing rapidly in New York City and across the U.S., making it a major public health concern. In the Central Bronx, more than 1 in 4 adults (28%) are obese, which is 40% higher than in New York City overall (20%).

## Diabetes

One in 10 adults in the Central Bronx has diabetes



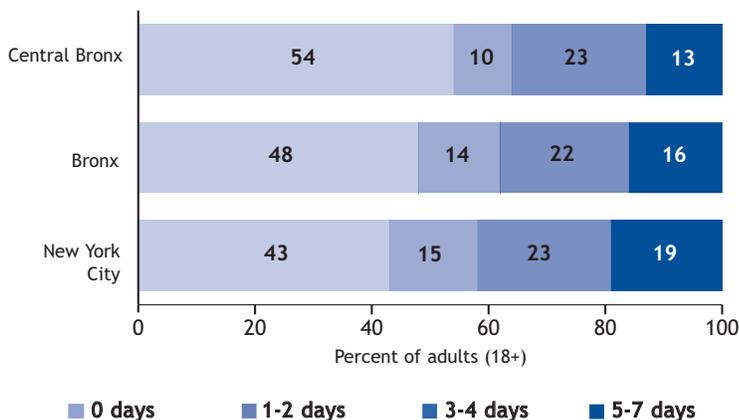
Percents are age-adjusted.  
Data Source: NYC Community Health Survey 2002-03-04

The increasing prevalence of obesity in the U.S. has contributed to an epidemic of diabetes. About 95% of diabetes cases are type 2 diabetes, which is strongly associated with obesity. Uncontrolled diabetes can worsen the harmful effects of high blood pressure, high cholesterol, and other risk factors for heart disease.

In the Central Bronx, more than 1 in 10 adults have diabetes (11%).

## Days per week of recreational exercise

Exercise habits in the Central Bronx are less healthy compared to New York City overall



Survey Question: On average, how many days per week do you exercise for at least 30 minutes? Percents are age-adjusted.  
Data Source: NYC Community Health Survey 2003

Physical activity helps people maintain a healthy weight and strengthens the cardiovascular system. More than half of Central Bronx residents (54%) report not exercising at all, compared to 43% of New York City residents. Only one third of residents in this community (36%) report exercising at least 3 days a week.

### Centers for Disease Control and Prevention Recommendations

Adults should do either 20 minutes of vigorous exercise 3 times per week or 30 minutes of moderate exercise 5 times per week.

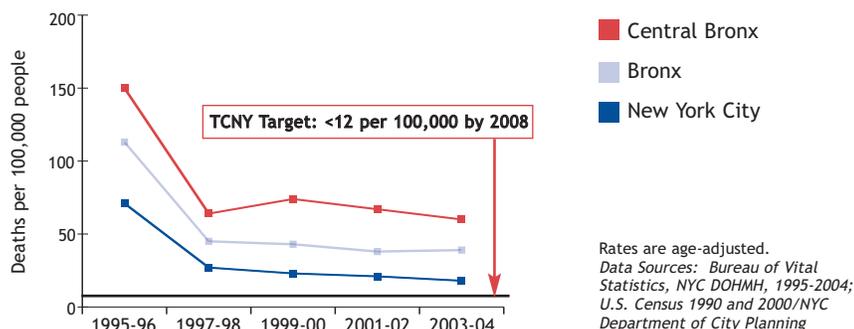
# TAKE CARE NEW YORK GOAL 4 Know Your HIV Status

Wide disparities exist in HIV across New York City communities. This is particularly apparent in the Central Bronx, where the rate of HIV diagnoses is twice the NYC overall rate, and the rate of people living with HIV/AIDS in the community is also twice the rate in NYC overall.

The death rate due to HIV disease has dropped by more than half during the past decade in this community. However, in 2003-2004, the average annual HIV-related death rate in the Central Bronx was still 35% higher than the Bronx rate and more than 3 times the NYC overall rate (60/100,000 vs. 39/100,000 in the Bronx and 18/100,000 in NYC).

## Death rate due to HIV

HIV-related death rates in the Central Bronx are much higher than in NYC overall but have dropped dramatically in the past decade



## HIV/AIDS in 2004

Total HIV diagnoses per 100,000 people\* (13+)

Central Bronx	112
Bronx	86
New York City	55

% HIV diagnosed concurrently with AIDS\*\* (13+)

Central Bronx	33%
Bronx	30%
New York City	29%

People living with HIV/AIDS per 100,000 people\*(13+)

Central Bronx	2,882
Bronx	2,017
New York City	1,419

\*Rates are age-adjusted.  
\*\*Within 31 days of HIV diagnosis – crude percents  
Data Source and Analysis: HIV Epidemiology Program, NYC DOHMH, 2004

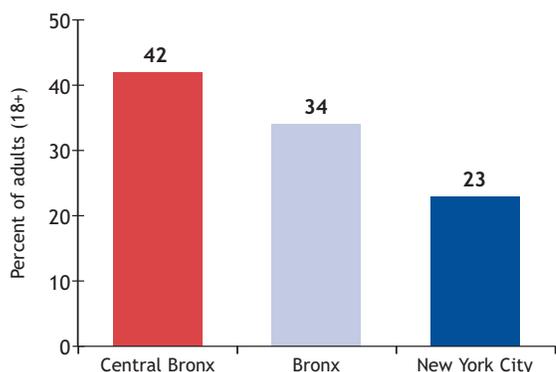
## HIV/AIDS testing and prevention

Everyone should know their HIV status. However, an estimated one quarter of New Yorkers living with HIV do not know they are infected, delaying treatment and increasing the risk that they will transmit the disease to others. Central Bronx residents are more likely to be tested for HIV than those in New York City overall (42% vs. 23%). However, one third of HIV positive test results (33%) are “late” diagnoses (HIV has already progressed to AIDS) in this community.

The most common way people get HIV is through sexual contact, and having multiple sex partners increases the risk of HIV. Condoms offer protection from HIV when engaging in sexual activities. Only 4 in 10 (41%) Central Bronx adults who had more than 1 sex partner in the past year reported using a condom at their last sexual encounter.

### HIV testing

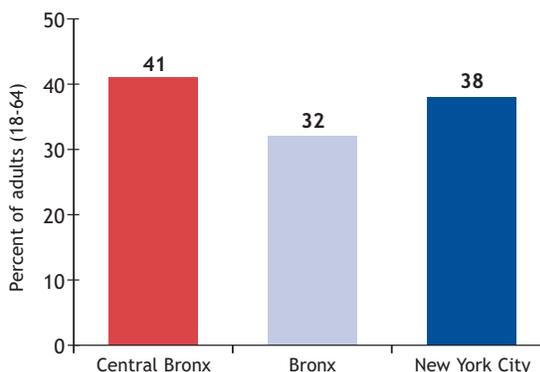
Central Bronx adults are more likely to have had an HIV test in the past year than those in NYC overall



Percents are age-adjusted.  
Data Source: NYC Community Health Survey 2003

### Condom use at last sexual encounter

Less than half of Central Bronx adults with multiple sex partners used a condom



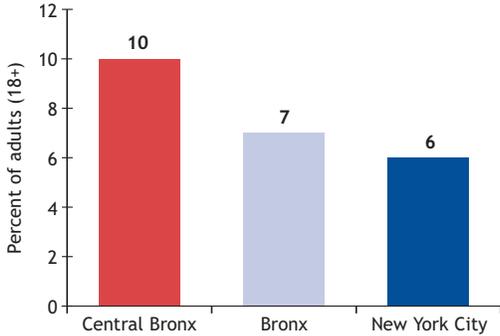
Analysis limited to adults aged 18-64 who reported having >1 sex partner in the past year, excluding women who reported having sex only with women. Percents are age-adjusted.  
Data Source: NYC Community Health Survey 2002-03-04



# GOAL 5 Get Help for Depression

## Psychological distress

One in 10 adults in the Central Bronx suffers from serious psychological distress



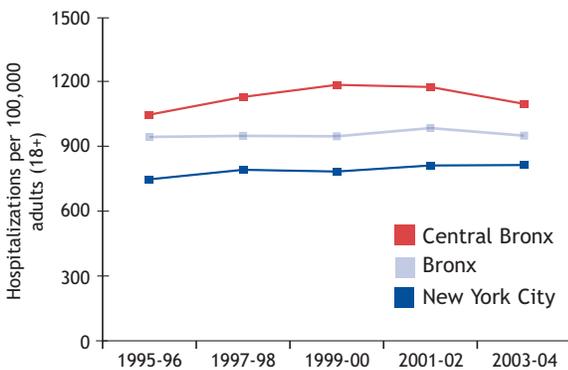
Serious psychological distress can be identified in individuals using Kessler's K6 scale, a validated measure consisting of 6 simple questions about mood. Percents are age-adjusted.  
Data Source: NYC Community Health Survey 2002-03

Depression is a serious but treatable health condition that frequently goes undiagnosed. Serious psychological distress is associated with depression and other mental illnesses.

Central Bronx residents are more likely to experience serious psychological distress than those in NYC overall (10% vs. 6%).

## Mental illness

Hospitalizations for mental illness are higher in the Central Bronx



Rates are age-adjusted.  
Data Sources: New York State Department of Health Statewide Planning and Research Cooperative System, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning

Hospitalization rates are one way to look at serious mental illness in a neighborhood. Residents in the Central Bronx have had a higher rate of mental illness hospitalizations over the past 10 years (excluding alcohol- or drug-related illness) than those in the Bronx and New York City overall.

In 2003-2004, the community's average annual rate of mental illness hospitalizations (1,096/100,000) was higher than both the Bronx rate (949/100,000) and the rate in New York City overall (813/100,000).

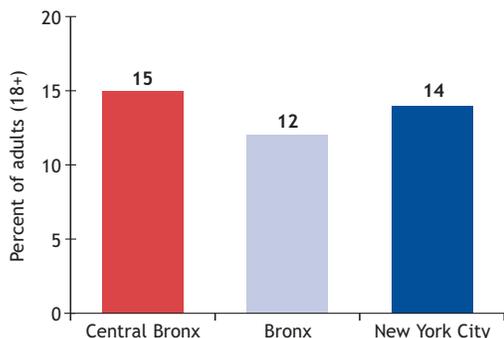
**Understanding hospitalizations and access to health care.** Hospitalization data are useful in understanding the burden that certain conditions place on the health care system, but not necessarily in measuring the exact extent of illness in a community. Variations in hospitalization rates may reflect not only differences in rates of illness, but also differences in access to health care. For example, the kinds of health institutions available to residents differ by community, as might the ability of residents to pay for those resources. If a community has a specialized residential institution for a certain type of disease, such as mental illness or stroke, people from outside that neighborhood may come to reside at this institution for care, resulting in an increase in reported hospitalizations for that disease in the community.



# GOAL 6 Live Free of Dependence on Alcohol and Drugs

## Binge drinking

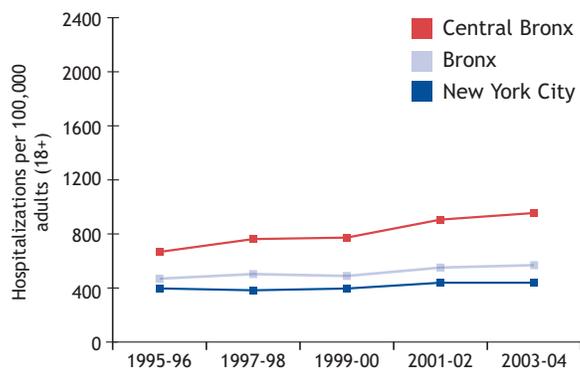
More than 1 in 7 adults in the Central Bronx engaged in binge drinking in the past month



Percents are age-adjusted. Data Source: NYC Community Health Survey 2002-03-04

## Alcohol-related hospitalizations

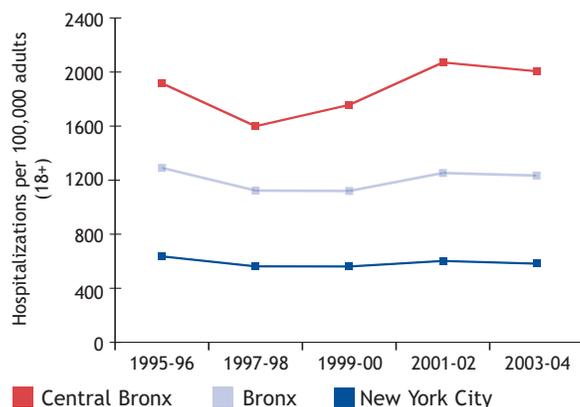
The alcohol-related hospitalization rate in the Central Bronx is double the NYC rate



Rates are age-adjusted. Data Sources: New York State Department of Health Statewide Planning and Research Cooperative System, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning

## Drug-related hospitalizations

The drug-related hospitalization rate in the Central Bronx is two times the NYC rate



Rates are age-adjusted. Data Sources: New York State Department of Health Statewide Planning and Research Cooperative System, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning

The abuse of alcohol and drugs can lead to many preventable injuries, illnesses, and deaths, including injury in motor-vehicle crashes, liver disease, and violence.

Estimates of binge drinking represent the risk of immediate alcohol-related problems, such as alcohol-poisoning, injury and violence. In the Central Bronx, 15% of adults report engaging in at least one episode of binge drinking (defined as consuming 5 or more drinks on one occasion) in the past month.

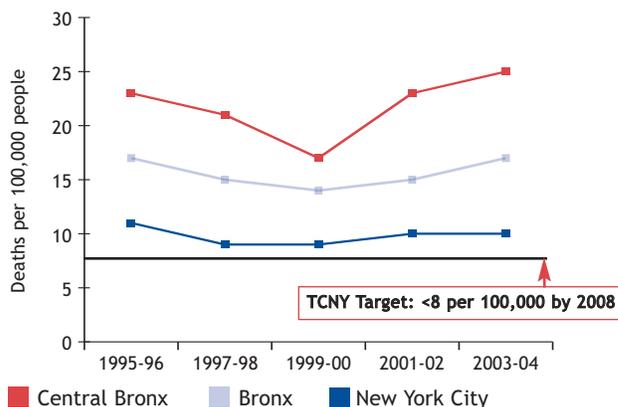
Alcohol-related hospitalizations reflect both acute and chronic (e.g., liver disease) consequences of alcohol abuse. The alcohol-related hospitalization rate in the Central Bronx has increased by more than 40% in the last decade. In 2003-2004, the average annual alcohol-related hospitalization rate in this community was higher than in the Bronx and double the New York City overall rate (955/100,000 vs. 569/100,000 in the Bronx and 439/100,000 in NYC).

The drug-related hospitalization rate in 2003-2004 was also higher (2,006/100,000) than in the Bronx (1,258/100,000) and nearly twice the rate in NYC overall (595/100,000).

The death rate due to drugs in 2003-2004 was more than twice as high in the Central Bronx as in NYC overall (25/100,000 vs. 10/100,000).

## Drug-related deaths

The drug-related death rate is twice as high in the Central Bronx as in NYC overall

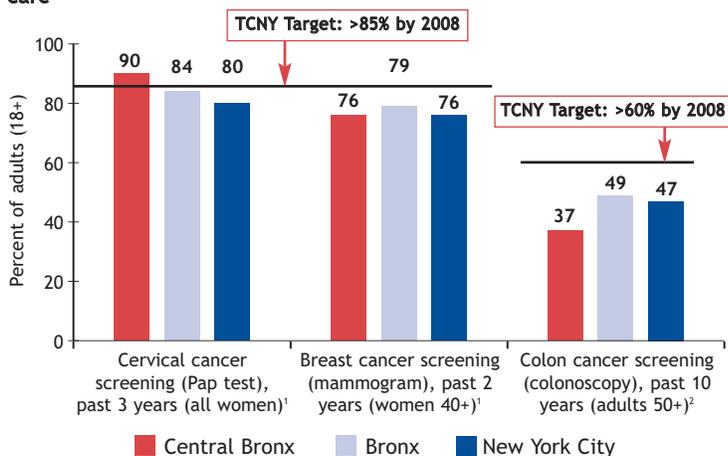


Rates are age-adjusted. Data Sources: Bureau of Vital Statistics, NYC DOHMH, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning

# TAKE CARE NEW YORK GOAL 7 Get Checked for Cancer

## Cancer screenings

Cancer screening is an important part of regular preventive health care



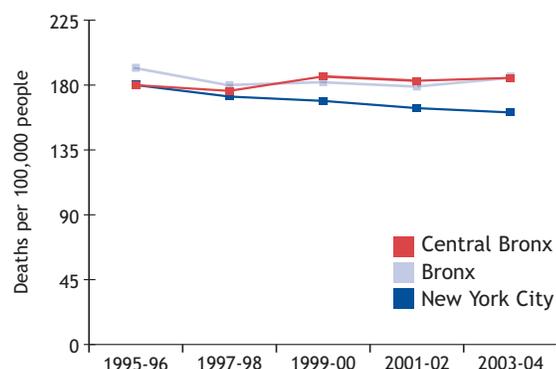
Percents are age-adjusted.  
Data Sources: <sup>1</sup>NYC Community Health Survey 2002 & 2004, <sup>2</sup>NYC Community Health Survey 2003-04

Cancer screening can save lives by preventing disease, catching cancer in its early stages and providing opportunities for treatment. TCNY has set specific screening targets for cervical, breast, and colon cancers.

Women in the Central Bronx are more likely to be getting Pap tests for cervical cancer than women in NYC overall, but their rate of mammograms for breast cancer is lower than the TCNY target of more than 85%. In addition, only about one third of adults aged 50 and older in the Central Bronx have had a colonoscopy in the past 10 years.

## Cancer deaths

The death rate due to cancer is higher in the Central Bronx than in NYC overall



Rates are age-adjusted.  
Data Sources: Bureau of Vital Statistics, NYC DOHMH, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning

The death rate due to cancer has remained fairly steady in the Central Bronx during the past decade. The 2003-2004 average annual cancer death rate was the same as the Bronx rate but 15% higher than the rate in NYC overall (185/100,000 vs. 185/100,000 in the Bronx and 161/100,000 in NYC).

**Preventing cancer and related deaths.** Individuals can reduce their risk of the most common cancers. Never smoking or quitting the habit greatly reduces the risk of lung and other cancers. High colon and breast cancer death rates highlight the importance of getting recommended screenings so treatment can begin early.

The highest cancer-related death rates among men in the Central Bronx are due to lung, prostate, and colon cancers. Among women, colon, breast, and lung cancers are the top 3 causes of cancer-related death.

Highest cancer death rates in the Central Bronx (2003-2004)					
MEN			WOMEN		
Type of Cancer	DEATHS / 100,000 PEOPLE		Type of Cancer	DEATHS / 100,000 PEOPLE	
	Central Bronx	NYC		Central Bronx	NYC
Lung, trachea, bronchus	63	51	Colorectal	29	17
Prostate	37	25	Breast	26	26
Colorectal	22	23	Lung, trachea, bronchus	23	28
Liver	16	10	Blood-related	11	12
Blood-related	16	18	Pancreas	9	9

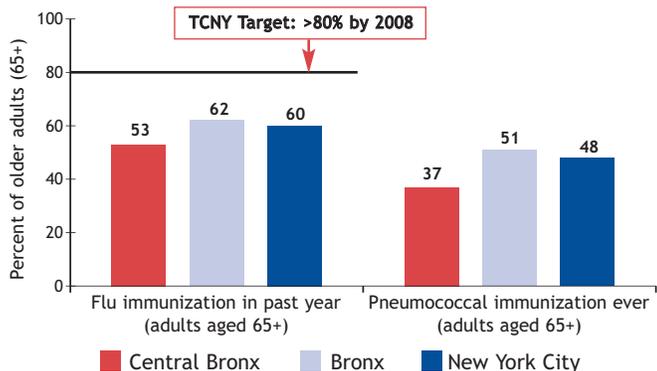
Rates are age-adjusted. Data Sources: Bureau of Vital Statistics, NYC DOHMH, 2003-2004; U.S. Census 2000/NYC Department of City Planning



## GOAL 8 Get the Immunizations You Need

### Immunizations

Flu shot rates among older adults fall below the TCNY target and pneumococcal (pneumonia) immunizations are even lower



Data Source: NYC Community Health Survey 2002-03-04

Immunizations are not just for kids. Of all the deaths that could have been prevented by vaccination, 99% occur in adults. **Take Care New York** has set a target that more than 80% of adults aged 65 and older will get an annual flu (influenza) shot by 2008. The Central Bronx flu immunization rate among older adults falls short of the TCNY target by more than 50%.

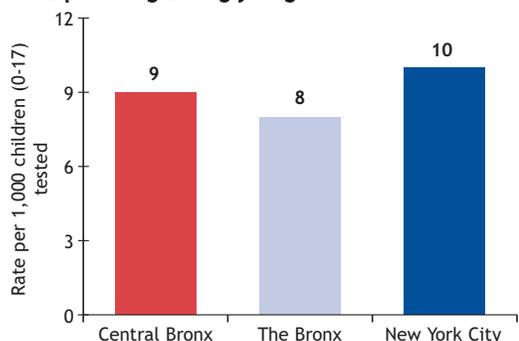
Immunization rates for pneumonia are lower than those for flu across NYC. Only about one third of older adults in the Central Bronx (37%) have ever received the pneumococcal vaccine, which protects against one common cause of pneumonia.



## GOAL 9 Make Your Home Safe and Healthy

### Childhood lead poisoning

Lead poisoning among young children continues to be a problem



Lead poisoning is defined as a blood lead level  $\geq 10$   $\mu\text{g}/\text{dL}$ .

Data Source and Analysis: Lead Poisoning Prevention Program, NYC DOHMH, 2004

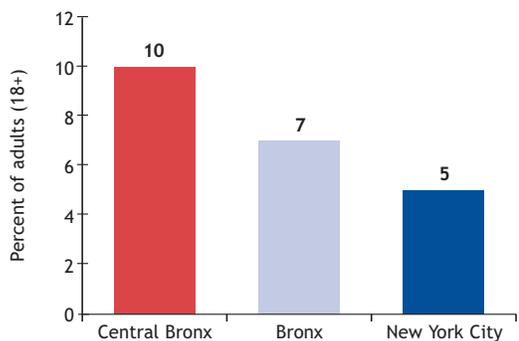
Childhood lead poisoning is a health problem that may be associated with decreased intelligence, learning and behavioral problems, and delayed growth and development. While the number of lead-poisoned children (0-17 years old) in New York City has declined dramatically over the past decade, the Health Department aims to eliminate lead poisoning by preventing children's exposure to lead-based paint and other sources of lead.

In 2004, 140 children in the Central Bronx (9/1,000) were newly identified with lead poisoning (defined as a blood lead level greater than or equal to 10  $\mu\text{g}/\text{dL}$ ).

## Asthma in Adults and Children

### Asthma

Asthma is more common in the Central Bronx than in NYC overall



Percents are age-adjusted.

Data Source: NYC Community Health Survey 2002-03-04

Conditions, or "triggers," in the home environment, such as the presence of second-hand smoke or dust, can cause asthma attacks. Some housing conditions associated with asthma triggers, such as rodent or roach infestation, are more common in some neighborhoods than others.

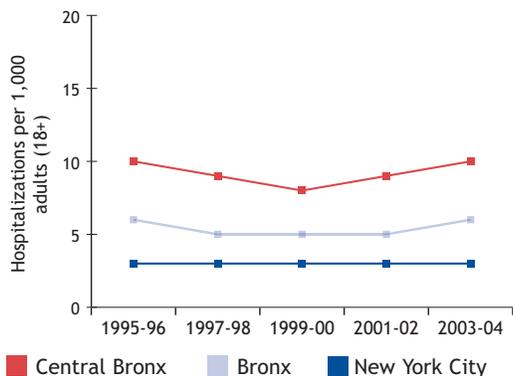
The self-reported asthma rate among adults in the Central Bronx (10%) is double the rate in New York City overall (5%).

Neighborhood asthma hospitalization rates depend in part on the percent of residents who have asthma. However, good medical management of asthma can prevent many asthma-related hospitalizations, and patients can work with health care providers to better control their asthma. Thus, the asthma hospitalization rate can also indicate poor access to health care.

Asthma hospitalization rates for adults and children (0-17 years old) in the Central Bronx are higher than in NYC overall. The average annual hospitalization rate due to adult asthma in 2003-2004 is three times the NYC overall rate (10/1,000 vs. 3/1,000). The rate among children has declined 35% in the past decade, but remains nearly double the NYC overall rate.

### Adult asthma hospitalizations

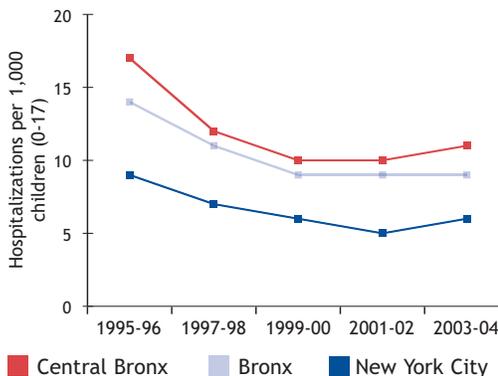
Rates of asthma hospitalization are higher in the Central Bronx than in NYC overall



Rates are age-adjusted.  
Data Sources: New York State Department of Health Statewide Planning and Research Cooperative System, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning

### Child asthma hospitalizations

The child asthma hospitalization rate has decreased but remains higher in the Central Bronx



Data Sources: New York State Department of Health Statewide Planning and Research Cooperative System, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning

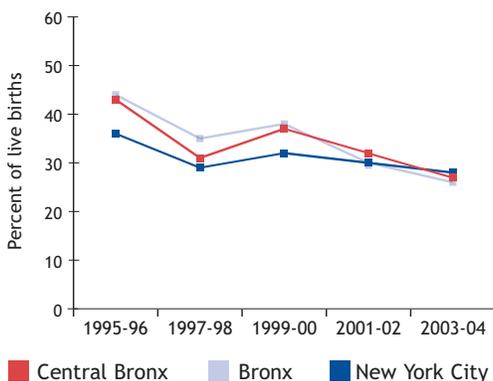
## TAKE CARE NEW YORK Goal 10 Have a Healthy Baby

The health of babies depends on the health of mothers. Good health care for pregnant women includes high quality prenatal care beginning in the first trimester of pregnancy. The average annual percent of women who received late or no prenatal care has declined in the Central Bronx from 43% in 1995-1996 to 27% in 2003-2004, meeting the NYC overall rate.

Teenage mothers and their babies face a number of risks. Pregnant teens are more likely to be poor and not complete high school than other teens, and they are more likely to have babies born with low birthweight than older women. The birth rate to teenage mothers has decreased over the past 10 years by more than 15% in the Central Bronx. However, the average teen birth rate in 2003-2004 in this community (137/1,000) was still 80% higher than in NYC overall (75/1,000).

### Prenatal care

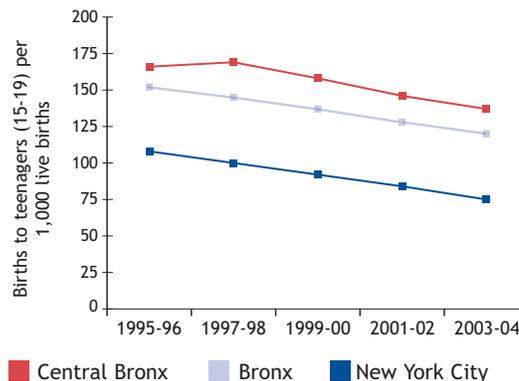
About one quarter of mothers received late or no prenatal care in New York City



Data Source: Bureau of Vital Statistics, NYC DOHMH, 1995-2004

### Teenage mothers

The birth rate to teenage mothers (15-19 years) is higher in the Central Bronx



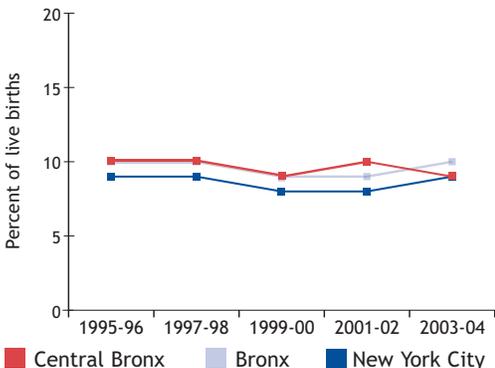
Data Source: Bureau of Vital Statistics, NYC DOHMH, 1995-2004

Babies born with low birthweight tend to have more health problems than others. In 2003-2004, the average percent of babies with low birthweight in the Central Bronx (9%) mirrors the NYC overall percent.

Infant mortality (the death of babies in the first year of life) has declined over the past 10 years in NYC. The 2002-2004 rate in the Central Bronx (8/1,000) was higher than the rate in NYC overall (6/1,000).

### Low birthweight

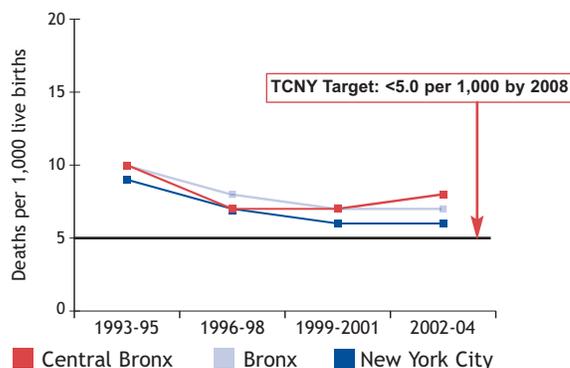
Fewer than 1 in 10 of babies in the Central Bronx is born with low birthweight



Low birthweight is defined as <2,500 grams (5.5 pounds).  
Data Source: Bureau of Vital Statistics, NYC DOHMH, 1995-2004

### Infant mortality rate (IMR)

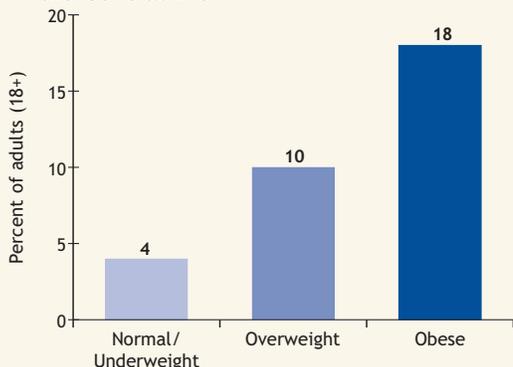
The IMR in the Central Bronx is higher than the NYC overall rate



Data Source: Bureau of Vital Statistics, NYC DOHMH, 1993-2004

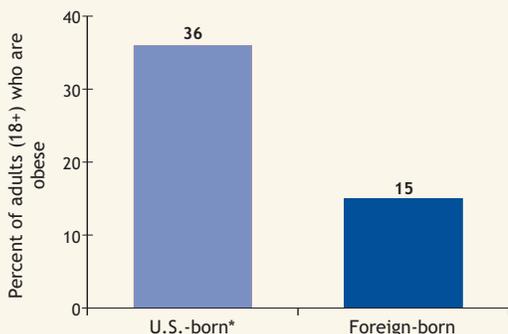
## Neighborhood Health Highlight: Overweight and Obesity

Obese adults are more likely to have diabetes in the Central Bronx



Normal/underweight=body mass index (BMI) of less than 25; Overweight=BMI 25 to less than 30; Obese=BMI of 30 or greater. Percents are age-adjusted.  
Data Source: NYC Community Health Survey 2002-03-04

U.S.-born adults are more likely to be obese than foreign-born adults in the Central Bronx



\*Includes those born in Puerto Rico and other U.S. territories. Obese is defined as a body mass index (BMI) of 30 or greater. Percents are age-adjusted.  
Data Source: NYC Community Health Survey 2002-03-04

Every New York City neighborhood has different health concerns. Here we highlight overweight and obesity in the Central Bronx.

One third of Central Bronx adults (34%) are overweight and more than a quarter (28%) are obese.

Obesity can contribute to a number of other serious health problems, including diabetes and heart disease. In the Central Bronx, obese adults are almost 6 times more likely to have diabetes than adults of normal or lower weight (18% vs. 4%).

Obesity is more common among adults born in the U.S. compared to those born elsewhere. In the Central Bronx, U.S.-born adults are more than twice as likely to be obese as foreign-born adults (36% vs. 15%).

### TAKING ACTION

Although body weight is basically a result of the balance between "calories in" and "calories out," many factors affect this balance. These factors include the availability of healthy foods and opportunities for physical activity in a neighborhood. Neighborhoods can support healthy lifestyles by making **healthy, affordable food** and **opportunities for physical activity** available to residents. In addition, individuals can work toward allotting **time for physical activity** in their schedules and having **more healthy, balanced diets**.

For information on healthy lifestyle resources, call 311.

## Technical notes

### Analyses

All analyses were conducted by the Bureau of Epidemiology Services, NYC DOHMH, unless otherwise indicated. All estimates in this report were age standardized to the Year 2000 Standard Population, except for age-specific data and mother-child health indicators. All CHS analyses were done in SUDAAN to account for complex survey design and were weighted to the New York City population according to the U.S. Census 2000.

### Data sources

*NYS DOH hospitalization data:* Includes hospitalizations of NYC residents that occurred anywhere in New York State. Patient zip code was used to classify hospitalizations into 42 neighborhoods. Data from 1995-2003 updated in April 2005; 2004 data updated in July 2005.

*Vital Statistics data:* Includes births and deaths of NYC residents that occurred within New York City. Data were combined across years to increase statistical stability and average annual rates are presented. In addition, infant mortality rates (IMR) were calculated as 3-year annual averages, and this statistic and others may differ from the presentation in "Summary of Vital Statistics" reports from the Bureau of Vital Statistics, NYC DOHMH.

*Community Health Survey data:* The NYC Community Health Survey (CHS) is an annual random-digit-dial telephone survey of approximately 10,000 adults in New York City. This profile uses the following datasets from this survey: NYC CHS 2002, NYC CHS 2003, NYC CHS 2004, NYC CHS 2002-03-04, NYC CHS 2002-03, NYC CHS 2002 & 2004 and NYC CHS 2003-04. The combined-year datasets increase statistical power, allowing for more stable analyses at the neighborhood level.

### Neighborhood Definitions

The 42 NYC neighborhoods are based on the United Hospital Fund definitions of neighborhood, which are specified by zip code. For a complete listing of all 42 neighborhoods and their zip codes, go to [nyc.gov/health](http://nyc.gov/health). The zip codes included in analyses of the Central Bronx are 10453, 10457, and 10460. Please note that some neighborhoods were combined for statistical purposes in the CHS 2002, CHS 2003 and CHS 2004 datasets to make a total of 33 (2002) or 34 (2003, 2004) neighborhoods. Central Bronx statistics from these individual-year datasets include data from the neighboring communities of Highbridge, Morrisania, Hunts Point, and Mott Haven.

### Avoidable Hospitalizations

Data based on Ambulatory Care Sensitive Conditions (called "avoidable hospitalizations" in this report) were calculated using the Agency for Healthcare Research and Quality (AHRQ) classification of inpatient hospitalization data. Conditions in the overall measure include: Diabetes Short-term Complications Admission Rate, Diabetes Long-term Complications Admission Rate, Pediatric Asthma Admission Rate, Chronic Obstructive Pulmonary Disease Admission Rate, Pediatric Gastroenteritis Admission Rate, Hypertension Admission Rate, Congestive Heart Failure Admission Rate, Dehydration Admission Rate, Bacterial Pneumonia Admission Rate, Urinary Tract Infection Admission Rate, Angina without Procedure Admission Rate, Uncontrolled Diabetes Admission Rate, Adult Asthma Admission Rate, and Rate of Lower-extremity Amputation among Patients with Diabetes.

### Significance Testing

For all data, 95% confidence limits were calculated for neighborhood, borough, and NYC estimates. If these ranges did not overlap, a significant difference was inferred. This is a conservative measure of statistical difference. This methodology also was used to examine differences between years in neighborhood trend data. *Only robust findings found to be statistically significant are discussed in the text.* In addition, all NYC CHS estimates were evaluated for statistical stability using the relative standard error (RSE). Those estimates with an RSE > .30 are flagged in graphs, "Estimate is unstable due to small sample size and should be interpreted with caution."

### TCNY report card

The neighborhood was classified according to where it ranked in comparison to the other 41 NYC neighborhoods with Above Average = rankings 1-10, Average = rankings 11-32, and Below Average = rankings 33-42 where 1 = the best neighborhood score. Rankings were computed by combining (or in some cases, using only one indicator) standardized measures (z-scores) of the following health indicators for each TCNY goal: TCNY#1 - primary care provider, insurance, ED visits; TCNY#2 - current smokers; TCNY#3 - diabetes, obesity, exercise, heart disease hospitalizations, heart disease mortality; TCNY#4 - HIV testing, AIDS mortality; TCNY#5 - serious psychological distress, mental illness hospitalizations; TCNY#6 - binge drinking, alcohol-related hospitalizations, drug-related hospitalizations, drug-related mortality; TCNY#7 - cervical cancer screening, breast cancer screening, colon cancer screening, cancer mortality; TCNY#8 - flu immunization; TCNY#9 - child lead poisoning, adult asthma rates; TCNY#10 - prenatal care, teenage mothers, low birthweight, infant mortality.

*Cover Photograph: Cross Bronx Expressway, Bronx. Photo by Mary Freeman. Maps by Susan Resnick.*

*Thank you to all the individuals who contributed to these reports: Sonia Angell, Fatima Ashraf, Birgit Bogler, Shadi Chamany, Louise Cohen, Lorna Davis, Erica Desai, Tamara Dumanovsky, Donna Eisenhower, Jennifer Ellis, Tim Frasca, Stephen Friedman, Renu Garg, Chris Goranson, Leena Gupta, Charon Gwynn, David Hanna, Kelly Henning, Mary Huynh, John Jasek, Qun Jiang, Deborah Kaplan, Adam Karpati, Elizabeth Kilgore, Marty Kim, Vani Kurup, Brooke Levinson, Cortnie Lowe, Jingsong Lu, Xiaowu Lu, Jenna Mandel-Ricci, Thomas Matte, Tina McVeigh, Rachel Miller, Trang Nguyen, Leze Nicaaj, Preeti Pathela, Robyn Philburn, Jane Plapinger, Chitra Ramaswamy, Judy Sackoff, Julia Schillinger, Tejinder Singh, Sally Slavinski, Catherine Stayton, Parisa Tehranifar, William Vaughn, Joshua Volle, Joyce Weinstein, Kellee White, Candace Young, and Regina Zimmerman.*

# Community Health Profile for the Central Bronx

This report is an updated, expanded second edition of the 2002 Community Health Profile for the Central Bronx.

## NEW IN THE SECOND EDITION:

- Take Care New York report card
- Time-trend data on births, hospitalizations, and deaths
- More neighborhood-specific health statistics
- Robust estimates from data through 2004

First and second edition reports on all 42 New York City neighborhoods are available from the New York City Department of Health and Mental Hygiene online or by mail.

Web: [nyc.gov/health](http://nyc.gov/health)  
Click on "My Community's Health"

Email: [profiles@health.nyc.gov](mailto:profiles@health.nyc.gov)

Mail:  
**Community Health Profiles**  
**New York City Department of Health and Mental Hygiene**  
**Division of Epidemiology**  
**125 Worth Street, Room 315, CN-6**  
**New York, NY 10013**

For more information about health issues  
in this report,  
please call 311.

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