The Health of Southeast Queens

(Including Cambria Heights, Glen Oaks, Laurelton, Queens Village, and Rosedale)
This community health profile highlights important health issues facing the residents of Southeast Queens, 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 Southeast Queens and across New York City.

Thomas R. Frieden, MD, MPH
Commissioner
This summary shows how the health of residents of Southeast Queens compares to 41 other neighborhoods in New York City. In general, people living in Southeast Queens are healthier than residents of other New York City neighborhoods. However, there remain many health issues that can be improved. The challenge of improving these indicators does not fall only on neighborhood residents but is a shared responsibility between all sectors of society.

<table>
<thead>
<tr>
<th>Southeast Queens compared to 41 other NYC neighborhoods</th>
</tr>
</thead>
<tbody>
<tr>
<td>Below Average (bottom 10)</td>
</tr>
<tr>
<td>General health</td>
</tr>
<tr>
<td>Maternal and child health</td>
</tr>
<tr>
<td>Infectious diseases (including pneumonia, influenza, HIV/AIDS)</td>
</tr>
<tr>
<td>Chronic diseases (including heart disease, diabetes, lung diseases)</td>
</tr>
<tr>
<td>Prevention in doctors’ offices (including cancer screening and immunizations)</td>
</tr>
<tr>
<td>Access to medical care</td>
</tr>
</tbody>
</table>

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

In a recent survey, adults in Southeast Queens and across New York City were asked to rate their own health. The options were “Excellent,” “Very Good,” “Good,” “Fair,” and “Poor.” In Southeast Queens, 88% said their health is “Good,” “Very Good,” or “Excellent.” The way people rate their own health is an indication of the overall health of a community.
Heart disease and cancer caused the most deaths in 2001 among Southeast Queens residents. The death rates for all causes were lower in Southeast Queens than in New York City as a whole.

**Leading Causes of Death in Southeast Queens, 2001**

<table>
<thead>
<tr>
<th></th>
<th>Southeast Queens</th>
<th>New York City</th>
<th>Southeast Queens compared to NYC as a whole</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. of deaths</td>
<td>1,074</td>
<td>736</td>
<td>25%</td>
</tr>
<tr>
<td>Death rate (per 100,000 people)*</td>
<td>556</td>
<td>736</td>
<td></td>
</tr>
<tr>
<td>Death rate (per 100,000 people)*</td>
<td>736</td>
<td>736</td>
<td></td>
</tr>
<tr>
<td>Higher by</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Lower by</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All causes</td>
<td>1,074</td>
<td>736</td>
<td>25%</td>
</tr>
<tr>
<td>Heart disease</td>
<td>474</td>
<td>304</td>
<td>15%</td>
</tr>
<tr>
<td>Cancer</td>
<td>271</td>
<td>167</td>
<td>20%</td>
</tr>
<tr>
<td>Pneumonia and influenza</td>
<td>45</td>
<td>32</td>
<td>20%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>33</td>
<td>22</td>
<td>25%</td>
</tr>
<tr>
<td>Stroke</td>
<td>26</td>
<td>24</td>
<td>40%</td>
</tr>
<tr>
<td>Chronic lung disease</td>
<td>23</td>
<td>21</td>
<td>45%</td>
</tr>
<tr>
<td>AIDS</td>
<td>15</td>
<td>22</td>
<td>65%</td>
</tr>
</tbody>
</table>

*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." Nearly half the years of potential life lost in Southeast Queens were due to 2 causes: heart disease/stroke and cancer. Smoking is, by far, the leading preventable cause of these illnesses.
Causes of hospitalization

Heart disease is the leading cause of adult hospitalization in Southeast Queens. The hospitalization data also reveal the burden of illness due to mental illness and alcohol abuse, as well as injuries and asthma. Hospitalization rates in Southeast Queens are lower than in New York City as a whole.

### Leading Causes of Hospitalization in Adults in Southeast Queens, 2001

<table>
<thead>
<tr>
<th>Cause</th>
<th>Southeast Queens</th>
<th>New York City</th>
<th>Southeast Queens compared to NYC as a whole</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. of admissions</td>
<td>15,242</td>
<td>14,140</td>
<td></td>
</tr>
<tr>
<td>Admission rate (per 100,000 people)*</td>
<td>10,104</td>
<td>14,140</td>
<td></td>
</tr>
</tbody>
</table>

*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 Southeast Queens residents is one indication of the burden of mental illness there. In addition, in a recent telephone survey, 3% of adults in Southeast Queens — corresponding to about 4,000 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 Southeast Queens residents are living with HIV/AIDS.

<table>
<thead>
<tr>
<th>HIV/AIDS in Southeast Queens, 2001</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of people newly diagnosed with HIV</td>
</tr>
<tr>
<td>Number of people living with HIV/AIDS</td>
</tr>
</tbody>
</table>

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)

Southeast Queens is higher than the citywide average for all these indicators, especially the infant mortality rate.
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 196 asthma hospitalizations among children in Southeast Queens in 2001.

Injuries
Injury is a preventable threat to children’s health. In 2001, 158 children in Southeast Queens were hospitalized with injuries, including those from falls, burns, and motor-vehicle crashes.

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 96 children newly diagnosed with lead poisoning in Southeast Queens in 2001 (defined as blood levels over 10 µg/dL).

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

**Smoking**
Smoking causes heart disease, stroke, emphysema, lung cancer, and many other illnesses. Currently, about 1 in 7 adults in Southeast Queens smokes. 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](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 Southeast Queens 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.
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 Southeast Queens residents have poor access to medical care: about 17,000 people report no current health care coverage; 8,500 people did not get needed medical care in the past year; and 34,000 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 Southeast Queens compare to New York City as a whole and to some national goals.
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. Southeast Queens has a low poverty rate, but there are still many residents whose health is at risk due to poor social and economic conditions.

Technical notes

Data sources

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: Brookville Park, Queens. Photo by Don Weiss.
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, e-mail profiles@health.nyc.gov.