Community Health Profiles

New York City Department of Health and Mental Hygiene
SECOND EDITION — 2006

NYC Health
nyc.gov/health

TAKE CARE

Northeast Bronx

(Including Co-op City, Eastchester, Wakefield, Williamsbridge, and Woodlawn)
Community Health Profile, Second Edition: The Northeast Bronx

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 the Northeast Bronx include:

- One quarter of Northeast Bronx residents are obese, and 12% have diabetes (page 7).
- The birth rate to teenage mothers is more than 40% higher in this community than in New York City overall (page 13).
- The rate of uninsured residents in the Northeast Bronx increased dramatically between 2002 and 2004 (page 14).

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

The Northeast Bronx at a Glance

<table>
<thead>
<tr>
<th>Population</th>
<th>Age</th>
<th>Poverty</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of people living in the Northeast Bronx in 2000:</td>
<td>People in the Northeast Bronx are slightly older in age than those in the Bronx overall</td>
<td>In the Northeast Bronx, the percent of residents living below the poverty level is lower than in the Bronx and NYC overall</td>
</tr>
<tr>
<td>186,000</td>
<td>Northeast Bronx: 25% Bronx: 30% NYC: 24%</td>
<td>Northeast Bronx: 16% Bronx: 31% NYC: 21%</td>
</tr>
</tbody>
</table>

Education

One in 5 Northeast Bronx residents aged 25 and older (19%) have completed a college education compared to 14% in the Bronx and 27% in NYC overall.

<table>
<thead>
<tr>
<th>Education</th>
<th>Northeast Bronx</th>
<th>Bronx</th>
<th>NYC</th>
<th>Northeast Bronx</th>
<th>Bronx</th>
<th>NYC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up to 8th grade</td>
<td>9%</td>
<td>16%</td>
<td>12%</td>
<td>16%</td>
<td>26%</td>
<td>25%</td>
</tr>
<tr>
<td>Some high school, no diploma</td>
<td>18%</td>
<td>22%</td>
<td>16%</td>
<td>22%</td>
<td>26%</td>
<td>20%</td>
</tr>
<tr>
<td>High school diploma</td>
<td>28%</td>
<td>26%</td>
<td>25%</td>
<td>22%</td>
<td>26%</td>
<td>20%</td>
</tr>
<tr>
<td>Some college, no degree</td>
<td>26%</td>
<td>22%</td>
<td>20%</td>
<td>22%</td>
<td>26%</td>
<td>20%</td>
</tr>
<tr>
<td>College graduate</td>
<td>19%</td>
<td>14%</td>
<td>27%</td>
<td>14%</td>
<td>26%</td>
<td>20%</td>
</tr>
</tbody>
</table>

Race / Ethnicity

The Northeast Bronx has a higher proportion of black residents than the Bronx and NYC overall.

<table>
<thead>
<tr>
<th>Race / Ethnicity</th>
<th>Northeast Bronx</th>
<th>Bronx</th>
<th>NYC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asian</td>
<td>2%</td>
<td>3%</td>
<td>15%</td>
</tr>
<tr>
<td>Other Asian</td>
<td>4%</td>
<td>3%</td>
<td>10%</td>
</tr>
<tr>
<td>White</td>
<td>16%</td>
<td>15%</td>
<td>35%</td>
</tr>
<tr>
<td>Black</td>
<td>58%</td>
<td>31%</td>
<td>24%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>20%</td>
<td>48%</td>
<td>27%</td>
</tr>
</tbody>
</table>

Data Source: U.S. Census 2000/NYC Department of City Planning
Take Care Northeast Bronx

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 Northeast Bronx 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 the Northeast Bronx 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**
The Northeast Bronx ranks as average or above on 9 of the 10 indicators when compared to the 41 other NYC neighborhoods

<table>
<thead>
<tr>
<th>Take Care New York Goals</th>
<th>Below Average (bottom 10)</th>
<th>Average (middle 22)</th>
<th>Above Average (top 10)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Have a regular doctor</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Be tobacco-free</td>
<td></td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>3 Keep your heart healthy</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Know your HIV status</td>
<td></td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>5 Get help for depression</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Live free of alcohol and drugs</td>
<td></td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>7 Get checked for cancer</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Get the immunizations you need</td>
<td></td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>9 Make your home safe and healthy</td>
<td></td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>10 Have a healthy baby</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

How Residents Rate Their Own Health

**Overall health**
Almost one fifth of adults in the Northeast Bronx consider themselves to be in fair or poor health

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 the Northeast Bronx, residents are less likely to report being in fair or poor health (19%) than those in the Bronx overall (28%).
Death rates in New York City have dropped over the last decade, decreasing by 10% in the Northeast Bronx. In 2003-2004, the average annual death rate in the Northeast Bronx was nearly 10% lower than in the Bronx but nearly 10% higher than the New York City overall rate (779/100,000 vs. 852/100,000 in the Bronx and 718/100,000 in NYC). Throughout this profile, cause-specific death rates are provided for TCNY goals.

**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 the Northeast Bronx is cancer, as well as in the Bronx and New York City overall.

**Top 5 causes of years of potential life lost**

Cancer causes the most years of potential life lost in the Northeast Bronx

- Cancer 22% 2,874 years lost
- Heart Disease 20% 2,610 years lost
- HIV-related 6% 800 years lost
- Certain Perinatal Conditions 6% 825 years lost
- Homicide 7% 979 years lost
- Other* 39% 5,122 years lost

*Other includes Accidents (4%), Drug-related (4%), Diabetes (3%), Congenital Conditions (2%), Pneumonia and Influenza (2%), and Other (24%).

Data Source: 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 the Northeast Bronx, residents are less likely to be without a regular doctor (19%) than those in the Bronx (26%) and New York City overall (24%). In addition, Northeast Bronx adults were less likely to go to the ED when they were sick or need health advice in 2004 than in 2002. Although the size of the decrease cannot be precisely estimated because of small sample size, the percent has clearly dropped, indicating improved access to care.

Access to care

Without a primary provider, people may seek routine health care in the emergency department (ED)

Avoidable hospitalizations

The 2004 avoidable hospitalization rate in the Northeast Bronx ranks 30th among 42 NYC neighborhoods

Health insurance

More than a quarter of adults in the Northeast Bronx are uninsured or went without health insurance during the past year

Health insurance is important for access to health care. A similar proportion of residents in the Northeast Bronx (17%), the Bronx (18%), and New York City overall (18%) are currently uninsured. In addition, another 10% 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. Northeast Bronx residents are less likely to report currently smoking (11%) than those in the Bronx (20%) and NYC overall (18%). Many methods to quit smoking are available, and 8 in 10 smokers in the Northeast Bronx (80%) are trying to kick the habit.

Residents who smoke
Northeast Bronx residents smoke at lower rates than those in NYC overall . . .

Attempts to quit smoking in the past year
. . . and the majority of smokers are trying to quit

GOAL 3  Keep Your Heart Healthy

Heart disease can cause severe illness and death. The heart disease hospitalization rate in the Northeast Bronx has increased by 7% in the past decade. Residents in this community had an average annual heart disease hospitalization rate in 2003-2004 that was lower than the Bronx rate and the same as the NYC overall rate (1,865/100,000 vs. 2,201/100,000 in the Bronx). The heart disease death rate in the Northeast Bronx decreased during the past 10 years. In 2003-2004, the rate in this community (311/100,000) was the same as the rate in the Bronx and similar to the NYC overall rate (297/100,000).

Heart disease hospitalizations
The heart disease hospitalization rate increased in the Northeast Bronx

Deaths due to heart disease
The heart disease death rate decreased in the Northeast Bronx

High blood pressure and high cholesterol. Both of these conditions contribute to heart disease. In the Northeast Bronx, one third of adults (32%) were told by a health care professional that they have high blood pressure (similar to 29% in the Bronx and 26% in NYC overall), and more than one fifth (22%) were told that they have high cholesterol (similar to 24% in the Bronx and 26% in NYC overall).
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 the Northeast Bronx, one quarter of adults (25%) are obese, which is one-fourth higher than in New York City overall (20%).

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 the Northeast Bronx, 12% of adults have diabetes, compared to 9% in New York City overall.

Physical activity helps people maintain a healthy weight and strengthens the cardiovascular system. Four in 10 Northeast Bronx residents (42%) report not exercising at all. About the same proportion (41%) 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 the Northeast Bronx, the rate of HIV diagnoses is half the Bronx overall rate, and the rate of people living with HIV/AIDS in the community is lower than the rates in the Bronx and NYC overall.

The death rate due to HIV disease has dropped by two-thirds during the past decade in the Northeast Bronx. In 2003-2004, the average annual HIV-related death rate in this community was less than half of the Bronx rate and similar to the NYC overall rate (16/100,000 vs. 39/100,000 in the Bronx and 18/100,000 in NYC).

Death rate due to HIV

HIV-related death rates in the Northeast Bronx have dropped dramatically in the past decade.

HIV/AIDS in 2004

<table>
<thead>
<tr>
<th>Total HIV diagnoses</th>
<th>per 100,000 people* (13+)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Northeast Bronx</td>
<td>44</td>
</tr>
<tr>
<td>Bronx</td>
<td>86</td>
</tr>
<tr>
<td>New York City</td>
<td>55</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>% HIV diagnosed concurrently with AIDS** (13+)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Northeast Bronx</td>
</tr>
<tr>
<td>Bronx</td>
</tr>
<tr>
<td>New York City</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>People living with HIV/AIDS per 100,000 people* (13+)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Northeast Bronx</td>
</tr>
<tr>
<td>Bronx</td>
</tr>
<tr>
<td>New York City</td>
</tr>
</tbody>
</table>

*Rates are age-adjusted.
**Within 31 days of HIV diagnosis – crude percents

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 3 in 10 Northeast Bronx residents (29%) were tested for HIV in the past year. In addition, one third of positive HIV test results (33%) are “late” diagnoses (HIV has already progressed to AIDS) in the Northeast Bronx.

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 one third (28%) of Northeast Bronx adults who had more than 1 sex partner in the past year reported using a condom at their last sexual encounter.

HIV testing

Less than one third of Northeast Bronx adults had an HIV test in the past year.

Condom use at last sexual encounter

Fewer than 1 in 3 Northeast Bronx adults with multiple sex partners used a condom.

*Percents are age-adjusted.
Data Source: NYC Community Health Survey 2003.

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.
Per cents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03-04.
GOAL 5 Get Help for Depression

Psychological distress

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

In the Northeast Bronx, 4% of residents experience serious psychological distress, compared to 7% in the Bronx overall.

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

Mental illness

Hospitalizations for mental illness have increased in the Northeast Bronx.

Hospitalization rates are one way to look at serious mental illness in a neighborhood. The mental illness hospitalization rate (excluding alcohol- or drug-related illness) in the Northeast Bronx has increased by 12% during the past decade, but remained lower than in the Bronx overall.

In 2003-2004, the community’s average annual rate of mental illness hospitalizations (783/100,000) was lower than the Bronx rate (949/100,000) and similar to 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

Adults in the Northeast Bronx are less likely to have engaged in binge drinking in the past month

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 the Northeast Bronx, adults are less likely to report engaging in at least one episode of binge drinking (defined as consuming 5 or more drinks on one occasion) in the past month than adults in the Bronx and NYC overall.

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 the Northeast Bronx was lower than in the Bronx and in New York City overall (231/100,000 vs. 569/100,000 in the Bronx and 439/100,000 in NYC). The 2003-2004 drug-related hospitalization rate in this community (442/100,000) also was lower than in the Bronx (1,258/100,000) and New York City overall (595/100,000).

The death rate due to drugs in 2003-2004 was lower in the Northeast Bronx than in the Bronx but the same as in NYC overall (10/100,000 vs. 17/100,000 in the Bronx).
Cancer screenings

In the Northeast Bronx, cancer screening is lower than TCNY targets

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 the Northeast Bronx are getting Pap tests for cervical cancer at a rate close to the TCNY target of more than 85%. However, the rate of mammograms for breast cancer among women is 10% lower than the target. Also, less than half of adults aged 50 and older in the Northeast Bronx have had a colonoscopy in the past 10 years.

Cancer deaths

The death rate due to cancer has remained fairly constant in the Northeast Bronx

The death rate due to cancer has remained fairly steady in the Northeast Bronx during the past decade. The 2003-2004 average annual death rate due to cancer was similar to the Bronx rate but 10% higher than the NYC overall rate (177/100,000 vs. 185/100,000 in the Bronx and 161/100,000 in NYC).

The highest cancer-related death rates among men in the Northeast Bronx are due to lung, prostate, and colon cancers. Among women, breast, lung, and colon cancers are the top 3 causes of cancer-related death.


<table>
<thead>
<tr>
<th>MEN</th>
<th>DEATHS / 100,000 PEOPLE</th>
<th>WOMEN</th>
<th>DEATHS / 100,000 PEOPLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of Cancer</td>
<td>Northeast Bronx</td>
<td>NYC</td>
<td>Type of Cancer</td>
</tr>
<tr>
<td>Lung, trachea, bronchus</td>
<td>51</td>
<td>51</td>
<td>Breast</td>
</tr>
<tr>
<td>Prostate</td>
<td>39</td>
<td>25</td>
<td>Lung, trachea, bronchus</td>
</tr>
<tr>
<td>Colorectal</td>
<td>28</td>
<td>23</td>
<td>Colorectal</td>
</tr>
<tr>
<td>Blood-related</td>
<td>21</td>
<td>18</td>
<td>Blood-related</td>
</tr>
<tr>
<td>Liver</td>
<td>11</td>
<td>10</td>
<td>Pancreas</td>
</tr>
</tbody>
</table>

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

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 Northeast Bronx flu immunization rate among older adults falls short of the TCNY target by nearly 30%.

Immunization rates for pneumonia are lower than those for flu across NYC. Only half of older adults in the Northeast Bronx 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

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, 49 children in the Northeast Bronx (5/1,000) 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
Asthma is less common among Northeast Bronx adults than adults in NYC overall

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.

Self-reported asthma rates among adults in the Northeast Bronx (4%) are lower than in the Bronx overall (7%).
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.

The average annual asthma hospitalization rate for adults in 2003-2004 in the Northeast Bronx was lower than in the Bronx overall. The rate among children (0-17 years old) in 2003-2004 was also lower than the Bronx rate but higher than the NYC overall rate (8/1,000 vs. 9/1,000 in the Bronx and 6/1,000 in NYC).

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 declined in the Northeast Bronx from 44% in 1995-1996 to 23% in 2003-2004, which is a lower proportion than in both the Bronx (26%) and 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 annual teen birth rate in 2003-2004 in the Northeast Bronx (107/1,000) was 40% higher than in NYC overall (75/1,000).
Babies born with low birthweight tend to have more health problems than others. In 2003-2004, the average percent of babies with low birthweight in the Northeast Bronx was 11% — higher than in 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 the Northeast Bronx was 9/1,000, higher than both the NYC overall rate (6/1,000) and the TCNY target.

**Low birthweight**

More than 1 in 10 babies in the Northeast Bronx are born with low birthweight.

![Graph showing percent of live births](image)

**Infant mortality rate (IMR)**

The IMR in the Northeast Bronx is higher than NYC overall rate and the TCNY target.

![Graph showing deaths per 1,000 live births](image)

Neighborhood Health Highlight: The Uninsured

Every New York City neighborhood has different health concerns. Here we highlight the uninsured in Northeast Bronx.

The percent of adults in the Northeast Bronx who do not have health insurance nearly tripled between 2002 and 2004. Although the size of this increase cannot be precisely estimated because of small sample size, the percent of uninsured in this community has clearly gone up.

Lack of health insurance can lead to poor access to care, which can threaten health. In fact, those without insurance in the Northeast Bronx are less likely to have a primary care provider than those with insurance (49% vs. 85%).

Individuals who do not have health insurance are also less likely to get preventive health care. For example, in the Northeast Bronx, those without health insurance are three times less likely to have been screened for colon cancer (had a colonoscopy) in the past 10 years than those with insurance (15% vs. 49%).

**TAKING ACTION**

Free and low cost health insurance is available through Medicaid and Family Health Plus for eligible low-income groups. Despite this, 28% of Northeast Bronx residents living below the poverty level are uninsured.

For information on finding **affordable or free health insurance**, call 311.
The neighborhood was classified according to where it ranked in comparison to the other 41 NYC neighborhoods with Above Average =
TCNY report card
rankings 1-10, Average = rankings 11-32, and Below Average = rankings 33-42 where 1 = the best neighborhood score. 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.

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 the Northeast Bronx are 10466, 10469, 10470, and 10475. 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.

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.

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 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.

Cover Photograph: East 233rd Street, Bronx. Photo by Don Weiss. Maps by Susan Resnick.

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Community Health Profile for the Northeast Bronx

This report is an updated, expanded second edition of the 2002 Community Health Profile for the Northeast Bronx.

NEW IN THE SECOND EDITION:
- Take Care New York report card
- Time-trend data on births, hospitalizations, and deaths
- More neighborhood-specific health statistics
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