Community Health Profiles

New York City Department of Health and Mental Hygiene









The Health of Lower Manhattan

Message From the Commissioner

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

Thomas R. Frieden, MD, MPH
Commissioner

Snapshots From the Census

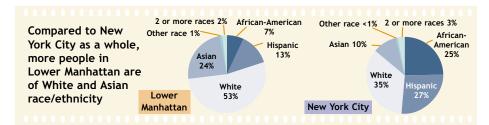
Number of people living in Lower Manhattan in 2000:

30,895

Age

People in Lower Manhattan are older than the New York City average		Lower Manhattan	New York City
	Children (0-17 years)	13%	24%
	Adults (18-64 years)	76%	64%
	Adults (65 years and above)	11%	12%

Race/Ethnicity



Country of Origin

Almost 1 in 3 residents of Lower Manhattan was born outside the U.S. (Top 3 countries of origin: China, Hong Kong, Canada)

Lower Manhattan New York City 28% foreign-born 36% foreign-born

Report Card on Health

This summary shows how the health of residents of Lower Manhattan compares to 41 other neighborhoods in New York City. In general, people living in Lower Manhattan have a moderate 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.

Lower Manhattan compared to 41 other NYC neighborhoods

	Below Average Avera (bottom 10) (middle	•
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 Lower Manhattan and across New York City were asked to rate their own health. The options were "Excellent," "Very Good," "Good," "Fair," and "Poor." In Lower Manhattan, 20% 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

Heart disease and cancer caused the most deaths in 2001 among Lower Manhattan residents.

Leading Causes of Death in Lower Manhattan, 2001

	Lower	Manhattan	New York City	Lower Ma compai NYC as a	ed to
	No. of deaths	Death rate (per 100,000 people)*	Death rate (per 100,000 people)*	Higher by	Lower by
All causes	202	715	736		5%
Heart disease	62	220	304		30%
Cancer	59	216	167	30%	
Pneumonia and influenza	11	37	32	15%	
Stroke	10	35	24	50%	

^{*}Age-adjusted

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.

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 40% of the years of potential life lost in Lower Manhattan were due to 2 causes: cancer and heart disease/stroke. Smoking is, by far, the leading preventable cause of these illnesses.

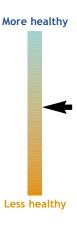
More than 1,700 years of potential life were lost before age 75 in Lower Manhattan in 2001

Other causes of death: 61%
1,051 years lost

Cancer: 28%
479 years lost

Heart disease and stroke: 11%
197 years lost

How the overall death rate in Lower Manhattan ranks among 42 New York City neighborhoods



Causes of hospitalization

Injury is the leading cause of adult hospitalization in Lower Manhattan. The hospitalization data also reveal the burden of illness due to mental illness, alcohol abuse, and drug use, as well as diabetes. The hospitalization rate for alcohol-related causes is particularly high in Lower Manhattan, compared with New York City as a whole.

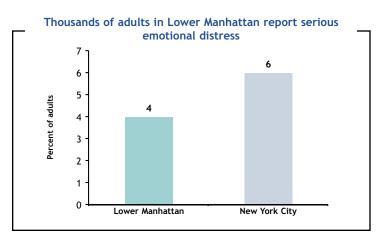
Leading Causes of Hospitalization in Adults in Lower Manhattan, 2001

	Lower Manhattan		New York City	Lower Manhattan 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	3,049	12,635	14,140		10%
Accidents and injuries	287	1,235	1,209	<2.5%	
Heart disease	268	1,278	1,744		25%
Alcohol-related	207	829	387	2 times	
Drug-related	171	576	492	15%	
Cancer	162	764	654	15%	
Mental Illness	140	499	671		25%
Pneumonia and influenza	94	434	433	<2.5%	
Stroke	93	452	379	20%	
Diabetes	54	244	328		25%
Asthma	36	145	262		45%

^{*}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 Lower Manhattan residents is one indication of the burden of mental illness there. In addition, in a recent telephone survey, 4% of adults in Lower Manhattan — corresponding to about 1,200 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. More than two hundred Lower Manhattan residents are living with HIV/AIDS.

HIV/AIDS in Lo	wer Manhattan,	2001
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Number of people newly diagnosed with HIV 32 Number of people living with HIV/AIDS 265

The Health of Mothers and Children

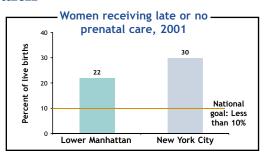
The health of mothers and children is an important measure of the overall health of a community. Ensuring that children get a healthy start and learn healthy behaviors has many long-term benefits.

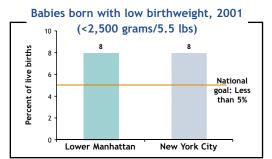
Maternal and infant health

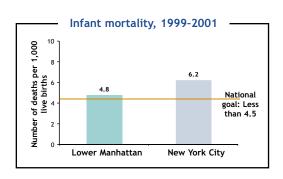
Three important measures of maternal and infant health are:

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

Lower Manhattan is at or better than the citywide average for all these indicators, but has not yet reached national goals.





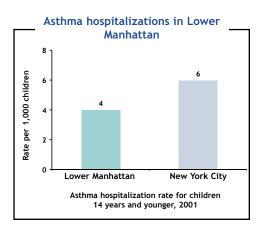


Healthy babies start with healthy mothers who get early, regular, and high-quality prenatal care. Asthma can be controlled. All children with asthma should have a written "Asthma Action Plan" to help them and their parents know which medicines to take and when to take them, how to avoid asthma triggers, and when to get medical care.

Children's health

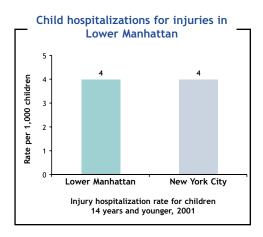
Asthma

Asthma affects a large number of New York City's children and is a leading cause of missed school days and hospitalizations. There were 14 asthma hospitalizations among children in Lower Manhattan in 2001.



Injuries

Injury is a preventable threat to children's health. In 2001, 14 children in Lower Manhattan were hospitalized with injuries, including those from falls, burns, and motor-vehicle crashes.



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 16 children newly diagnosed with lead poisoning in Lower Manhattan in 2001 (defined as blood levels over $10~\mu g/dL$).



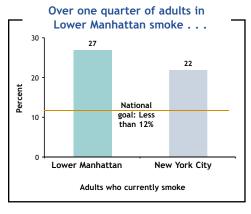
Targets for Prevention

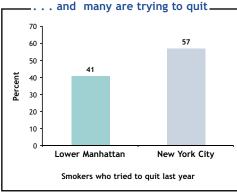
Promoting healthy behaviors and reducing risks

Smoking

Smoking causes heart disease, stroke, emphysema, lung cancer, and many other illnesses. Currently, over one quarter of adults in Lower Manhattan smoke. Many, however, want to quit. There are a number of highly effective strategies, including medication (such as the nicotine patch) and counseling, to help smokers quit.

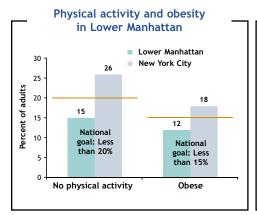
Stopping smoking is the most important thing smokers can do to improve their health.

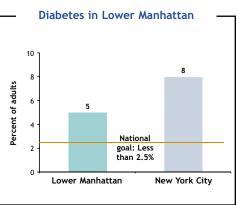




Exercise, obesity, and diabetes

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.

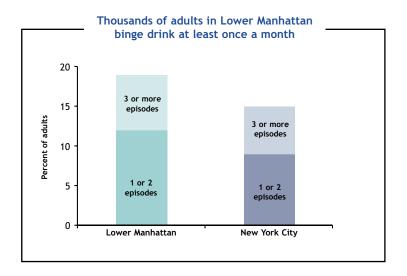




^{*} The Centers for Disease Control and Prevention recommends that adults get either moderate exercise for at least 30 minutes, 5 or more times per week, or vigorous exercise for at least 20 minutes, 3 or more times per week. Obesity is defined by someone's "weight for height" — otherwise known as the "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.

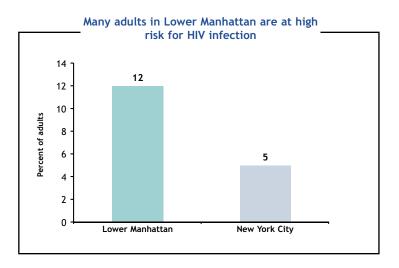
Alcohol

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 Lower Manhattan - nearly 1 in 8 - 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

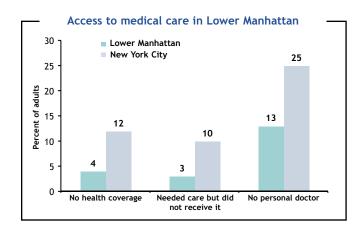
The medical community — doctors, nurses, counselors, and others — can help prevent illness. Screening and treatment for high blood pressure, high cholesterol, and cancer can prolong life. Flu and pneumonia vaccinations prevent many hospitalizations and deaths. Counseling to quit smoking or control drinking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

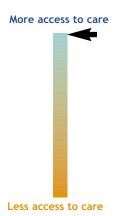
Access to care

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. Most Lower Manhattan residents have good access to medical care. However, some do not: about

1,000 people report no current health care coverage; 700 people did not get needed medical care in the past year; and 3,500 people do not have a personal doctor.

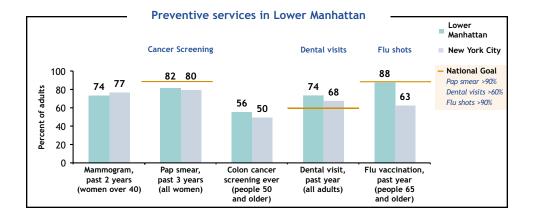
How access to medical care in Lower Manhattan ranks among 42 New York City neighborhoods





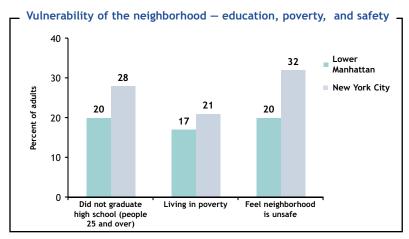
Cancer screening and other preventive services

Cancer screening and other clinical services can prevent or reduce the severity of many illnesses. This graph shows how rates in Lower Manhattan 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 many Lower Manhattan residents, reflected in the 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: View from Brooklyn Bridge. Photo by Adam Karpati.

Community Health Profile for Lower Manhattan

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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To contact NYC Community Health Profiles, e-mail profiles@health.nyc.gov

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