

Community Health Profiles

New York City Department of Health and Mental Hygiene

SECOND EDITION — 2006



TAKE CARE

Southwest Brooklyn

*(Including Bay Ridge,
Bensonhurst, and
Dyker Heights)*

Community Health Profile, Second Edition: Southwest Brooklyn

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 **Southwest Brooklyn** include:

- Cancer is the primary cause of premature death in Southwest Brooklyn (page 4).
- More than 1 in 5 adults in Southwest Brooklyn smoke, and the death rate due to heart disease is higher in this community than in NYC overall (page 6).
- Women in Southwest Brooklyn are less likely to get screened for cervical cancer than women in NYC overall, and foreign-born women in this community have lower screening rates than those born in the U.S. (pages 11, 14).

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

Southwest Brooklyn at a Glance

Population

Total number of people living in Southwest Brooklyn in 2000:

194,600

Age

People in Southwest Brooklyn are older than in Brooklyn and New York City overall

| | Southwest Brooklyn | Brooklyn | NYC |
|-------------|--------------------|----------|-----|
| 0-17 years | 19% | 27% | 24% |
| 18-24 years | 8% | 10% | 10% |
| 25-44 years | 32% | 31% | 33% |
| 45-64 years | 23% | 21% | 21% |
| 65+ years | 18% | 11% | 12% |

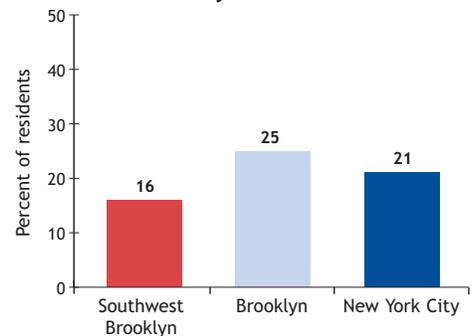
Education

Southwest Brooklyn residents aged 25 and older have completed more years of education than those in Brooklyn overall

| | Southwest Brooklyn | Brooklyn | NYC |
|------------------------------|--------------------|----------|-----|
| Up to 8th grade | 12% | 13% | 12% |
| Some high school, no diploma | 13% | 18% | 16% |
| High school diploma | 28% | 27% | 25% |
| Some college, no degree | 20% | 20% | 20% |
| College graduate | 27% | 22% | 27% |

Poverty

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



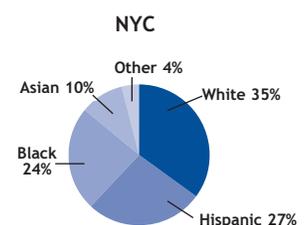
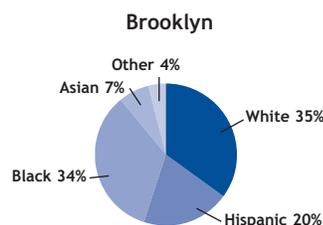
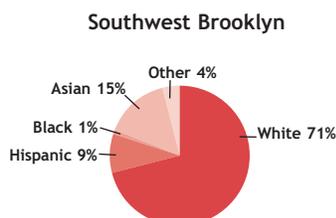
Foreign-born

The percent of Southwest Brooklyn residents born outside the U.S. is slightly higher than in NYC overall

| Area | Percent |
|--------------------|---------|
| Southwest Brooklyn | 40% |
| Brooklyn | 38% |
| NYC | 36% |

Race / Ethnicity

Southwest Brooklyn has a higher proportion of white residents than Brooklyn and NYC overall



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

Take Care Southwest Brooklyn



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 Southwest Brooklyn 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 Southwest Brooklyn 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

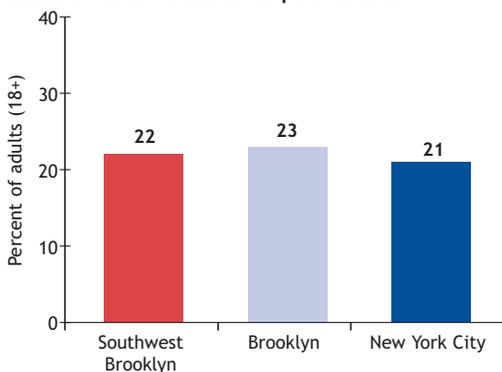
Southwest Brooklyn ranks as average or above on almost all indicators when compared to the 41 other NYC neighborhoods

| | 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

More than 1 in 5 adults in Southwest Brooklyn consider themselves to be in fair or poor health



Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03-04

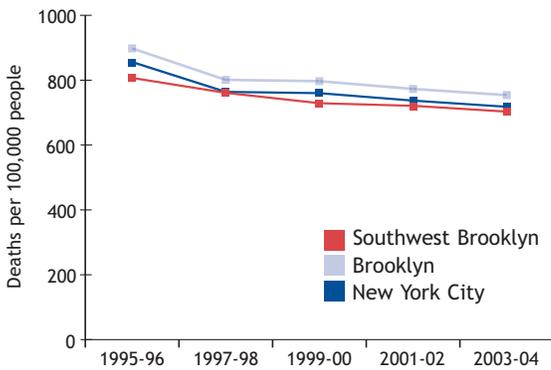
People are good at rating their own health. In general, when asked to rate their general health as excellent, very good, good, fair, or poor, those who say “fair” or “poor” are more likely to have health problems than those who report better health.

In Southwest Brooklyn, more than one fifth of residents report being in fair or poor health (22%).

Overall Death Rates in Southwest Brooklyn

Death rates

In Southwest Brooklyn, death rates have decreased in the past 10 years



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 in Southwest Brooklyn has decreased by more than 10% in the past decade, mirroring the rate drop in New York City overall.

In 2003-2004, the average annual death rate in Southwest Brooklyn was slightly lower than in Brooklyn and similar to the rate in New York City overall (703/100,000 vs. 754/100,000 in Brooklyn 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.

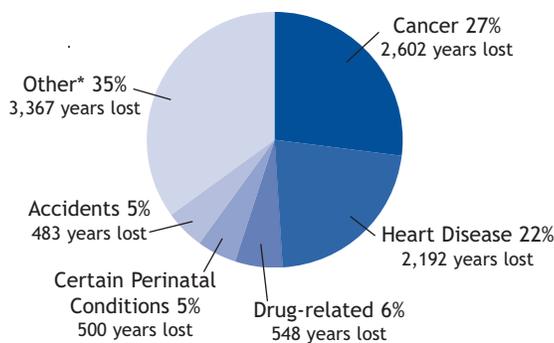
Premature death

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 Southwest Brooklyn is cancer, as well as in both Brooklyn and New York City overall.

Top 5 causes of years of potential life lost

Cancer causes the most years of potential life lost in Southwest Brooklyn

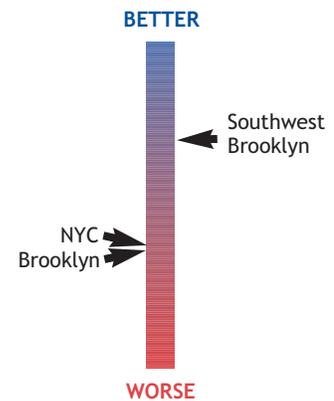


*Other includes Suicide (5%), Chronic Lower Respiratory Disease (2%), Congenital Conditions (2%), Diabetes (2%), Pneumonia and Influenza (2%), and Other (22%).

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 Southwest Brooklyn ranks 15th 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

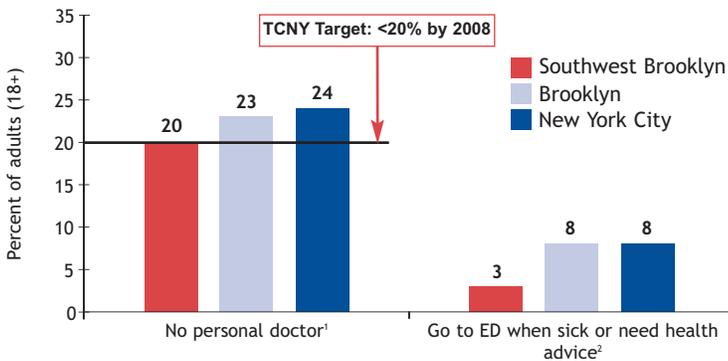
Access to good medical care helps people prevent illnesses, identify health conditions early, and treat health problems. Some conditions can and should be managed regularly outside the hospital. Higher rates of these avoidable hospitalizations can indicate reduced access to health care in a community.

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 Southwest Brooklyn, 1 in 5 residents does not have a regular doctor, nearly meeting the TCNY target. The percent of residents with a primary care provider increased between 2002 and 2004.

Although the size of this increase cannot be precisely estimated because of a small sample size, the percent of people with a regular doctor has clearly gone up. Also, Southwest Brooklyn residents are less likely to go to the ED when they are sick or need health advice (3%) than those in Brooklyn (8%) and NYC overall (8%).

Access to care

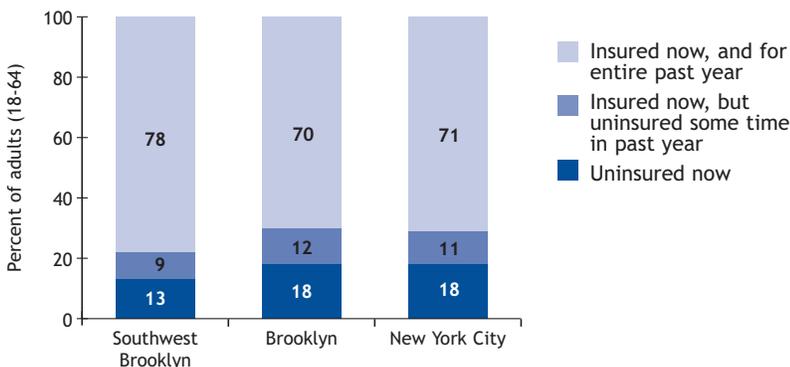
Without a primary provider, people may seek routine health care in the emergency department (ED)



Percents are age-adjusted.
Data Sources: ¹NYC Community Health Survey 2002-03-04, ²NYC Community Health Survey 2003-04

Health insurance

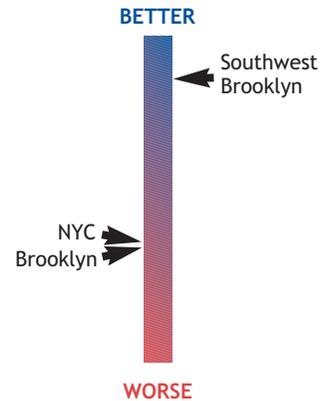
More than 1 in 5 adults in Southwest Brooklyn are uninsured or went without health insurance during the past year



Insurance rates are calculated for adults aged 18-64 and age-adjusted.
Data Source: NYC Community Health Survey 2002-03-04

Avoidable hospitalizations

The 2004 avoidable hospitalization rate in Southwest Brooklyn ranks well (6th) among 42 NYC neighborhoods



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 is important for access to health care. Residents in Southwest Brooklyn, are less likely to be uninsured (13%) than those in Brooklyn (18%) and New York City overall (18%). In addition to the currently uninsured, another 9% of residents in this community went without health insurance at some time during the past year.

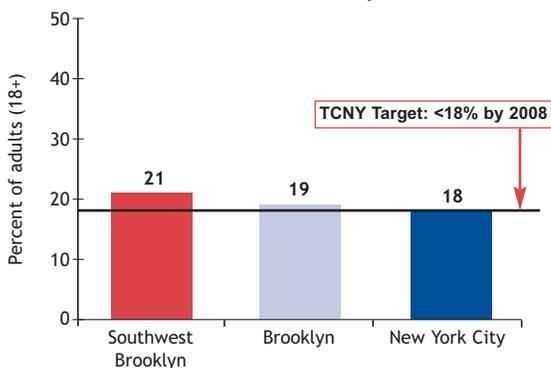


GOAL 2 Be Tobacco-Free

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. One fifth of Southwest Brooklyn residents (21%) currently smoke. Many methods to quit smoking are available, and just over half of smokers in Southwest Brooklyn (52%) are trying to kick the habit.

Residents who smoke

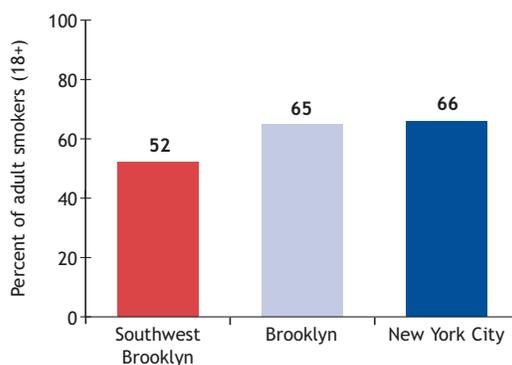
One in 5 adults in Southwest Brooklyn smokes . . .



Percents are age-adjusted.
Data Source: NYC Community Health Survey 2004

Attempts to quit smoking in the past year

. . . but many smokers are trying to quit



Percents are age-adjusted.
Data Source: NYC Community Health Survey 2004

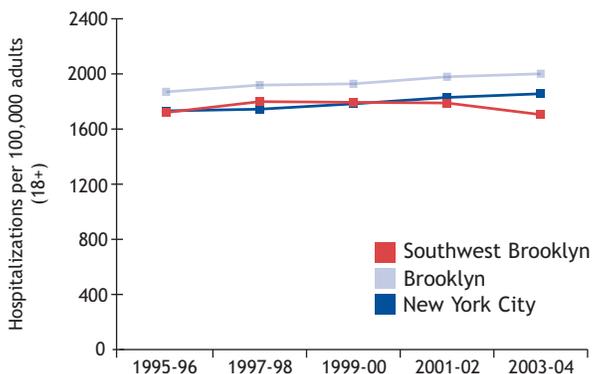


GOAL 3 Keep Your Heart Healthy

Heart disease can cause severe illness and death. Southwest Brooklyn residents had an average annual heart disease hospitalization rate in 2003-2004 that was 15% lower than the Brooklyn rate and slightly lower than the rate in NYC overall (1,705/100,000 vs. 2,001/100,000 in Brooklyn and 1,856/100,000 in NYC). However, the heart disease death rate in 2003-2004 (351/100,000) was higher than the rates in both Brooklyn (326/100,000) and NYC overall (297/100,000), despite the more than 15% decrease in the Southwest Brooklyn rate in the past decade.

Heart disease hospitalizations

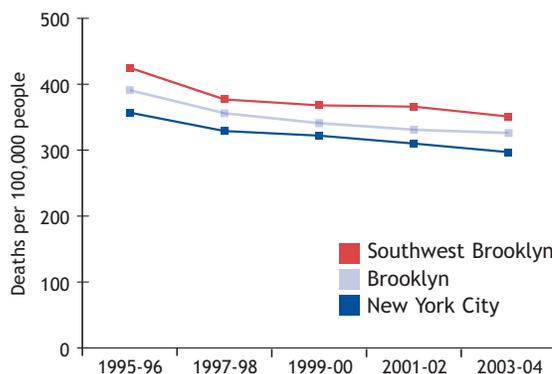
The heart disease hospitalization rate is slightly lower in Southwest Brooklyn than in Brooklyn overall



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

The heart disease death rate is higher in Southwest Brooklyn



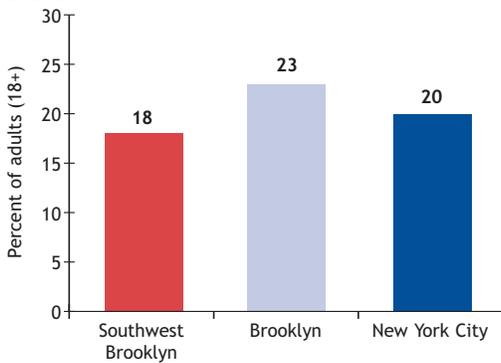
Rates are age-adjusted.
Data Sources: Bureau of Vital Statistics, NYC DOHMH, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning

High blood pressure and high cholesterol. Both of these conditions contribute to heart disease. In Southwest Brooklyn, 23% of adults were told by a health care professional that they have high blood pressure (similar to 28% in Brooklyn and 26% in NYC overall), and one quarter (28%) were told that they have high cholesterol (similar to 26% in Brooklyn and NYC overall).

Percents are age-adjusted. Data Source: NYC Community Health Survey 2002

Obesity

Fewer than 1 in 5 Southwest Brooklyn adults is obese



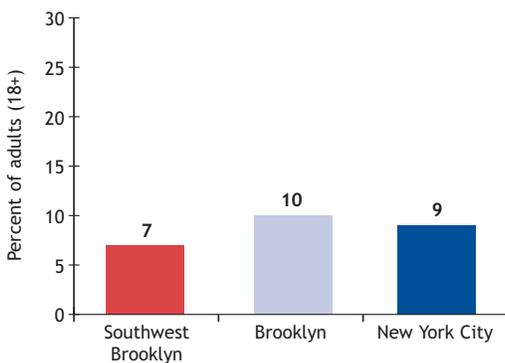
Obesity is defined as a body-mass-index (BMI) of 30 or greater. Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03-04

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 Southwest Brooklyn, adults are less likely to be obese (18%) than those in Brooklyn overall.

Diabetes

One in 14 adults in Southwest Brooklyn has diabetes



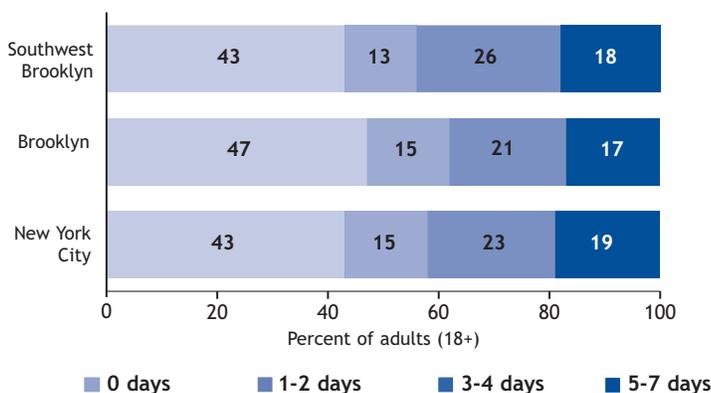
Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03-04

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 Southwest Brooklyn, 7% of adults have diabetes.

Days per week of recreational exercise

Less than half of Southwest Brooklyn are meeting physical activity recommendations



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 Southwest Brooklyn residents (43%) report not doing any physical activity at all. Also, less than half of residents in this community (44%) 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.



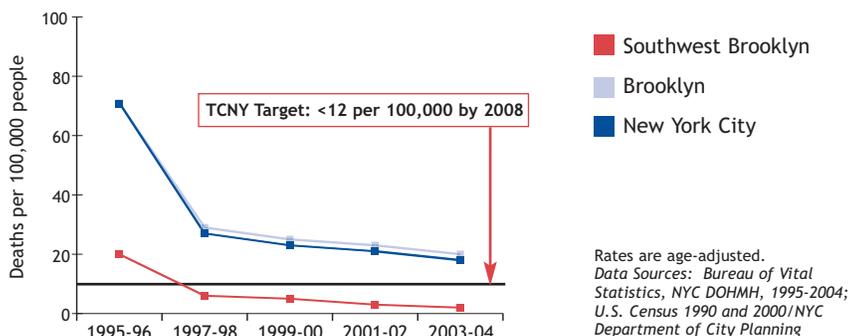
GOAL 4 Know Your HIV Status

Wide disparities exist in HIV across New York City communities. In Southwest Brooklyn, the rate of HIV diagnoses (10/100,000) is less than one fifth of the NYC overall rate, and the rate of people living with HIV/AIDS in the community (283/100,000) is also 80% lower than the rate in NYC overall.

The death rate due to HIV disease has dropped by 90% during the past decade in this community. In 2003-2004, the average annual HIV-related death rate in Southwest Brooklyn was much lower than both the Brooklyn and the NYC overall rates (2/100,000 vs. 20/100,000 in Brooklyn and 18/100,000 in NYC).

Death rate due to HIV

HIV-related death rates in Southwest Brooklyn are much lower than in NYC overall and have dropped dramatically in the past decade



HIV/AIDS in 2004

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

| | |
|--------------------|----|
| Southwest Brooklyn | 10 |
| Brooklyn | 50 |
| New York City | 55 |

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

| | |
|--------------------|-----|
| Southwest Brooklyn | 31% |
| Brooklyn | 31% |
| New York City | 29% |

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

| | |
|--------------------|-------|
| Southwest Brooklyn | 283 |
| Brooklyn | 1,183 |
| 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

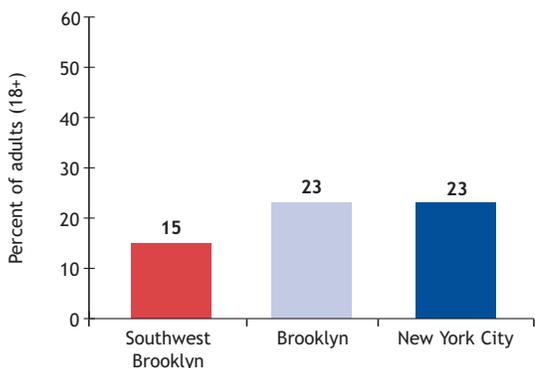
HIV/AIDS testing and prevention

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. Southwest Brooklyn residents are less likely to be tested for HIV (15%) than those in Brooklyn (23%) and New York City overall (23%). In addition, nearly one third of positive HIV test results (31%) are “late” diagnoses (HIV has already progressed to AIDS) in this community.

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 (47%) of Southwest Brooklyn adults who had more than 1 sex partner in the past year reported using a condom at their last sexual encounter.

HIV testing

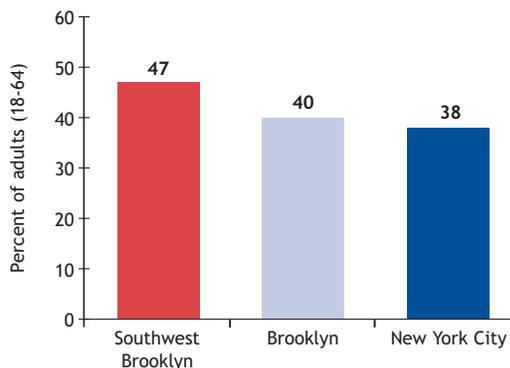
Southwest Brooklyn adults are less likely to have had an HIV test in the past year



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

Condom use at last sexual encounter

Less than half of Southwest Brooklyn adults with multiple sex partners used a condom



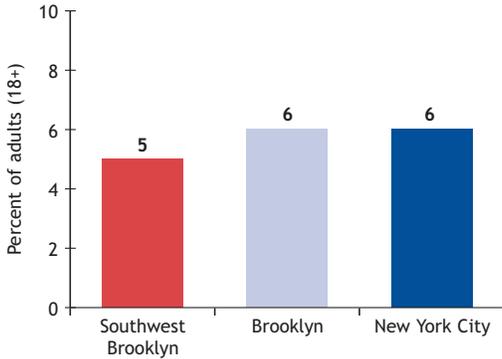
Analysis limited to adults aged 18-64 who reported having >1 sex partner in the past year, excluding women who reported having sex only with women.
Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03-04



GOAL 5 Get Help for Depression

Psychological distress

One in 20 adults in Southwest Brooklyn suffers from serious psychological distress



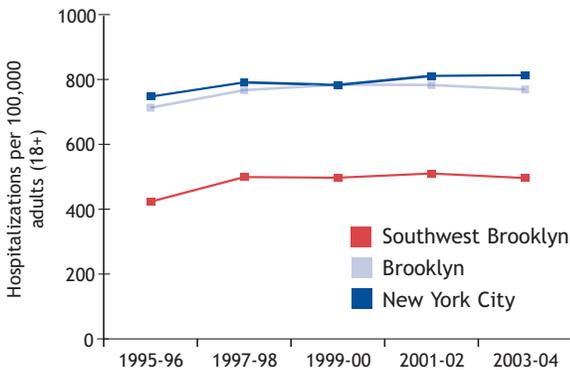
Serious psychological distress can be identified in individuals using Kessler's K6 scale, a validated measure consisting of 6 simple questions about mood. Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03

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

In Southwest Brooklyn, 5% of residents experience serious psychological distress.

Mental illness

Hospitalizations for mental illness are lower in Southwest Brooklyn



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 Southwest Brooklyn have had a lower mental illness hospitalization rate over the past 10 years (excluding alcohol- or drug-related illness) than residents in Brooklyn and in New York City overall. However, the mental illness hospitalization rate has increased by 15% during the past decade.

In 2003-2004, the community's average annual rate of mental illness hospitalizations (496/100,000) was lower than both the Brooklyn rate (769/100,000) and the rate in New York City overall (813/100,000).

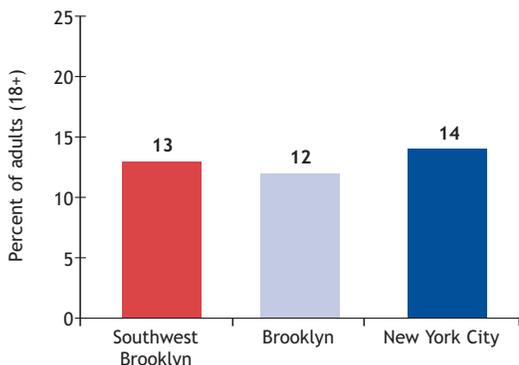
Understanding hospitalizations and access to health care. Hospitalization data are useful in understanding the burden that certain conditions place on the health care system, but not necessarily in measuring the exact extent of illness in a community. Variations in hospitalization rates may reflect not 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

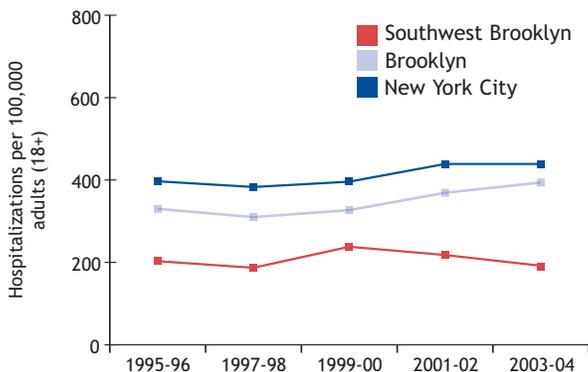
More than 1 in 10 adults in Southwest Brooklyn engaged in binge drinking in the past month



Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-03-04

Alcohol-related hospitalizations

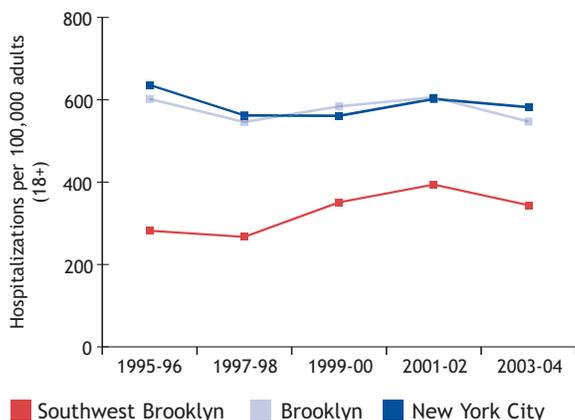
The alcohol-related hospitalization rate is lower in Southwest Brooklyn



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 hospitalizations

The drug-related hospitalization rate is lower in Southwest Brooklyn



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 Southwest Brooklyn, 13% 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.

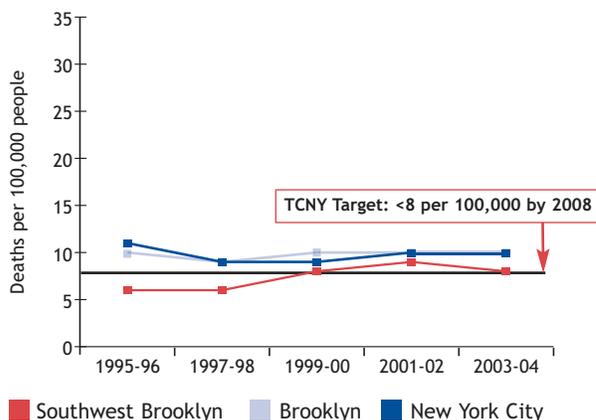
Alcohol-related hospitalizations reflect both acute and chronic (e.g., liver disease) consequences of alcohol abuse. In 2003-2004, the average annual alcohol-related hospitalization rate in Southwest Brooklyn was lower than in Brooklyn and in New York City overall (192/100,000 vs. 394/100,000 in Brooklyn and 439/100,000 in NYC).

The drug-related hospitalization rate in 2003-2004 was also lower (344/100,000) than in Brooklyn (547/100,000) and New York City overall (595/100,000). However, the rate in Southwest Brooklyn has increased slightly in the past decade.

The 2003-2004 death rate due to drugs in Southwest Brooklyn was similar to the rate in NYC overall (8/100,000 vs. 10/100,000).

Drug-related deaths

The drug-related death rate is similar in Southwest Brooklyn, Brooklyn and NYC overall



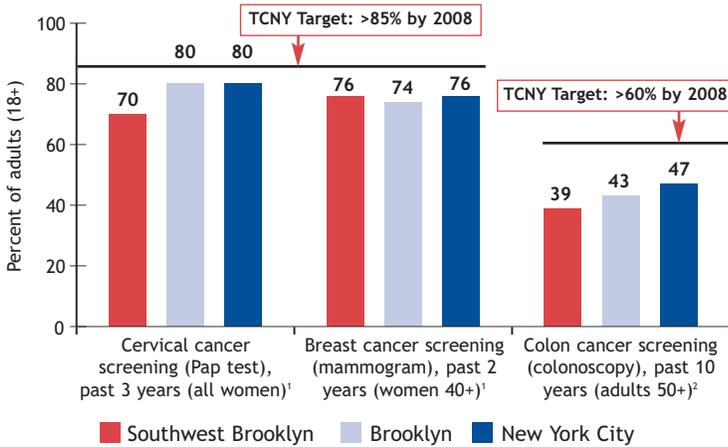
Rates are age-adjusted.
Data Sources: Bureau of Vital Statistics, NYC DOHMH, 1995-2004; U.S. Census 1990 and 2000/NYC Department of City Planning



GOAL 7 Get Checked for Cancer

Cancer screenings

In Southwest Brooklyn, cancer screening is lower than TCNY targets



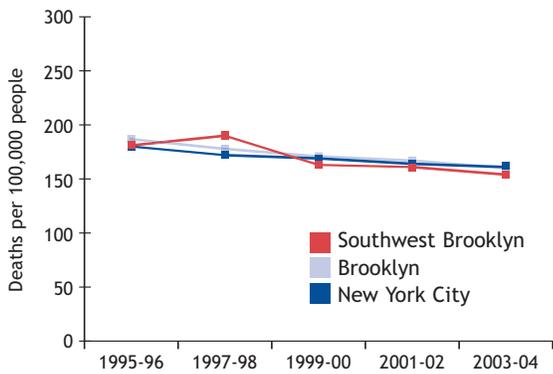
Percents are age-adjusted.
Data Sources: ¹NYC Community Health Survey 2002 & 2004, ²NYC Community Health Survey 2003-04

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 Southwest Brooklyn are less likely to get timely Pap tests for cervical cancer than women in Brooklyn and NYC overall. Their rate of mammograms for breast cancer is also lower than the TCNY target of more than 85%. In addition, less than half of adults aged 50 and older in Southwest Brooklyn have had a colonoscopy in the past 10 years.

Cancer deaths

The death rate due to cancer is similar in Southwest Brooklyn, Brooklyn 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

The death rate due to cancer has decreased slightly in Southwest Brooklyn during the past decade. The 2003-2004 average annual cancer death rate was similar to both the Brooklyn and NYC overall rates (154/100,000 vs. 160/100,000 in Brooklyn and 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 Southwest Brooklyn are due to lung, colon, and prostate cancers. Among women, lung, breast, and colon cancers are the top 3 causes of cancer-related death.

| Highest cancer death rates in Southwest Brooklyn (2003-2004) | | | | | |
|--|-------------------------|-----|-------------------------|-------------------------|-----|
| MEN | DEATHS / 100,000 PEOPLE | | WOMEN | DEATHS / 100,000 PEOPLE | |
| | Southwest Brooklyn | NYC | | Southwest Brooklyn | NYC |
| Type of Cancer | | | Type of Cancer | | |
| Lung, trachea, bronchus | 63 | 51 | Lung, trachea, bronchus | 36 | 28 |
| Colorectal | 23 | 23 | Breast | 20 | 26 |
| Prostate | 19 | 25 | Colorectal | 19 | 17 |
| Liver | 13 | 10 | Blood-related | 10 | 12 |
| Blood-related | 12 | 18 | Ovary | 9 | 8 |

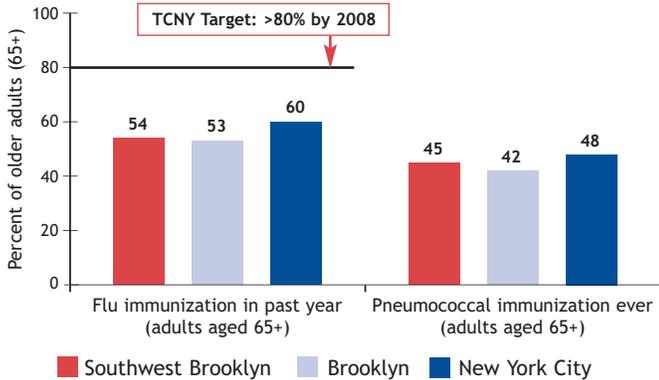
Rates are age-adjusted. Data Sources: Bureau of Vital Statistics, NYC DOHMH, 2003-2004; U.S. Census 2000/NYC Department of City Planning



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



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 Southwest Brooklyn flu immunization rate among older adults falls short of the TCNY target by more than 30%.

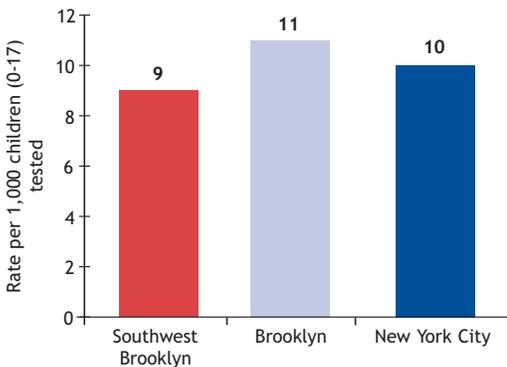
Immunization rates for pneumonia are lower than those for flu across NYC. Less than half of older adults in Southwest Brooklyn have ever received the pneumococcal vaccine, which protects against one common cause of pneumonia.



GOAL 9 Make Your Home Safe and Healthy

Childhood lead poisoning

Lead poisoning among young children continues to be a problem



Lead poisoning is defined as a blood lead level ≥ 10 $\mu\text{g}/\text{dL}$.

Data Source and Analysis: Lead Poisoning Prevention Program, NYC DOHMH, 2004

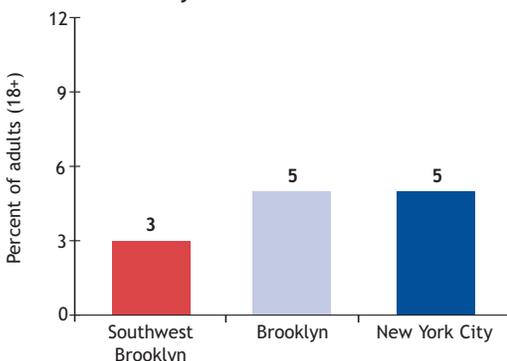
Childhood lead poisoning is a health problem that may be associated with decreased intelligence, learning and behavioral problems, and delayed growth and development. While the number of lead-poisoned children (0-17 years old) in New York City has declined dramatically over the past decade, the Health Department aims to eliminate lead poisoning by preventing children's exposure to lead-based paint and other sources of lead.

In 2004, 63 children in Southwest Brooklyn (9/1,000) were newly identified with lead poisoning (defined as a blood lead level greater than or equal to 10 $\mu\text{g}/\text{dL}$).

Asthma in Adults and Children

Asthma

Fewer than 1 in 20 adults suffers from asthma in Southwest Brooklyn



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.

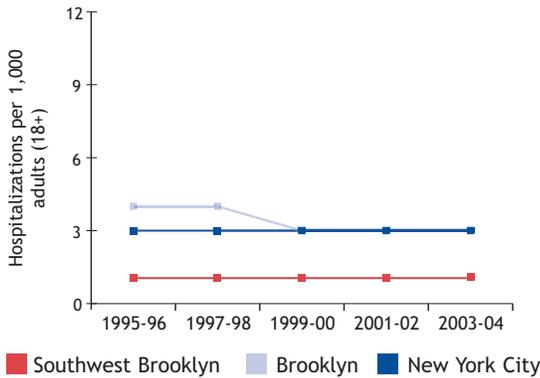
The percent of adults who report having asthma is similar in Southwest Brooklyn (3%), Brooklyn (5%), and New York City overall (5%).

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 Southwest Brooklyn are lower than in NYC overall. Also, rates among children have decreased slightly in the past decade.

Adult asthma hospitalizations

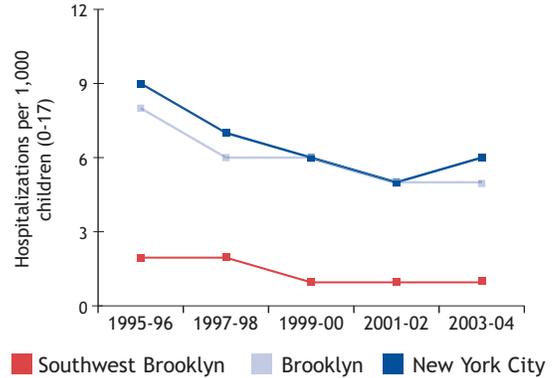
Rates of asthma hospitalization are lower in Southwest Brooklyn



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 Southwest Brooklyn



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

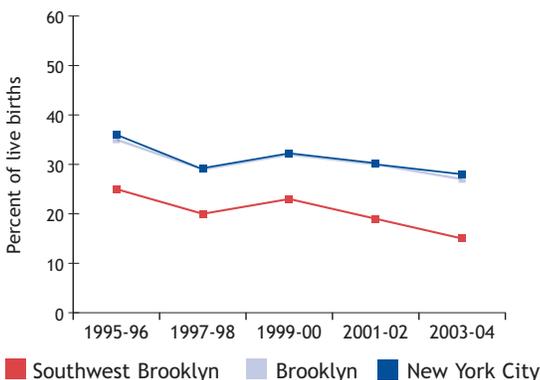
TAKE CARE NEW YORK Goal 10 Have a Healthy Baby

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 by 40% in the past decade in Southwest Brooklyn and was lower in 2003-2004 (15%) than the percents in Brooklyn (27%) 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 teen birth rate has decreased over the past 10 years by more than 25% in Southwest Brooklyn. In 2003-2004, the average teen birth rate in this community (31/1,000) was lower than in Brooklyn (73/1,000) and NYC overall (75/1,000).

Prenatal care

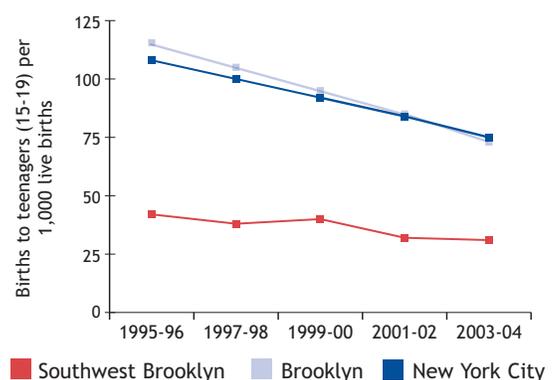
Mothers in Southwest Brooklyn are less likely to receive late or no prenatal care



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

Teenage mothers

The birth rate to teenage mothers (15-19 years) is lower in Southwest Brooklyn

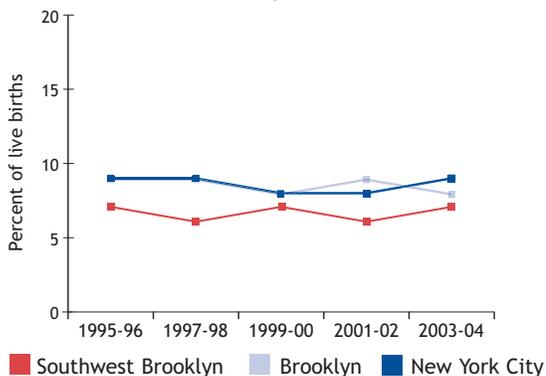


Data Source: Bureau of Vital Statistics, NYC DOHMH, 1995-2004

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 Southwest Brooklyn was 7% — higher than in Brooklyn (8%) and NYC overall (9%). Infant mortality (the death of babies in the first year of life) has declined in the past 10 years in NYC overall. The 2002-2004 rate in Southwest Brooklyn (4/1,000) was similar to the rates in Brooklyn and NYC overall.

Low birthweight

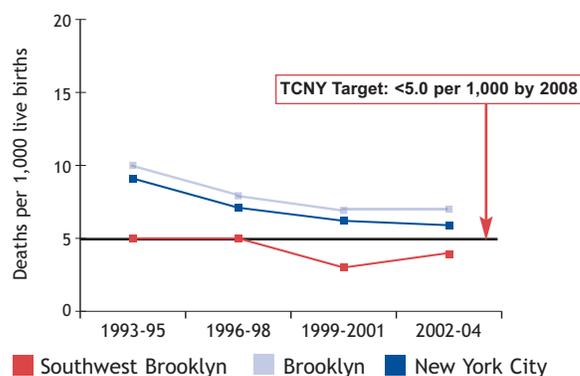
Babies in Southwest Brooklyn are less likely to be born with low birthweight



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)

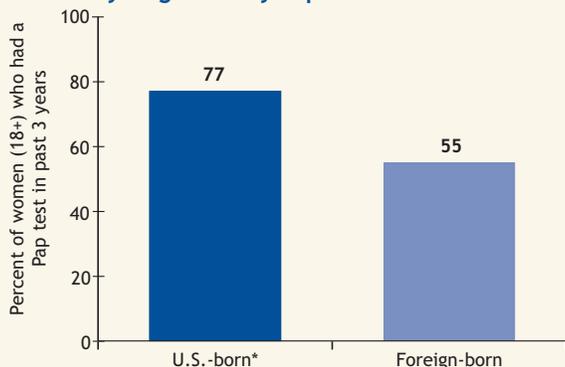
The IMR is similar in Southwest Brooklyn and NYC overall



Data Source: Bureau of Vital Statistics, NYC DOHMH, 1993-2004

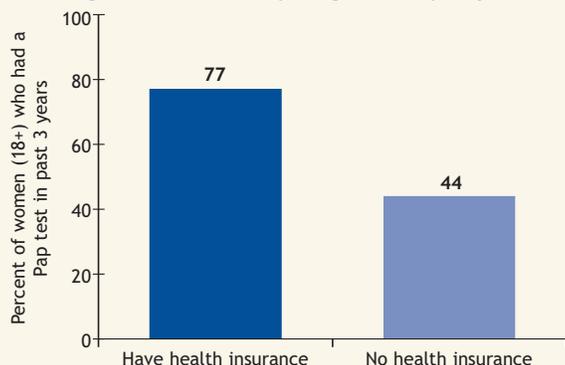
Neighborhood Health Highlight: Cervical Cancer Screening

Foreign-born women in Southwest Brooklyn are less likely to get timely Pap tests



*Includes those born in Puerto Rico and other U.S. territories. Percents are age-adjusted.
Data Source: NYC Community Health Survey 2002-04

Women in Southwest Brooklyn with health coverage are more likely to get timely Pap tests



Analysis was limited to women aged 18-64 and age-adjusted.
Data Source: NYC Community Health Survey 2002-04

Every New York City neighborhood has different health concerns. Here we highlight cervical cancer screening in Southwest Brooklyn.

Cervical cancer is a life-threatening disease of the cervix (the opening to a woman's uterus). Cervical cancer has no symptoms in its early, most curable stage, but it can be easily prevented with regular Pap tests (also called Pap smears). This simple, painless test screens for pre-cancerous cells by using a small brush to take cells from the cervix during a gynecological exam.

In Southwest Brooklyn, the percent of women who have had a timely Pap test is low (see page 11). Access to health care and information will increase the chance that a woman will have a Pap test. Foreign-born women in Southwest Brooklyn are almost 30% less likely to have had a Pap test in the past 3 years. Women without insurance are also less likely to have the preventive test done, with only 44% of women without coverage getting a timely Pap test compared to 77% of other women.

TAKING ACTION

Women should have their first Pap test within 3 years of first sexual activity or at age 21 — whichever comes first. In general, after the first Pap test, screening should be done every 1-3 years. However, all women should consult their primary health care provider and/or gynecologist about how often they should have Pap tests.

For more information on finding a regular doctor and on cervical cancer screening, 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 Southwest Brooklyn are 11209, 11214, 11228, and 11252. 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. *Only robust findings found to be statistically significant are discussed in the text.* Neighborhood Health Highlight data was evaluated using t-tests with a significance level of p-value ≤ 0.05 . 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.¹

Cover Photograph: John Paul Jones Park at 4th Avenue and Shore Road, Brooklyn. Photo by Renato DaSilva. Maps by Susan Resnick.

Thank you to all the individuals who contributed to these reports: Sonia Angell, Fatima Ashraf, Birgit Bogler, Shadi Chamany, Louise Cohen, Lorna Davis, Erica Desai, Tamara Dumanovsky, Donna Eisenhower, Jennifer Ellis, Tim Frasca, Stephen Friedman, Renu Garg, Chris Goranson, Leena Gupta, Charon Gwynn, David Hanna, Kelly Henning, Mary Huynh, John Jasek, Qun Jiang, Deborah Kaplan, Adam Karpati, Elizabeth Kilgore, Marty Kim, Vani Kurup, Brooke Levinson, Cortnie Lowe, Jingsong Lu, Xiaowu Lu, Jenna Mandel-Ricci, Thomas Matte, Tina McVeigh, Rachel Miller, Trang Nguyen, Leze Nica, Preeti Pathela, Robyn Philburn, Jane Plapinger, Chitra Ramaswamy, Judy Sackoff, Julia Schillinger, Tejinder Singh, Sally Slavinski, Catherine Stayton, Parisa Tehranifar, William Vaughn, Joshua Volle, Joyce Weinstein, Kellee White, Candace Young, and Regina Zimmerman.

Community Health Profile for Southwest Brooklyn

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

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

**For more information about health issues
in this report,
please call 311.**

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