

Community Health Profile, Second Edition: The Upper West Side

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) by providing more recent and time-trend data, and a greater variety of health statistics. Key health issues on the [Upper West Side](#) include:

- Cancer is the primary cause of premature death on the Upper West Side (page 4).
- Adults on the Upper West Side are more likely to binge drink than adults in NYC overall (page 10).
- Flu and pneumonia are the third leading cause of death on the Upper West Side, and the death rate due to flu and pneumonia has risen higher than the NYC overall rate in the past 10 years (page 14).

Methods: While this report provides important information, it is not intended to be an exhaustive examination of the health of Upper West Side 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 Upper West Side at a Glance

Population

Total number of people living on the Upper West Side in 2000:

222,100

Age

People on the Upper West Side are slightly older than in New York City overall

	Upper West Side	Manhattan	NYC
0-17 years	13%	17%	24%
18-24 years	9%	10%	10%
25-44 years	40%	38%	33%
45-64 years	25%	23%	21%
65+ years	13%	12%	12%

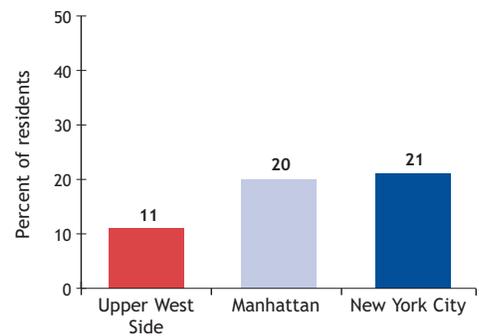
Education

Upper West Side residents aged 25 and older have completed more years of education than those in Manhattan and NYC overall

	Upper West Side	Manhattan	NYC
Up to 8th grade	5%	10%	12%
Some high school, no diploma	5%	11%	16%
High school diploma	9%	14%	25%
Some college, no degree	13%	16%	20%
College graduate	68%	49%	27%

Poverty

On the Upper West Side, the percent of residents living below the poverty level is lower than in Manhattan and NYC overall



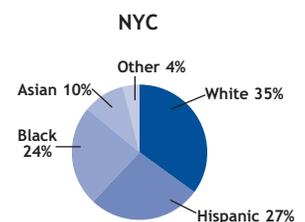
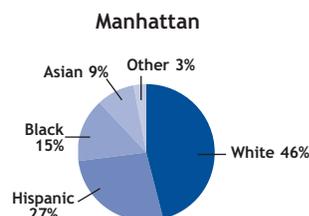
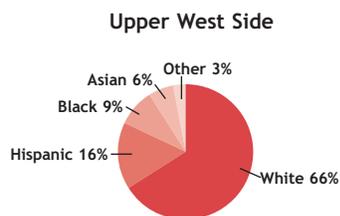
Foreign-born

The percent of Upper West Side residents born outside the U.S. is lower than in Manhattan and NYC overall

Area	Percent
Upper West Side	22%
Manhattan	29%
NYC	36%

Race / Ethnicity

The Upper West Side has a higher proportion of white residents than Manhattan and NYC overall



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

Take Care Upper West Side



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 Upper West Side 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 Upper West Side 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

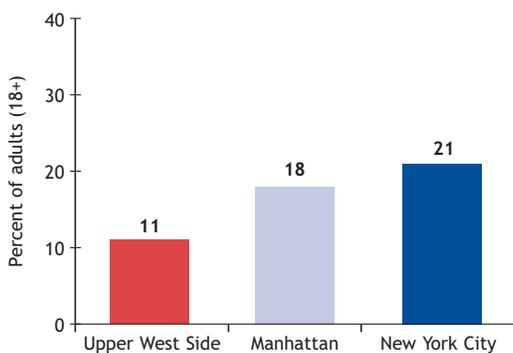
The Upper West Side ranks as average or above on all the indicators when compared to the 41 other NYC neighborhoods

	Below Average (bottom 10)	Average (middle 22)	Above Average (top 10)
Take Care New York Goals			
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

Adults on the Upper West Side are less likely to consider themselves to be in fair or poor health



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

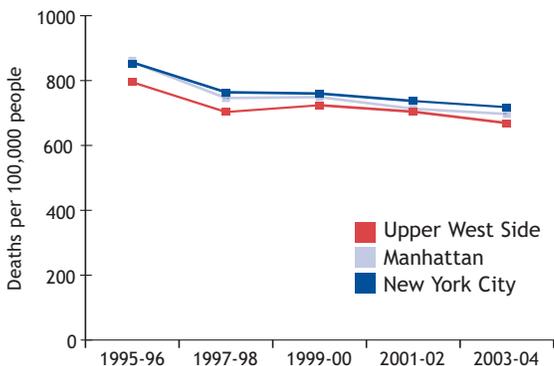
People are good at rating their own health. In general, when asked to rate their general health as excellent, very good, good, fair, or poor, those who say “fair” or “poor” are more likely to have health problems than those who report better health.

On the Upper West Side, residents are less likely to report being in fair or poor health (11%) than those in Manhattan (18%) and in New York City overall (21%).

Overall Death Rates on the Upper West Side

Death rates

On the Upper West Side, death rates have decreased 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 on the Upper West Side has decreased by 15% in the past decade, mirroring the rate drop in New York City overall.

In 2003-2004, the average annual death rate on the Upper West Side was similar to the Manhattan rate and slightly lower than in New York City overall (669/100,000 vs. 697/100,000 in Manhattan 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.

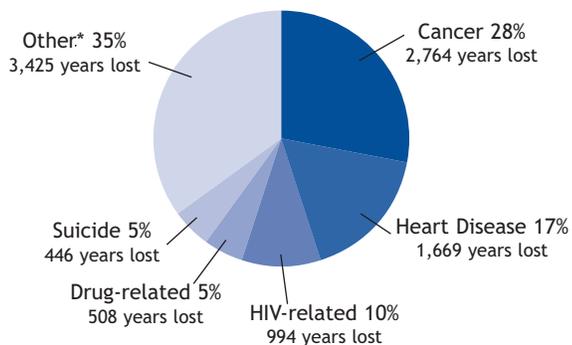
Premature death

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 on the Upper West Side is cancer, as well as in both Manhattan and New York City overall.

Top 5 causes of years of potential life lost

Cancer causes the most years of potential life lost on the Upper West Side

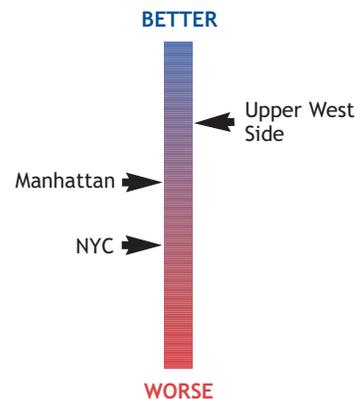


*Other includes Certain Perinatal Conditions (3%), Accidents (3%), Diabetes (2%), Pneumonia and Influenza (2%), Diseases of the Nervous System (2%), and Other (23%).

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 on the Upper West Side ranks 12th 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

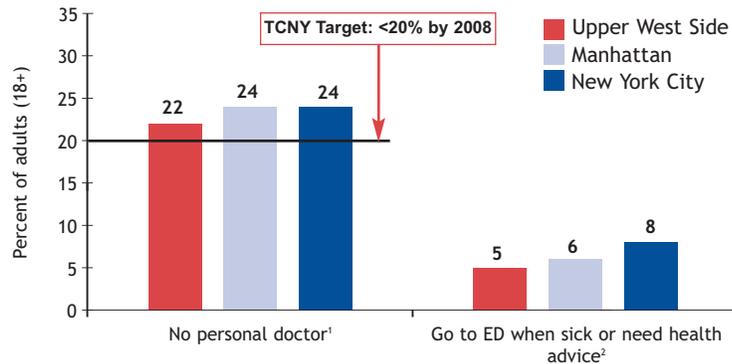
GOAL 1 Have a Regular Doctor or Other Health Care Provider

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. On the Upper West Side, 22% of residents do not have a regular doctor, compared to the TCNY goal of less than 20%. Residents in this community are less likely to go to the ED when they are sick or need health advice (5%) than those in NYC overall (8%).

Access to care

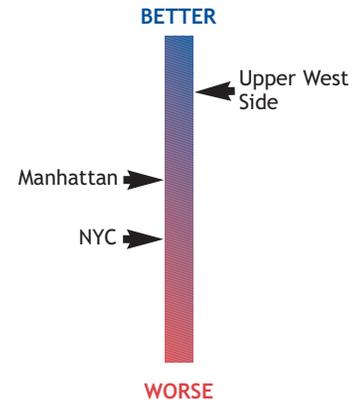
Without a primary provider, people may seek routine health care in the emergency department (ED)



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

Avoidable hospitalizations

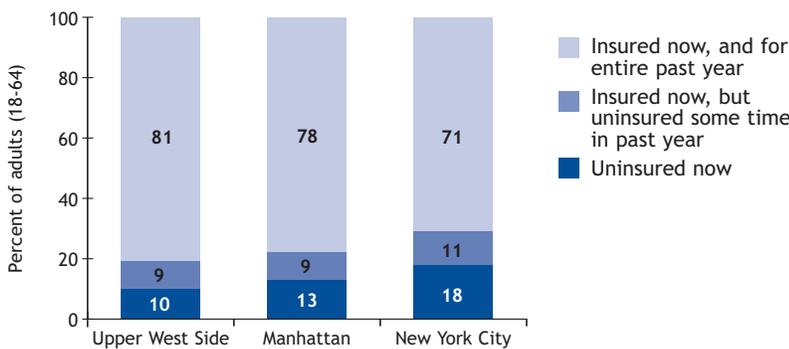
The 2004 avoidable hospitalization rate on the Upper West Side ranks well (8th) among 42 NYC neighborhoods



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

One in 5 adults on the Upper West Side is 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. Residents on the Upper West Side are less likely to be uninsured (10%) than adults in New York City overall (18%). In addition to the currently uninsured, another 9% of residents in this community went without health insurance at some time during the past year.

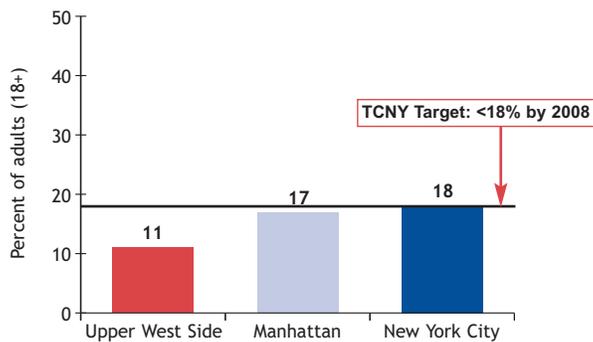


GOAL 2 Be Tobacco-Free

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. Upper West Side residents are less likely to be current smokers than adults in NYC overall (11% vs. 18%). Many methods to quit smoking are available, and 8 in 10 smokers on the Upper West Side (80%) are trying to kick the habit.

Residents who smoke

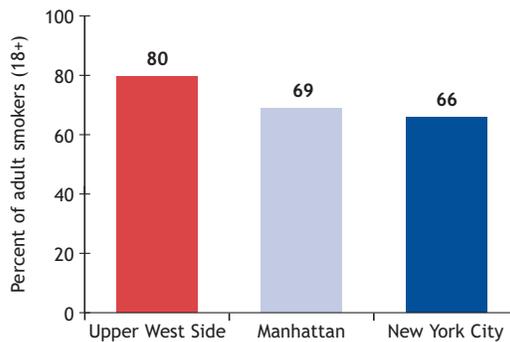
Adults on the Upper West Side are less likely to smoke than adults in NYC overall



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

Attempts to quit smoking in the past year

Most smokers are trying to quit



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

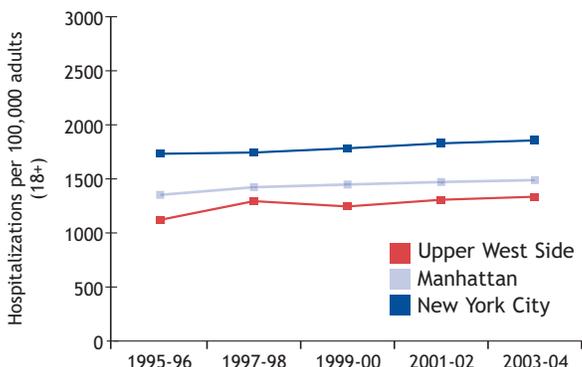


GOAL 3 Keep Your Heart Healthy

Heart disease can cause severe illness and death. Upper West Side residents had an average annual heart disease hospitalization rate in 2003-2004 that was 10% lower than the Manhattan rate and 25% lower than the rate in NYC overall (1,335/100,000 vs. 1,489/100,000 in Manhattan and 1,856/100,000 in NYC). However, the heart disease hospitalization rate in this community has increased by more than 15% in the past decade. In contrast, the heart disease death rate has decreased by more than 20% in the past 10 years, and the 2003-2004 rate (246/100,000) was similar to the rate in Manhattan (234/100,000) and slightly lower than the NYC overall rate (297/100,000).

Heart disease hospitalizations

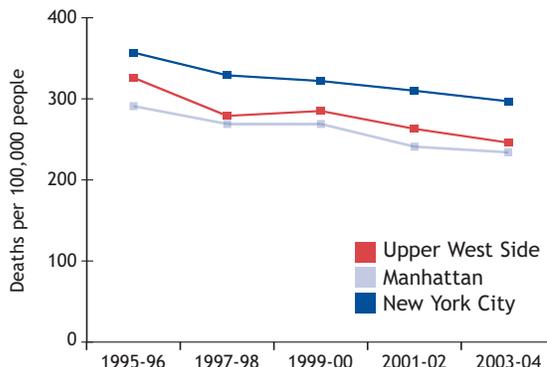
The heart disease hospitalization rate has increased but remains lower on the Upper West Side



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

Death due to heart disease is less common on the Upper West Side than in NYC overall



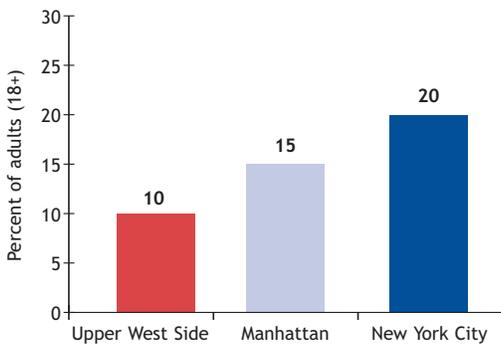
Rates are age-adjusted.
Data Sources: Bureau of Vital Statistics, NYC DOHMH, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning

High blood pressure and high cholesterol. Both of these conditions contribute to heart disease. On the Upper West Side, 22% of adults were told by a health care professional that they have high blood pressure (similar to 22% in Manhattan and 26% in NYC overall), and one quarter (24%) were told that they have high cholesterol (similar to 27% in Manhattan and 26% in NYC overall).

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

Obesity

Adults on the Upper West Side are less likely to be obese



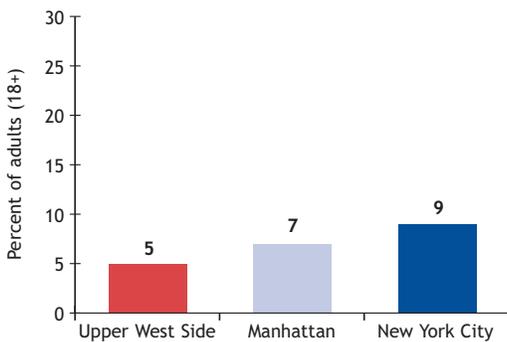
Obesity is defined as a body-mass-index (BMI) of 30 or greater. Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03-04

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. On the Upper West Side, adults are less likely to be obese (10%) than those in Manhattan (15%) and New York City overall (20%).

Diabetes

Adults on the Upper West Side are less likely to have diabetes than in NYC overall



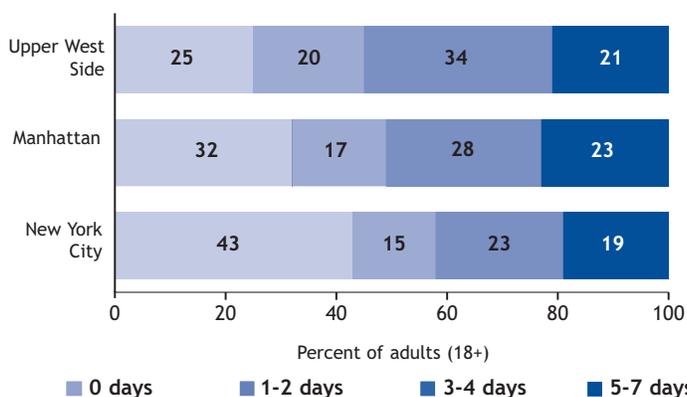
Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03-04

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.

On the Upper West Side, adults are less likely to have diabetes than in New York City overall (5% vs. 9%).

Days per week of recreational exercise

Exercise habits on the Upper West Side are more 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. Upper West Side residents are less likely to report doing no physical activity than residents in NYC overall (25% vs. 43%). Also, more than half of residents in this community (55%) 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.



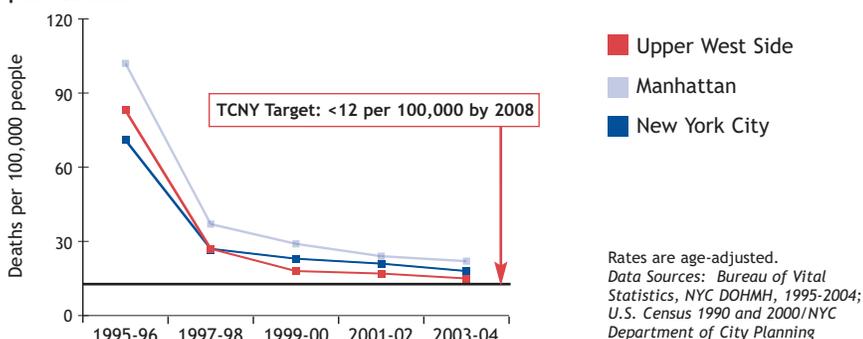
GOAL 4 Know Your HIV Status

Wide disparities exist in HIV across New York City communities. On the Upper West Side, the rate of HIV diagnoses (32/100,000) is lower than both the Manhattan and NYC overall rates. The rate of people living with HIV/AIDS in the community is lower than the Manhattan rate but higher than the rate in NYC overall.

The death rate due to HIV disease has dropped by 80% during the past decade in this community. In 2003-2004, the average annual HIV-related death rate on the Upper West Side was slightly lower than the Manhattan rate and similar to the NYC overall rate (15/100,000 vs. 22/100,000 in Manhattan and 18/100,000 in NYC).

Death rate due to HIV

HIV-related death rates on the Upper West Side have dropped dramatically in the past decade



HIV/AIDS in 2004

Total HIV diagnoses per 100,000 people* (13+)	
Upper West Side	32
Manhattan	69
New York City	55
% HIV diagnosed concurrently with AIDS** (13+)	
Upper West Side	15%
Manhattan	23%
New York City	29%
People living with HIV/AIDS per 100,000 people* (13+)	
Upper West Side	1,450
Manhattan	2,102
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

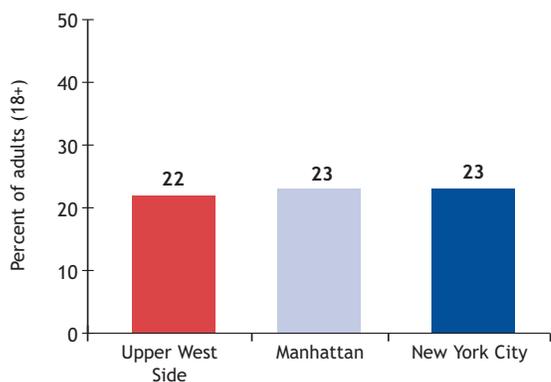
HIV/AIDS testing and prevention

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. Only about one fifth of Upper West Side residents (22%) have been tested for HIV in the past year. In addition, 15% of positive HIV test results are “late” diagnoses (HIV has already progressed to AIDS) on the Upper West Side.

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 one third (33%) of Upper West Side adults who had more than 1 sex partner in the past year reported using a condom at their last sexual encounter.

HIV testing

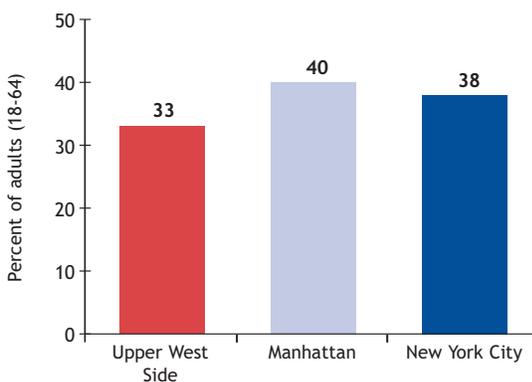
Only about 1 in 5 Upper West Side adults has had an HIV test in the past year



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

Condom use at last sexual encounter

Only 1 in 3 Upper West Side adults with multiple sex partners used a condom



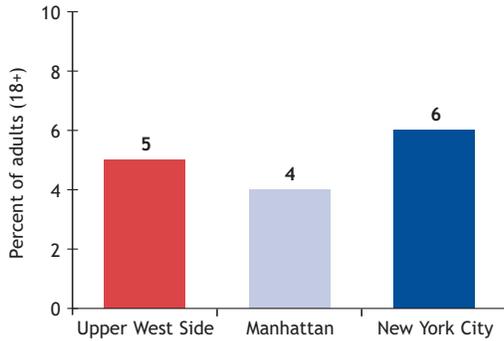
Analysis limited to adults aged 18-64 who reported having >1 sex partner in the past year, excluding women who reported having sex only with women.
Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03-04



GOAL 5 Get Help for Depression

Psychological distress

One in 20 adults on the Upper West Side suffers from serious psychological distress



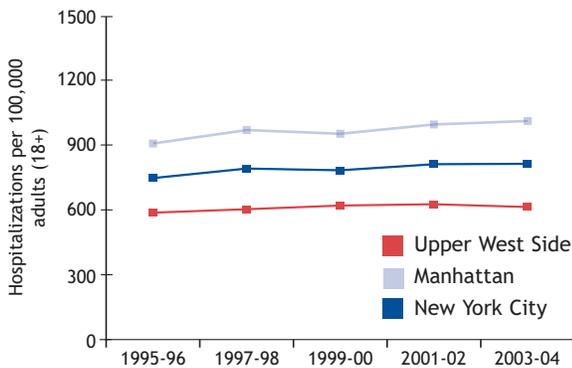
Serious psychological distress can be identified in individuals using Kessler's K6 scale, a validated measure consisting of 6 simple questions about mood. Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03

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

On the Upper West Side, 5% of residents experience serious psychological distress.

Mental illness

Hospitalizations for mental illness are lower on the Upper West Side



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 on the Upper West Side have had a lower mental illness hospitalization rate over the past 10 years (excluding alcohol- or drug-related illness) than those in Manhattan and in New York City overall.

In 2003-2004, the community's average annual rate of mental illness hospitalizations (613/100,000) was more than 35% lower than the Manhattan rate (1,011/100,000) and 25% lower than the rate in New York City overall (813/100,000).

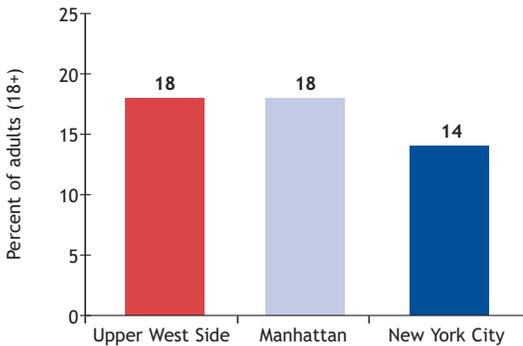
Understanding hospitalizations and access to health care. Hospitalization data are useful in understanding the burden that certain conditions place on the health care system, but not necessarily in measuring the exact extent of illness in a community. Variations in hospitalization rates may reflect not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

Upper West Side adults are more likely to engage in binge drinking in the past month than adults in NYC overall

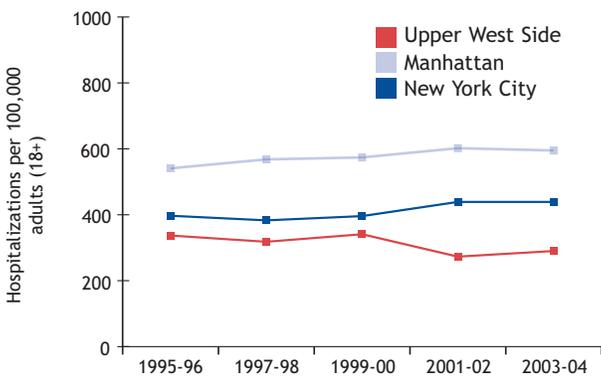


Percents are age-adjusted.

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

Alcohol-related hospitalizations

The alcohol-related hospitalization rate is lower on the Upper West Side

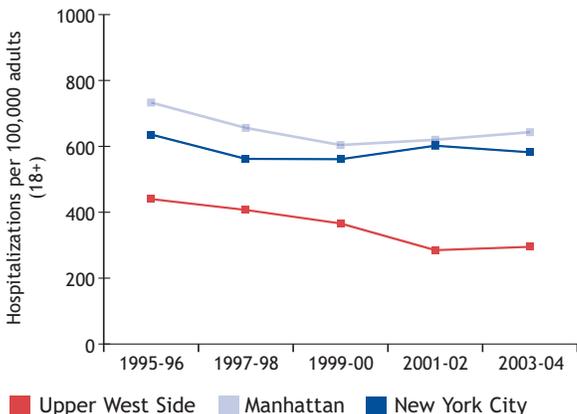


Rates are age-adjusted.

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 has decreased and remains lower on the Upper West Side



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. Adults are more likely on the Upper West Side than in NYC 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.

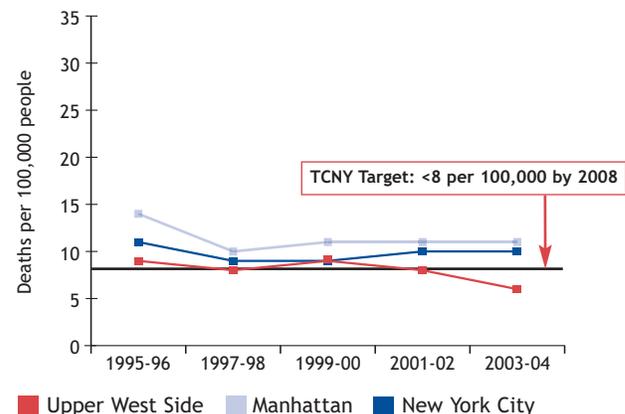
Alcohol-related hospitalizations reflect both acute and chronic (e.g., liver disease) consequences of alcohol abuse. The alcohol-related hospitalization rate on the Upper West Side has decreased slightly in the past decade. In 2003-2004, the average annual alcohol-related hospitalization rate in this community was lower than in Manhattan and in New York City overall (290/100,000 vs. 595/100,000 in Manhattan and 439/100,000 in NYC).

The drug-related hospitalization rate has also decreased in the past 10 years. In 2003-2004, it was also lower (295/100,000) than in Manhattan (643/100,000) and New York City overall (595/100,000).

The death rate due to drugs in 2003-2004 was 35% lower on the Upper West Side than in Manhattan overall (6/100,000 vs. 11/100,000).

Drug-related death rates

The drug-related death rate is lower on the Upper West Side than in Manhattan overall



Rates are age-adjusted.

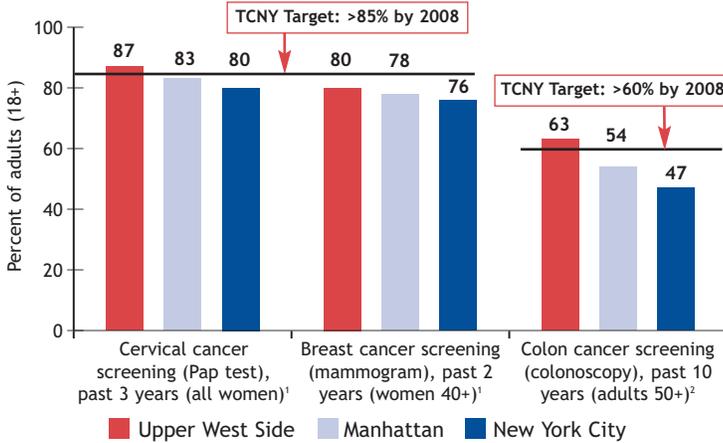
Data Sources: Bureau of Vital Statistics, NYC DOHMH, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning



GOAL 7 Get Checked for Cancer

Cancer screenings

Cancer screening are an important part of regular preventive health care



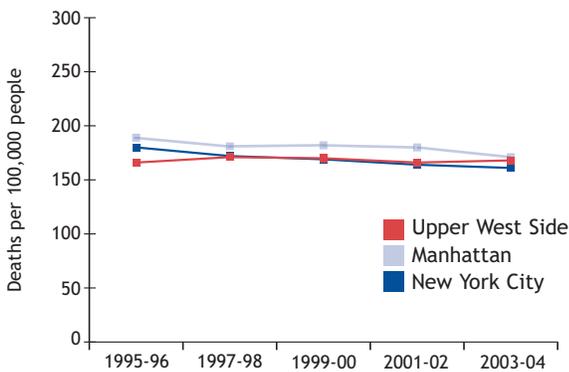
Percents are age-adjusted. Data Sources: ¹NYC Community Health Survey 2002 & 2004, ²NYC Community Health Survey 2003-04

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 on the Upper West Side are more likely to get regular Pap tests for cervical cancer than women in NYC overall (87% vs. 80%). They are also getting mammograms for breast cancer at a rate close to the TCNY target of more than 85%. Adults aged 50 and older on the Upper West Side are more likely to have had a colonoscopy in the past 10 years than those in NYC overall (63% vs. 47%).

Cancer deaths

The death rates due to cancer is similar on the Upper West Side, Manhattan, 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 on the Upper West Side during the past decade. The 2003-2004 average annual cancer death rate in this community was similar to both the Manhattan and NYC overall rates (168/100,000 vs. 171/100,000 in Manhattan 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 on the Upper West Side are due to lung, prostate, and blood-related (such as lymphoid) cancers. Among women, lung, breast, and blood-related cancers are the top 3 causes of cancer-related death.

Highest cancer death rates on the Upper West Side (2003-2004)					
MEN	DEATHS / 100,000 PEOPLE		WOMEN	DEATHS / 100,000 PEOPLE	
	Upper West Side	NYC		Upper West Side	NYC
Lung, trachea, bronchus	43	51	Lung, trachea, bronchus	29	28
Prostate	27	25	Breast	27	26
Blood-related	21	18	Blood-related	17	12
Colorectal	17	23	Colorectal	15	17
Pancreas	11	12	Ovary	14	8

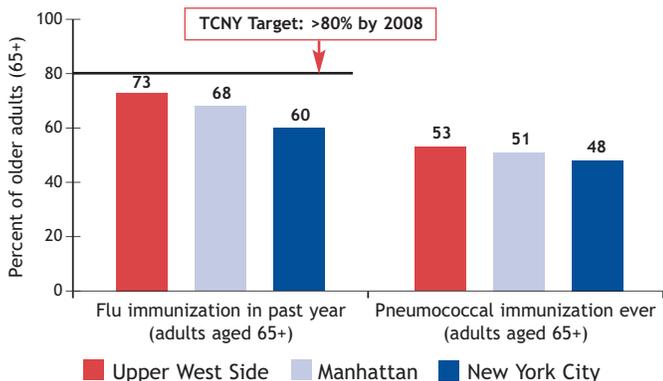
Rates are age-adjusted. Data Sources: Bureau of Vital Statistics, NYC DOHMH, 2003-2004; U.S. Census 2000/NYC Department of City Planning



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 Upper West Side flu immunization rate among older adults is higher than in NYC overall but still falls short of the TCNY target by about 10%.

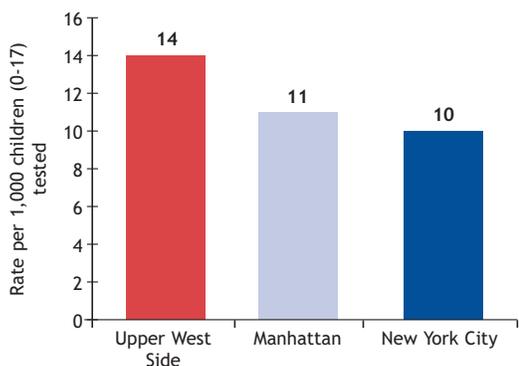
Immunization rates for pneumonia are lower than those for flu across NYC. Only about half of older adults on the Upper West Side have ever received the pneumococcal vaccine, which protects against one common cause of pneumonia.



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 ≥ 10 $\mu\text{g}/\text{dL}$.

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

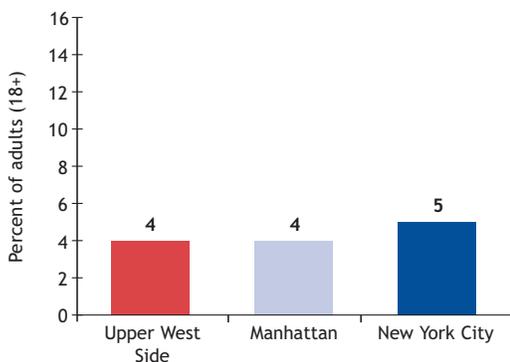
Childhood lead poisoning is a health problem that may be associated with decreased intelligence, learning and behavioral problems, and delayed growth and development. While the number of lead-poisoned children (0-17 years old) in New York City has declined dramatically over the past decade, the Health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

In 2004, 78 children on the Upper West Side (14/1,000) 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

Nearly 1 in 20 adults on the Upper West Side 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.

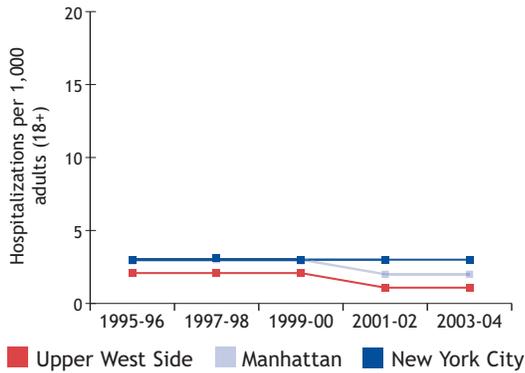
The percent of adults who report having asthma is similar on the Upper West Side (4%) and in NYC overall (5%).

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 both adults and children (0-17 years old) on the Upper West Side are lower than in Manhattan and NYC overall. In addition, rates among both adults and children have decreased in the past decade.

Adult asthma hospitalizations

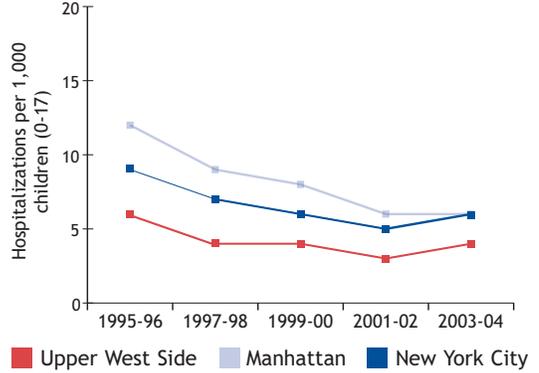
Rates of asthma hospitalization are lower on the Upper West Side



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 remains lower on the Upper West Side



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

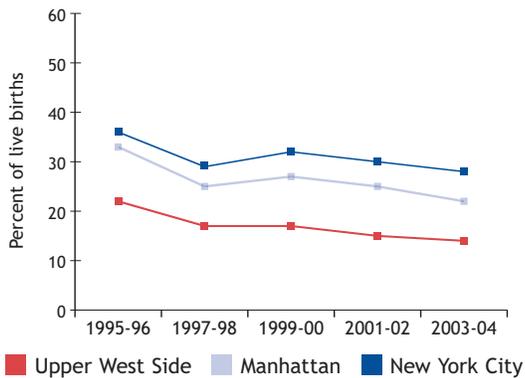
Goal 10 Have a Healthy Baby

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 decreased by one third on the Upper West Side during the past decade. The 2003-2004 percent (14%) was lower than in Manhattan (22%) 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 women. The birth rate to teenage mothers has decreased in the past 10 years by more than half on the Upper West Side. Also, the average teen birth rate in 2003-2004 in this community (21/1,000) was lower than in Manhattan (59/1,000) and NYC overall (75/1,000).

Prenatal care

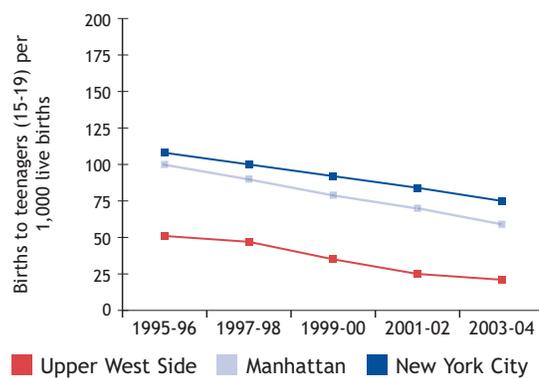
Mothers on the Upper West Side are less likely to receive late or no prenatal care in New York City



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

Teenage mothers

The birth rate to teenage mothers (15-19 years) is lower on the Upper West Side



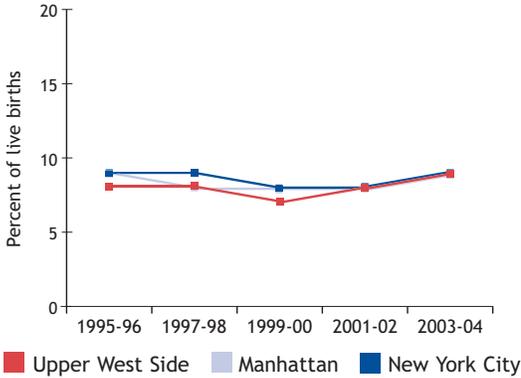
Data Source: Bureau of Vital Statistics, NYC DOHMH, 1995-2004

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 is the same on the Upper West Side, in Manhattan and in NYC overall (9%).

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 on the Upper West Side (3/1,000) was lower than in NYC overall (6/1,000), meeting the TCNY target.

Low birthweight

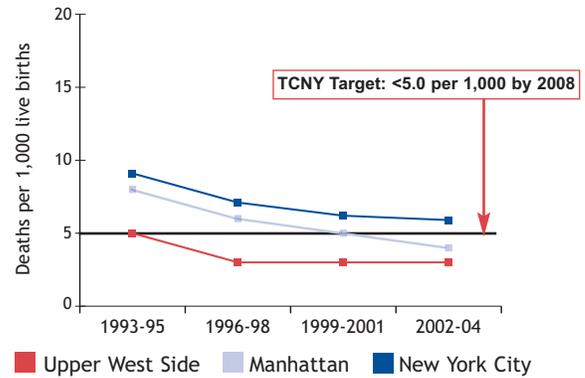
About 1 in 10 babies on the Upper West Side is born with low birthweight



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 on the Upper West Side is lower than the NYC overall rate



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

Neighborhood Health Highlight: Flu and Pneumonia

Leading Causes of Death: Upper West Side

Cause of Death	Rate per 100,000 people
Heart Disease	246
Cancer	168
Influenza (flu) & pneumonia	55
Stroke	25
Chronic Lung Diseases	20
AIDS	15
Diabetes	14

Rates are age-adjusted.
Data Source: Bureau of Vital Statistics, NYC DOHMH, 2003-04; U.S. Census 2000/NYC Department of City Planning

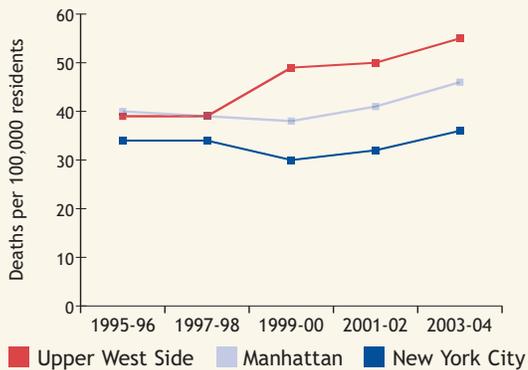
Every New York City neighborhood has different health concerns. Here we highlight flu (influenza) and pneumonia on the Upper West Side.

The flu (also called influenza) can be dangerous for the very young, older adults and people with long-term health problems. Bacterial pneumonia is a serious complication of the flu. However, there are effective vaccines (shots) to prevent illness, serious complications and death from these diseases.

Despite the flu shot and the pneumococcal vaccine for one type of bacterial pneumonia, flu and pneumonia remain the third leading cause of death on the Upper West Side. The average annual death rate has increased by almost 30% in the past decade on the Upper West Side, and the 2003-2004 rate was 35% higher than the NYC overall rate (55/100,000 vs. 36/100,000). This is likely due in part to an increasingly older population — as people live longer, they are more likely to die if they catch the flu.

Death rates due to influenza and pneumonia

The flu and pneumonia death rate on the Upper West Side is higher than in NYC overall



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

TAKING ACTION

A different flu shot is made each year because the flu virus strains that cause illness change. **People at high risk should have a flu shot every year**, including older adults (50+); young children aged 6-59 months (very young children can also get the flu but cannot have a flu shot); pregnant women; and individuals with long-term health problems, such as HIV/AIDS, diabetes, or underlying heart disease and cancer. Many cases of pneumonia are caused by a bacterial infection that is a complication of the flu and for which there is an effective immunization (pneumococcal vaccine). **All adults aged 65 and older should have a pneumonia vaccine once** for life-long protection. Individuals younger than 65 with long-term health problems should have one shot immediately and a single revaccination after 5 years. For more information on where to get flu/pneumonia shots, 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. The zip codes included in analyses of the Upper West Side are 10023, 10024, 10025, and 10069. 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. Upper West Side statistics from the 2003 and 2004 individual-year datasets include data from the neighboring communities of the Lower East Side, Chinatown and the East Village.

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: Broadway and 75th Street, Manhattan. Photo by Marty Kim. 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 Nicaj, 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 Upper West Side

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

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
Click on "My Community's Health"

Email: 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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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 Upper West Side. NYC Community Health Profiles, Second Edition; 2006; 22(42):1-16.

EP1122R304