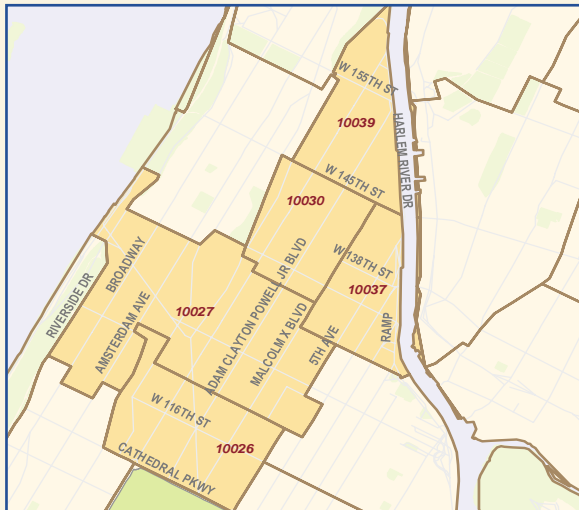


# Community Health Profiles

New York City Department of Health and Mental Hygiene



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



## The Health of Central Harlem

*Manhattan*

*(Including Morningside Heights)*

# Message From the Commissioner

This community health profile highlights important health issues facing the residents of Central Harlem, with a special focus on preventable causes of illness and death. Preventing illness requires people making healthy life choices, neighborhood resources that promote healthy living, and high-quality, accessible medical care.

New York City is the most diverse city in the U.S. This is reflected in the unique character of each neighborhood. Strategies to improve New Yorkers' health should take local concerns into account and be based on an understanding of how decisions at the city level affect local residents. The burden of illness and death does not fall equally across New York City's neighborhoods. One of the primary goals of the Department of Health and Mental Hygiene is to reduce and eliminate these disparities by improving health in communities with the greatest need.

Improving the health of *all* New Yorkers requires the involvement and cooperation of individual residents, community-based organizations, and the public health community. We hope that this health profile will support this effort in Central Harlem and across New York City.

Thomas R. Frieden, MD, MPH  
Commissioner

## Snapshots From the Census

Number of people living  
in Central Harlem  
in 2000:

151,113

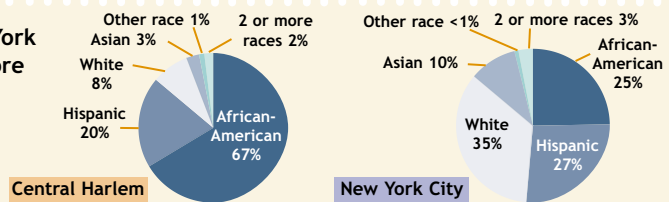
### Age

People in Central Harlem are slightly younger than the New York City average

	Central Harlem	New York City
Children (0-17 years)	26%	24%
Adults (18-64 years)	63%	64%
Adults (65 years and above)	11%	12%

### Race/Ethnicity

Compared to New York City as a whole, more people in Central Harlem are of African-American race/ethnicity



### Country of Origin

Nearly 1 in 5 residents of Central Harlem was born outside the U.S. (Top 3 regions of origin: Dominican Republic, West Africa, Jamaica)

	Central Harlem	New York City
19% foreign-born		
36% foreign-born		

# Report Card on Health

This summary shows how the health of residents of Central Harlem compares to 41 other neighborhoods in New York City. In general, people living in Central Harlem have a heavy burden of illness and mortality compared to residents of other neighborhoods. The challenge of improving these indicators does not fall only on neighborhood residents but is a shared responsibility between all sectors of society.

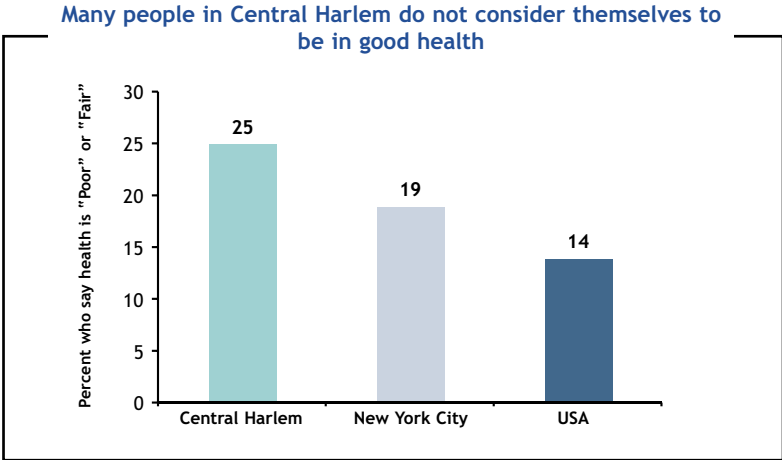
Central Harlem compared to 41 other NYC neighborhoods

	Below Average (bottom 10)	Average (middle 22)	Above Average (top 10)
General health	✓		
Maternal and child health	✓		
Infectious diseases (including pneumonia, influenza, HIV/AIDS)	✓		
Chronic diseases (including heart disease, diabetes, lung diseases)	✓		
Prevention in doctors' offices (including cancer screening and immunizations)		✓	
Access to medical care		✓	

Please see the technical notes on page 11 for details on how these measures were calculated.

## How Residents Rate Their Own Health

In a recent survey, adults in Central Harlem and across New York City were asked to rate their own health. The options were "Excellent," "Very Good," "Good," "Fair," and "Poor." In Central Harlem, 25% said their health is "Poor" or "Fair." How people rate their own health is a good indication of the overall health of a community.



# Major Causes of Death and Hospital Admissions

Many deaths from heart disease, the biggest killer in New York City and nationwide, are caused by preventable or controllable factors, such as smoking, high blood pressure, high cholesterol, diabetes, and obesity.

Heart disease, cancer, and AIDS caused the most deaths in 2001 among Central Harlem residents. The death rates for most causes were higher in Central Harlem than in New York City as a whole, particularly for AIDS, lung disease, drug-related deaths, and kidney disease.

Leading Causes of Death in Central Harlem, 2001

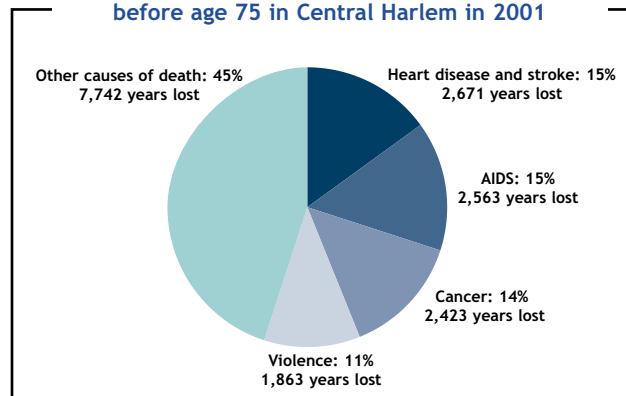
	Central Harlem		New York City		Central Harlem compared to NYC as a whole	
	No. of deaths	Death rate (per 100,000 people)*	Death rate (per 100,000 people)*	Higher by	Lower by	
All causes	1,465	1,065	736	45%		
Heart disease	418	303	304		5%	
Cancer	305	226	167	35%		
AIDS	89	65	22	3 times		
Pneumonia and influenza	64	46	32	45%		
Stroke	61	45	24	90%		
Chronic lung disease	60	45	21	2 times		
Diabetes	55	40	22	85%		
Accidents and injuries	35	25	15	65%		
Drug-related	31	23	10	2 times		
Kidney disease	29	21	10	2 times		

\*Age-adjusted

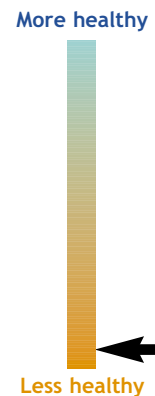
## Premature death

People who die before age 75 can be thought of as dying prematurely. The difference between 75 years and the age of a person who dies before that is called the “years of potential life lost.” More than half the years of potential life lost in Central Harlem were due to 4 causes: heart disease/stroke, AIDS, cancer, and violence (including homicide and accidents).

More than 17,000 years of potential life were lost before age 75 in Central Harlem in 2001



How the overall death rate in Central Harlem ranks among 42 New York City neighborhoods



## Causes of hospitalization

Heart disease is the leading cause of adult hospitalization in Central Harlem. The hospitalization data also reveal the burden of illness due to mental illness and alcohol abuse, as well as injuries, diabetes, and asthma. Hospitalization rates in Central Harlem are higher than in New York City as a whole, particularly for alcohol-related causes.

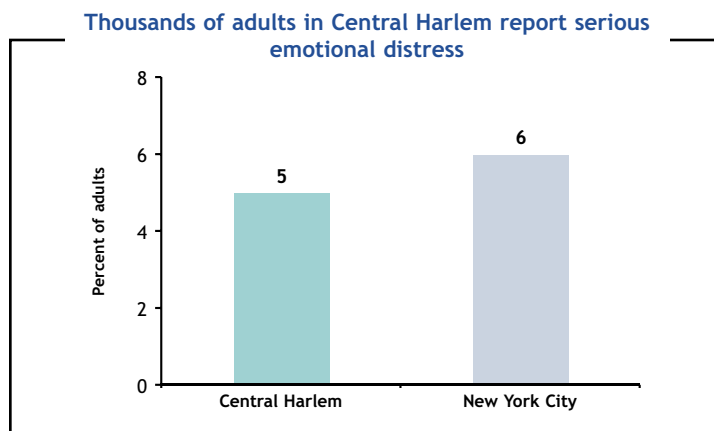
### Leading Causes of Hospitalization in Adults in Central Harlem, 2001

	Central Harlem		New York City	Central Harlem compared to NYC as a whole	
	No. of admissions	Admission rate (per 100,000 people)*	Admission rate (per 100,000 people)*	Higher by	Lower by
All causes	20,807	19,256	14,140	35%	
Heart disease	2,128	2,114	1,744	20%	
Accidents and injuries	1,729	1,620	1,209	35%	
Mental illness	1,383	1,206	671	80%	
Alcohol-related	983	878	387	2.5 times	
Drug-related	869	760	492	55%	
Cancer	760	751	654	15%	
Diabetes	615	588	328	80%	
Pneumonia and influenza	576	550	433	25%	
Asthma	454	425	262	60%	
Stroke	434	433	379	15%	

\*Age-adjusted

## Mental illness

Depression is a common and serious health problem that often goes undiagnosed but is treatable. Other treatable mental health problems, such as anxiety, affect many New Yorkers. The high number of hospitalizations for mental illness among Central Harlem residents is one indication of the burden of mental illness there. In addition, in a recent telephone survey, 5% of adults in Central Harlem – corresponding to about 5,500 people – reported experiencing serious emotional distress.



Reducing risky sexual behavior, getting tested for HIV, and ensuring high-quality treatment of all HIV-infected people are effective ways of preventing new HIV infections and AIDS.

## HIV/AIDS

While the number of AIDS deaths has dropped dramatically across New York City over the past decade, HIV/AIDS remains a very serious public health problem. Hundreds of people are diagnosed with HIV each year in Central Harlem, and nearly three thousand people are living with HIV/AIDS.

HIV/AIDS in Central Harlem, 2001	
Number of people newly diagnosed with HIV	355
Number of people living with HIV/AIDS	2,956

# The Health of Mothers and Children

The health of mothers and children is an important measure of the overall health of a community. Ensuring that children get a healthy start and learn healthy behaviors has many long-term benefits.

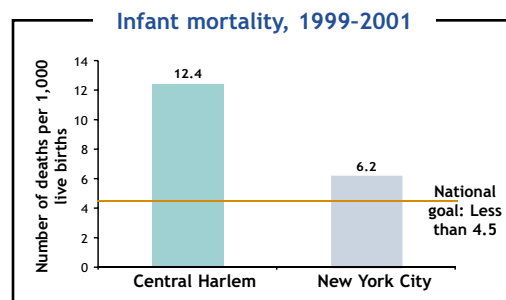
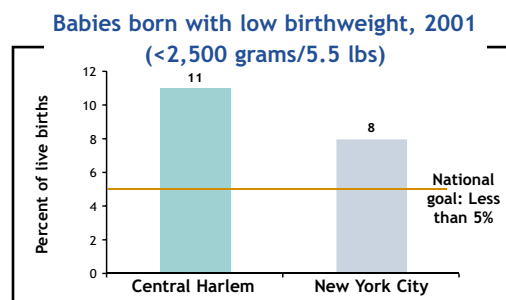
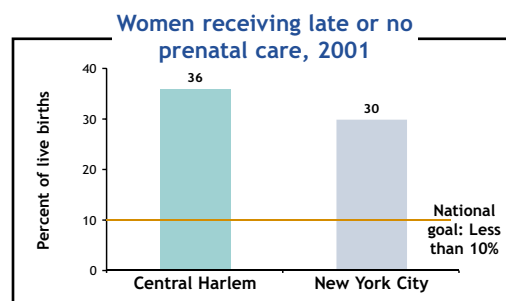
## Maternal and infant health

Three important measures of maternal and infant health are:

1. Early prenatal care (care initiated in the first trimester)
2. Low birthweight, which increases the risk for many health problems
3. Infant mortality (deaths of babies under one year of age)

Central Harlem is higher than the citywide average for all these indicators, especially for infant mortality.

Healthy babies start with healthy mothers who receive high-quality prenatal care.

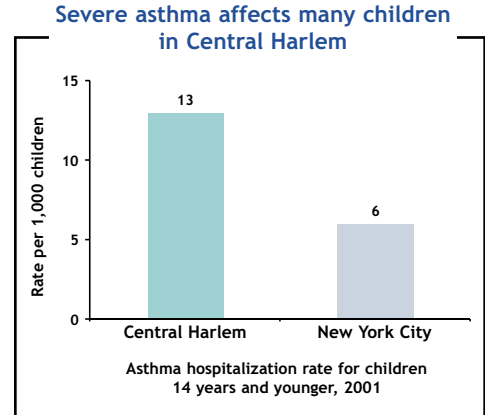


Asthma can be controlled. All children with asthma should have a written “Asthma Action Plan” to help them and their parents know which medicines to take and when to take them, how to avoid asthma triggers, and when to get medical care.

## Children’s health

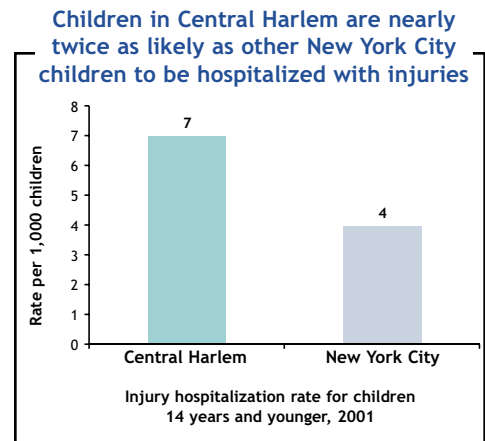
### Asthma

Asthma affects a large number of New York City’s children and is a leading cause of missed school days and hospitalizations. The asthma hospitalization rate in Central Harlem is higher than in New York City as a whole. There were 412 asthma hospitalizations among children in Central Harlem in 2001.



### Injuries

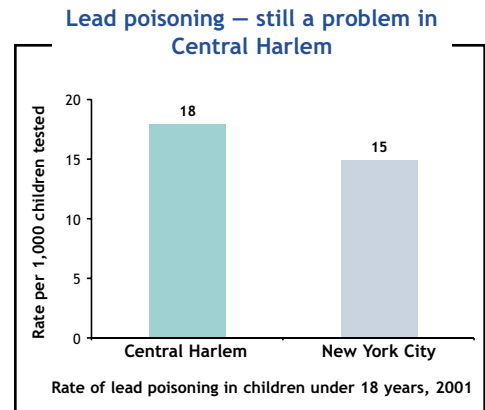
Injury is a preventable threat to children’s health. In 2001, 225 children in Central Harlem were hospitalized with injuries, including those from falls, burns, and motor-vehicle crashes. The rate of hospitalization for injuries among children in Central Harlem is almost twice the citywide rate.



All children in New York City must have a blood lead test at 1 and 2 years of age.

### Lead poisoning

Lead can cause neurologic, learning, and behavioral problems, and lowered intelligence. While the number of lead-poisoned children in New York City has decreased over the past decade, the goal is to eliminate lead poisoning by preventing children’s exposure to lead paint and other sources of lead. There were 130 children newly diagnosed with lead poisoning in Central Harlem in 2001 (defined as blood levels over 10 µg/dL).



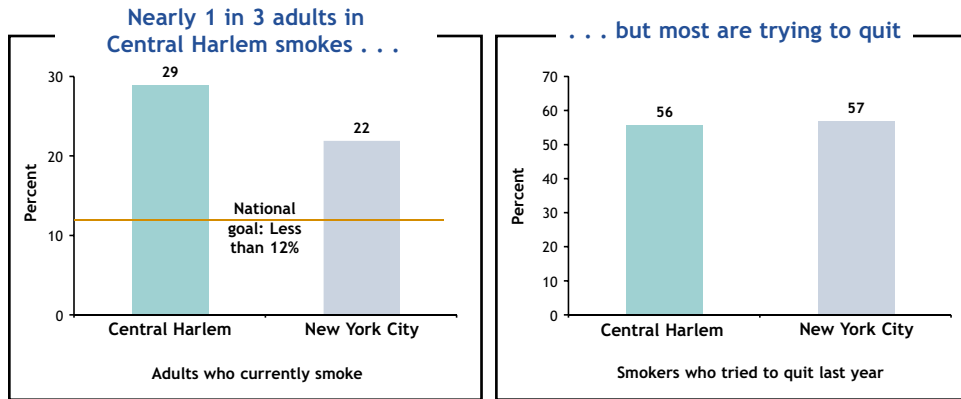
# Targets for Prevention

## Promoting healthy behaviors and reducing risks

Stopping smoking is the most important thing smokers can do to improve their health.

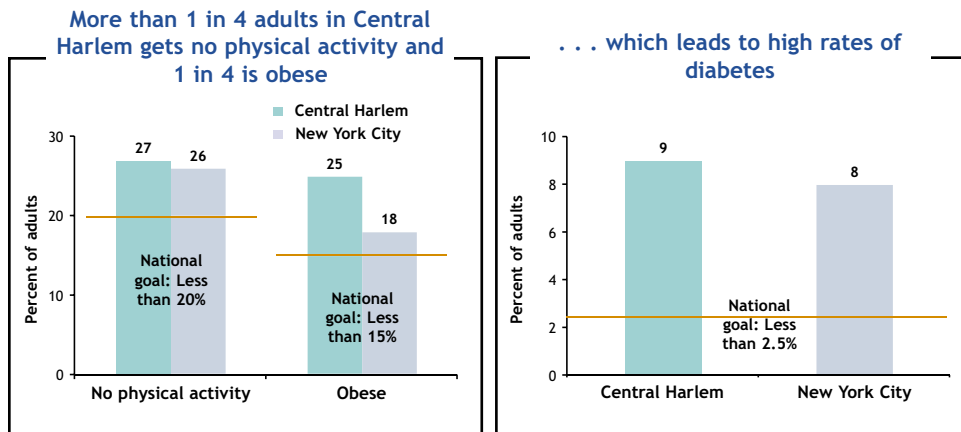
### Smoking

Smoking causes heart disease, stroke, emphysema, lung cancer, and many other illnesses. Currently, nearly one third of adults in Central Harlem smoke. Most, however, want to quit, and more than half tried last year. There are a number of highly effective strategies, including medication (such as the nicotine patch) and counseling, to help smokers quit.



### Exercise, obesity, and diabetes

As New Yorkers exercise less and eat more, we are becoming more overweight. Being overweight puts people at risk for heart disease and many other health problems, especially diabetes. Diabetes is a chronic illness that can lead to heart attack, blindness, kidney failure, and amputations. Many New Yorkers are not getting enough exercise and are obese.\* Even modest increases in exercise and reductions in weight can reduce the risk of diabetes by more than half.

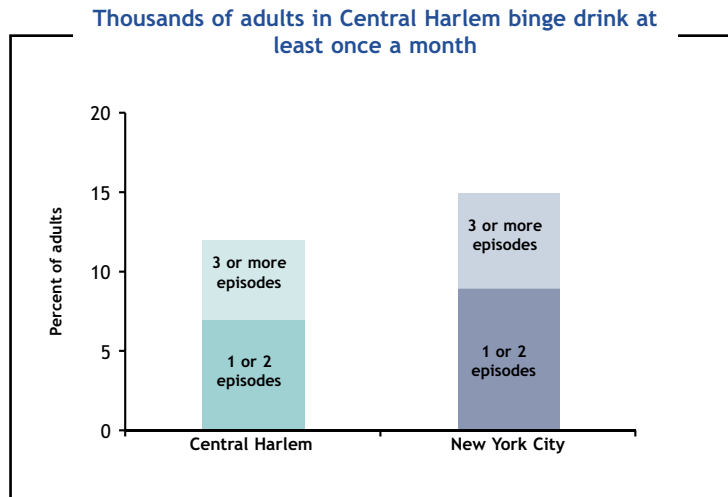


\* The Centers for Disease Control and Prevention recommends that adults get either moderate exercise for at least 30 minutes, 5 or more times per week, or vigorous exercise for at least 20 minutes, 3 or more times per week. Obesity is defined by someone's "weight for height" – otherwise known as the "body mass index" or BMI – being over 30. "Overweight" is defined by a BMI over 25. Everyone should aim for a BMI less than 25. For example, a 5'10" man who weighs less than 175 lbs and a 5'4" woman who weighs less than 145 lbs have BMIs less than 25. To calculate BMI, visit [www.cdc.gov/nccdphp/dnpa/bmi/bmi-adult.htm](http://www.cdc.gov/nccdphp/dnpa/bmi/bmi-adult.htm).



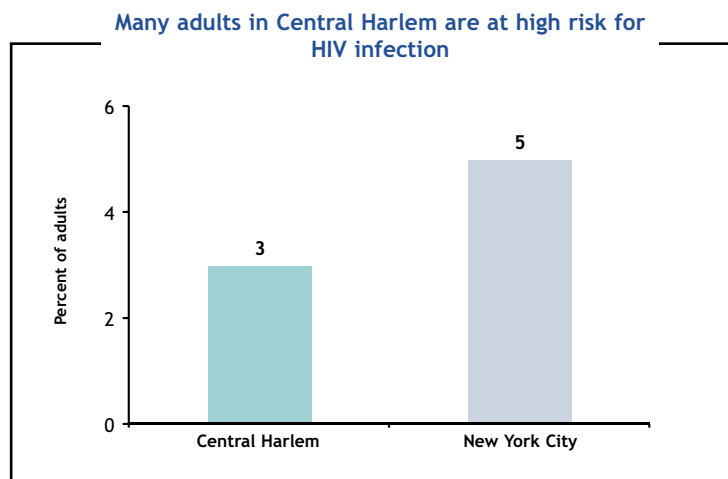
## Alcohol

Heavy drinking is responsible for many preventable illnesses, injuries, and deaths, including those caused by motor-vehicle crashes and other accidents, liver disease, and cancer. One pattern of alcohol misuse that can lead to violence and health problems is “binge” drinking (consuming 5 or more drinks on one occasion).



## Risk behaviors for HIV

Many adults in Central Harlem report at least one of the following behaviors that put them at risk for HIV: using injection drugs, having unprotected anal intercourse, exchanging sex or drugs for money, or having a sexually transmitted disease.



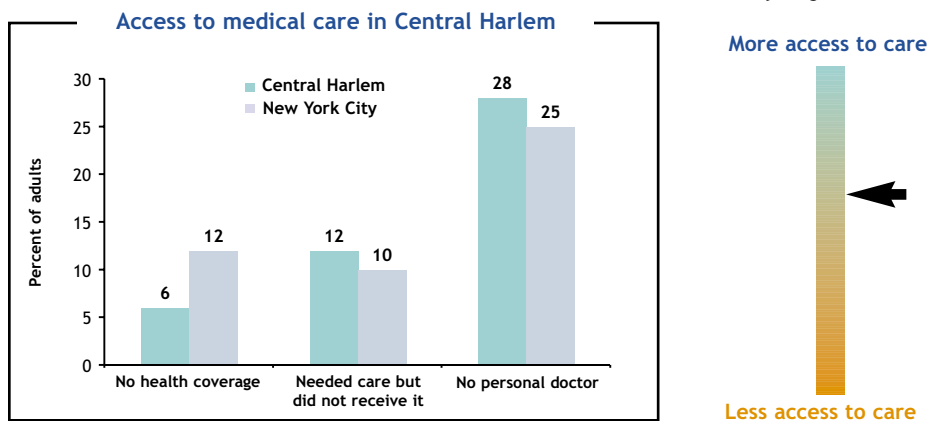
# Medical Care

## Opportunities for prevention

The medical community – doctors, nurses, counselors, and others – can help prevent illness. Screening and treatment for high blood pressure, high cholesterol, and cancer can prolong life. Flu and pneumonia vaccinations prevent many hospitalizations and deaths. Counseling to quit smoking or control drinking is highly effective and helps people who want to improve their health.

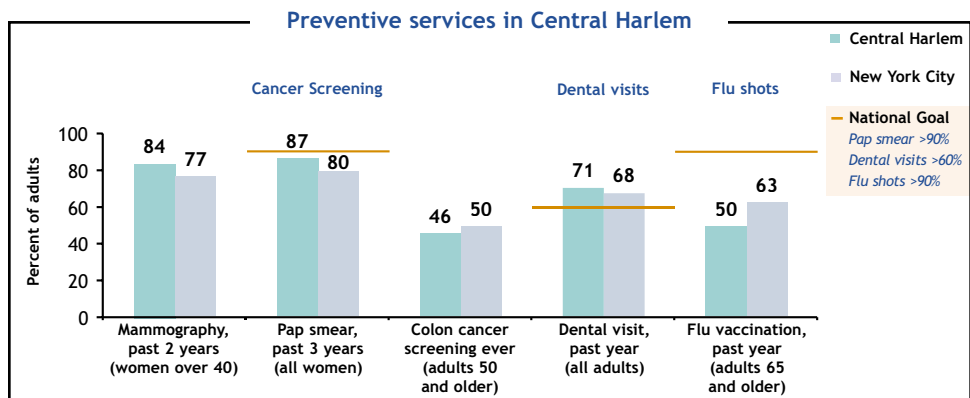
### Access to care

Preventing and treating illness depends on people’s ability to access high-quality medical care. This means having health insurance and a “medical home” – a personal doctor or nurse practitioner. Many Central Harlem residents have poor access to medical care: about 6,600 people report no current health care coverage; 13,000 people did not get needed medical care in the past year; and 31,000 people do not have a personal doctor.



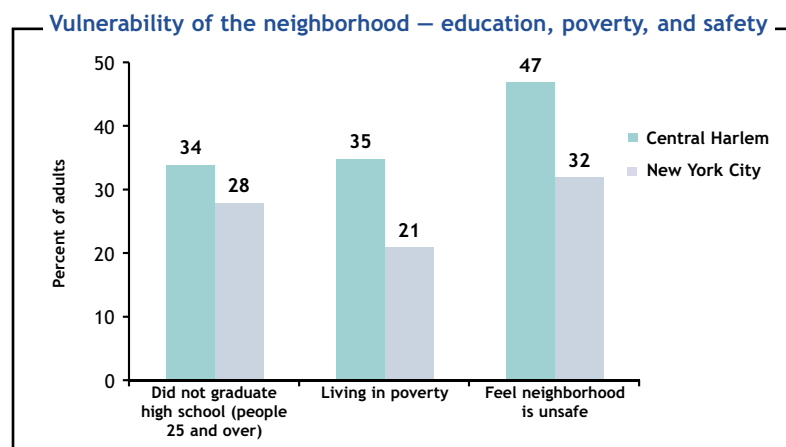
### Cancer screening and other preventive services

Cancer screening and other clinical services can prevent or reduce the severity of many illnesses. This graph shows how rates in Central Harlem compare to New York City as a whole and to some national goals.



# Vulnerable Populations

People's ability to increase healthy behaviors and improve their health is influenced by the conditions in which they live. A healthy environment that includes adequate housing, neighborhood resources such as supermarkets and parks, community services such as daycare, and safety, is essential in preventing disease and promoting health. The graph below gives an indication of the vulnerability of Central Harlem residents, reflected in high rates of not graduating from high school, living in poverty, and feeling unsafe in their neighborhood.



## Technical notes

### Data sources

Mortality, years of potential life lost, infant mortality, low birthweight, late prenatal care: NYCDOHMH/Office of Vital Statistics; Self-reported health status, depression/anxiety symptoms, smoking, exercise, obesity, diabetes, alcohol, drugs/risky sexual practices, access to medical care, clinical preventive services, neighborhood safety: NYCDOHMH/Division of Epidemiology/NYC Community Health Survey 2002; Lead poisoning: NYCDOHMH Lead Poisoning Prevention Program; Hospitalizations: New York State Department of Health/Statewide Planning and Research Cooperative System; Population (total, race/ethnicity, foreign-born, percent in poverty, education): New York City Department of City Planning/Census 2000 data; National goals: US Department of Health and Human Services/Healthy People 2010; National self-reported health status: Behavioral Risk Factor Surveillance System 2001, Centers for Disease Control and Prevention.

### How the report card was calculated

Ranks in each category were computed by combining several standardized (z-scores) measures within the following categories: *General health*: Self-reported health status and all-cause mortality rate; *Maternal and child health*: All "Health of Mothers and Children" indices; *Infectious disease*: People living with HIV, pneumonia and influenza mortality, tuberculosis incidence, and gonorrhea incidence; *Chronic diseases*: Mortality and hospital admissions for heart disease, cancer, diabetes, and lung disease; *Prevention in doctors' offices*: All listed indices; *Access to medical care*: All listed indices.

All rates are age-standardized to the NCHS Year 2000 standard. Mortality rates do not include residents of NYC who died outside the city. Infant mortality rates are 3-year averages, 1999-2001. Death rates are rounded to the nearest whole number; however, percentage differences between neighborhood and NYC rates are calculated based on more precise values.

Geographic definitions of neighborhoods are based on zip code aggregations (from the United Hospital Fund, New York, NY).

For more information on data collection and analysis, including detailed tables, please visit [www.nyc.gov/health](http://www.nyc.gov/health).

Cover Photograph: West 141st Street, Manhattan. Photo by Don Weiss.

# Community Health Profile for Central Harlem

Reports on 41 other New York City neighborhoods are available from the New York City Department of Health and Mental Hygiene

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

by e-mailing: [profiles@health.nyc.gov](mailto:profiles@health.nyc.gov)

or by writing to:

**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 the health issues covered in this report, please call 311.**

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## NYC Community Health Profiles

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New York City Department of Health and Mental Hygiene

Division of Epidemiology, Bureau of Epidemiology Services, 125 Worth Street, CN-6, New York, NY 10013

**Michael R. Bloomberg**  
Mayor

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

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NYC bCommunity Health Profiles feature information  
about 42 neighborhoods in New York City.

To contact NYC Community Health Profiles,  
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