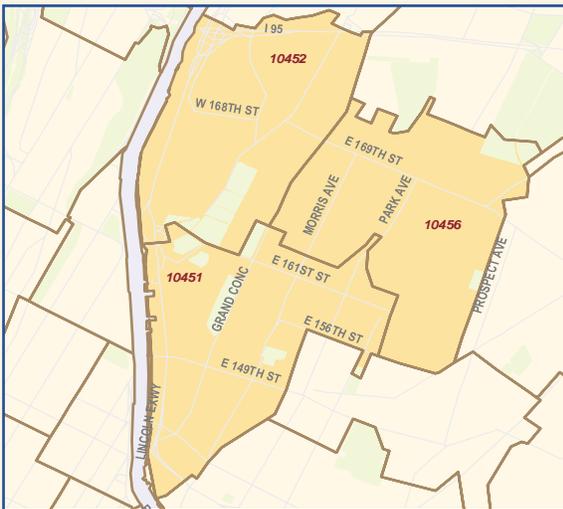


Community Health Profiles

New York City Department of Health and Mental Hygiene



nyc.gov/health



The Health of Highbridge and Morrisania

Bronx

Message From the Commissioner

This community health profile highlights important health issues facing the residents of Highbridge and Morrisania, 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 Highbridge and Morrisania and across New York City.

Thomas R. Frieden, MD, MPH
Commissioner

Snapshots From the Census

Number of people living in Highbridge and Morrisania in 2000:

189,755

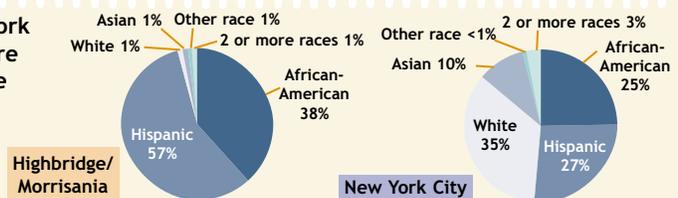
Age

People in Highbridge and Morrisania are younger than the New York City average

	Highbridge and Morrisania	New York City
Children (0-17 years)	35%	24%
Adults (18-64 years)	58%	64%
Adults (65 years and above)	7%	12%

Race/Ethnicity

Compared to New York City as a whole, more people in Highbridge and Morrisania are of Hispanic and African-American race/ethnicity



Country of Origin

3 in 10 residents of Highbridge and Morrisania were born outside the U.S. (Top 3 countries of origin: Dominican Republic, Honduras, Jamaica)

	Highbridge and Morrisania	New York City
foreign-born	30%	36%

Report Card on Health

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

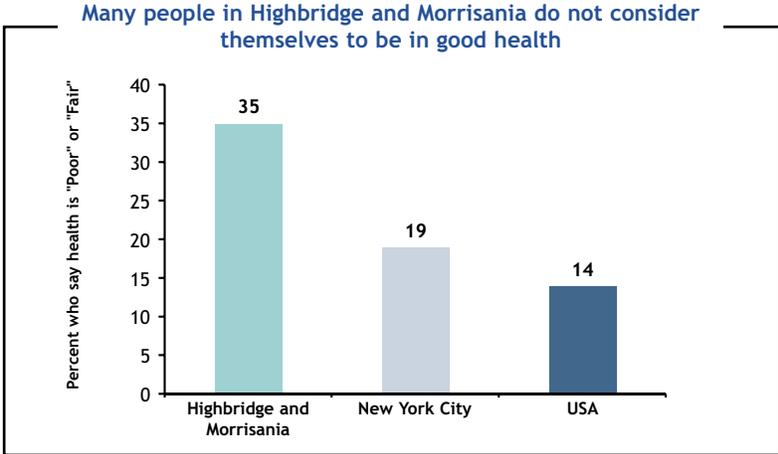
Highbridge and Morrisania compared to 41 other NYC neighborhoods

	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 Highbridge and Morrisania and across New York City were asked to rate their own health. The options were "Excellent," "Very Good," "Good," "Fair," and "Poor." In Highbridge and Morrisania, 35% 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 Highbridge and Morrisania residents. The death rates for all causes were higher in Highbridge and Morrisania than in New York City as a whole.

Leading Causes of Death in Highbridge and Morrisania, 2001

	Highbridge and Morrisania		New York City	Highbridge/Morrisania 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	1,334	1,119	736	50%	
Heart disease	316	307	304	5%	
Cancer	291	249	167	50%	
AIDS	118	74	22	3.5 times	
Pneumonia and influenza	67	65	32	2 times	
Diabetes	57	50	22	2 times	
Accidents and injuries	44	31	15	2 times	
Homicide	42	23	7	3 times	
Chronic lung disease	41	35	21	65%	
Stroke	41	35	24	50%	
Drug-related	41	25	10	2.5 times	

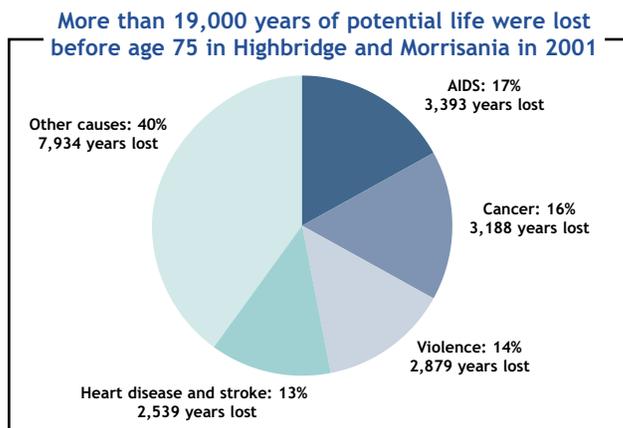
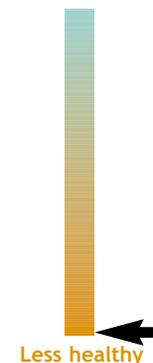
*Age-adjusted

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.” Almost two thirds of the years of potential life lost in Highbridge and Morrisania were due to 4 causes: AIDS, cancer, violence (including accidents and homicide), and heart disease/stroke.

How the overall death rate in Highbridge and Morrisania ranks among 42 New York City neighborhoods

More healthy



Causes of hospitalization

Heart disease is the leading cause of adult hospitalization in Highbridge and Morrisania. The hospitalization data also reveal the burden of illness due to mental illness, alcoholism, and drug use, as well as asthma. Hospitalization rates in Highbridge and Morrisania are higher than in New York City as a whole, particularly for HIV/AIDS, drug use, asthma, and diabetes.

Leading Causes of Hospitalization in Adults in Highbridge and Morrisania, 2001

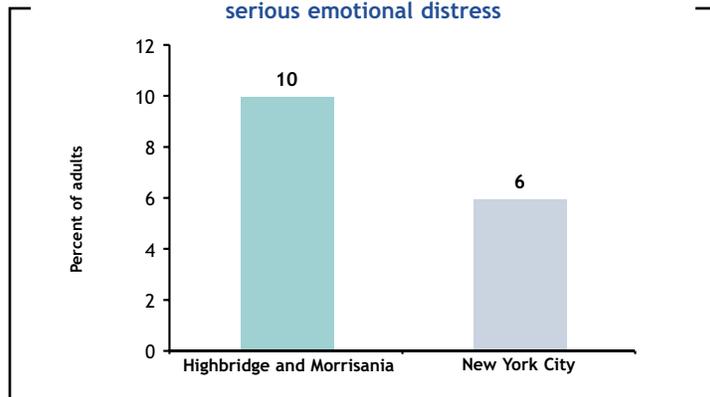
	Highbridge and Morrisania		New York City	Highbridge/Morrisania compared to NYC as a whole	
	No. of admissions	Admission rate (per 100,000 people)*	Admission rate (per 100,000 people)*	Higher by	Lower by
All causes	26,223	23,331	14,140	65%	
Heart disease	2,203	2,413	1,744	40%	
Drug-related	2,118	1,544	492	3 times	
Accidents and injuries	1,849	1,661	1,209	35%	
Mental Illness	1,294	1,005	671	50%	
HIV/AIDS	947	744	167	4.5 times	
Alcohol-related	892	713	387	85%	
Asthma	804	708	262	2.5 times	
Cancer	774	815	654	25%	
Diabetes	746	719	328	2 times	
Pneumonia and influenza	689	707	433	65%	

*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 Highbridge and Morrisania residents is one indication of the burden of mental illness there. In addition, in a recent telephone survey, 10% of adults in Highbridge and Morrisania – corresponding to about 13,000 people – reported experiencing serious emotional distress.

Thousands of adults in Highbridge and Morrisania report 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 Highbridge and Morrisania, and more than three thousand people are living with HIV/AIDS.

HIV/AIDS in Highbridge and Morrisania, 2001

Number of people newly diagnosed with HIV	389
Number of people living with HIV/AIDS	3,233

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.

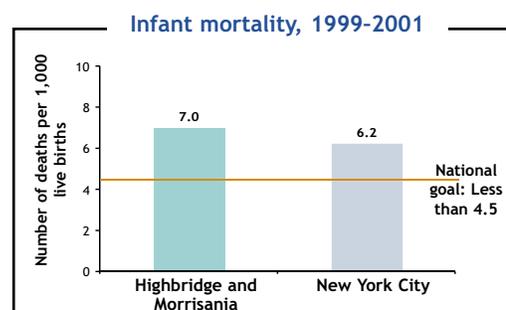
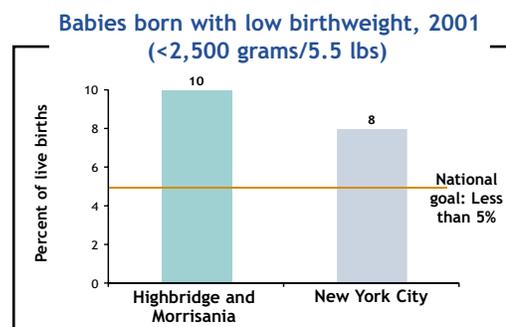
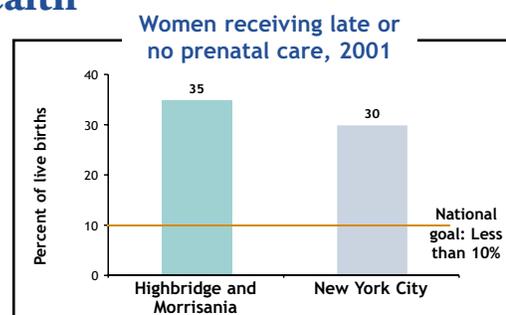
Maternal and infant health

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)

Highbridge and Morrisania are near the citywide average for all these indicators.

Healthy babies start with healthy mothers who get early, regular, and high-quality prenatal care.



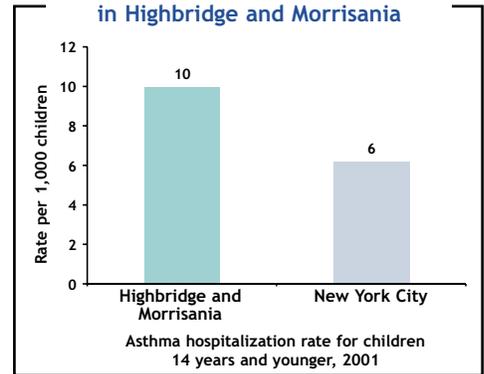
Asthma can be controlled. All children with asthma should have a written “Asthma Action Plan” to help them and their parents know which medicines to take and when to take them, how to avoid asthma triggers, and when to get medical care.

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 Highbridge and Morrisania is higher than in New York City as a whole. There were 573 asthma hospitalizations among children in Highbridge and Morrisania in 2001.

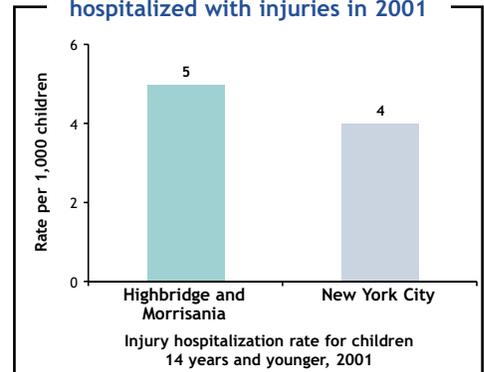
Severe asthma affects many children in Highbridge and Morrisania



Injuries

Injury is a preventable threat to children’s health. In 2001, 267 children in Highbridge and Morrisania were hospitalized with injuries, including those from falls, burns, and motor-vehicle crashes.

More than two hundred children in Highbridge and Morrisania were hospitalized with injuries in 2001

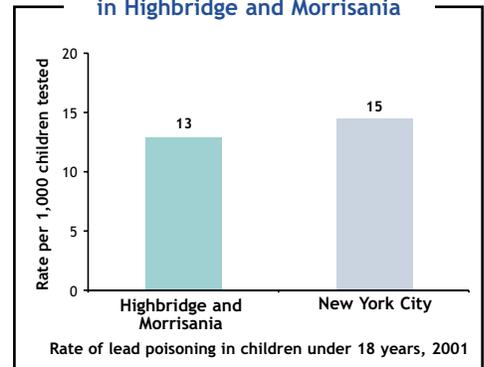


All children in New York City must have a blood lead test at 1 and 2 years of age.

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 192 children newly diagnosed with lead poisoning in Highbridge and Morrisania in 2001 (defined as blood levels over 10 µg/dL).

Lead poisoning – still a problem in Highbridge and Morrisania



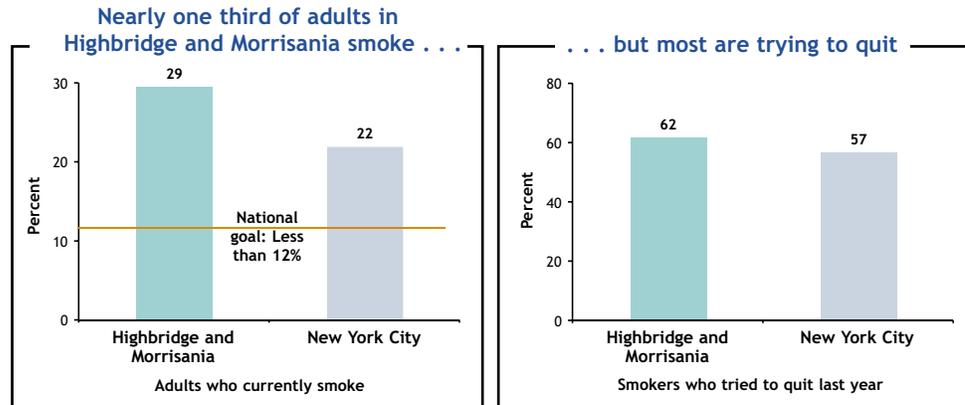
Targets for Prevention

Promoting healthy behaviors and reducing risks

Smoking

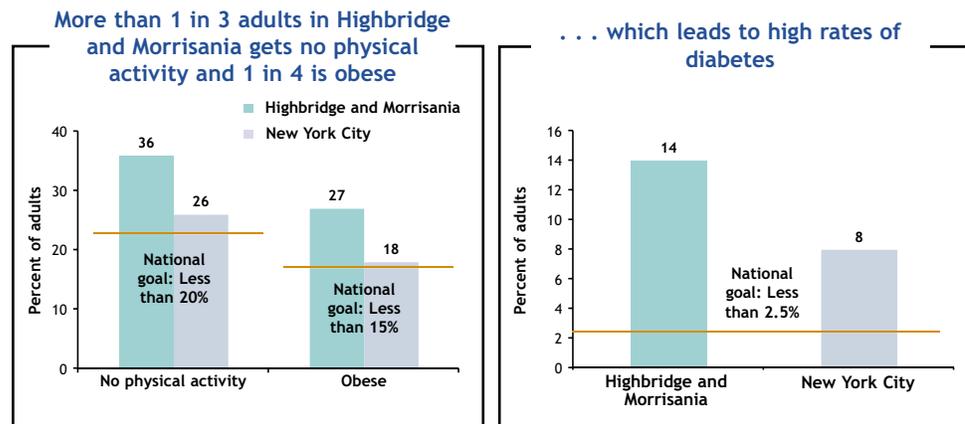
Smoking causes heart disease, stroke, emphysema, lung cancer, and many other illnesses. Currently, nearly one third of adults in Highbridge and Morrisania smoke. Most, however, want to quit, and more than half tried last year. There are a number of highly effective strategies, including medication (such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

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



Exercise, obesity, and diabetes

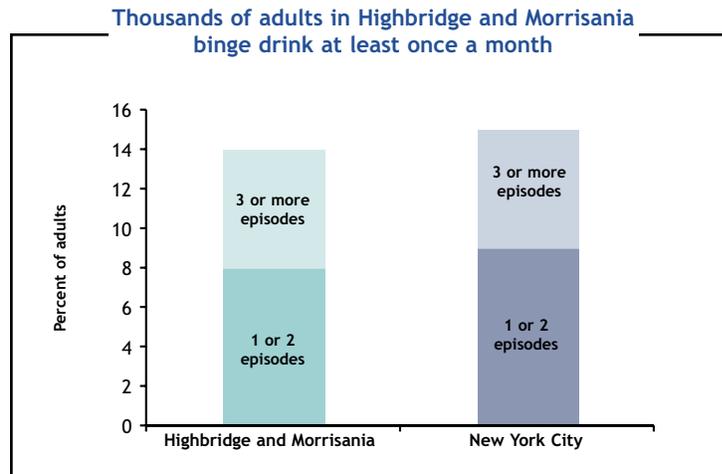
As New Yorkers exercise less and eat more, we are becoming more overweight. Being overweight puts people at risk for heart disease and many other health problems, especially diabetes. Diabetes is a chronic illness that can lead to heart attack, blindness, kidney failure, and amputations. Many New Yorkers 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.

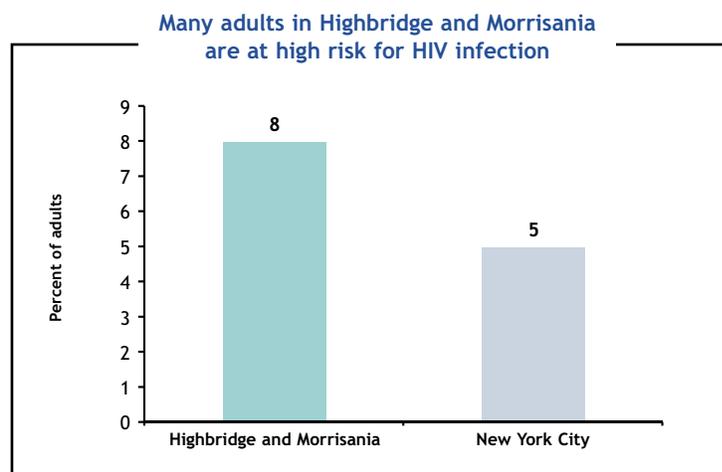
Alcohol

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 Highbridge and Morrisania – nearly 1 in 12 – 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.



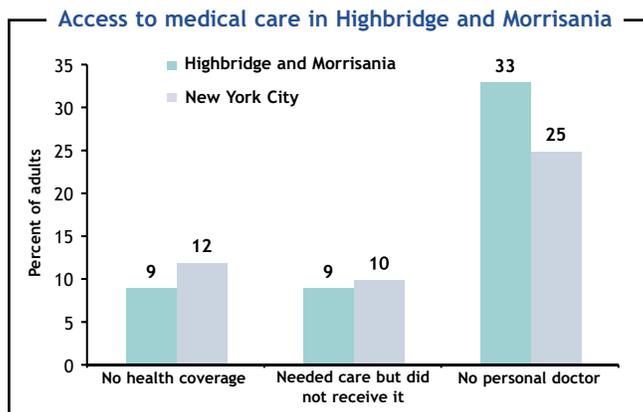
Medical Care

Opportunities for prevention

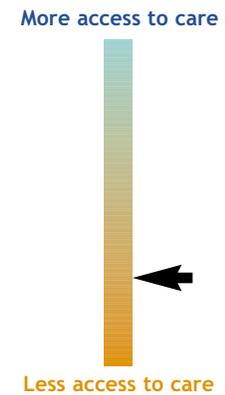
The medical community – doctors, nurses, counselors, and others – can help prevent illness. Screening and treatment for high blood pressure, high cholesterol, and cancer can prolong life. Flu and pneumonia vaccinations prevent many hospitalizations and deaths. Counseling to quit smoking or control drinking 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 Highbridge and Morrisania residents have poor access to medical care: about 11,000 people report no current health care coverage; 11,000 people did not get needed medical care in the past year; and 41,000 people do not have a personal doctor.

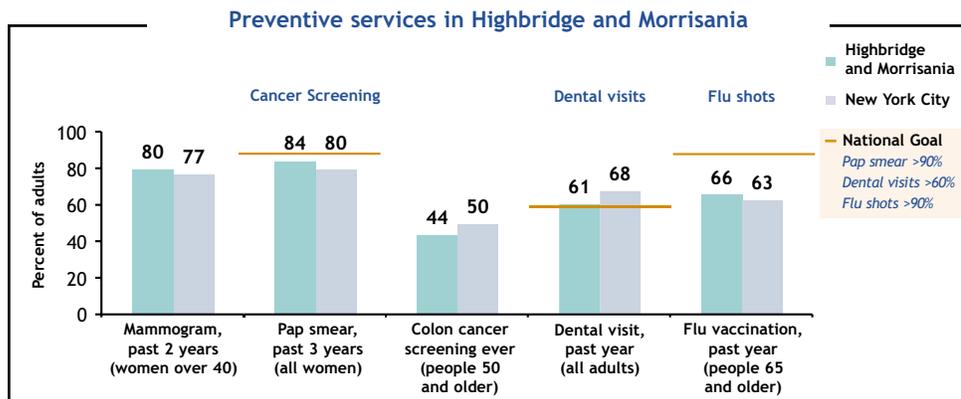


How access to medical care in Highbridge and Morrisania ranks among 42 New York City neighborhoods



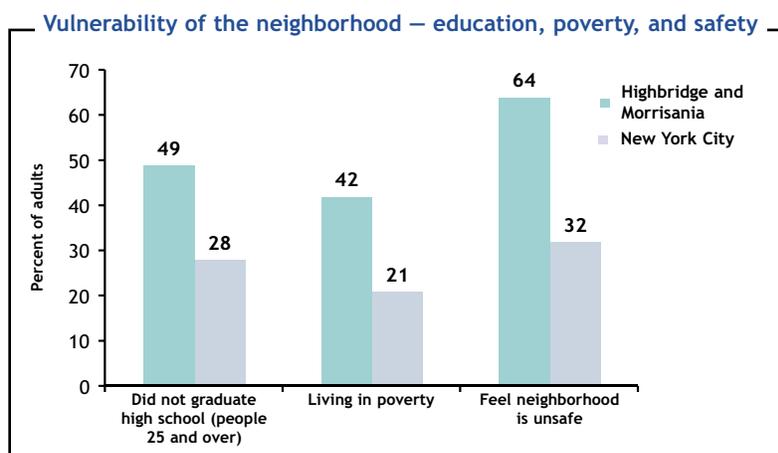
Cancer screening and other preventive services

Cancer screening and other clinical services can prevent or reduce the severity of many illnesses. This graph shows how rates in Highbridge and Morrisania 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 Highbridge and Morrisania 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.

Cover Photograph: Yankee Stadium, Bronx. Copyright NYC & Company, Inc.

Community Health Profile for Highbridge and Morrisania

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

by e-mailing: 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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NYC Community Health Profiles feature information
about 42 neighborhoods in New York City.

To contact NYC Community Health Profiles,
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