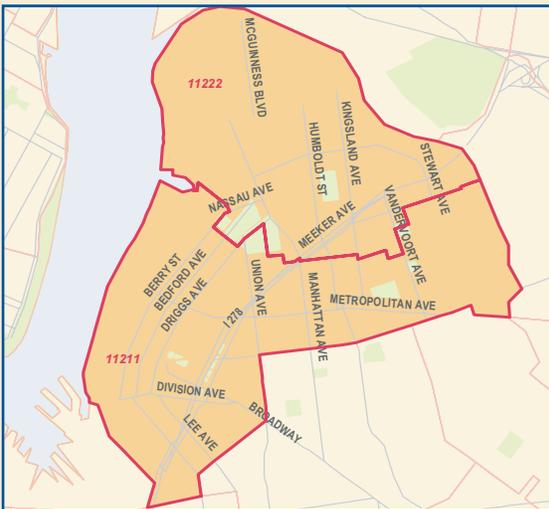


# Community Health Profiles

New York City Department of Health and Mental Hygiene

SECOND EDITION — 2006



TAKE CARE

## Greenpoint

*Brooklyn*

# Community Health Profile, Second Edition: Greenpoint

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 **Greenpoint** include:

- Greenpoint adults are less likely to have a primary health care provider than adults in Brooklyn and NYC overall (page 5).
- Greenpoint has one of the highest proportions of residents who suffer from psychological distress among all NYC neighborhoods (pages 9, 14).
- Mothers in Greenpoint are less likely to have received timely prenatal care than moms in Brooklyn and NYC overall (page 13).

**Methods:** While this report provides important information, it is not intended to be an exhaustive examination of the health of Greenpoint 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).

## Greenpoint at a Glance

### Population

Total number of people living in Greenpoint in 2000:

**124,400**

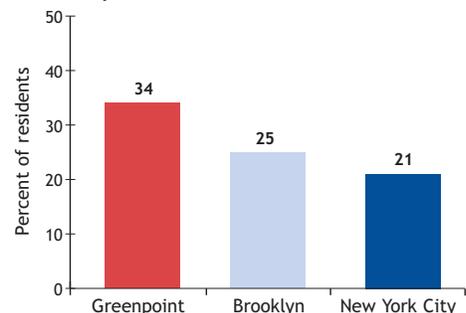
### Age

People in Greenpoint are slightly younger than in New York City overall

	Greenpoint	Brooklyn	NYC
0-17 years	28%	27%	24%
18-24 years	12%	10%	10%
25-44 years	31%	31%	33%
45-64 years	19%	21%	21%
65+ years	10%	11%	12%

### Poverty

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



### Education

Greenpoint residents aged 25 and older are less likely to have completed some college education than those in Brooklyn and NYC overall

	Greenpoint	Brooklyn	NYC
Up to 8th grade	18%	13%	12%
Some high school, no diploma	22%	18%	16%
High school diploma	26%	27%	25%
Some college, no degree	15%	20%	20%
College graduate	19%	22%	27%

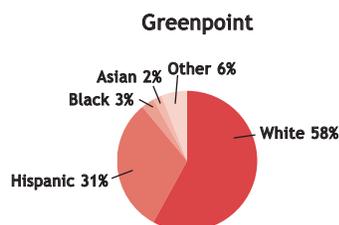
### Foreign-born

One third of Greenpoint residents were born outside the U.S. — similar to NYC overall

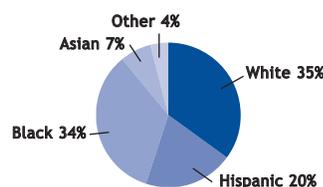
Area	Greenpoint	Brooklyn	NYC
Percent of residents	34%	38%	36%

### Race / Ethnicity

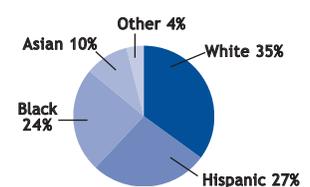
Greenpoint has a higher proportion of white residents than Brooklyn and NYC overall



### Brooklyn



### NYC



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

# Take Care Greenpoint



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 Greenpoint 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 Greenpoint 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

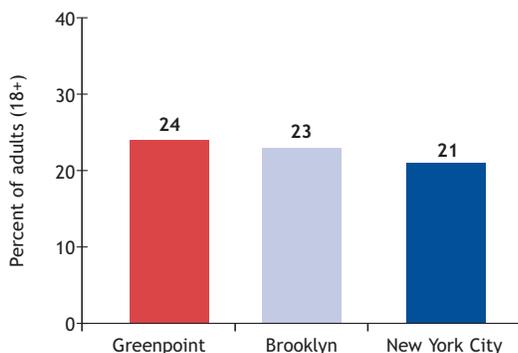
Greenpoint ranks as average on most indicators when compared to the 41 other NYC neighborhoods

	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

One quarter of adults in Greenpoint consider themselves to be in fair or poor health



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

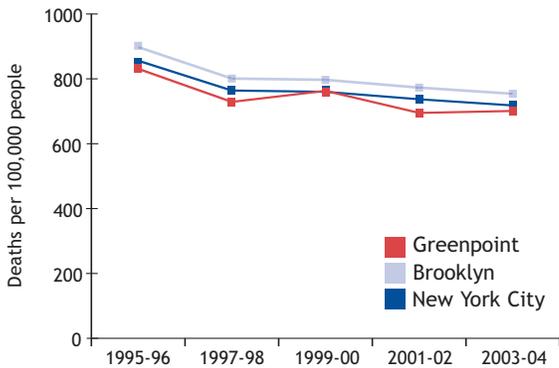
People are good at rating their own health. In general, when asked to rate their general health as excellent, very good, good, fair, or poor, those who say “fair” or “poor” are more likely to have health problems than those who report better health.

In Greenpoint, about 1 in 4 residents reports being in fair or poor health (24%).

# Overall Death Rates in Greenpoint

## Death rates

In Greenpoint, the death rate has dropped in the past 10 years



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 Greenpoint decreased by 15% in the past decade, mirroring the rate drop in New York City overall.

In 2003-2004, the average annual death rate in Greenpoint was slightly lower than in Brooklyn but similar to the rate in New York City overall (701/100,000 vs. 754/100,000 in Brooklyn 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.

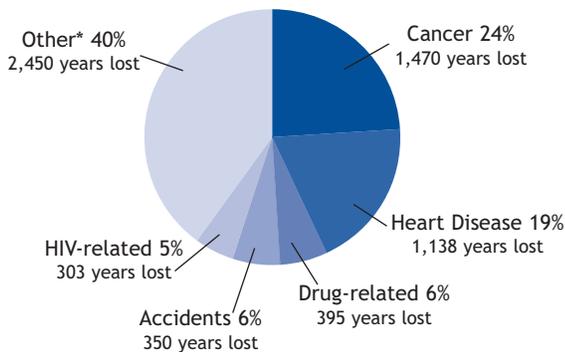
## Premature death

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 Greenpoint is cancer, as well as in both Brooklyn and New York City overall.

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

Cancer causes the most years of potential life lost in Greenpoint

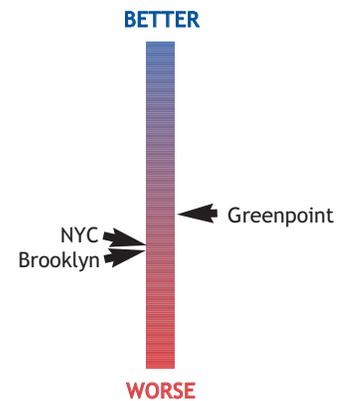


\*Other includes Suicide (4%), Certain Perinatal Conditions (3%), Diabetes (3%), Homicide (3%), Congenital Conditions (2%), and Other (25%).

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 Greenpoint ranks as about average (22nd) 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

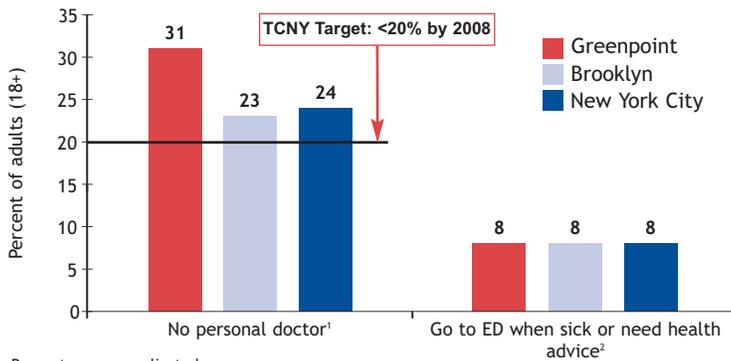
## GOAL 1 Have a Regular Doctor or Other Health Care Provider

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. In Greenpoint, residents are less likely to be without a regular doctor (31%) than those in Brooklyn (23%) and NYC overall (24%). In addition, 8% of Greenpoint residents go to the ED when they are sick or need health advice.

### Access to care

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

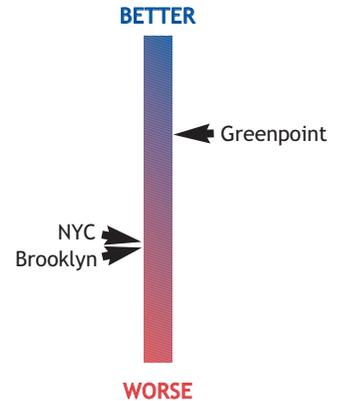


Percents are age-adjusted.

Data Sources: <sup>1</sup>NYC Community Health Survey 2002-03-04, <sup>2</sup>NYC Community Health Survey 2003-04

### Avoidable hospitalizations

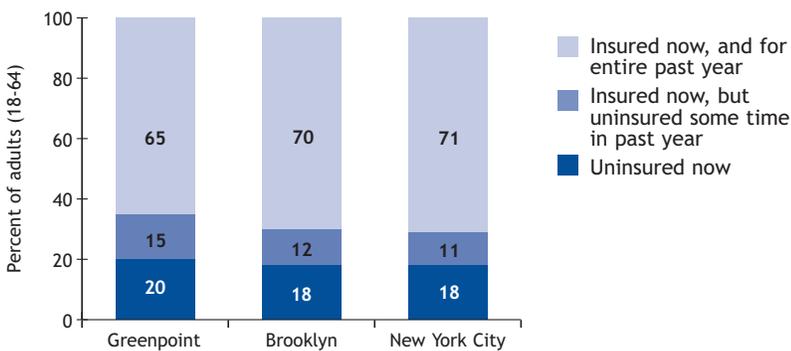
The 2004 avoidable hospitalization rate in Greenpoint ranks 17th among 42 NYC neighborhoods



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

More than 1 in 3 adults in Greenpoint are uninsured or went without health insurance during the past year



Insurance rates are calculated for adults aged 18-64 and age-adjusted.

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

Health insurance is important for access to health care. Similar proportions of residents in Greenpoint (20%), Brooklyn (18%) and New York City overall (18%) are currently uninsured. In addition, another 15% of residents in this community went without health insurance at some time during the past year.

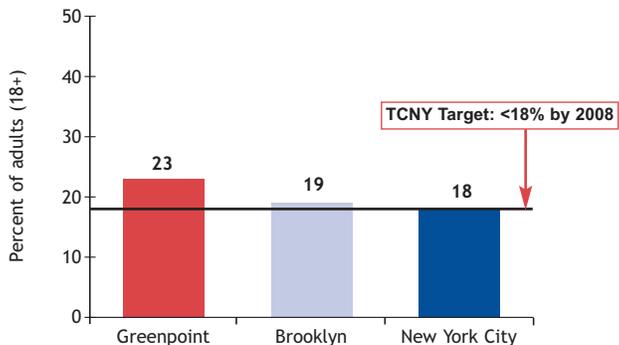


## GOAL 2 Be Tobacco-Free

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. More than one fifth of Greenpoint residents (23%) currently smoke. Many methods to quit smoking are available, and more than half of smokers in Greenpoint (59%) are trying to kick the habit.

### Residents who smoke

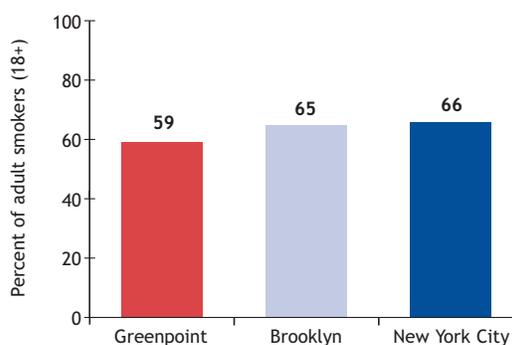
More than 1 in 5 adults in Greenpoint smoke . . .



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

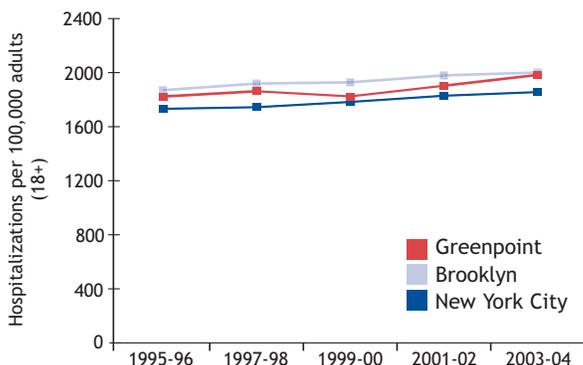


## GOAL 3 Keep Your Heart Healthy

Heart disease can cause severe illness and death. Greenpoint residents had an average annual heart disease hospitalization rate in 2003-2004 that was similar to the Brooklyn rate but higher than the rate in NYC overall (1,983/100,000 vs. 2,001/100,000 in Brooklyn and 1,856/100,000 in NYC). Also, the heart disease hospitalization rate in this community has increased slightly in the past decade. In contrast, the heart disease death rate has decreased slightly, and in 2003-2004, the rate (288/100,000) was lower than the rate in Brooklyn (326/100,000) and similar to the NYC overall rate (297/100,000).

### Heart disease hospitalizations

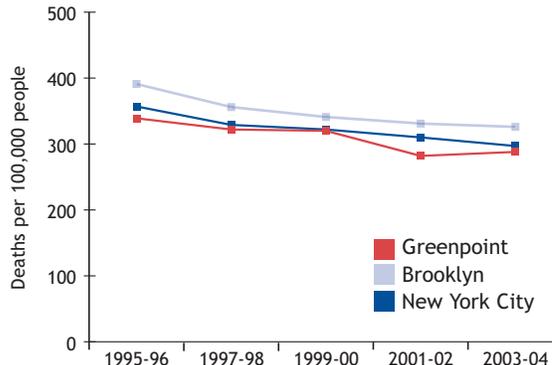
The heart disease hospitalization rate is higher in Greenpoint than in NYC overall



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

### Deaths due to heart disease

The heart disease death rate in Greenpoint is lower than in Brooklyn overall



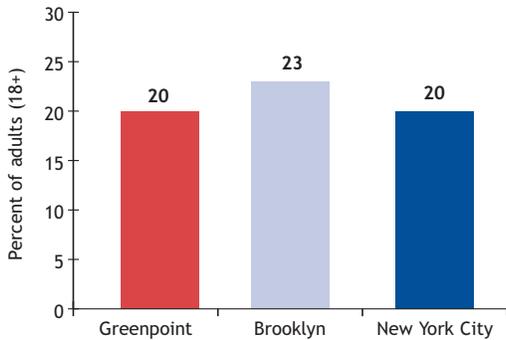
Rates are age-adjusted.  
Data Sources: Bureau of Vital Statistics, NYC DOHMH, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning

**High blood pressure and high cholesterol.** Both of these conditions contribute to heart disease. In Greenpoint, 28% of adults were told by a health care professional that they have high blood pressure (the same as in Brooklyn and similar to 26% in NYC overall), and almost one quarter (22%) were told that they have high cholesterol (similar to 26% in Brooklyn and NYC overall).

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

## Obesity

### One in 5 adults in Greenpoint is obese



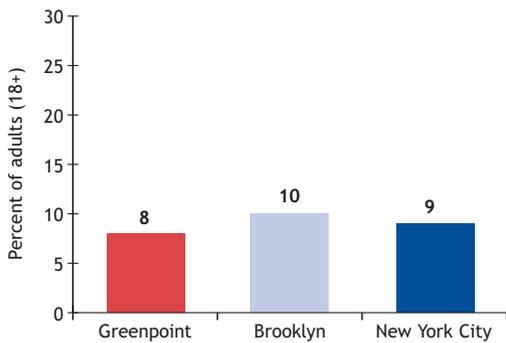
Obesity is defined as a body-mass-index (BMI) of 30 or greater. Percents are age-adjusted.  
Data Source: NYC Community Health Survey 2002-03-04

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 Greenpoint, one fifth of adults are obese — the same proportion as in New York City overall (20%).

## Diabetes

### Nearly 1 in 10 adults in Greenpoint has diabetes



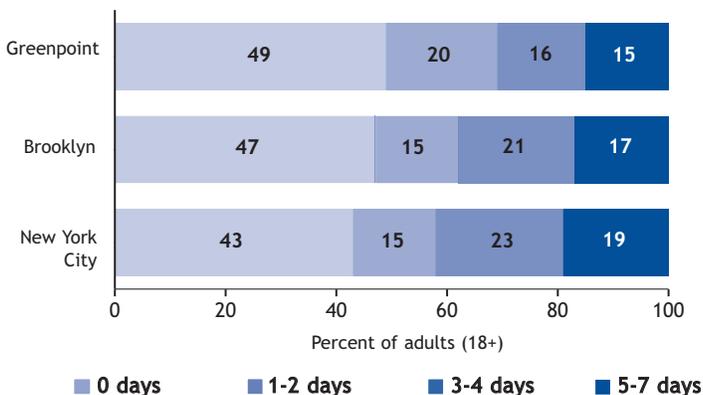
Percents are age-adjusted.  
Data Source: NYC Community Health Survey 2002-03-04

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 Greenpoint, 8% of adults have diabetes.

## Days per week of recreational exercise

### Fewer than 1 in 3 adults in Greenpoint are meeting physical activity recommendations



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. Nearly half of Greenpoint residents (49%) report doing no physical activity at all. Only about one third of residents in this community report exercising at least 3 days a week (31%).

### 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.



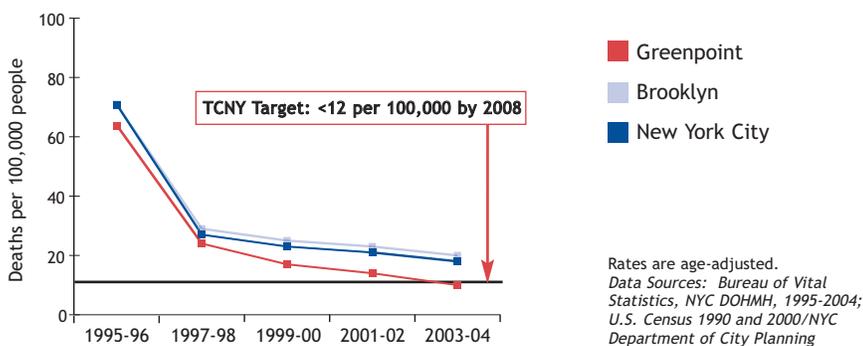
## GOAL 4 Know Your HIV Status

Wide disparities exist in HIV across New York City communities. In Greenpoint, the rate of HIV diagnoses (28/100,000) and the rate of people living with HIV/AIDS (903/100,000) are lower than the rates in Brooklyn and NYC overall.

The death rate due to HIV disease has dropped by 85% during the past decade in this community. In 2003-2004, the average annual HIV-related death rate in Greenpoint was about half both the Brooklyn and NYC overall rates (10/100,000 vs. 20/100,000 in Brooklyn and 18/100,000 in NYC).

### Death rate due to HIV

HIV-related death rates have dropped dramatically in the past decade and remain lower in Greenpoint



### HIV/AIDS in 2004

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

<b>Greenpoint</b>	<b>28</b>
Brooklyn	50
New York City	55

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

<b>Greenpoint</b>	<b>29%</b>
Brooklyn	31%
New York City	29%

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

<b>Greenpoint</b>	<b>903</b>
Brooklyn	1,183
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

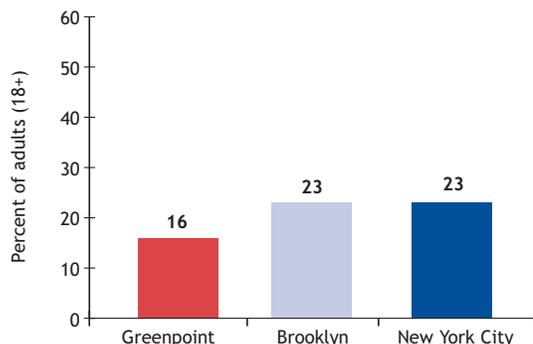
## HIV/AIDS testing and prevention

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. Greenpoint residents are less likely to be tested for HIV (16%) than those in Brooklyn (23%) and New York City overall (23%). In addition, nearly one third of positive HIV test results (29%) 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. Less than half (45%) of Greenpoint adults who had more than 1 sex partner in the past year reported using a condom at their last sexual encounter.

### HIV testing

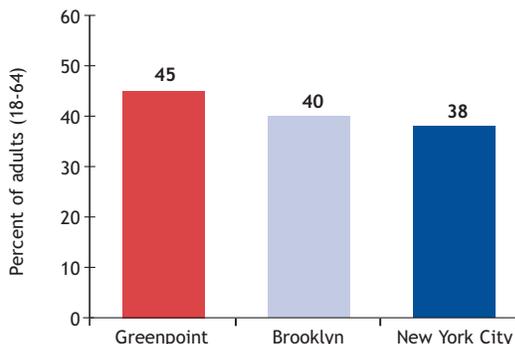
Greenpoint adults are less likely to have had an HIV test in the past year



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

### Condom use at last sexual encounter

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



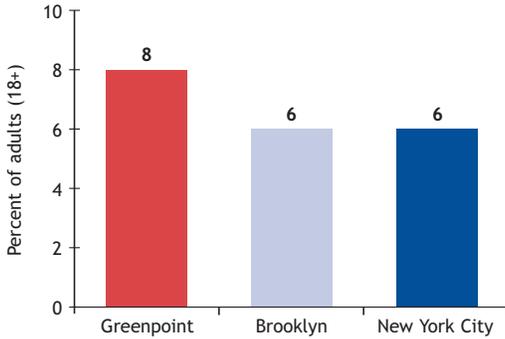
Analysis limited to adults aged 18-64 who reported having >1 sex partner in the past year, excluding women who reported having sex only with women.  
Percents are age-adjusted.  
Data Source: NYC Community Health Survey 2002-03-04



# GOAL 5 Get Help for Depression

## Psychological distress

One in 12 adults in Greenpoint suffers from serious psychological distress



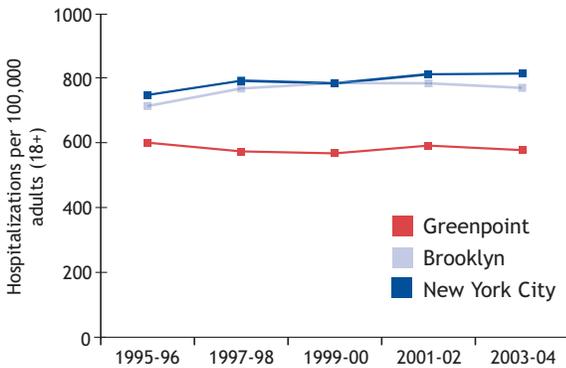
Serious psychological distress can be identified in individuals using Kessler's K6 scale, a validated measure consisting of 6 simple questions about mood. Percents are age-adjusted.  
Data Source: NYC Community Health Survey 2002-03

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

In Greenpoint, 8% of residents experience serious psychological distress.

## Mental illness

Hospitalizations for mental illness are lower in Greenpoint



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. The mental illness hospitalization rate has remained fairly constant in Greenpoint during the past decade and consistently lower than in Brooklyn and NYC overall.

In 2003-2004, the community's average annual rate of mental illness hospitalizations (577/100,000) was lower than both the Brooklyn rate (769/100,000) and the rate in New York City overall (813/100,000).

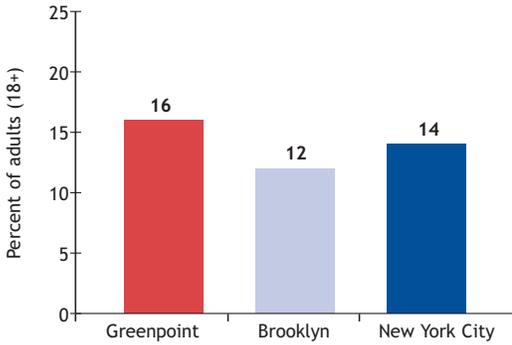
**Understanding hospitalizations and access to health care.** Hospitalization data are useful in understanding the burden that certain conditions place on the health care system, but not necessarily in measuring the exact extent of illness in a community. Variations in hospitalization rates may reflect 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

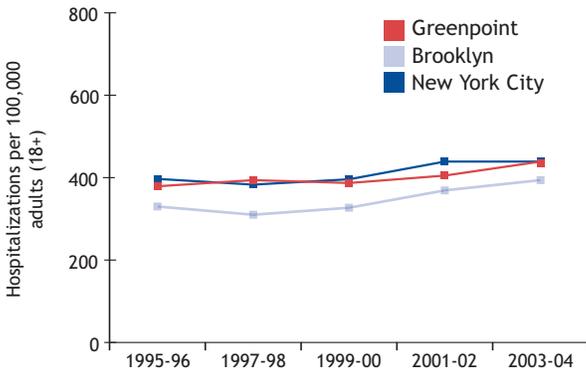
More than 1 in 7 adults in Greenpoint engaged in binge drinking in the past month



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

## Alcohol-related hospitalizations

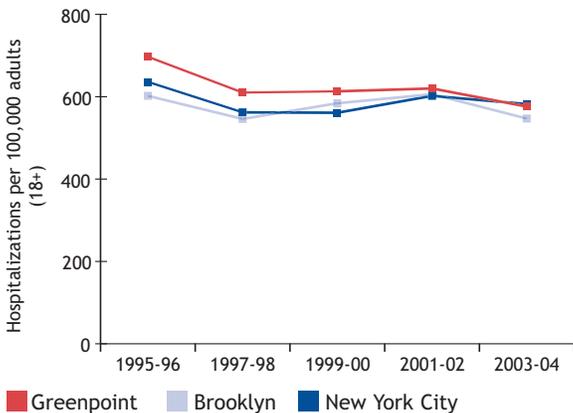
The alcohol-related hospitalization rate in Greenpoint is higher than the Brooklyn rate



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 Greenpoint has dropped in the past 10 years



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 Greenpoint, adults are more likely than those in Brooklyn overall to report engaging in at least one episode of binge drinking (defined as consuming 5 or more drinks on one occasion) in the past month.

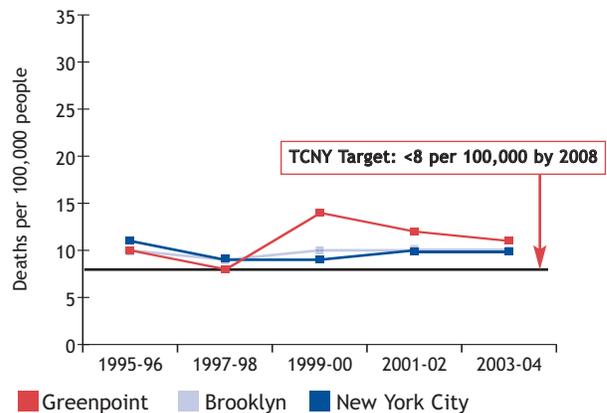
Alcohol-related hospitalizations reflect both acute and chronic (e.g., liver disease) consequences of alcohol abuse. In 2003-2004, the average annual alcohol-related hospitalization rate in Greenpoint was higher than in Brooklyn and the same as the New York City overall rate (439/100,000 vs. 394/100,000 in Brooklyn and 439/100,000 in NYC).

The drug-related hospitalization rate has decreased by more than 15% in the past decade. In 2003-2004, the Greenpoint rate (576/100,000) was similar to the rates in both Brooklyn (547/100,000) and New York City overall (595/100,000).

The 2003-2004 death rate due to drugs in Greenpoint was similar to the rate in Brooklyn and NYC overall (11/100,000 vs. 10/100,000 in Brooklyn and NYC).

## Drug-related deaths

The drug-related death rate is similar in Greenpoint to Brooklyn and NYC overall



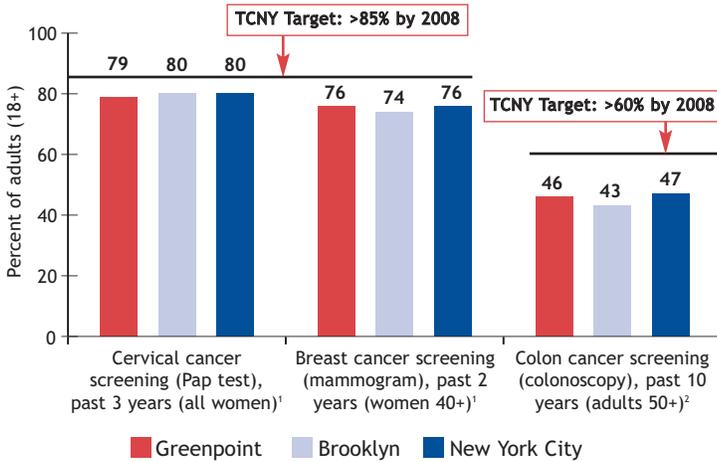
Rates are age-adjusted.  
Data Sources: Bureau of Vital Statistics, NYC DOHMH, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning



# GOAL 7 Get Checked for Cancer

## Cancer screenings

In Greenpoint, cancer screening is lower than TCNY targets



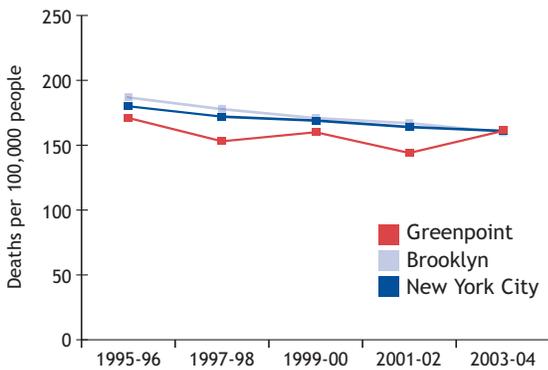
Percents are age-adjusted.  
Data Sources: <sup>1</sup>NYC Community Health Survey 2002 & 2004, <sup>2</sup>NYC Community Health Survey 2003-04

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 Greenpoint are getting Pap tests for cervical cancer and mammograms for breast cancer at rates nearing but still below the TCNY target of more than 85%. In addition, less than half of adults aged 50 and older in Greenpoint have had a colonoscopy in the past 10 years.

## Cancer deaths

The death rate due to cancer is similar in Greenpoint to Brooklyn and 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 Greenpoint during the past decade. The 2003-2004 average annual cancer death rate (161/100,000) was the same as the rates in Brooklyn and NYC overall.

**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 Greenpoint are due to lung, colon, and liver cancers. Among women, lung, breast, and colon cancers are the top 3 causes of cancer-related death.

Highest cancer death rates in Greenpoint (2003-2004)					
MEN			WOMEN		
Type of Cancer	DEATHS / 100,000 PEOPLE		Type of Cancer	DEATHS / 100,000 PEOPLE	
	Greenpoint	NYC		Greenpoint	NYC
Lung, trachea, bronchus	46	51	Lung, trachea, bronchus	27	28
Colorectal	29	23	Breast	21	26
Liver	13	10	Colorectal	15	17
Prostate	12	25	Blood-related	14	12
Blood-related	11	18	Pancreas	12	9

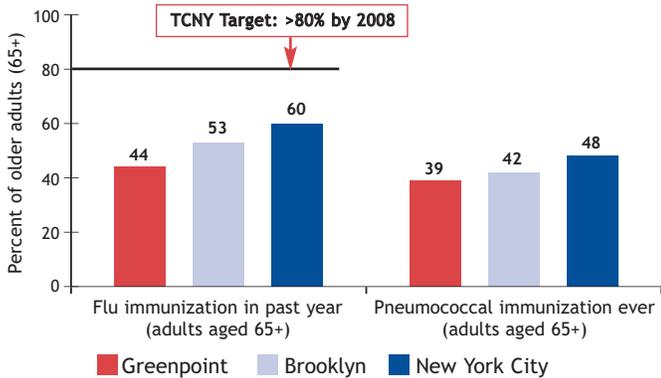
Rates are age-adjusted. Data Sources: Bureau of Vital Statistics, NYC DOHMH, 2003-2004; U.S. Census 2000/NYC Department of City Planning



## 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. Older adults in Greenpoint are less likely to have had a flu shot in the past year than those in NYC overall.

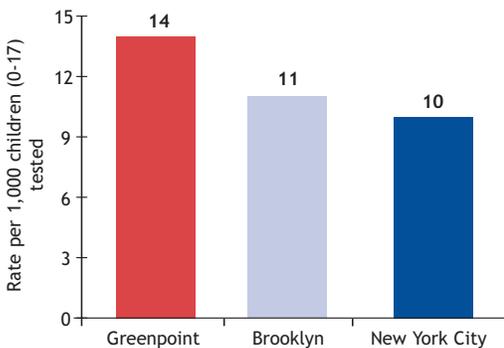
Immunization rates for pneumonia are lower than those for flu across NYC. Fewer than 4 in 10 older adults in Greenpoint have ever received the pneumococcal vaccine, which protects against one common cause of pneumonia.



## 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  $\geq 10 \mu\text{g/dL}$ .

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

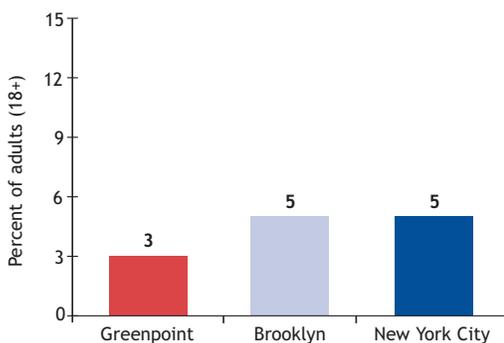
Childhood lead poisoning is a health problem that may be associated with decreased intelligence, learning and behavioral problems, and delayed growth and development. While the number of lead-poisoned children (0-17 years old) in New York City has declined dramatically over the past decade, the Health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

In 2004, 87 children in Greenpoint (14/1,000) were newly identified with lead poisoning (defined as a blood lead level greater than or equal to  $10 \mu\text{g/dL}$ ).

## Asthma in Adults and Children

### Asthma

Fewer than 1 in 20 adults in Greenpoint suffers from asthma



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.

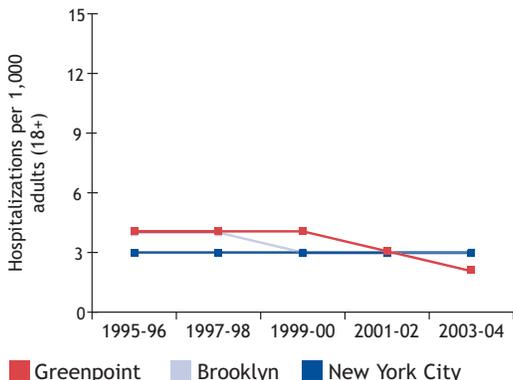
The percent of Greenpoint adults who report having asthma is similar to the percent in Brooklyn and New York City overall (3% vs. 5% in Brooklyn and NYC).

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.

The 2003-2004 annual asthma hospitalization rates for adults and children (0-17 years old) in Greenpoint are lower than in NYC overall. In addition, both rates have decreased in this community over the past decade. The rate among children is also lower than the Brooklyn rate.

### Adult asthma hospitalizations

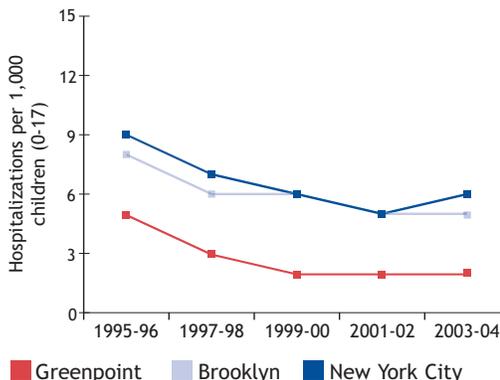
Rates of asthma hospitalization are lower in Greenpoint than in NYC overall



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 and remains lower in Greenpoint



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

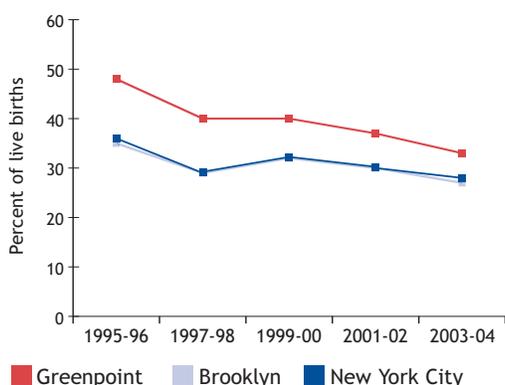
## TAKE CARE NEW YORK Goal 10 Have a Healthy Baby

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 percent of women who received late or no prenatal care has declined in Greenpoint in the past decade, but in 2003-2004, the average annual percent (33%) remains higher than in Brooklyn (27%) and NYC overall (28%).

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 mothers. The teen birth rate has decreased over the past decade by more than 50% in Greenpoint. The average annual rate in 2003-2004 in this community (41/1,000) was more than 40% lower than in Brooklyn (73/1,000) and NYC overall (75/1,000).

### Prenatal care

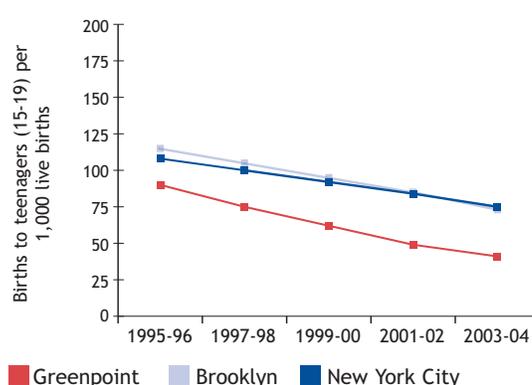
Mothers in Greenpoint are more likely to have received late or no prenatal care



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

### Teenage mothers

The birth rate to teenage mothers (15-19) is lower in Greenpoint



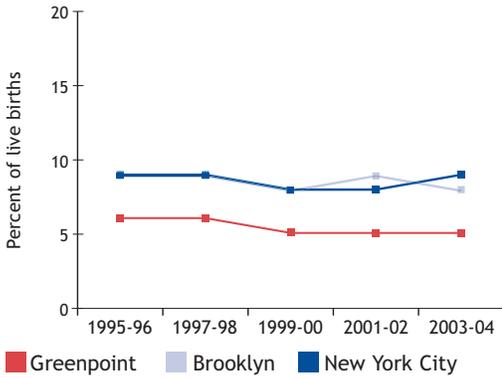
Data Source: Bureau of Vital Statistics, NYC DOHMH, 1995-2004

Babies born with low birthweight tend to have more health problems than others. In 2003-2004, the average percent of babies born with low birthweight in Greenpoint was 5% — lower than in Brooklyn (8%) and NYC overall (9%).

Infant mortality (the death of babies in the first year of life) has declined in the past 10 years in both Greenpoint and NYC overall. The 2002-2004 rate in this community (2/1,000) was lower than in Brooklyn and NYC overall, and met the TCNY target of fewer than 5/1,000.

**Low birthweight**

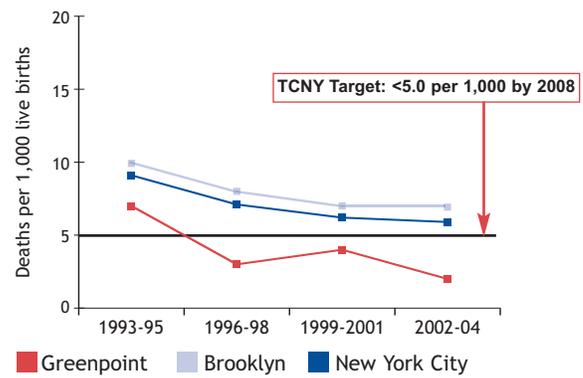
**Babies are less likely to be born with low birthweight in Greenpoint**



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)**

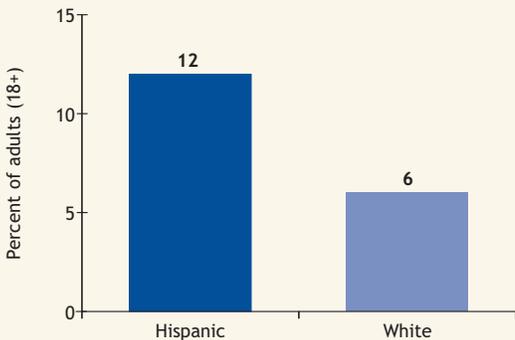
**The IMR is lower in Greenpoint than in Brooklyn and NYC overall**



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

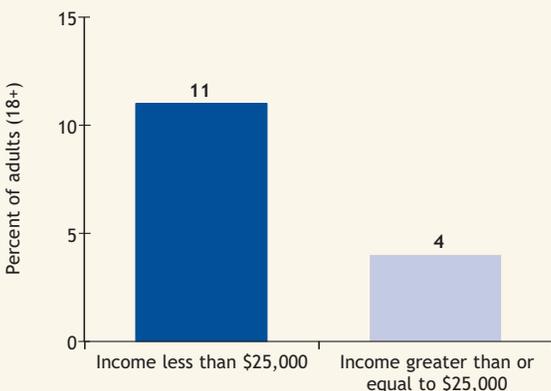
**Neighborhood Health Highlight: Psychological Distress**

**Psychological distress is highest among Hispanics in Greenpoint**



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

**Those with lower incomes in Greenpoint have higher rates of psychological distress**



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

Every New York City neighborhood has different health concerns. Here we highlight serious psychological distress in Greenpoint.

Serious psychological distress (SPD) can be used to approximate the burden of mental illness, including depression and anxiety. The rate of SPD in Greenpoint (8%) is among the highest rates in New York City.

The burden of SPD does not fall equally among the residents of this community. The majority of residents in Greenpoint are white (58%) or Hispanic (31%). The percent of SPD among Hispanics (12%) is twice the percent among whites (6%). Similarly, in NYC overall, 11% of Hispanics report SPD, compared to 4% of whites.

Serious psychological distress is also more common among lower income groups. In Greenpoint, individuals living in households with incomes of \$25,000 per year or less are more likely to have SPD than those with higher incomes (11% vs. 4%).

**TAKING ACTION**

Depression and other mental illnesses are treatable with medication and/or therapy. Feeling down or unhappy sometimes is normal, but people feeling depressed for two weeks or more should **seek out help** by talking to a doctor or **calling 1-800-LifeNet (543-3638) or 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 Greenpoint are 10211 and 10222. 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.

### 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: Looking east from Bedford and N. 11th Street, Brooklyn. Photo by Stephen Bitterolf. 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 Greenpoint

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

## 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.

## Inside

### Community-specific information on . . .

Census Data	2
TCNY Report Card	3
Death Rates	4

### Take Care New York

Have a Regular Doctor	5
Be Tobacco Free	6
Keep Your Heart Healthy	6
Know Your HIV Status	8
Get Help for Depression	9
Live Free of Dependence on Alcohol and Drugs	10
Get Checked for Cancer	11
Get the Immunizations You Need	12
Make Your Home Safe and Healthy	12
Have a Healthy Baby	13

Neighborhood Health Highlight	14
-------------------------------	----



New York City Department of Health and Mental Hygiene  
Division of Epidemiology, Bureau of Epidemiology Services, 125 Worth Street, CN-6, New York, NY 10013

Michael R. Bloomberg  
Mayor

Thomas R. Frieden, MD, MPH  
Commissioner of Health and Mental Hygiene

PRST STD  
U.S. POSTAGE  
  
PAID  
NEW YORK, N.Y.  
PERMIT NO. 6174

Copyright©2006  
The New York City Department of Health and Mental Hygiene  
NYC Community Health Profiles, Second Edition feature information about 42 neighborhoods in New York City.

*Suggested citation:* Olson EC, Van Wye G, Kerker B, Thorpe L, Frieden TR. Take Care Greenpoint. NYC Community Health Profiles, Second Edition; 2006; 8(42):1-16.

EPI1122R201