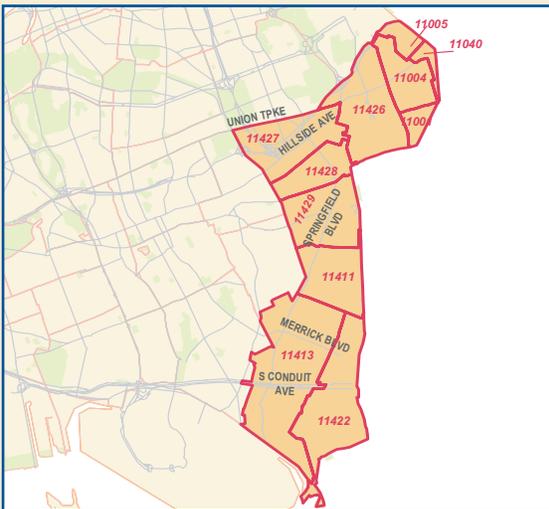


Community Health Profiles

New York City Department of Health and Mental Hygiene

SECOND EDITION — 2006



TAKE CARE

Southeast Queens

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

Community Health Profile, Second Edition: Southeast Queens

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 in the **Southeast Queens** include:

- Mothers in Southeast Queens are less likely to receive early prenatal care than moms in NYC overall (page 13).
- The infant mortality rate in Southeast Queens is higher than in Queens and NYC overall (page 14).
- Hospitalizations for injuries due to motor vehicle traffic crashes are more common in Southeast Queens than in NYC overall (page 14).

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

Southeast Queens at a Glance

Population

Total number of people living in Southeast Queens in 2000:

203,700

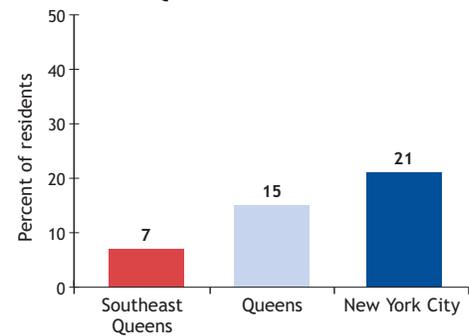
Age

People in Southeast Queens are similar in age to those in Queens and New York City overall

	Southeast Queens	Queens	NYC
0-17 years	25%	23%	24%
18-24 years	9%	9%	10%
25-44 years	30%	33%	33%
45-64 years	24%	22%	21%
65+ years	12%	13%	12%

Poverty

In Southeast Queens, the percent of residents living below the poverty level is lower than in Queens and NYC overall



Education

Southeast Queens residents aged 25 and older have completed more years of education than those in Queens and NYC overall

	Southeast Queens	Queens	NYC
Up to 8th grade	6%	11%	12%
Some high school, no diploma	13%	15%	16%
High school diploma	28%	28%	25%
Some college, no degree	28%	22%	20%
College graduate	25%	24%	27%

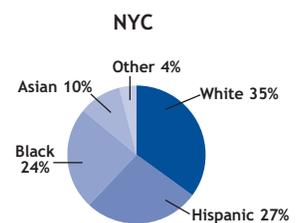
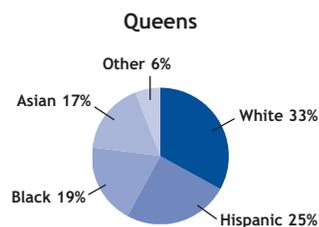
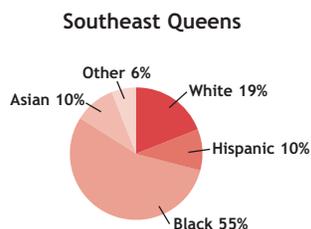
Foreign-born

The percent of Southeast Queens residents born outside the U.S. is similar to NYC overall but lower than in Queens

	Southeast Queens	Queens	NYC
Percent of residents	39%	46%	36%

Race / Ethnicity

Southeast Queens has a higher proportion of black residents than Queens and NYC overall



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

Take Care Southeast Queens



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 Southeast Queens 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 Southeast Queens 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

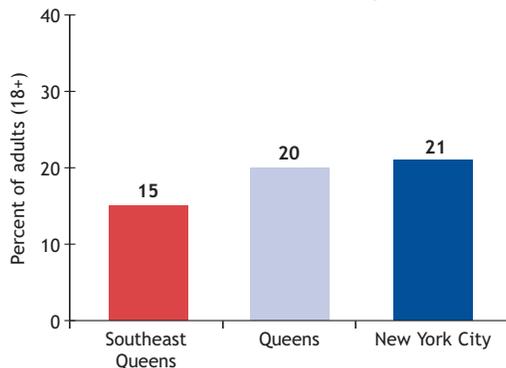
Southeast Queens ranks as average or above on 9 out of 10 indicators when compared to the 41 other NYC neighborhoods

	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 in Southeast Queens 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

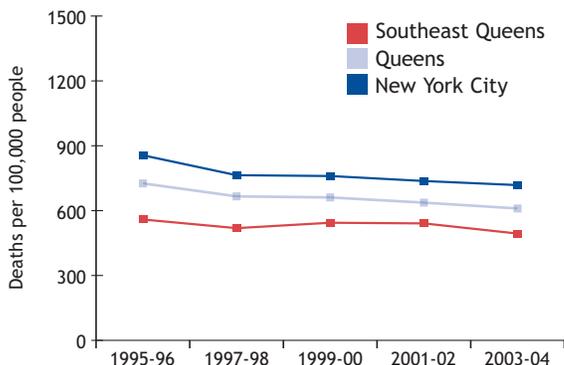
People are good at rating their own health. In general, when asked to rate their general health as excellent, very good, good, fair, or poor, those who say “fair” or “poor” are more likely to have health problems than those who report better health.

In Southeast Queens, residents are less likely to report being in fair or poor health (15%) than those in Queens (20%) and New York City overall (21%).

Overall Death Rates in Southeast Queens

Death rates

In Southeast Queens, death rates are lower than in Queens 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 in Southeast Queens has dropped by more than 10% in the past decade, mirroring the rate drop in New York City overall.

In 2003-2004, the average annual death rate in Southeast Queens was nearly 20% lower than in Queens and more than 30% lower than in New York City overall (494/100,000 vs. 610/100,000 in Queens 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.

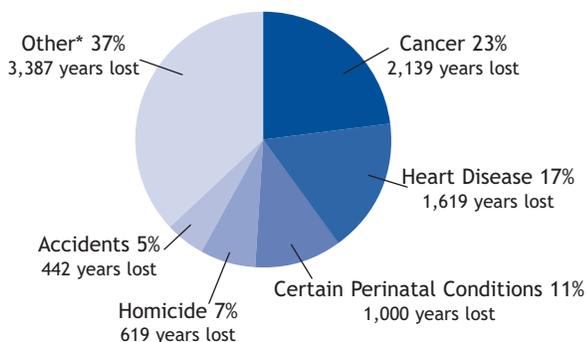
Premature death

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 Southeast Queens is cancer, as well as in both Queens and New York City overall.

Top 5 causes of years of potential life lost

Cancer causes the most years of potential life lost in Southeast Queens

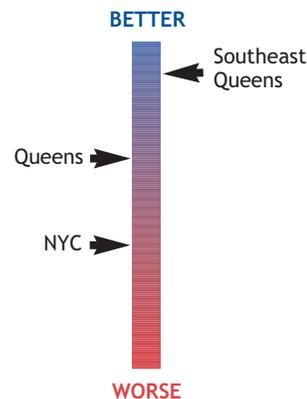


*Other includes HIV-related (4%), Drug-related (4%), Congenital Conditions (3%), Suicide (3%), Diseases of the Nervous System (2%), and Other (21%).

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 Southeast Queens is one of the lowest (5th) 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

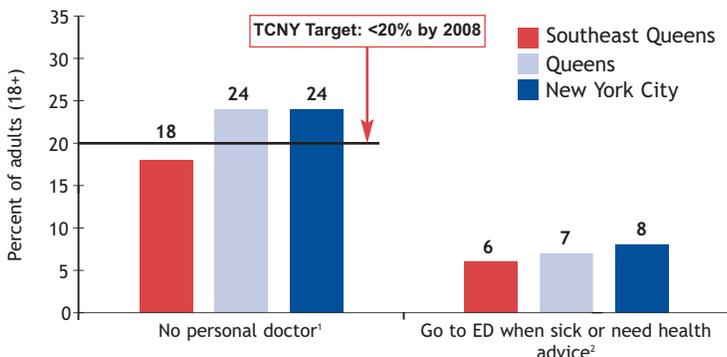
GOAL 1 Have a Regular Doctor or Other Health Care Provider

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 Southeast Queens, fewer adults reported that they did not have a personal doctor in 2004 than in 2002. Although the size of the drop cannot be precisely estimated because of the small sample size, the percent of adults without a regular provider in this community has clearly decreased. Also, residents are less likely to be without a regular doctor than those in Queens and NYC overall, meeting the TCNY target. Only 6% of Southeast Queens residents go to the ED when they are sick or need health advice.

Access to care

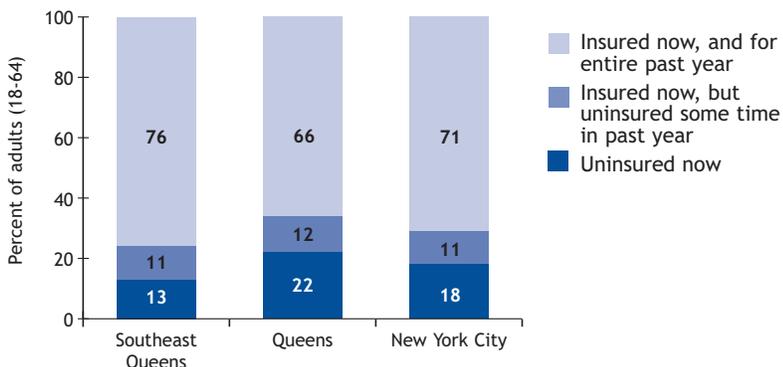
Without a primary provider, people may seek routine health care in the emergency department (ED)



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

Health insurance

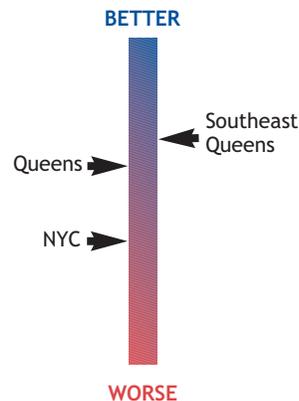
Nearly 1 in 4 adults in Southeast Queens is uninsured or went without health insurance during the past year



Insurance rates are calculated for adults aged 18-64 and age-adjusted. Data Source: NYC Community Health Survey 2002-03-04

Avoidable hospitalizations

The 2004 avoidable hospitalization rate in Southeast Queens ranks 14th 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 is important for access to health care. Residents in Southeast Queens are less likely to be uninsured (13%) than those in Queens overall (22%). In addition to the currently uninsured, another 11% of residents in this community went without health insurance at some time during the past year.

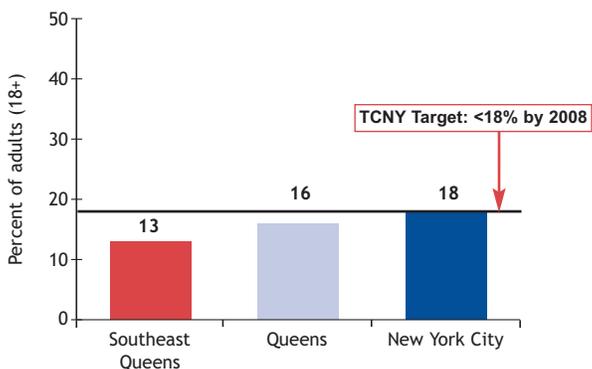


GOAL 2 Be Tobacco-Free

Smoking is the leading cause of preventable death in New York City and the cause of many illnesses, including heart disease, stroke, emphysema, and lung cancer. One eighth of Southeast Queens residents currently smoke (13%). Many methods to quit smoking are available, and nearly 8 in 10 smokers in Southeast Queens (78%) are trying to kick the habit.

Residents who smoke

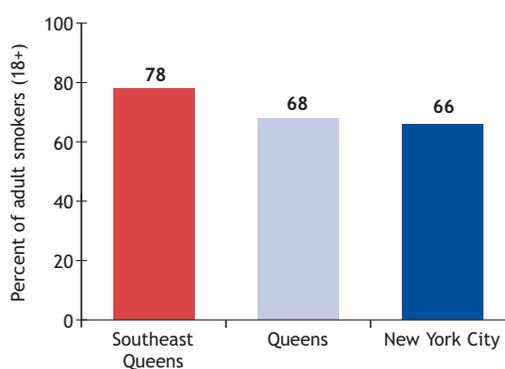
More than 1 in 10 adults in Southeast Queens smoke . . .



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

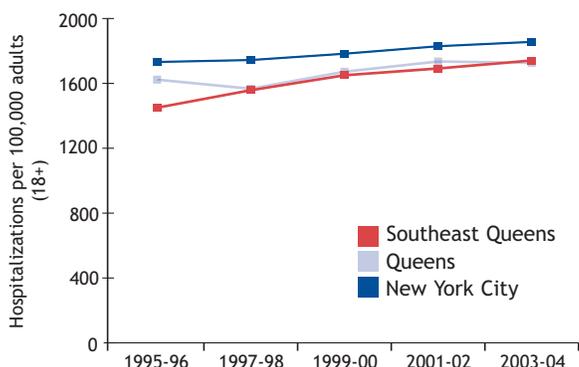


GOAL 3 Keep Your Heart Healthy

Heart disease can cause severe illness and death. The heart disease hospitalization rate in Southeast Queens has increased by 20% in the past decade. However, residents in this community had an average annual heart disease hospitalization rate in 2003-2004 that was similar to the Queens rate and lower than the rate in NYC overall (1,741/100,000 vs. 1,727/100,000 in Queens and 1,856/100,000 in NYC). The heart disease death rate has dropped slightly in the past 10 years in Southeast Queens, and the 2003-2004 rate (206/100,000) was lower than the rates in Queens (288/100,000) and NYC overall (297/100,000).

Heart disease hospitalizations

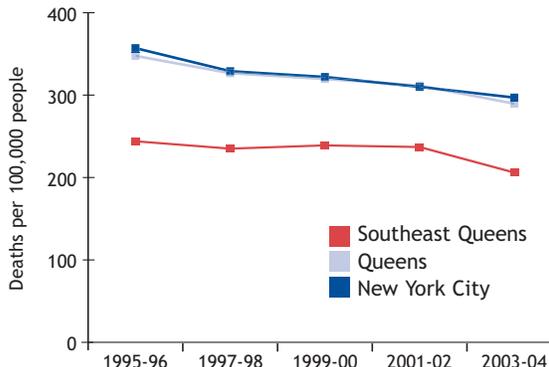
The heart disease hospitalization rate has increased in Southeast Queens



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 is lower in Southeast Queens



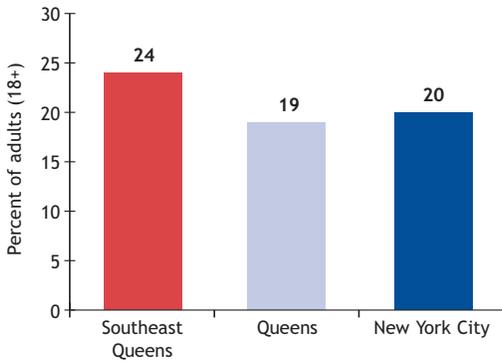
Rates are age-adjusted.
Data Sources: Bureau of Vital Statistics, NYC DOHMH, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning

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

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

Obesity

One in 4 adults in Southeast Queens is obese



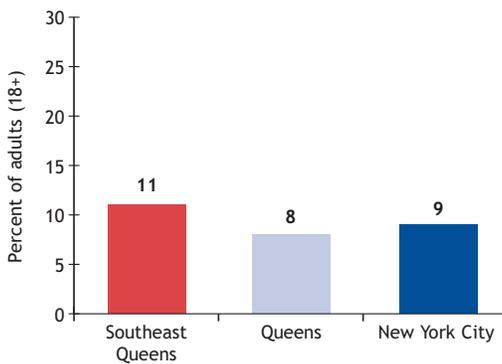
Obesity is defined as a body-mass-index (BMI) of 30 or greater. Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03-04

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 Southeast Queens, adults are more likely to be obese than in Queens overall (24% vs. 19%).

Diabetes

More than 1 in 10 adults in Southeast Queens have diabetes



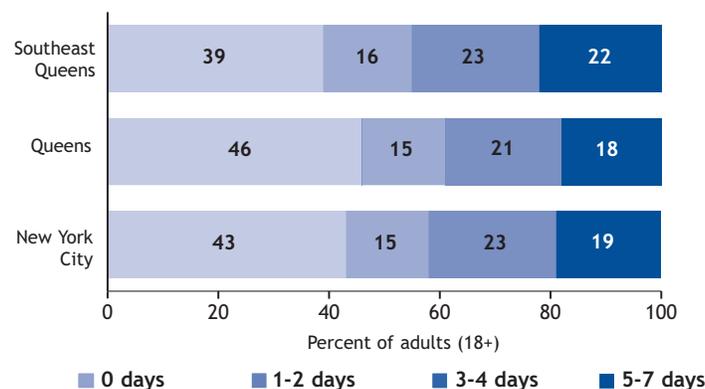
Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03-04

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 Southeast Queens, 11% of adults have diabetes.

Days per week of recreational exercise

Less than half of Southeast Queens adults 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. About 4 in 10 Southeast Queens residents (39%) report not doing any physical activity. Less than half of residents (45%) in this community 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.



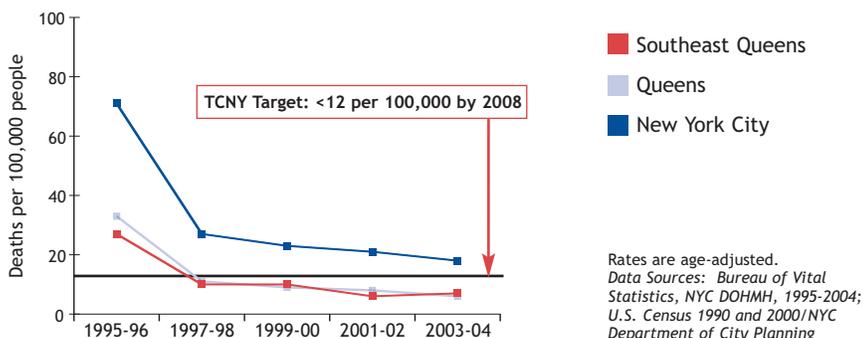
GOAL 4 Know Your HIV Status

Wide disparities exist in HIV across New York City communities. The rate of HIV diagnoses (24/100,000) and the rate of people living with HIV/AIDS (532/100,000) in Southeast Queens are lower than the rates in both Queens and NYC overall.

The death rate due to HIV disease has dropped by 75% during the past decade in this community. In 2003-2004, the average annual HIV-related death rate in Southeast Queens was similar to the Queens rate but was less than half the NYC overall rate (7/100,000 vs. 6/100,000 in Queens and 18/100,000 in NYC).

Death rate due to HIV

HIV-related death rates in Southeast Queens have dropped dramatically in the past decade and remain lower than in NYC overall



HIV/AIDS in 2004

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

Southeast Queens	24
Queens	30
New York City	55

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

Southeast Queens	26%
Queens	35%
New York City	29%

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

Southeast Queens	532
Queens	680
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

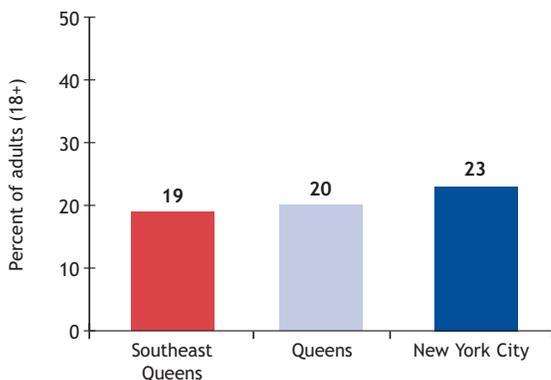
HIV/AIDS testing and prevention

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. Less than one fifth of Southeast Queens residents have been tested for HIV in the past year (19%). In addition, more than 1 in 4 positive HIV test results (26%) are “late” diagnoses (HIV has already progressed to AIDS) in this community.

The most common way people get HIV is through sexual contact, and having multiple sex partners increases the risk of HIV. Condoms offer protection from HIV when engaging in sexual activities. Only one third (33%) of Southeast Queens adults who had more than 1 sex partner in the past year reported using a condom at their last sexual encounter.

HIV testing

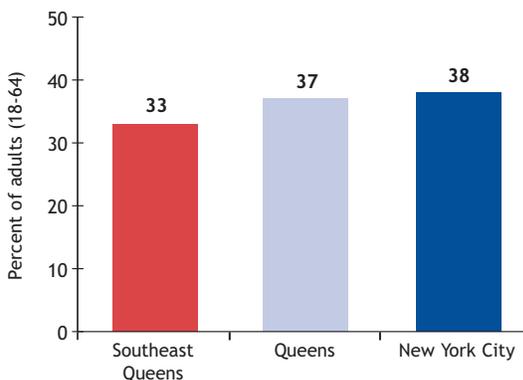
Only 1 in 5 Southeast Queens adults has had an HIV test in the past year



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

Condom use at last sexual encounter

Only 1 in 3 Southeast Queens adults with multiple sex partners used a condom



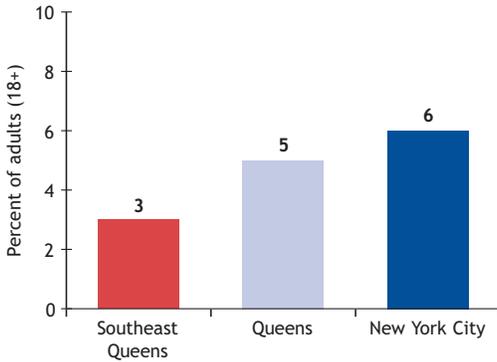
Analysis limited to adults aged 18-64 who reported having >1 sex partner in the past year, excluding women who reported having sex only with women.
Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03-04



GOAL 5 Get Help for Depression

Psychological distress

Three in 10 adults in Southeast Queens suffer from serious psychological distress



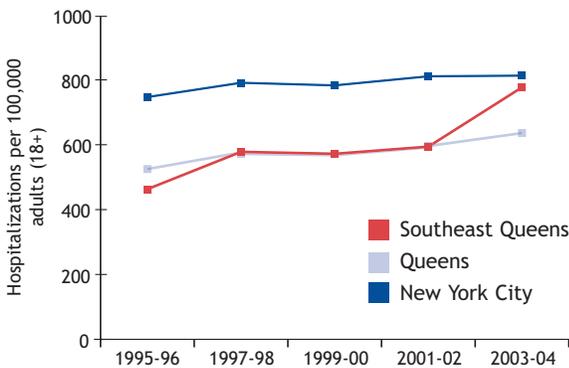
Serious psychological distress can be identified in individuals using Kessler's K6 scale, a validated measure consisting of 6 simple questions about mood. Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03

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

In Southeast Queens, 3% of residents experience serious psychological distress.

Mental illness

The mental illness hospitalization rate has increased during the past 10 years in Southeast Queens



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 in Southeast Queens has increased by more than 65% during the past decade.

In 2003-2004, the community's average annual rate of mental illness hospitalizations (777/100,000) was higher than the Queens rate (636/100,000) and similar to the rate in New York City overall (813/100,000).

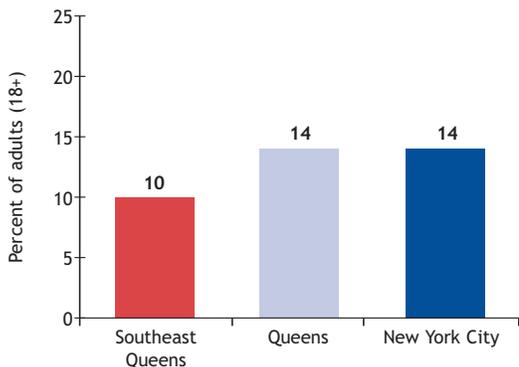
Understanding hospitalizations and access to health care. Hospitalization data are useful in understanding the burden that certain conditions place on the health care system, but not necessarily in measuring the exact extent of illness in a community. Variations in hospitalization rates may reflect not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

Adults in Southeast Queens are less likely to have engaged in binge drinking in the past month



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

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 Southeast Queens, adults are less likely than those in Queens and 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.

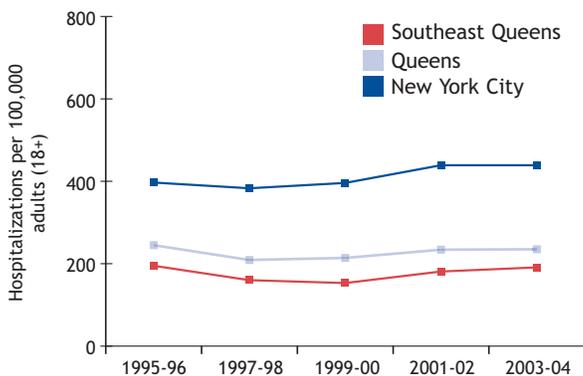
Alcohol-related hospitalizations reflect both acute and chronic (e.g., liver disease) consequences of alcohol abuse. In 2003-2004, the average annual alcohol-related hospitalization rate in this community was lower than in Queens and in New York City overall (191/100,000 vs. 235/100,000 in Queens and 439/100,000 in NYC).

The drug-related hospitalization rate has decreased in the past decade in Southeast Queens, and in 2003-2004, the rate (135/100,000) was also lower than in Queens (234/100,000) and New York City overall (595/100,000).

The 2003-2004 death rate due to drugs in Southeast Queens was half the NYC overall rate (5/100,000 vs. 10/100,000).

Alcohol-related hospitalizations

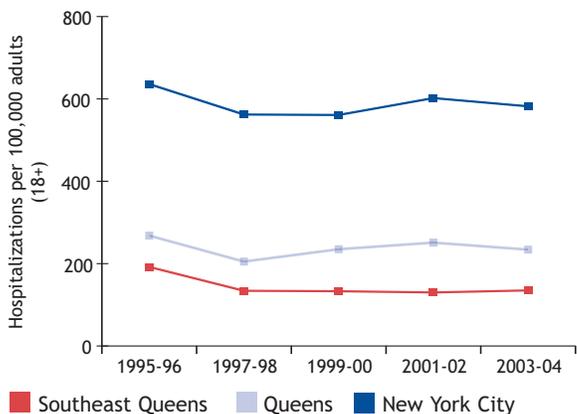
The alcohol-related hospitalization rate is lower in Southeast Queens



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

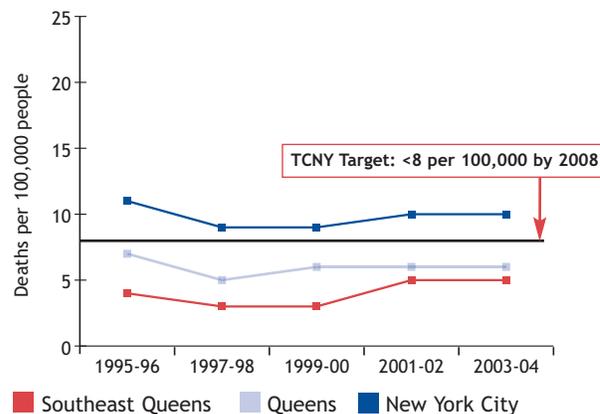
The drug-related hospitalization rate has decreased and remains lower in Southeast Queens



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 deaths

The drug-related death rate is much lower in Southeast Queens than in NYC overall



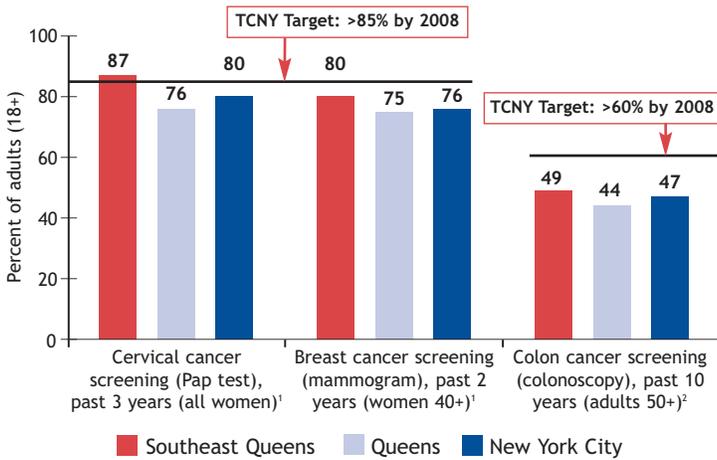
Rates are age-adjusted. Data Sources: Bureau of Vital Statistics, NYC DOHMH, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning



GOAL 7 Get Checked for Cancer

Cancer screenings

Cancer screening is an important part of regular preventive health care



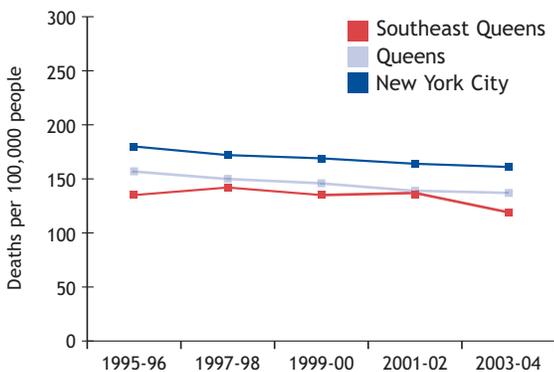
Percents are age-adjusted. Data Sources: ¹NYC Community Health Survey 2002 & 2004, ²NYC Community Health Survey 2003-04

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 in Southeast Queens are more likely to get Pap tests for cervical cancer than those in Queens and NYC overall. Also, their rate of mammograms for breast cancer is nearing the TCNY target of more than 85%. However, less than half of adults aged 50 and older in Southeast Queens have had a colonoscopy in the past 10 years.

Cancer deaths

The death rate due to cancer is lower in Southeast Queens



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 Southeast Queens during the past decade. The 2003-2004 average annual cancer death rate was more than 10% lower than the Queens rate and 25% lower than the rate in NYC overall (119/100,000 vs. 137/100,000 in Queens and 161/100,000 in NYC).

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

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

Highest cancer death rates in Southeast Queens (2003-2004)					
MEN			WOMEN		
Type of Cancer	DEATHS / 100,000 PEOPLE		Type of Cancer	DEATHS / 100,000 PEOPLE	
	Southeast Queens	NYC		Southeast Queens	NYC
Lung, trachea, bronchus	35	51	Breast	21	26
Prostate	23	25	Lung, trachea, bronchus	20	28
Colorectal	17	23	Colorectal	12	17
Blood-related	17	18	Blood-related	8	12
Pancreas	9	12	Pancreas	7	9

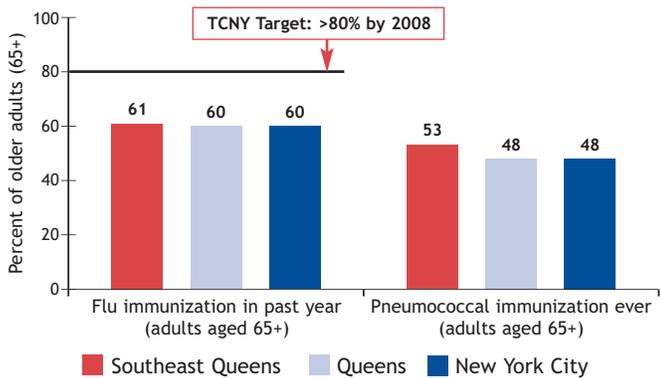
Rates are age-adjusted. Data Sources: Bureau of Vital Statistics, NYC DOHMH, 2003-2004; U.S. Census 2000/NYC Department of City Planning



GOAL 8 Get the Immunizations You Need

Immunizations

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



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

Immunizations are not just for kids. Of all the deaths that could have been prevented by vaccination, 99% occur in adults. **Take Care New York** has set a target that more than 80% of adults aged 65 and older will get an annual flu (influenza) shot by 2008. The Southeast Queens flu immunization rate among older adults falls short of the TCNY target by more than 20%.

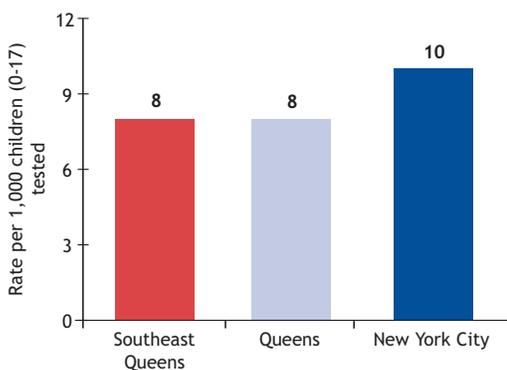
Immunization rates for pneumonia are lower than those for flu across NYC. Only about half of older adults in Southeast Queens have ever received the pneumococcal vaccine, which protects against one common cause of pneumonia.



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

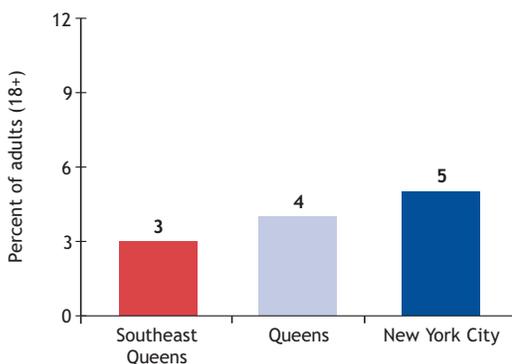
Childhood lead poisoning is a health problem that may be associated with decreased intelligence, learning and behavioral problems, and delayed growth and development. While the number of lead-poisoned children (0-17 years old) in New York City has declined dramatically over the past decade, the Health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

In 2004, 62 children in Southeast Queens (8/1,000) 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

Three in 10 adults in Southeast Queens suffer 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.

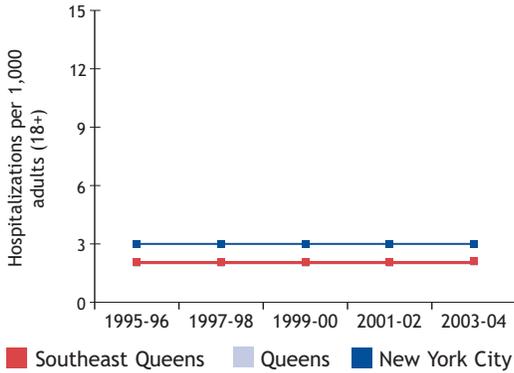
A similar percent of adults in Southeast Queens (3%) reports having asthma as in Queens (4%) and in New York City overall (5%).

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

Asthma hospitalization rates for adults and children (0-17 years old) in Southeast Queens are the same as rates in Queens and lower than in NYC overall. In addition, the child asthma hospitalization rate has declined by one third in the past decade.

Adult asthma hospitalizations

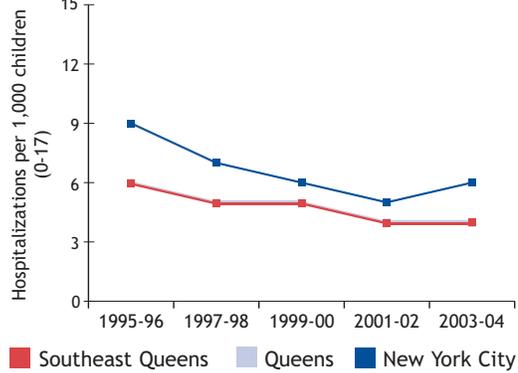
Rates of asthma hospitalization are lower in Southeast Queens than in NYC overall



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 in Southeast Queens



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

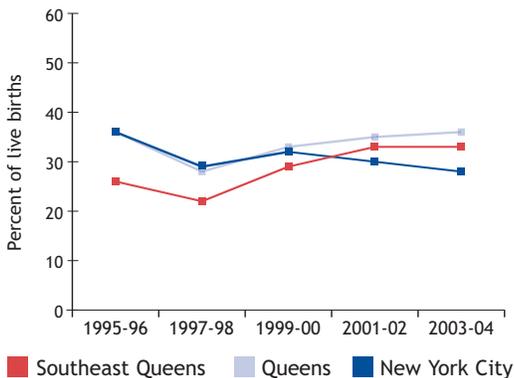
Goal 10 Have a Healthy Baby

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 2003-2004 average annual percent of women who received late or no prenatal care in Southeast Queens (33%) falls between the Queens (36%) and NYC overall (28%) percents.

Teenage mothers and their babies face a number of risks. Pregnant teens are more likely to be poor and not complete high school than other teens, and they are more likely to have babies born with low birthweight than older women. The birth rate to teenage mothers has decreased over the past 10 years by more than 25% in Southeast Queens. The average birth rate to teen moms in 2003-2004 in this community (57/1,000) was a quarter lower than in NYC overall (75/1,000).

Prenatal care

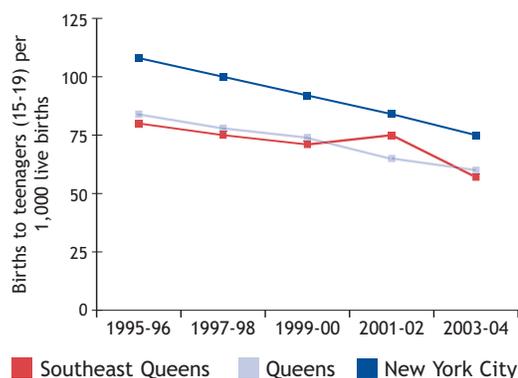
One third of mothers in Southeast Queens received late or no prenatal care



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

Teenage mothers

The birth rate to teenage mothers (15-19 years) is lower in Southeast Queens than in NYC overall

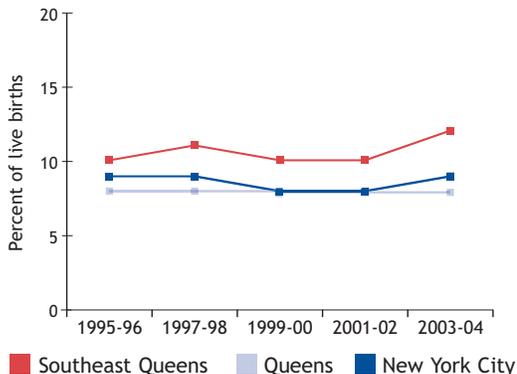


Data Source: Bureau of Vital Statistics, NYC DOHMH, 1995-2004

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 Southeast Queens was 12% — higher than in Queens (8%) and 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 in Southeast Queens (10/1,000) was higher than in both Queens (5/1,000) and NYC overall (6/1,000).

Low birthweight

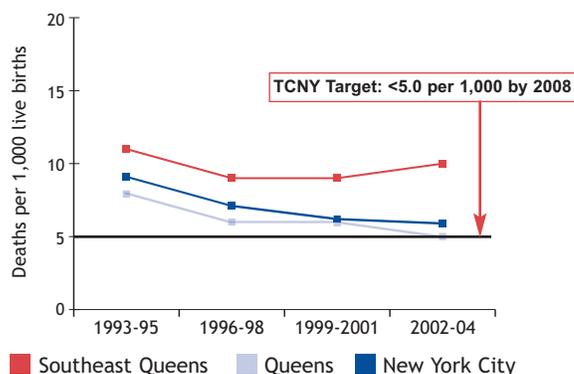
Low-birthweight babies are more common in Southeast Queens



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)

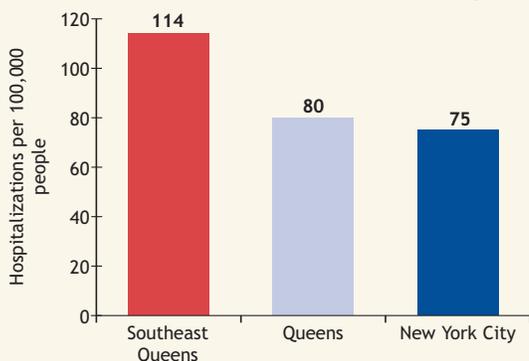
The Southeast Queens IMR is still higher in Queens and NYC overall



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

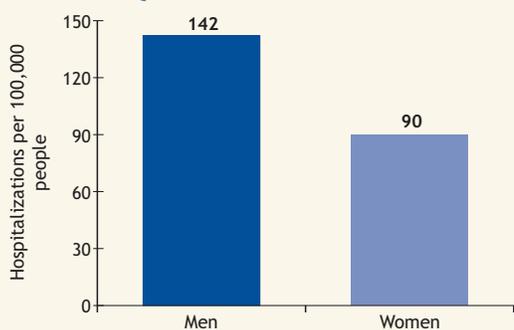
Neighborhood Health Highlight: Injury from Motor-Vehicle Crashes

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



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

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



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

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

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

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

TAKING ACTION

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

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

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 Southeast Queens are 11001, 11004, 11005, 11040, 11411, 11413, 11422, 11426, 11427, 11428, and 11429. 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: Brookville Park, Queens. Photo by Don Weiss. Maps by Susan Resnick.

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Community Health Profile for Southeast Queens

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

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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