Community Health Profiles

New York City Department of Health and Mental Hygiene

SECOND EDITION — 2006

NYC Health
nyc.gov/health

TAKE CARE NEW YORK TAKE CARE
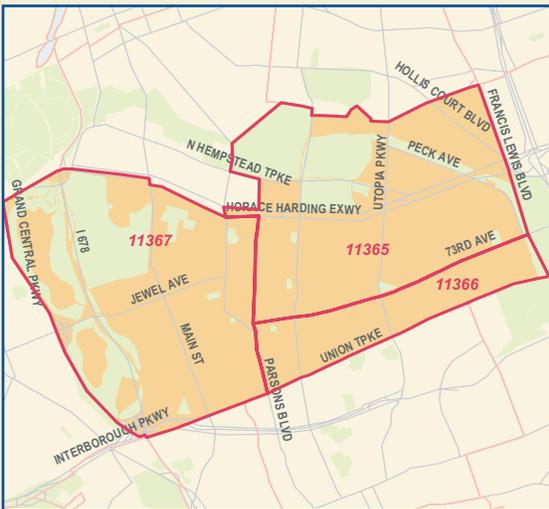
Central Queens

*(Including Fresh Meadows,
Hillcrest, and
Kew Gardens Hills)*

Community Health Profile, Second Edition: Central 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 Central Queens include:

- The primary cause of premature death in Central Queens is cancer (page 4).

- Although cancer screening rates in Central Queens are high in comparison with other neighborhoods, they remain below TCNY targets (page 11).

- The leading causes of death in Central Queens are primarily long-term (chronic) illnesses, for which many preventive measures and medical management are available (page 14).

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

Central Queens at a Glance

Population

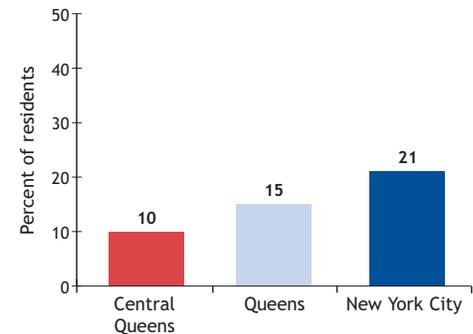Total number of people living in Central Queens in 2000:

93,100

Age

People in Central Queens are slightly older than in New York City overall

	Central Queens	Queens	NYC
0-17 years	**23%**	23%	24%
18-24 years	**8%**	9%	10%
25-44 years	**30%**	33%	33%
45-64 years	**23%**	22%	21%
65+ years	**16%**	13%	12%

Education

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

	Central Queens	Queens	NYC
Up to 8th grade	**6%**	11%	12%
Some high school, no diploma	**10%**	15%	16%
High school diploma	**25%**	28%	25%
Some college, no degree	**24%**	22%	20%
College graduate	**35%**	24%	27%

Poverty

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

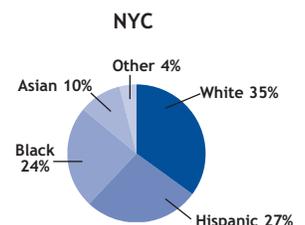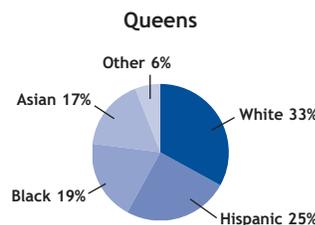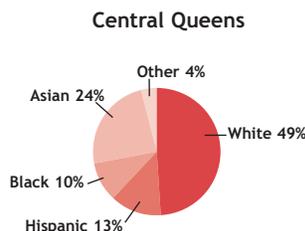## Foreign-born

The percent of Central Queens residents born outside the U.S. is lower than in Queens overall

Central Queens	Queens	NYC
39%	46%	36%

Race / Ethnicity

Central Queens has higher proportions of white and Asian residents than Queens and NYC overall

Central Queens
Other 4%
Asian 24%
White 49%
Black 10%
Hispanic 13%

Queens
Other 6%
Asian 17%
White 33%
Black 19%
Hispanic 25%

NYC
Other 4%
Asian 10%
White 35%
Black 24%
Hispanic 27%

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

Take Care Central 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 Central 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 Central 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

Central Queens 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 in Central Queens are less likely to consider themselves to be in fair or poor health

Percent of adults (18+)

- Central Queens: 14
- Queens: 20
- New York City: 21
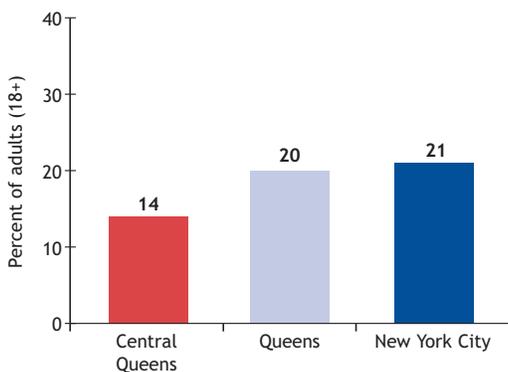
Percents are age-adjusted.
*Data Source*: NYC Community Health Survey 2002-03-04

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 Central Queens, residents are less likely to report being in fair or poor health (14%) than those in Queens (20%) and in New York City overall (21%).

Overall Death Rates in Central Queens

Death rates

In Central Queens, death rates are lower than in Queens and NYC overall
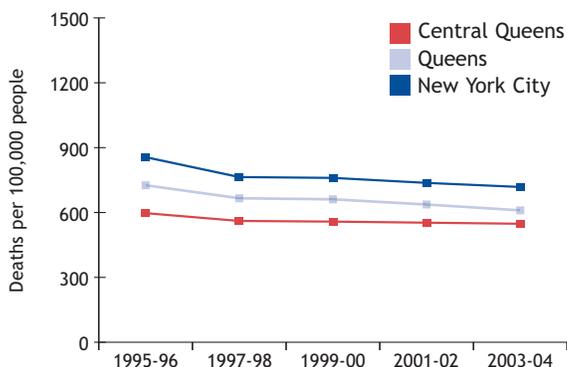
Rates are age-adjusted.
Data Sources: Bureau of Vital Statistics, NYC DOHMH, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning

Although New York City death rates have dropped over the last decade, the death rate in Central Queens has remained fairly steady and lower than in both Queens and New York City overall.

In 2003-2004, the average annual death rate in Central Queens was 10% lower than in Queens and more than 20% lower than in New York City overall (548/100,000 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 Central 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 Central Queens**
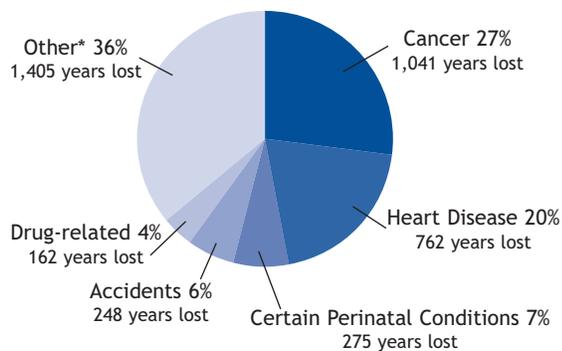
Other includes Homicide (4%), Accidents (4%), Congenital Conditions (3%), Diabetes (3%), Chronic Lower Respiratory Disease (3%), and Other (23%).

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 in Central Queens is one of the lowest, ranking 7th among 42 NYC neighborhoods
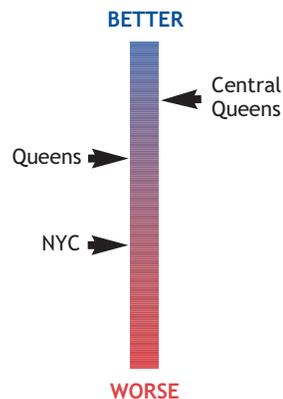
Data Sources: Bureau of Vital Statistics, NYC DOHMH, 2003-04; U.S. Census 2000/NYC Department of City Planning
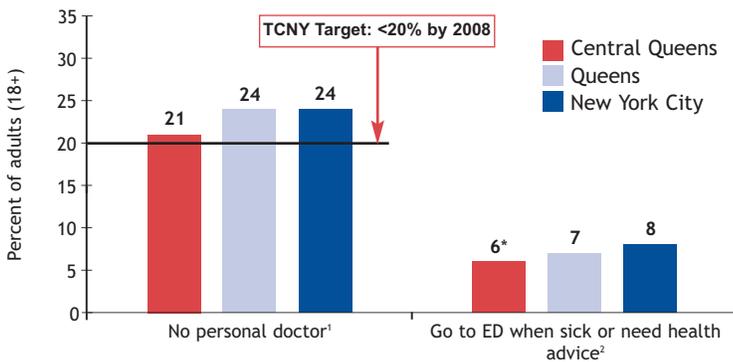
Take Care New York Goals
GOAL 1 Have a Regular Doctor or Other Health Care Provider

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 Central Queens, 21% of residents do not have a regular doctor, which is close to but still higher than the TCNY goal of less than 20%. In addition, 6% of Central 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)

TCNY Target: <20% by 2008

Central Queens
Queens
New York City

No personal doctor[1] — Central Queens: 21, Queens: 24, New York City: 24

Go to ED when sick or need health advice[2] — Central Queens: 6*, Queens: 7, New York City: 8

Percent of adults (18+)

*Estimate is unstable due to small sample size and should be interpreted with caution.
Percents are age-adjusted.
Data Sources: [1]NYC Community Health Survey 2002-03-04, [2]NYC Community Health Survey 2003-04
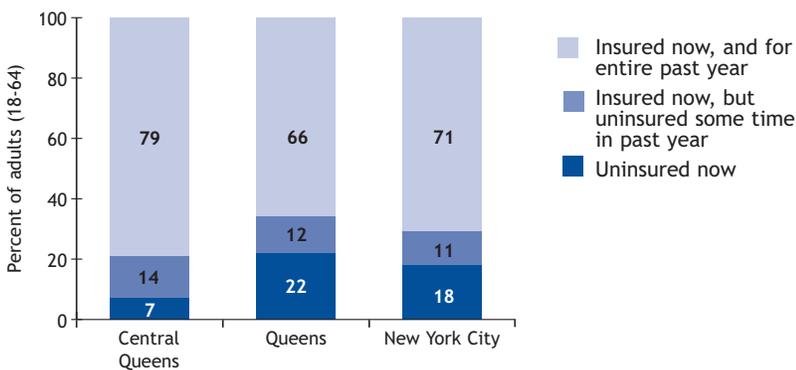
Avoidable hospitalizations

The 2004 avoidable hospitalization rate in Central Queens ranks very well (5th) among 42 NYC neighborhoods
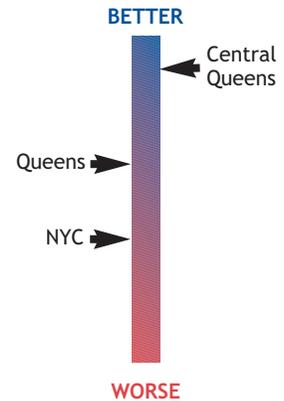
BETTER

Central Queens

Queens

NYC

WORSE

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 in Central Queens is uninsured or went without health insurance during the past year

Percent of adults (18-64)

	Central Queens	Queens	New York City
Insured now, and for entire past year	79	66	71
Insured now, but uninsured some time in past year	14	12	11
Uninsured now	7	22	18

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 in Central Queens are less likely to be uninsured (7%) than in Queens (22%) and New York City overall (18%). In addition to the currently uninsured, another 14% 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. About one fifth of Central Queens residents (18%) currently smoke. Many methods to quit smoking are available, and more than half of smokers in Central Queens (60%) are trying to kick the habit.

Residents who smoke

Fewer than 1 in 5 adults in Central Queens smokes . . .

TCNY Target: <18% by 2008

Percent of adults (18+)

Central Queens: 18
Queens: 16
New York City: 18
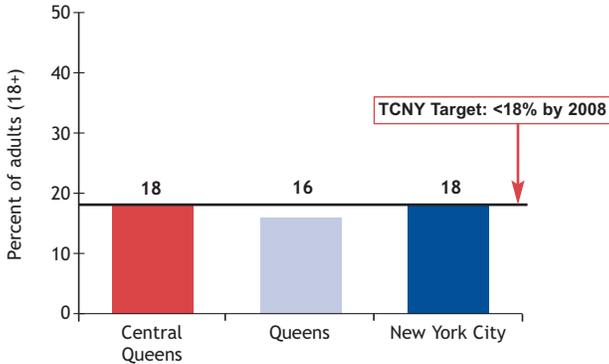
Percents are age-adjusted.
Data Source: NYC Community Health Survey 2004

Attempts to quit smoking in the past year

. . . and most smokers are trying to quit

Percent of adult smokers (18+)

Central Queens: 60
Queens: 68
New York City: 66
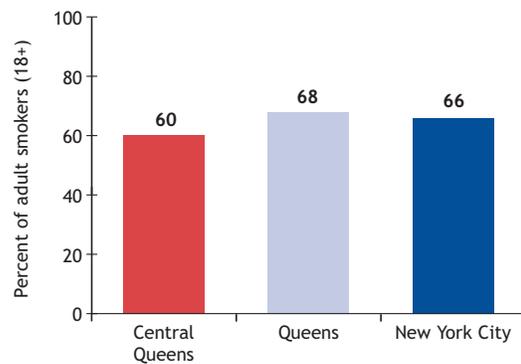
Percents are age-adjusted.
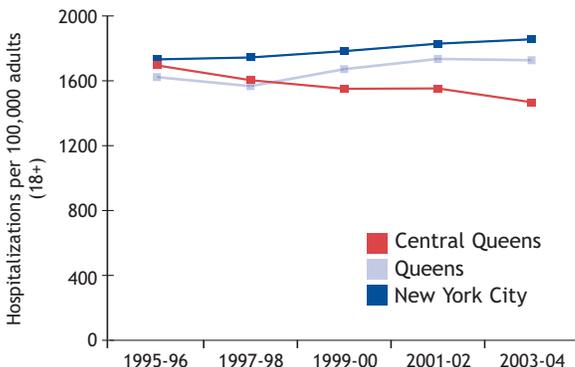*Data Source: NYC Community Health Survey 2004*

GOAL 3 Keep Your Heart Healthy

Heart disease can cause severe illness and death. Central Queens residents had an average annual heart disease hospitalization rate in 2003-2004 that was 15% lower than the Queens rate and 20% lower than the rate in NYC overall (1,468/100,000 vs. 1,727/100,000 in Queens and 1,856/100,000 in NYC). Also, the heart disease hospitalization rate in this community has decreased by more than 10% in the past decade. The heart disease death rate has also decreased slightly in Central Queens, and the 2003-2004 rate (237/100,000) was lower than the rates in Queens (288/100,000) and NYC overall (297/100,000).
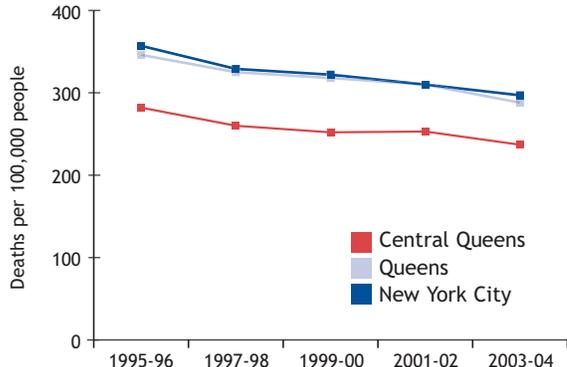
Heart disease hospitalizations

The heart disease hospitalization rate has decreased during the past 10 years in Central Queens

Hospitalizations per 100,000 adults (18+)

Legend: Central Queens, Queens, New York City

1995-96, 1997-98, 1999-00, 2001-02, 2003-04

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

Deaths due to heart disease are less common in Central Queens

Deaths per 100,000 people

Legend: Central Queens, Queens, New York City

1995-96, 1997-98, 1999-00, 2001-02, 2003-04

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 Central Queens, 26% of adults were told by a health care professional that they have high blood pressure (the same as in Queens and NYC overall), and one quarter (25%) were told that they have high cholesterol (similar to 26% in Queens and NYC overall).
Percents are age-adjusted. *Data Source: NYC Community Health Survey 2002*

Obesity

About 1 in 6 adults in Central Queens is obese
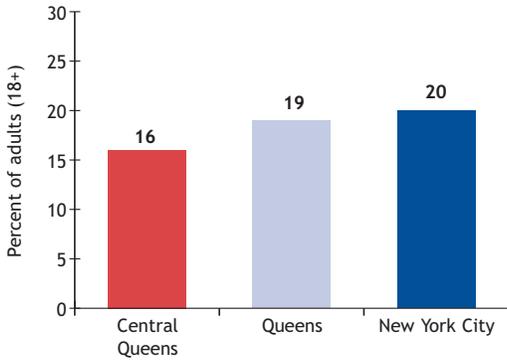
Obesity is defined as a body-mass-index (BMI) of 30 or greater.
Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03-04

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 Central Queens, less than one fifth of adults are obese (16%).

Diabetes

**One in 12 adults in Central Queens has diabetes**
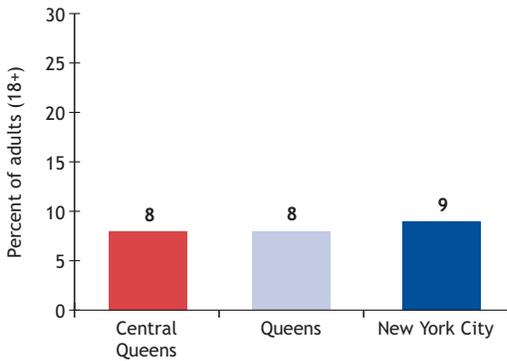
Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03-04

The increasing prevalence of obesity in the U.S. has contributed to an epidemic of diabetes. About 95% of diabetes cases are type 2 diabetes, which is strongly associated with obesity. Uncontrolled diabetes can worsen the harmful effects of high blood pressure, high cholesterol, and other risk factors for heart disease.

In Central Queens, 8% of adults have diabetes.

Days per week of recreational exercise

More than 2 in 5 adults in Central Queens report doing no physical activity
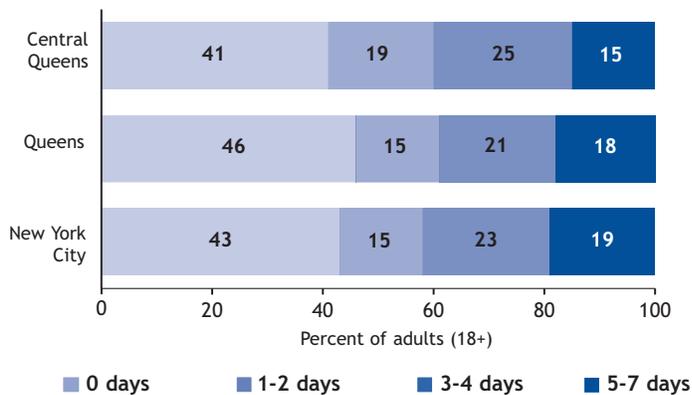
Survey Question: On average, how many days per week do you exercise for at least 30 minutes?
Percents are age-adjusted.
Data Source: NYC Community Health Survey 2003

Physical activity helps people maintain a healthy weight and strengthens the cardiovascular system. More than 4 in 10 Central Queens residents (41%) report doing no physical activity at all. Only 40% of adults 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.
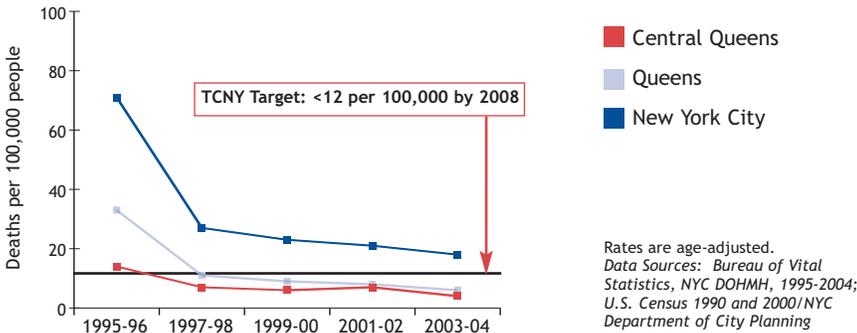
GOAL 4 Know Your HIV Status

Wide disparities exist in HIV across New York City communities. In Central Queens, the rate of HIV diagnoses (15/100,000) is half the Queens rate and only one quarter of the rate in NYC overall. Similarly, the rate of people living with HIV/AIDS in the community is much lower than the rates in Queens and NYC overall.

The death rate due to HIV disease has dropped by 70% during the past decade in this community. In 2003-2004, the average annual HIV-related death rate in Central Queens was two thirds the Queens rate and 75% lower than the NYC overall rate (4/100,000 vs. 6/100,000 in Queens and 18/100,000 in NYC).

Death rate due to HIV

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

TCNY Target: <12 per 100,000 by 2008

Legend: Central Queens, Queens, New York City

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

HIV/AIDS in 2004

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

Central Queens	15
Queens	30
New York City	55

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

Central Queens	27%
Queens	35%
New York City	29%

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

Central Queens	304
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. Fewer than 1 in 5 Central Queens adults (17%) has been tested for HIV in the past year. Also, nearly 3 in 10 positive HIV test results (27%) are "late" diagnoses (HIV has already progressed to AIDS) in Central Queens.

The most common way people get HIV is through sexual contact, and having multiple sex partners increases the risk of HIV. Condoms offer protection from HIV when engaging in sexual activities. Less than half (46%) of Central Queens adults who had more than 1 sex partner in the past year reported using a condom at their last sexual encounter.
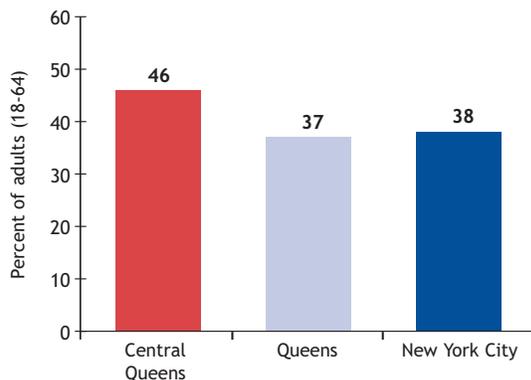
HIV testing

Fewer than 1 in 5 Central Queens adults has had an HIV test in the past year
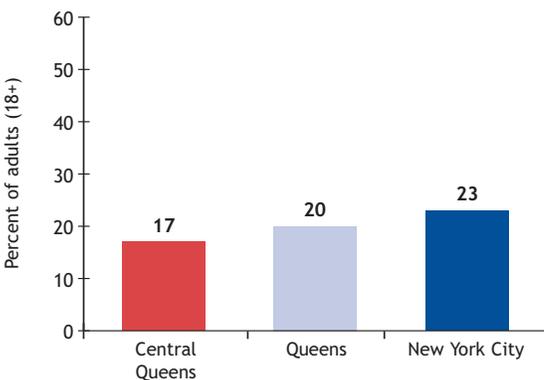
Percents are age-adjusted.
Data Source: NYC Community Health Survey 2003

Condom use at last sexual encounter

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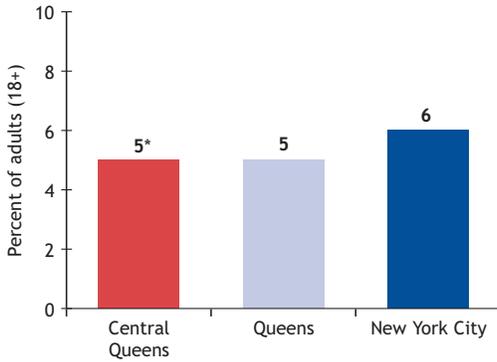

Analysis limited to adults aged 18-64 who reported having >1 sex partner in the past year, excluding women who reported having sex only with women. Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03-04

Psychological distress

One in 20 adults in Central Queens suffers from serious psychological distress

*Estimate is unstable due to small sample size and should be interpreted with caution.
Serious psychological distress can be identified in individuals using Kessler's K6 scale, a validated measure consisting of 6 simple questions about mood.
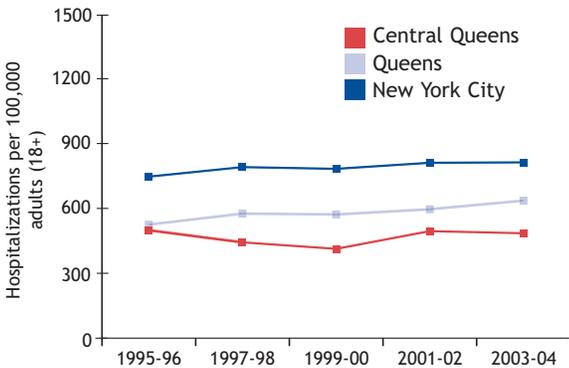Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03*

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

In Central Queens, 5% of residents experience serious psychological distress.

Mental illness

Hospitalizations for mental illness are lower in Central 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. Residents in Central Queens have had a lower mental illness hospitalization rate over the past 10 years (excluding alcohol- or drug-related illness) than residents in Queens and in New York City overall.

In 2003-2004, the community's average annual rate of mental illness hospitalizations (485/100,000) was more than 20% lower than the Queens rate (636/100,000) and 40% 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
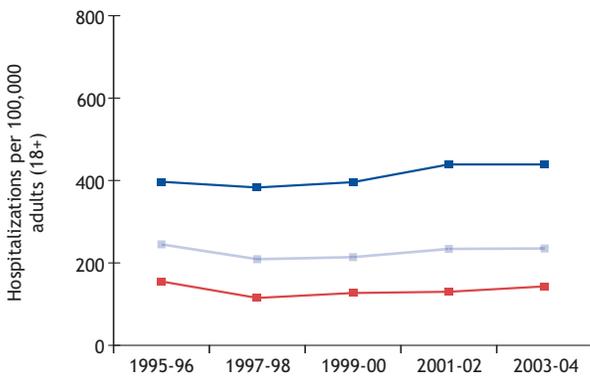
Binge drinking

More than 1 in 10 adults in Central Queens engaged in binge drinking in the past month
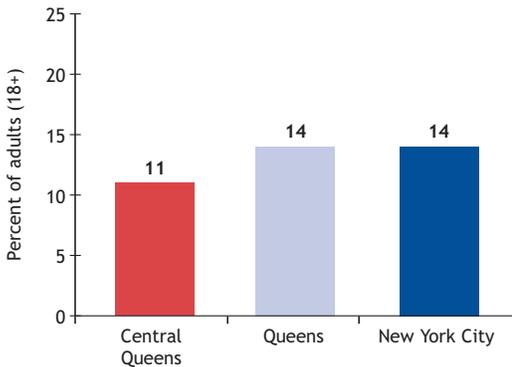
Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03-04

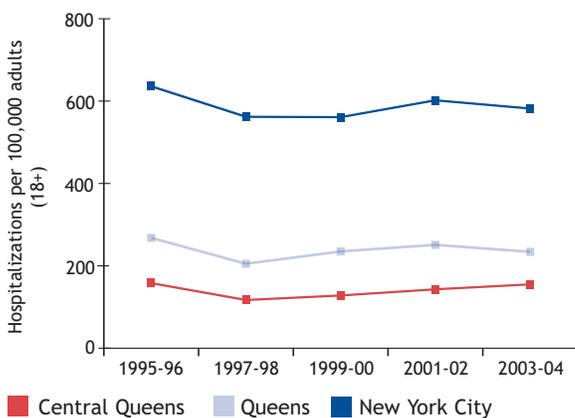## Alcohol-related hospitalizations

The alcohol-related hospitalization rate in Central Queens is one third of the NYC overall rate

Rates are age-adjusted.
Data Sources: New York State Department of Health Statewide Planning and Research Cooperative System, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning

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 Central Queens, 11% of adults 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 (143/100,000 vs. 235/100,000 in Queens and 439/100,000 in NYC).

The drug-related hospitalization rate in 2003-2004 was also lower (155/100,000) than in Queens (234/100,000) and New York City overall (595/100,000).

The 2003-2004 death rate due to drugs in Central Queens was similar to the rates in Queens and NYC overall (7/100,000 vs. 10/100,000).

Drug-related hospitalizations

The drug-related hospitalization rate is lower in Central 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 rates are similar in Central Queens, Queens and NYC overall
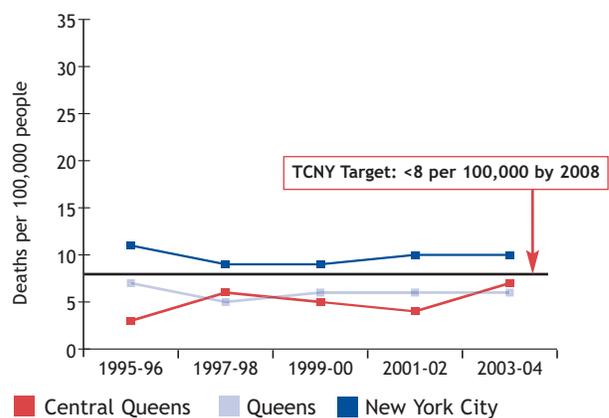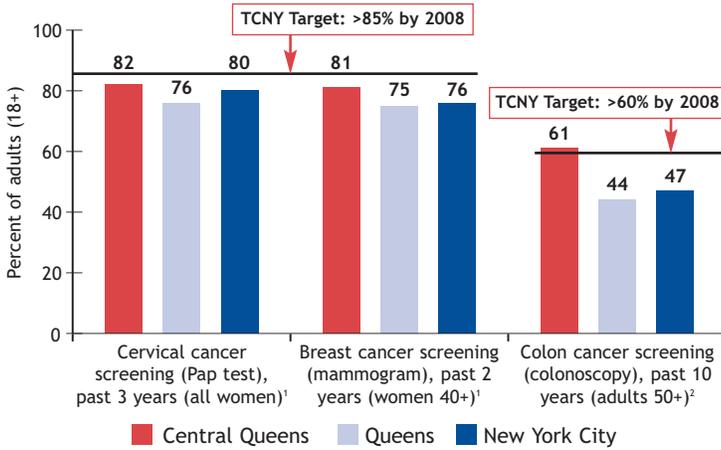

Rates are age-adjusted.
Data Sources: Bureau of Vital Statistics, NYC DOHMH, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning

![Take Care New York logo] **GOAL 7** Get Checked for Cancer

Cancer screenings

Cancer screening is an important part of routine preventive health care

Y-axis: Percent of adults (18+), scale 0 to 100

TCNY Target: >85% by 2008
TCNY Target: >60% by 2008

Cervical cancer screening (Pap test), past 3 years (all women)[1]: Central Queens 82, Queens 76, New York City 80

Breast cancer screening (mammogram), past 2 years (women 40+)[1]: Central Queens 81, Queens 75, New York City 76

Colon cancer screening (colonoscopy), past 10 years (adults 50+)[2]: Central Queens 61, Queens 44, New York City 47

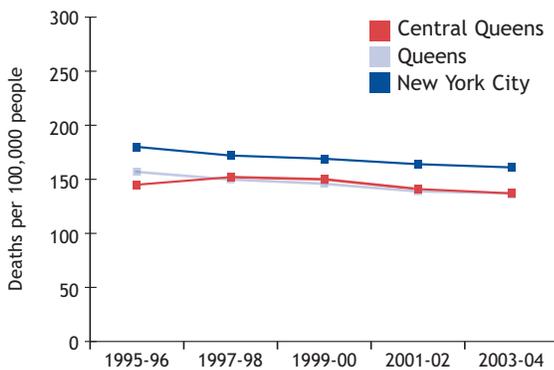Legend: ■ Central Queens ■ Queens ■ New York City

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

Cancer screening can save lives by preventing disease, catching cancer in its early stages and providing opportunities for treatment. TCNY has set specific screening targets for cervical, breast, and colon cancers.

Women in Central Queens are getting Pap tests for cervical cancer and mammograms for breast cancer at rates close to the TCNY target of more than 85%. Also, adults aged 50 and older in Central Queens are more likely to have had a colonoscopy in the past 10 years (61%) than those in Queens (44%) and NYC overall (47%), meeting the TCNY target.

Cancer deaths

The death rate due to cancer is lower in Central Queens than in NYC overall

Y-axis: Deaths per 100,000 people, scale 0 to 300

Legend: ■ Central Queens ■ Queens ■ New York City

X-axis: 1995-96, 1997-98, 1999-00, 2001-02, 2003-04

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 Central Queens during the past decade. The 2003-2004 average annual cancer death rate was the same as the Queens rate and 15% lower than the NYC overall rate (137/100,000 vs. 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 Central Queens are due to lung, colon, and prostate cancers. Among women, breast, lung, and colon cancers are the top 3 causes of cancer-related death.

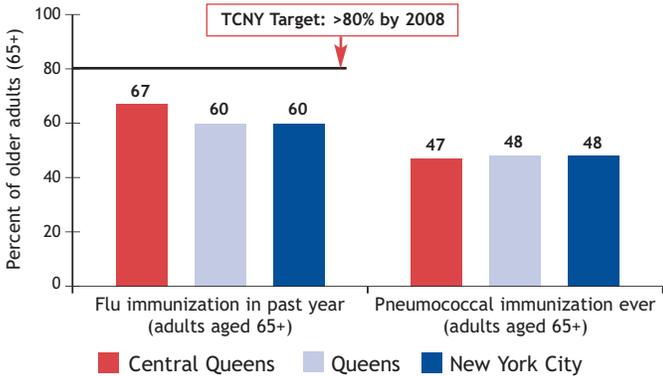| Highest cancer death rates in Central Queens (2003-2004)						
MEN				**WOMEN**		
	DEATHS / 100,000 PEOPLE				DEATHS / 100,000 PEOPLE	
Type of Cancer	Central Queens	NYC		Type of Cancer	Central Queens	NYC
Lung, trachea, bronchus	38	51		Breast	25	26
Colorectal	19	23		Lung, trachea, bronchus	18	28
Prostate	18	25		Colorectal	18	17
Blood-related	16	18		Blood-related	13	12
Pancreas	14	12		Pancreas	8	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

TCNY Target: >80% by 2008

Flu immunization in past year (adults aged 65+): Central Queens 67, Queens 60, New York City 60
Pneumococcal immunization ever (adults aged 65+): Central Queens 47, Queens 48, New York City 48

■ Central Queens   ■ Queens   ■ New York City

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 Central Queens flu immunization rate among older adults falls short of the TCNY target by more than 15%.

Immunization rates for pneumonia are lower than those for flu across NYC. Less than half of older adults in Central 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

Central Queens 7, Queens 8, New York City 10
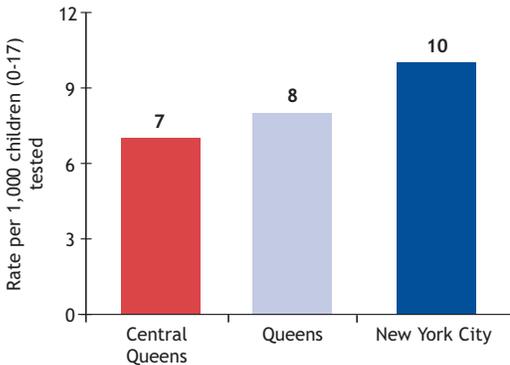
Lead poisoning is defined as a blood lead level ≥10 µg/dL.
*Data Source and Analysis: Lead Poisoning Prevention Program, NYC DOHMH, 2004*

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, 26 children in Central Queens (7/1,000) were newly identified with lead poisoning (defined as a blood lead level greater than or equal to 10 µg/dL).

Asthma in Adults and Children

Asthma

One in 20 adults in Central Queens suffers from asthma

Central Queens 5, Queens 4, New York City 5
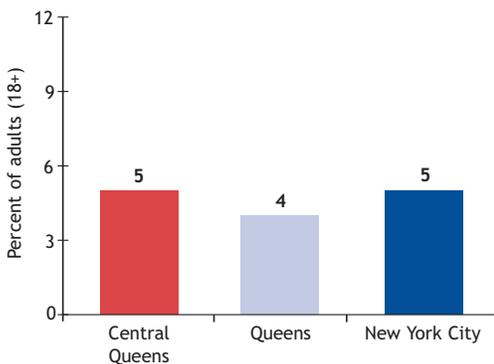
Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03-04

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 the same in Central Queens and 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 both adults and children (0-17 years old) in Central Queens are lower than in Queens and NYC overall. In addition, the rate among children has declined slightly in the past decade.

Adult asthma hospitalizations

Rates of asthma hospitalization are lower in Central Queens
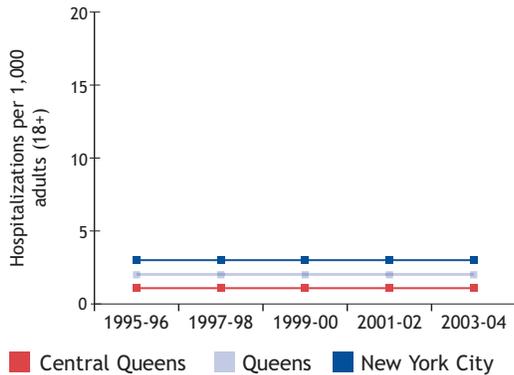
Rates are age-adjusted.
Data Sources: New York State Department of Health Statewide Planning and Research Cooperative System, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning

Child asthma hospitalizations

The child asthma hospitalization rate has decreased and remains lower in Central Queens
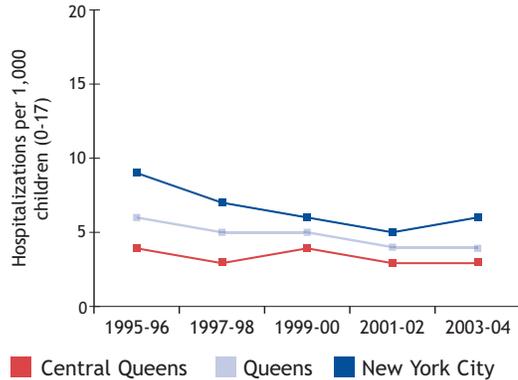
Data Sources: New York State Department of Health Statewide Planning and Research Cooperative System, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning

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 average annual percent of women who received late or no prenatal care has increased in Central Queens over the past decade. The 2003-2004 percent (31%) is lower than in Queens (36%) but slightly higher than in 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 average birth rate to teen moms in 2003-2004 in this community (30/1,000) was half the Queens rate (60/1,000) and 60% lower than in NYC overall (75/1,000).
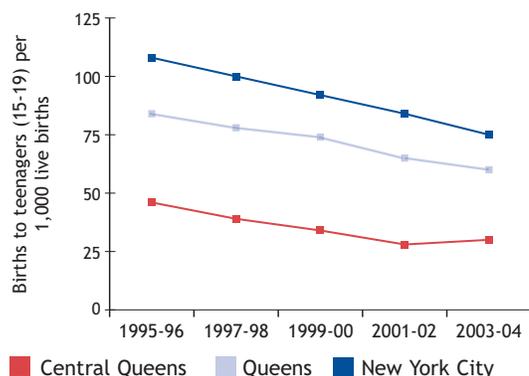
Prenatal care

Three in 10 mothers in Central Queens received late or no prenatal care
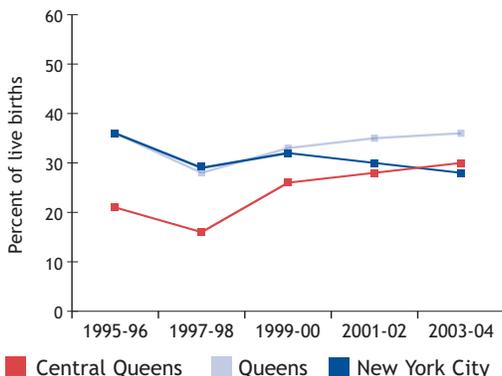
Data Source: Bureau of Vital Statistics, NYC DOHMH, 1995-2004

Teenage mothers

The birth rate to teenage mothers (15-19 years) is lower in Central Queens
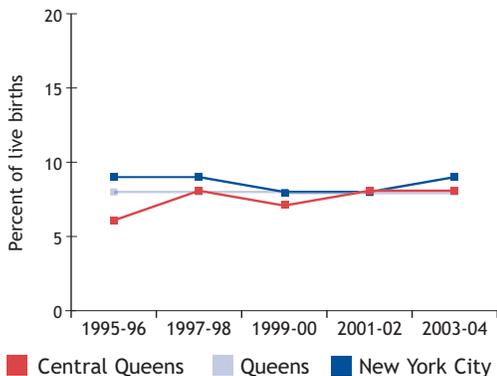

Data Source: Bureau of Vital Statistics, NYC DOHMH, 1995-2004

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 Central Queens was 8% — similar to 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 Central Queens (5/1,000) was similar to the NYC overall rate (6/1,000).

Low birthweight

Fewer than 1 in 10 babies in Central Queens is born with low birthweight

■ Central Queens   ■ Queens   ■ New York City

Low birthweight is defined as <2,500 grams (5.5 pounds).
Data Source: Bureau of Vital Statistics, NYC DOHMH, 1995-2004

Infant mortality rate (IMR)

The IMR is similar in Central Queens, Queens and NYC overall

TCNY Target: <5.0 per 1,000 by 2008

■ Central Queens   ■ Queens   ■ New York City
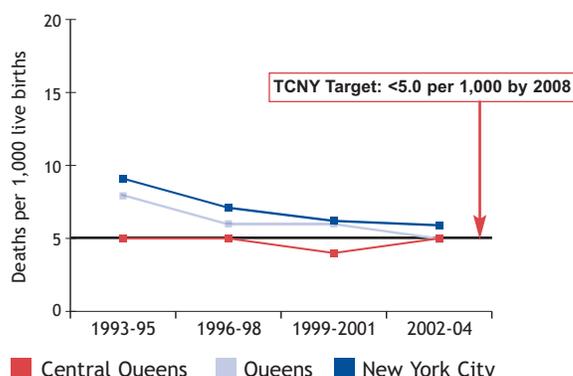
Data Source: Bureau of Vital Statistics, NYC DOHMH, 1993-2004

Neighborhood Health Highlight: Leading Causes of Death

Every New York City neighborhood has different health concerns. Here we highlight leading causes of death in Central Queens.

In comparison to other NYC neighborhoods, Central Queens is doing well on the major indicators of public health discussed in this report. However, people in this community still live with and die of diseases that could be better managed or even prevented. Looking at leading causes of death can provide a good picture of the primary health concerns for people in Central Queens.

People today across the U.S., particularly in healthy and affluent areas, are less likely to die from sudden (acute) illnesses than they were 100 years ago. Now many people live long enough to develop serious, long-term (chronic) conditions that require management for many years.

Many of the top causes of death in Central Queens are due to chronic illnesses. Preventive measures and medical management are available for most chronic diseases. Delaying the onset of these conditions can increase quality of life and the number of years lived free of disease. Looking at the top chronic causes in Central Queens:

■ The risk of heart disease and diabetes can be reduced by quitting smoking, increasing physical activity and maintaining a healthy weight (pages 6-7).

■ Many forms of cancer can be prevented or identified early for treatment with screenings (page 11).

■ Blood pressure and cholesterol can be controlled to reduce the risk of hypertension and stroke (page 6).

■ Many chronic lung diseases could be avoided by quitting smoking (page 6).

Leading Causes of Death: Central Queens	
Cause of Death	**Rate per 100,000 people**
Heart Disease	237
Cancer	137
Stroke	19
Influenza (flu) & pneumonia	18
Chronic Lung Diseases	18
Diabetes	17
Accidents	11
Diseases of the Nervous System	9
Drug-related	7
Hypertension	6

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

TAKING ACTION

For more information on leading causes of illness and death and ways to reduce their risk, **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 Central Queens are 11365, 11366, and 11367. 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. Central Queens statistics from these individual-year datasets include data from the neighboring communities of Northeast Queens, including Bayside, Douglaston, Little Neck, and Oakland Gardens.

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.

Community Health Profile for Central Queens

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

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