

Westchester County Community Health Assessment



2019 - 2021

Acknowledgement

The Westchester County Department of Health would like to thank the following organizations and agencies for their contribution and partnership in developing and distributing the Community Health Needs Assessment Survey as well as in the process of the Community Health Assessment.

Blythedale Children's Hospital

Montefiore Health System

Burke Rehabilitation Hospital

Montefiore Mount Vernon Hospital

Montefiore New Rochelle Hospital

White Plains Hospital

New York Presbyterian Regional Hospital Network

Hudson Valley Hospital

Lawrence Hospital

NewYork-Presbyterian Hospital/Westchester Division

Northwell Health

Northern Westchester Hospital

Phelps Memorial Hospital

St. John's Riverside Hospital

Saint Joseph's Medical Center

Westchester Medical Center

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FOREWORD

The Westchester County Department of Health (WCDH) plays a leading role in promoting health, preventing disease, and prolonging meaningful life for Westchester County residents. The WCDH's ongoing mission involves monitoring and controlling the spread of diseases, regulating air and water quality, enforcing state and local sanitary codes, promoting and endorsing local public health activities, and ensuring the availability of community health services.

To comply with New York State Public Health Law, WCDH has collaborated with local hospitals and other community health partners to complete a *Community Health Assessment (CHA)* survey, which describes the current health status of Westchester County residents, identifies existing gaps and health care barriers, assesses the availability and accessibility of health care services, and specifies public health priorities in the county. The first section of this document describes the process of developing and conducting the *Community Health Needs Assessment (CHA)* survey among members of the public, as well as the key findings from this assessment among Westchester county respondents.

In addition to the community health assessment survey, the WCDH and local hospitals hosted a Health Summit on April 5th, 2019, in which nearly 80 stakeholders from local agencies and organizations participated. Four of the five priority areas of the New York State Prevention Agenda were discussed based on the preliminary findings of the CHA Survey:

1. Prevent Chronic Diseases
2. Promote a Healthy and Safe Environment
3. Promote Healthy Women, Infants and Children
4. Promote Well-being and Prevent Mental and Substance Use Disorders

The stakeholders reviewed the focus areas within each of the four priority areas, brainstormed the strengths and resources in each area, identified opportunities and gaps, and suggested action items and solutions. A summary report of the Summit prepared by Premier, the company that facilitated the discussions at the Summit, is included as an appendix in this document.

Based on the CHA findings and discussions from the Summit, a *Community Health Improvement Plan (CHIP)* was developed to lay out the specific objectives, goals, and actions of the Health Department which address the public health priorities identified in the Community Health Assessment. The Health Department elected two Prevention Agenda Priority Areas, a). prevent chronic diseases, and b). promote well-being and prevent mental and substance use disorders, in its Community Health

Improvement Plan (CHIP) for the next three years. The Community Health Improvement Plan is presented in detail in a separate document.

The second section of this document presents the regional profiles for each of the county's 25 towns. The profiles present information on demographic and socioeconomic characteristics, births and deaths, emergency room visits, hospitalizations, as well as communicable diseases.

Supplementing this document, six additional data reports provide detailed data addressing specific areas relevant to the county's community health status. These reports are:

- Westchester County Community Health Assessment Supplemental Data Report 1. Population (2013-2017 ACS)
- Westchester County Community Health Assessment Supplemental Data Report 2. Vital Statistics (2011-2017)
- Westchester County Community Health Assessment Supplemental Data Report 3. Communicable Diseases (2013-2018)
- Westchester County Community Health Assessment Supplemental Data Report 4. Cancer (2012-2016)
- Westchester County Community Health Assessment Supplemental Data Report 5. Emergency Room Visits (2012-2016)
- Westchester County Community Health Assessment Supplemental Data Report 6. Hospitalizations (2012-2016)

TABLE OF CONTENTS

Foreword**Table of Contents**

| | |
|---|-----------|
| Section I. Community Health Assessment Survey Process and Findings | 1 |
| Overview | 2 |
| Community Health Assessment Survey Report | |
| Community Health Assessment Report Highlights | 4 |
| Demographics of Survey Respondents | 5 |
| General Health Status | 6 |
| Priority Health Issues For Self | 13 |
| Existing Health Issues | 20 |
| Access to Care | |
| Health Insurance Type | 27 |
| Barriers to Obtaining Medical Care by a Health Care Provider | 34 |
| Personal Health Care Provider | 41 |
| Perceived Discrimination | 48 |
| Priority Health Issues for the Community | 49 |
| Population Needing the Greatest Attention | 56 |
| Actions Needed to Improve the Health of the Community | 63 |
| 2019 Westchester County Community Health Survey Questionnaire | 70 |
| English version | 71 |
| Spanish version | 73 |
| Unweighted and Weighted Responses, Westchester ZIP Codes Only | 75 |
| Section II. Westchester County Regional Health Profiles | 81 |
| Overview | 82 |
| Regional Profile Definitions and Data Sources | 83 |
| Regional Profile | |
| Westchester County | 85 |
| Bedford Town | 89 |
| Cortlandt Town | 93 |
| Eastchester Town | 97 |
| Greenburgh Town | 101 |
| Harrison Town/Village | 105 |
| Lewisboro Town | 109 |
| Mamaroneck Town | 113 |
| Mount Kisco Town/Village | 117 |
| Mount Pleasant Town | 121 |
| Mount Vernon City | 125 |

| | |
|--|------------|
| New Castle Town | 129 |
| New Rochelle City | 133 |
| North Castle Town | 137 |
| North Salem Town | 141 |
| Ossining Town | 145 |
| Peekskill City | 149 |
| Pelham Town | 153 |
| Pound Ridge Town | 157 |
| Rye City | 161 |
| Rye Town | 165 |
| Scarsdale Town/Village | 169 |
| Somers Town | 173 |
| White Plains City | 177 |
| Yonkers City | 181 |
| Yorktown Town | 185 |
| Appendix: Health Summit Summary Report from Premier | 189 |
| Overview | 190 |
| Report from Premier | 191 |

List of Tables

| | | |
|---|--|----|
| 1 | Demographic and Employment Characteristics of the Community Survey Sample Population compared to Westchester County, 2019 | 5 |
| 2 | Percent of Respondents Who Reported Feeling Emotionally Upset Based on Treatment due to: Age, Gender Identity, Race/Ethnicity, Sexual Orientation, Perceived Immigration Status, Religion and Disability, Westchester County, 2019 | 48 |

List of Figures

| | | |
|----|--|----|
| 1 | Percent Distribution of General Health Status, Westchester County, 2019 | 6 |
| 2 | Percent Distribution of General Health Status by Gender, Westchester County, 2019 | 7 |
| 3 | Percent Distribution of General Health Status by Race/ Ethnicity, Westchester County, 2019 | 8 |
| 4 | Percent Distribution of General Health Status by Age, Westchester County, 2019 | 9 |
| 5 | Percent Distribution of General Health Status by Educational Attainment, Westchester County, 2019 | 10 |
| 6 | Percent Distribution of General Health Status by Language Spoken at Home, Westchester County, 2019 | 11 |
| 7 | Percent Distribution of General Health Status by Employment Status, Westchester County, 2019 | 12 |
| 8 | Priority Health Issues for Self (%), Westchester County, 2019 | 13 |
| 9 | Priority Health Issues for Self (%) by Gender, Westchester County, 2019 | 14 |
| 10 | Priority Health Issues for Self (%) by Race/Ethnicity, Westchester County, 2019 | 15 |
| 11 | Priority Health Issues for Self (%) by Age, Westchester County, 2019 | 16 |
| 12 | Priority Health Issues for Self (%) by Educational Attainment, Westchester County, 2019 | 17 |
| 13 | Priority Health Issues for Self (%) by Language Spoken at Home, Westchester County, 2019 | 18 |
| 14 | Priority Health Issues for Self (%) by Employment Status, Westchester County, 2019 | 19 |
| 15 | Existing Health Issues Ranked by the Percent of Respondents with the Condition, Westchester County, 2019 | 20 |
| 16 | Existing Health Issues (%) by Gender, Westchester County, 2019 | 21 |
| 17 | Existing Health Issues (%) by Race/Ethnicity, Westchester County, 2019 | 22 |
| 18 | Existing Health Issues (%) by Age, Westchester County, 2019 | 23 |
| 19 | Existing Health Issues (%) by Educational Attainment, Westchester County, 2019 | 24 |
| 20 | Existing Health Issues (%) by Language Spoken at Home, Westchester County, 2019 | 25 |
| 21 | Existing Health Issues (%) by Employment Status, Westchester County, 2019 | 26 |
| 22 | Health Insurance used by Respondents (%), Westchester County, 2019 | 27 |
| 23 | Health Insurance used by Respondents (%) by Gender, Westchester County, 2019 | 28 |
| 24 | Health Insurance used by Respondents (%) by Age, Westchester County, 2019 | 29 |
| 25 | Health Insurance used by Respondents (%) by Race/Ethnicity, Westchester County, 2019 | 30 |
| 26 | Health Insurance used by Respondents (%) by Educational Attainment, Westchester County, 2019 | 31 |
| 27 | Health Insurance used by Respondents (%) by Language Spoken at Home, Westchester County, 2019 | 32 |

Confidential - Archived

| | | |
|----|---|----|
| 28 | Health Insurance used by Respondents (%) by Employment Status, Westchester County, 2019 | 33 |
| 29 | Percent Distribution of Barriers to Obtaining Medical Care, Westchester County, 2019 | 34 |
| 30 | Percent of Respondents who Reported Barriers to Obtaining Medical Care by Age, Westchester County, 2019 | 35 |
| 31 | Percent of Respondents who Reported Barriers to Obtaining Medical Care by Race/Ethnicity, Westchester County, 2019 | 36 |
| 32 | Percent of Respondents who Reported Barriers to Obtaining Medical Care by Employment Status, Westchester County, 2019 | 37 |
| 33 | Percent of Respondents who Reported Barriers to Obtaining Medical Care by Language Spoken at Home, Westchester County, 2019 | 38 |
| 34 | Percent of Respondents who Reported Barriers to Obtaining Medical Care by Educational Attainment, Westchester County, 2019 | 39 |
| 35 | Percent of Respondents who Reported Barriers to Obtaining Medical Care by Gender, Westchester County, 2019 | 40 |
| 36 | Percent Distribution of Having a Primary Care Provider, Westchester County, 2019 | 41 |
| 37 | Percent Distribution of Having a Primary Care Provider by Gender, Westchester County, 2019 | 42 |
| 38 | Percent Distribution of Having a Primary Care Provider by Race/Ethnicity, Westchester County, 2019 | 43 |
| 39 | Percent Distribution of Having a Primary Care Provider by Age, Westchester County, 2019 | 44 |
| 40 | Percent Distribution of Having a Primary Care Provider by Educational Attainment, Westchester County, 2019 | 45 |
| 41 | Percent Distribution of Having a Primary Care Provider by Language Spoken at Home, Westchester County, 2019 | 46 |
| 42 | Percent Distribution of Having a Primary Care Provider by Employment Status, Westchester County, 2019 | 47 |
| 43 | Priority Health Issues for the Community (%), Westchester County, 2019 | 49 |
| 44 | Priority Health Issues for the Community (%) by Gender, Westchester County, 2019 | 50 |
| 45 | Priority Health Issues for the Community (%) by Race/ Ethnicity, Westchester County, 2019 | 51 |
| 46 | Priority Health Issues for the Community (%) by Age, Westchester County, 2019 | 52 |
| 47 | Priority Health Issues for the Community (%) by Employment Status, Westchester County, 2019 | 53 |
| 48 | Priority Health Issues for the Community (%) by Educational Attainment, Westchester County, 2019 | 54 |
| 49 | Priority Health Issues for the Community (%) by Language Spoken at Home, Westchester County, 2019 | 55 |
| 50 | Population Needing the Greatest Attention Ranked by Percent of Respondents Selections, Westchester County, 2019 | 56 |
| 51 | Population Needing the Greatest Attention (%) by Gender, Westchester County, 2019 | 57 |
| 52 | Population Needing the Greatest Attention (%) by Race/Ethnicity, Westchester County, 2019 | 58 |
| 53 | Population Needing the Greatest Attention (%) by Age, Westchester County, 2019 | 59 |
| 54 | Population Needing the Greatest Attention (%) by Educational Attainment, Westchester County, 2019 | 60 |
| 55 | Population Needing the Greatest Attention (%) by Language Spoken at Home, Westchester County, 2019 | 61 |

Confidential - Archived

| | | |
|----|---|--------|
| 56 | Population Needing the Greatest Attention (%) by Employment Status, Westchester County, 2019 | 62 |
| 57 | Actions Needed to Improve the Health of the Community (%), Westchester County, 2019 | 63 |
| 58 | Actions Needed to Improve the Health of the Community (%) by Gender, Westchester County, 2019 | 64 |
| 59 | Actions Needed to Improve the Health of the Community (%) by Race/Ethnicity, Westchester County, 2019 | 65 |
| 60 | Actions Needed to Improve the Health of the Community (%) by Age, Westchester County, 2019 | 66 |
| 61 | Actions Needed to Improve the Health of the Community (%) by Educational Attainment, Westchester County, 2019 | 67 |
| 62 | Actions Needed to Improve the Health of the Community by Language Spoken at Home, Westchester County, 2019 | 68 |
| 63 | Actions Needed to Improve the Health of the Community by Employment Status, Westchester County, 2019 | ... 69 |

**COMMUNITY HEALTH ASSESSMENT
SURVEY PROCESS AND FINDINGS**

OVERVIEW

In early 2018, the Westchester County Department of Health (WCDH) reconvened with the local county hospitals to develop an approach to undertake the upcoming Community Health Needs Assessment required by the New York State public health law. The Planning Group developed an updated survey for residents and local service providers to identify health priorities based on the proposed 2019- 2021 New York State Prevention Agenda. The survey was made available in paper-format and on-line through Survey Monkey, and was offered in English and Spanish. Paper forms were actively distributed and collected from various community agencies and organizations by WCDH staff onsite at service locations to assist and encourage underserved populations to complete the assessment. On-line links were distributed through *listservs* available to the WCDH, local hospitals, and community-based organizations.

During the survey process, WCDH shared weekly updates about the demographic characteristics of the respondents that completed the survey. This information was used by WCDH and the hospitals to refine and target outreach efforts to under-represented populations and communities. It was the intent of WCDH and the hospitals to obtain greater input from those from a lower socio-economic status. WCDH staff was deployed within the community to promote and to encourage Westchester County residents to complete the survey.

Surveys were conducted from January 28, 2019 through March 31, 2019 with a news release from the Office of Westchester County Executive George Latimer issued on January 29, 2019 to encourage public participation. A total of 1,873 on-line surveys and 1,651 paper surveys were collected. Among them 2,716 were from respondents with valid Westchester residence Zip codes (1,496 on-line and 1,220 paper).

The sample is skewed in terms of its demographic characteristics and geographic distributions. For example, over 70% of the respondents were women and about one-third identified themselves as Hispanic. A large proportion of the respondents reported as residing in the south part of the county. It is therefore necessary to weight the sample in order to draw any meaningful conclusions from the findings.

Age, sex, race/ethnicity, and ZIP codes are used for weighting adjustment of the sample. Ideally, the sample needs to be adjusted by a combined weight calculated from these four characteristics. However, due to data limitations, such as small sample size or zero respondents in certain ZIP codes, it is impossible to calculate a combined weight. Therefore, three separate weighting factors are calculated:

1. age and sex, 2. race/ethnicity and sex, and 3. ZIP codes and sex. The sample is weighted separated by these three weighting factors. The average from them is calculated to present the final findings.

Data from the 2013-2017 American Community Survey and the 2010 U.S. Census are used to develop the three weighting factors. In the original questionnaire, race and ethnicity (i.e., Hispanic or Latino origin) are two separate questions. Due to inconsistent response patterns and rates, these two variables are combined into one as race/ethnicity for the final report.

COMMUNITY HEALTH ASSESSMENT REPORT HIGHLIGHTS

- The Community Health Assessment survey reported here represents the responses collected from 2,716 respondents residing in Westchester County.
- Because the survey sample is not representative of the county population, the data presented in this report is weighted by age, sex, race/ethnicity and residents zip code.
- 53% of the respondents identified themselves as female and 47% as male.
- Half of the respondents identified as White non-Hispanic (52%), 14% identified as Black non-Hispanic, 8% were other non-Hispanic, and 26% were Hispanic (of any race).
- The majority of the survey respondents reported they spoke English (78.7%), 15.4% Spanish and 5.4% spoke another language in their home.
- Overall, Mental health was 39% of respondents' first area of health priority followed by chronic disease screening and care for conditions like asthma, diabetes, cancer and heart disease (30%), and Obesity (26.2%).
- The three actions reported by the respondents that would best improve the health of their communities were: mental health services (27.9%), affordable housing (26.5%), and exercise and weight loss programs (22.6).
- Respondents reported that older adults (38.9%) and teens (33.6%) needed the greatest attention in their communities.
- The three areas which respondents selected as being priority health issues for themselves were: physical activity (43.9%), food and nutrition (40.1%) and environments that promote well-being and active lifestyles (33.2%).
- Most respondents report that their health was either Good (36.0%) or Very good (34.7%).
- The majority of respondents (74.4%) reported having someone that they consider their personal doctors.
- About 19% of respondents reported being told by a health professional that they had hypertension, followed by arthritis (18%), depression/anxiety (15%), asthma (9.6%) and diabetes (9.6%).
- Fifteen percent of respondents reported that not being able to get an appointment was a factor of why they were not able to see a doctor, followed by cost (14%).
- More than half (56%) of the respondents reported using their employer or a family member's employer health insurance, followed by Medicare (23%) and Medicaid (13%). Seven percent of respondents reported they did not have health insurance.

Demographics of Survey Respondents

Table 1 represents the demographic and employment characteristics of the respondents compared to those of Westchester County. The survey sample is weighted by age, sex, race/ethnicity of the county population for this data report. In 2019, there were a total of 2,716 respondents to the Westchester County Community Health Survey.

Table 1. Demographic and Employment Characteristics of the Community Survey Sample Population compared to Westchester County, 2019.

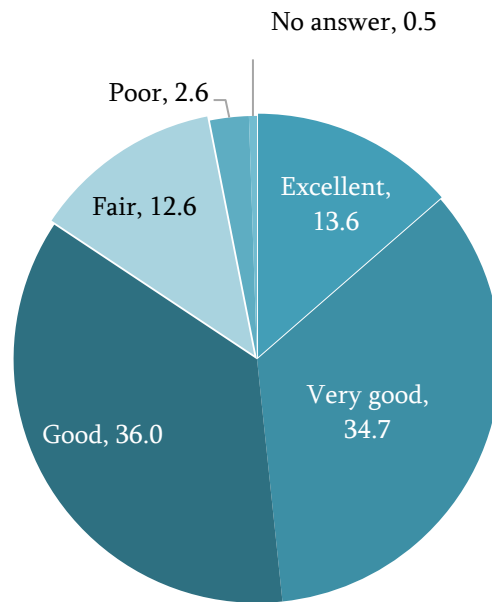
| | Westchester Population ¹ | Survey Sample | Weighted Sample |
|--|-------------------------------------|---------------|-----------------|
| Total | 753,672 | 2,716 | 753,847 |
| Gender [18 + years old] | | | |
| Male | 47.4 | 73.2 | 47.4 |
| Female | 52.6 | 25.5 | 52.6 |
| Other | -- | 1.3 | -- |
| Age Group [18 + years old] | | | |
| 18-24 | 11.4 | 7.5 | 8.1 |
| 25-34 | 14.8 | 17.3 | 14.9 |
| 35-44 | 16.7 | 17.4 | 16.1 |
| 45-54 | 19.7 | 16.7 | 17.9 |
| 55-64 | 17.0 | 18.6 | 19.2 |
| 65-74 | 11.0 | 13.4 | 14.1 |
| 75+ | 9.7 | 8.5 | 9.5 |
| No Answer | -- | 0.7 | 0.2 |
| Race/Ethnicity² | | | |
| White Non- Hispanic | 56.6 | 44.6 | 52.0 |
| Black Non-Hispanic | 13.5 | 15.5 | 13.9 |
| Other Non-Hispanic | 7.9 | 8.2 | 7.9 |
| Hispanic | 22.0 | 30.3 | 25.6 |
| No Answer | -- | 1.4 | 0.6 |
| Primary Language Spoken at home [5 + years old] | | | |
| English | 66.7 | 74.6 | 78.7 |
| Spanish | 18.7 | 19.1 | 15.4 |
| Other | 12.7 | 5.4 | 5.4 |
| No Answer | --- | 0.4 | 0.9 |
| Employment Status [16+ years old] | | | |
| In Labor Force | | | |
| Employed | 61.3 | 60.7 | 63.3 |
| Unemployed | 4.3 | 8.7 | 7.4 |
| Not In Labor Force | | | |
| Do not know | --- | 1.9 | 1.2 |

¹ Estimates from the 2013-2017 American Community Survey and the 2010 US Census.

General Health Status

Most of the respondents reported that their health was either good or very good (Figure 1), with some variation among those of different demographic and socioeconomic status (Figures 2-7).

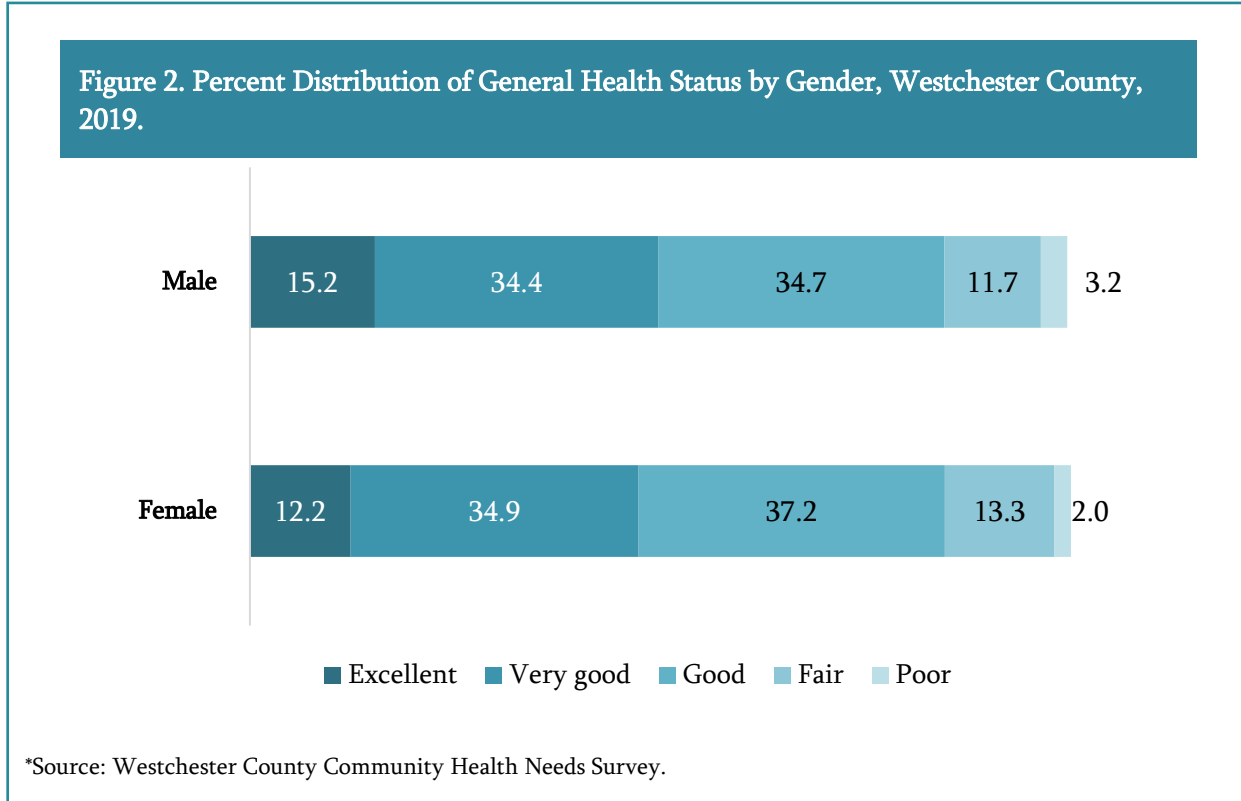
Figure 1. Percent Distribution of General Health Status, Westchester County, 2019.



*Source: Westchester County Community Health Needs Survey.

GENDER

More men than women (15.2% vs. 12.2%) reported having excellent health and more men than women (37.2% vs. 34.7%) reported having good health (Figure 2).



RACE/ETHNICITY

Non-Hispanic whites generally reported having very good health, whereas non-Hispanic blacks reported having good health. A higher percentage of Hispanics (24%) reported having fair health compared to all other race/ethnicity groups (Figure 3).

Figure 3. Percent Distribution of General Health Status by Race/ Ethnicity, Westchester County, 2019.

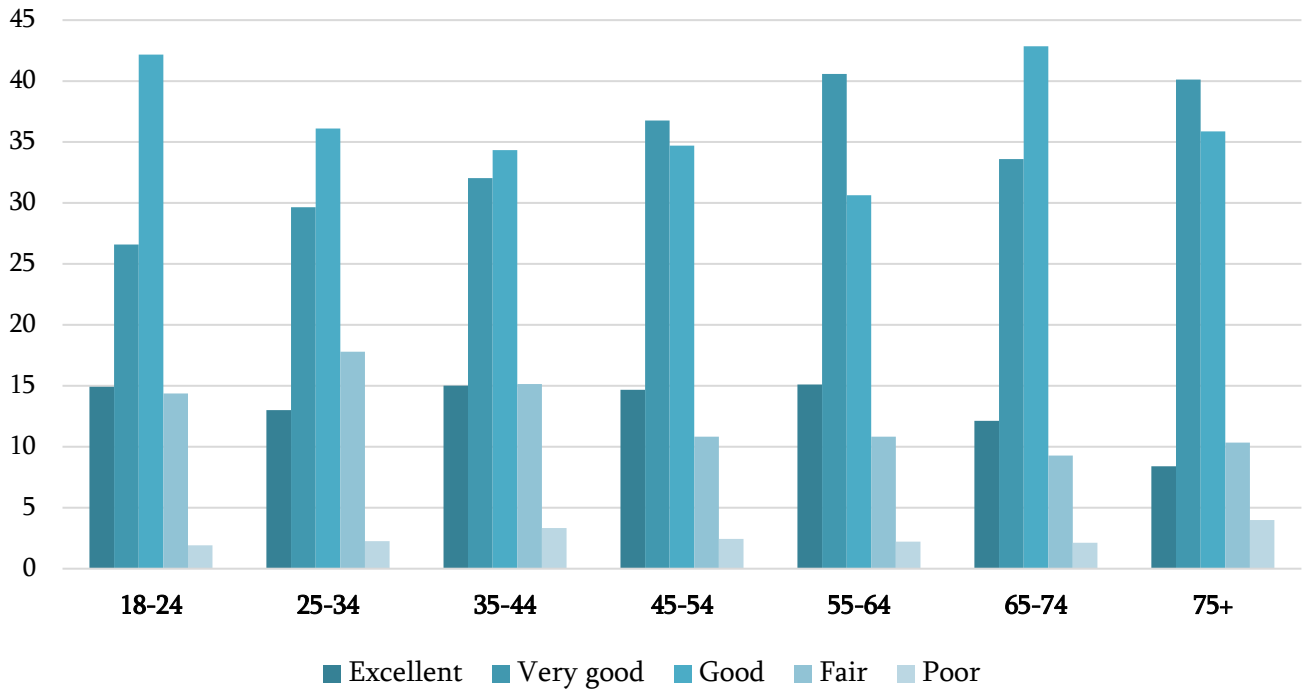


*Source: Westchester County Community Health Needs Survey.

AGE

Respondents 18-24 years old and 65-74 years old were more likely to report having good health compared to all other age groups (Figure 4).

Figure 4. Percent Distribution of General Health Status by Age, Westchester County, 2019.

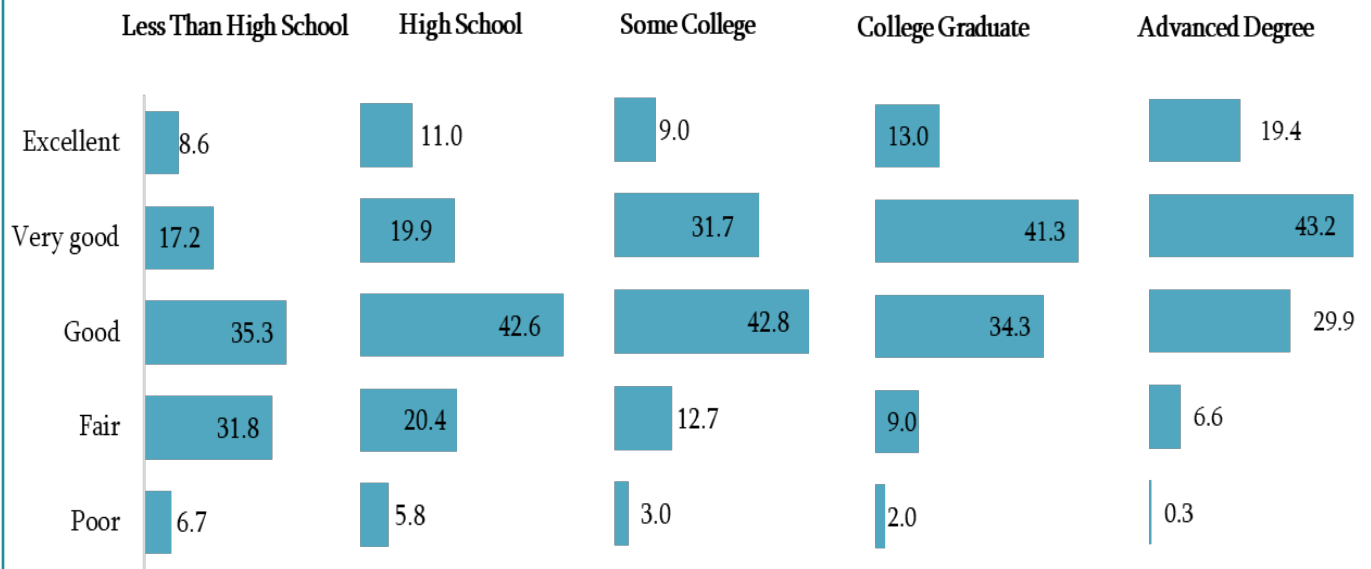


*Source: Westchester County Community Health Needs Survey.

EDUCATION

A higher percentage of respondents with some college education or greater stated they had very good health compared to those with a high school education or less (Figure 5).

Figure 5. Percent Distribution of General Health Status by Educational Attainment, Westchester County, 2019.



*Source: Westchester County Community Health Needs Survey.

LANGUAGE SPOKEN AT HOME

Most respondents who reported English as their primary language spoken at home stated their health was either very good (37.2%) or good (36.5%). Likewise, those who spoke a language other than English or Spanish reported their health was either very good (33.2%) or good (35.1%). Responses varied by those who reported Spanish as the primary language spoken at home (Figure 6).

Figure 6. Percent Distribution of General Health Status by Language Spoken at Home, Westchester County, 2019.

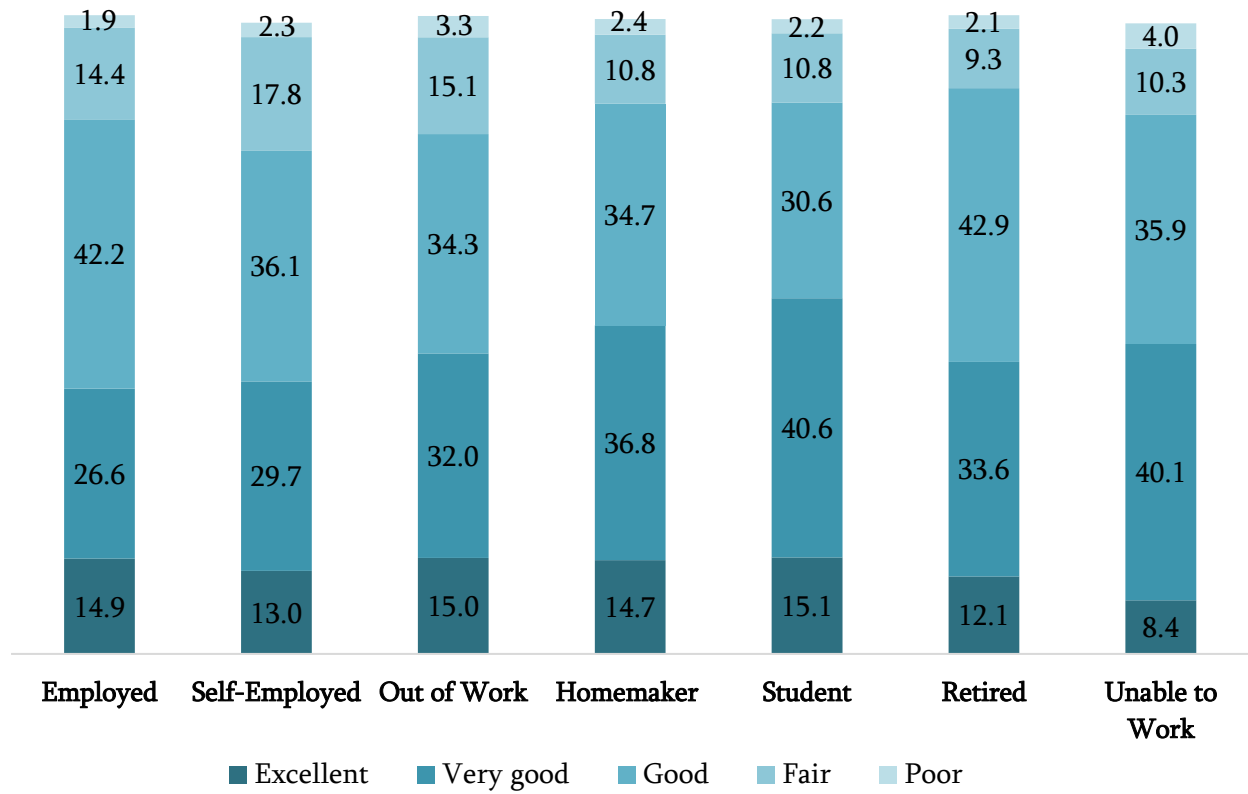


*Source: Westchester County Community Health Needs Survey.

EMPLOYMENT STATUS

Respondents who were employed or retired, were more likely to report very good or good health (Figure 7).

Figure 7. Percent Distribution of General Health Status by Employment Status, Westchester County, 2019.



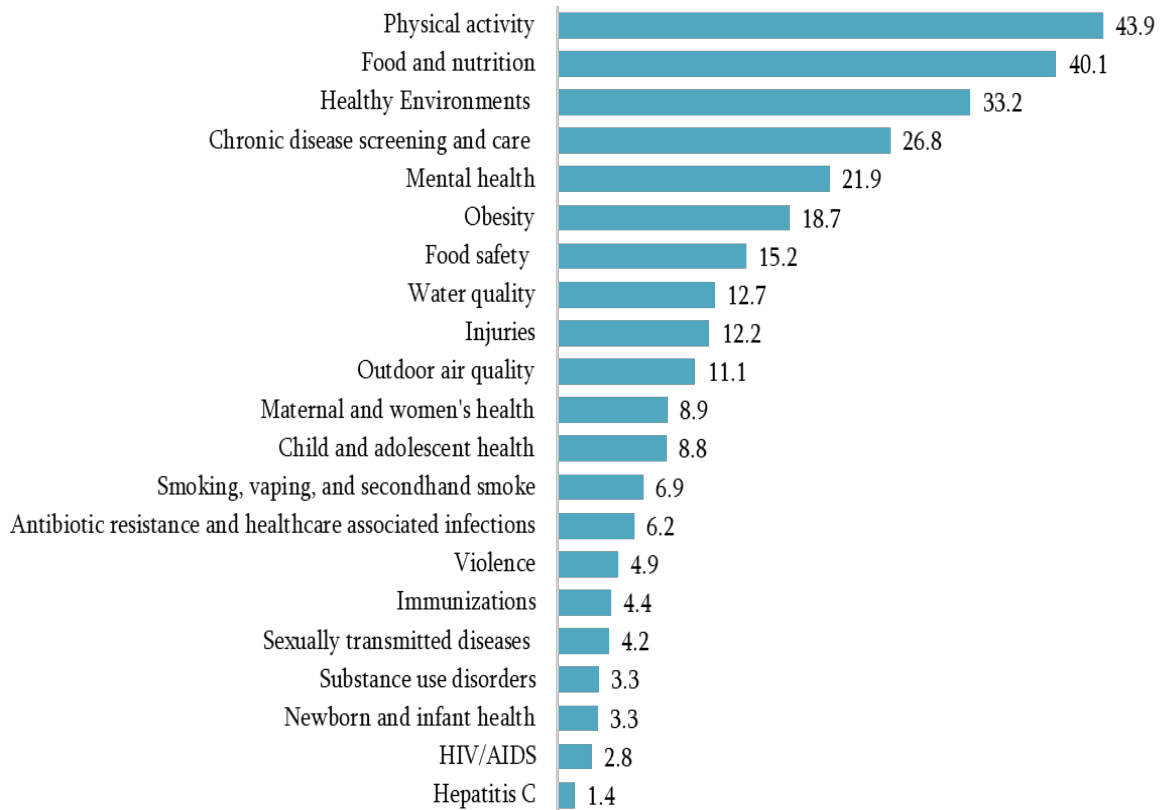
*Source: Westchester County Community Health Needs Survey.

Priority Health Issues For Self

43.9% of the respondents selected physical activity as one of their top three health issues for themselves followed by food and nutrition (40.1%) and healthy environments (33.2%) (Figure 8).

The top priority health issues for themselves selected vary by the respondent’s demographic and socioeconomic characteristics (Figures 9-14).

Figure 8. Priority Health Issues* for Self (%), Westchester County, 2019.

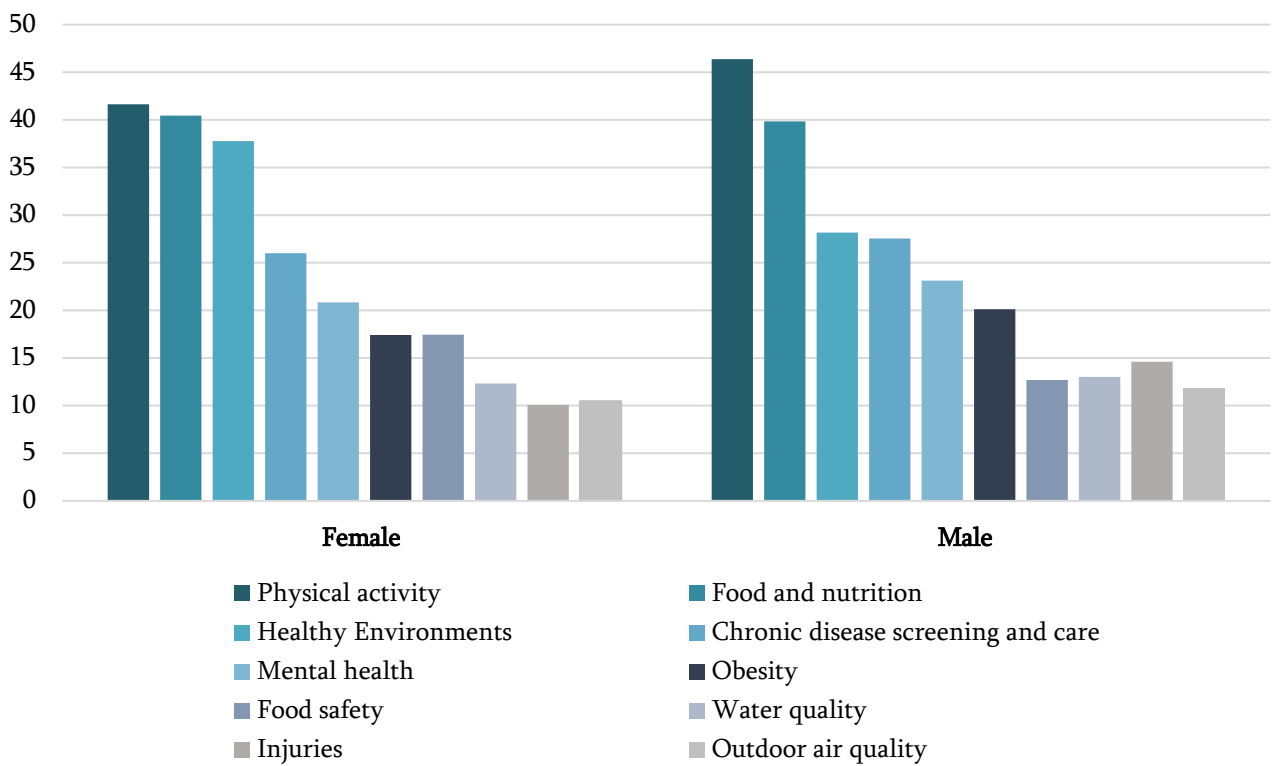


* Health issues are ranked by the percent of respondents who identified them as one of their top three choices out of 21 options.
Source: Westchester County Community Health Needs Survey.

GENDER

Men and women differ on their perceptions of areas of priority health issues for themselves. For example, more men than women reported physical activity as a top priority health issues whereas more woman than men reported healthy environments as one of the top priority health issue for themselves (Figure 9).

Figure 9. Priority Health Issues* for Self (%) by Gender, Westchester County, 2019.



* Health issues are ranked by the percent of respondents who identified them as one of their top three choices out of 21 options.
 Source: Westchester County Community Health Needs Survey.

RACE/ETHNICITY

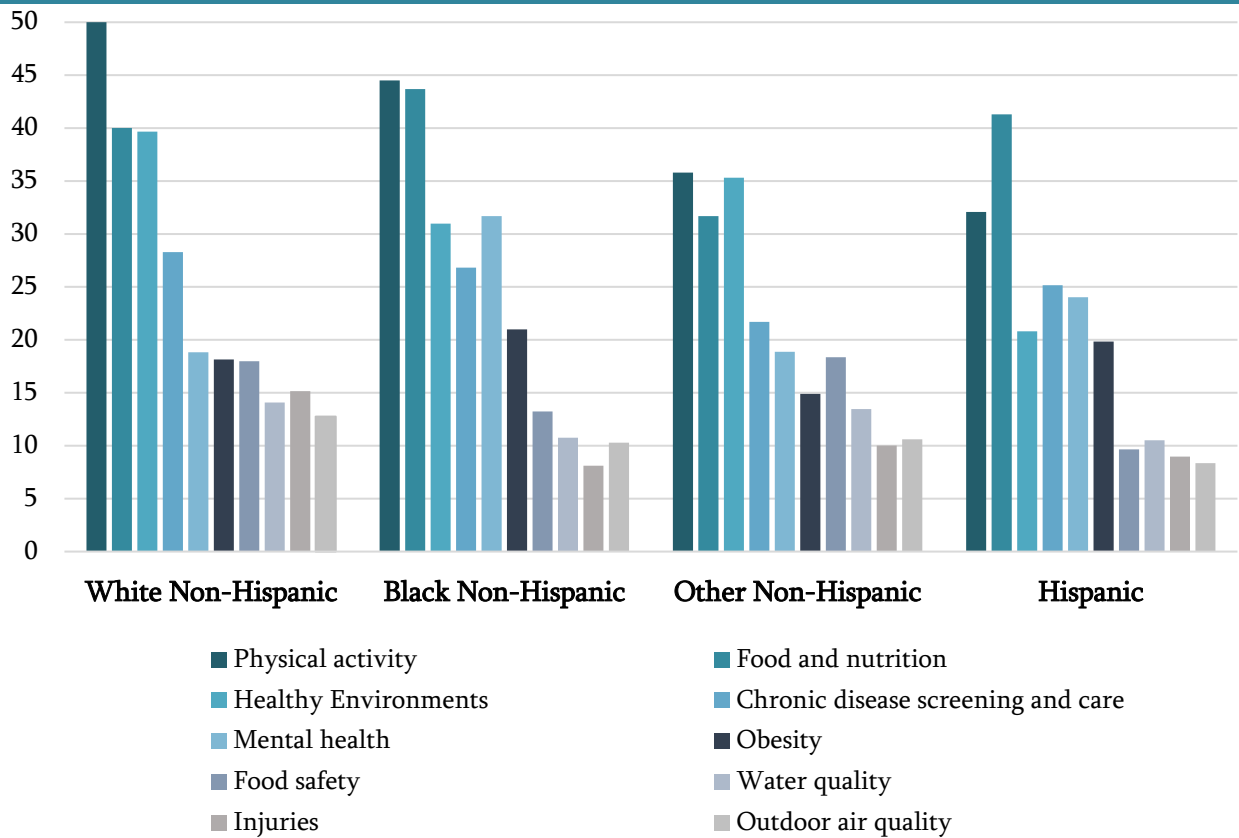
People of different race/ethnicity groups reported differently in terms of their perceptions of top health priorities.

Non-Hispanic whites and non-Hispanic blacks reported physical activity as a top priority health issue for themselves, whereas, Hispanics more frequently reported food and nutrition.

A higher percentage of non-Hispanic blacks reported mental health as one of the top priority health issues for themselves compared to all other race/ ethnicity groups.

Both non-Hispanic blacks and Hispanics were more likely to report food and nutrition as a top health priority compared to non-Hispanic whites and other non-Hispanics (Figure 10).

Figure 10. Priority Health Issues* for Self (%) by Race/Ethnicity, Westchester County, 2019.

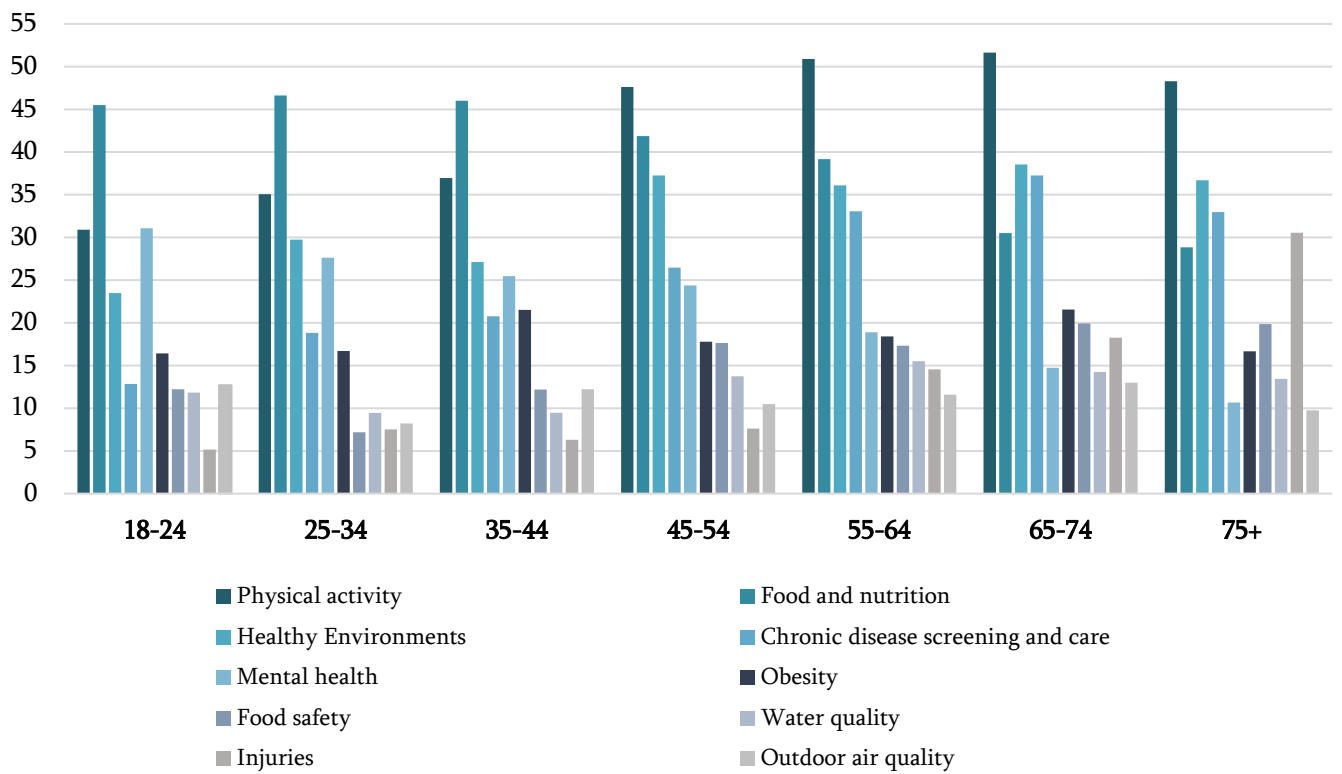


* Health issues are ranked by the percent of respondents who identified them as one of their top three choices out of 21 options.
Source: Westchester County Community Health Needs Survey.

AGE

A higher percent of adults 18-44 years old reported food and nutrition as a top health priority for themselves compared to all other age groups. Most respondents 45 years and older reported physical activity as a top priority for themselves when compared to all other age groups. Those 75 years and older had a higher percentage of respondents who selected Injuries (30.5%) as a top health priority compared to all other age groups (Figure 11).

Figure 11. Priority Health Issues* for Self (%) by Age, Westchester County, 2019.

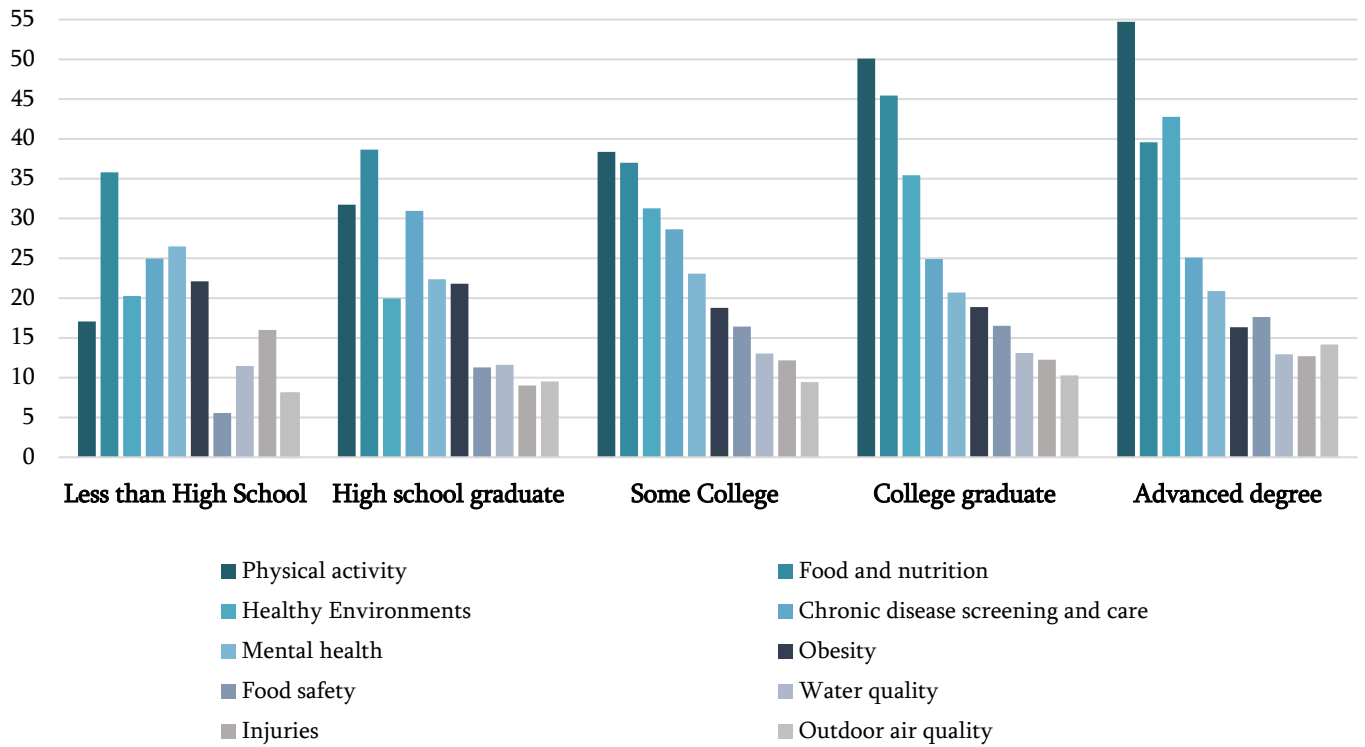


* Health issues are ranked by the percent of respondents who identified them as one of their top three choices out of 21 options.
Source: Westchester County Community Health Needs Survey.

EDUCATION

The higher the education level there was a trend towards an increase of reporting physical activity as a top health priority for self, whereas those with lower education levels prioritized food and nutrition more so than those with higher education levels (Figure 12).

Figure 12. Priority Health Issues* for Self (%) by Educational Attainment, Westchester County, 2019.

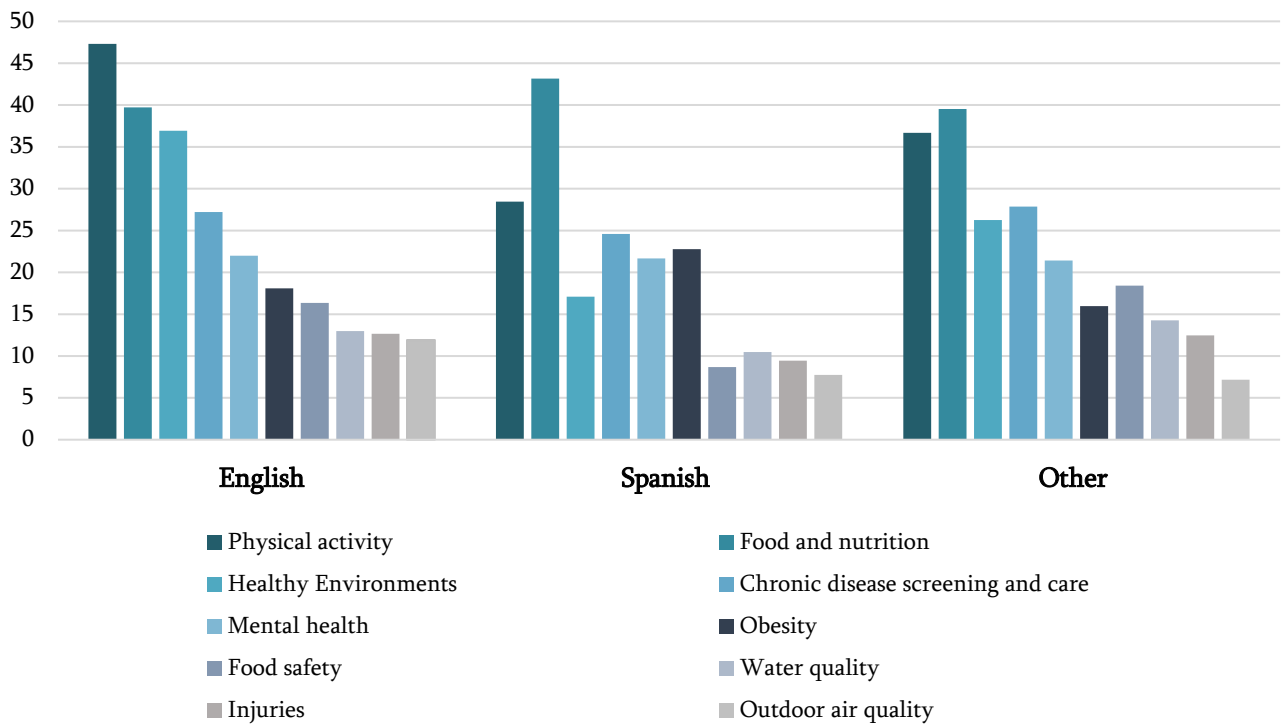


*Health issues are ranked by the percent of respondents who identified them as one of their top three choices out of 21 options. Survey Source: Westchester County Community Health Needs.

LANGUAGE SPOKEN AT HOME

About 43% of respondents who reported Spanish as their primary language spoken at home selected food and nutrition as a top health priorities for themselves. The inverse was observed among English speakers (Figure 13).

Figure 13. Priority Health Issues* for Self (%) by Language Spoken at Home, Westchester County, 2019.

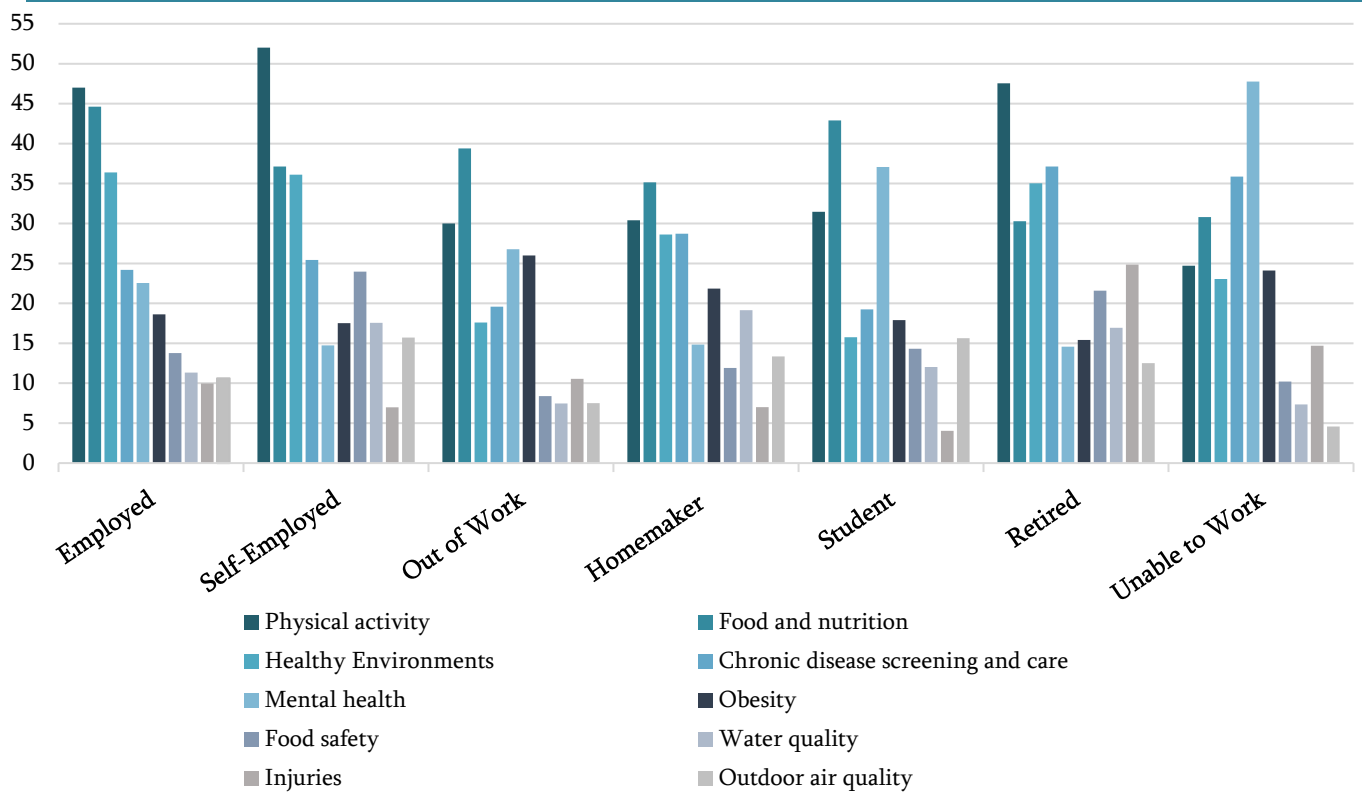


*Health issues are ranked by the percent of respondents who identified them as one of their top three choices out of 21 options.
 Survey Source: Westchester County Community Health Needs.

EMPLOYMENT

Survey respondents who were employed or retired reported physical activity as a health priority. Those who were out of work or students reported food and nutrition as a top health priority more often than all other employment groups. Respondents who were unable to work were more likely to report chronic diseases screening and care and mental health as a top priority more frequently than other groups. Students also reported mental health as a top health priority for themselves (Figure 14).

Figure 14. Priority Health Issues* for Self (%) by Employment Status, Westchester County, 2019.



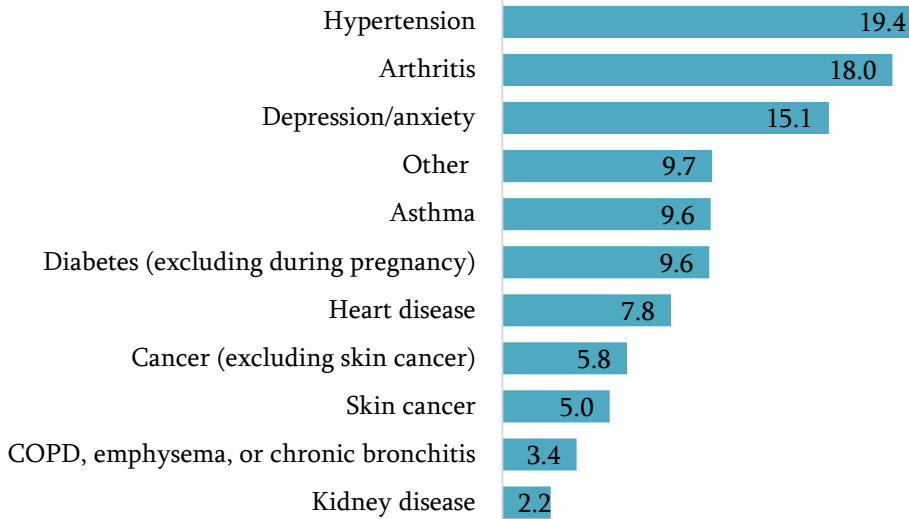
*Health issues are ranked by the percent of respondents who identified them as one of their top three choices out of 21 options.
 Survey Source: Westchester County Community Health Needs.

Existing Health Issues

Of the ten health conditions listed, the three existing health issues most often reported by survey respondents were hypertension (19.4%), arthritis (18.0%), and depression/anxiety (15.1%) (Figure 15).

Existing health conditions vary by the respondent’s demographic and socioeconomic characteristics (Figures 16-21).

Figure 15. Existing Health Issues Ranked by the Percent of Respondents with the Condition, Westchester County, 2019.

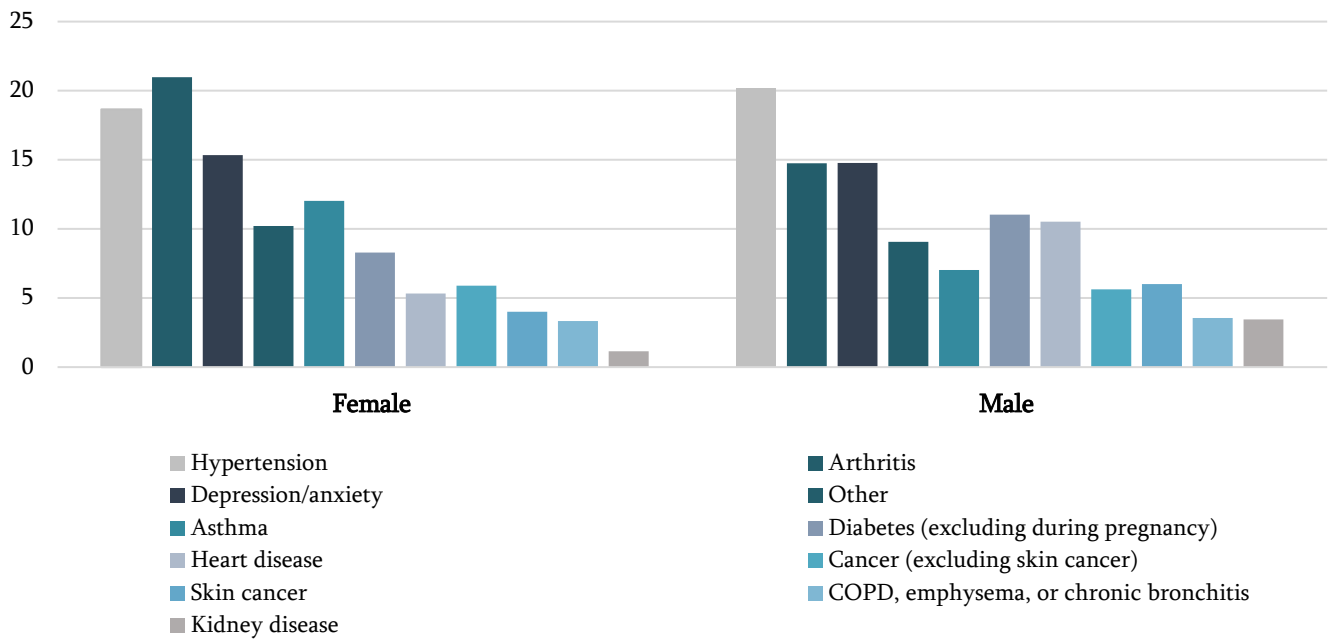


*Survey Source: Westchester County Community Health Needs.

GENDER

More females than males reported they have arthritis, whereas more males than females had heart disease (Figure 16).

Figure 16. Existing Health Issues (%) by Gender, Westchester County, 2019.

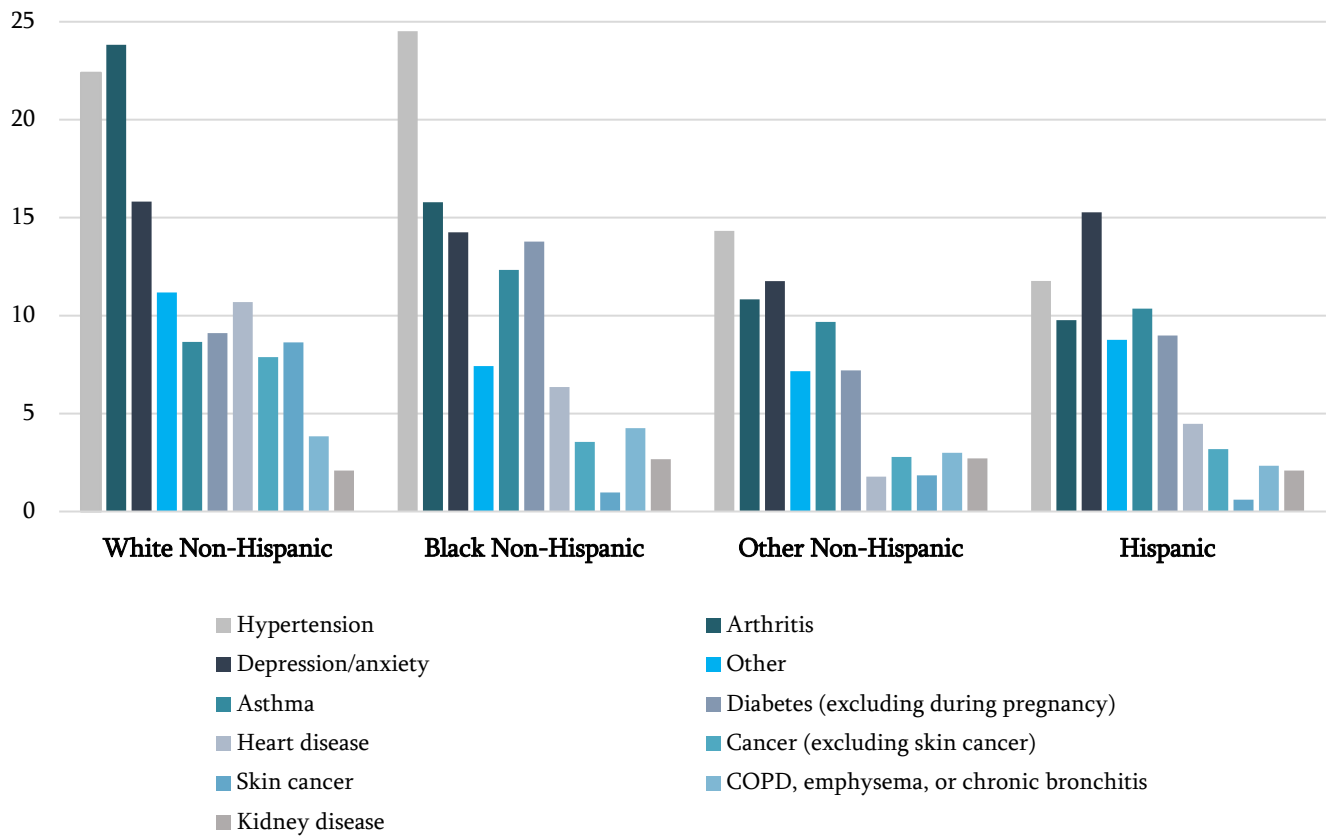


*Survey Source: Westchester County Community Health Needs.

RACE/ETHNICITY

More non-Hispanics whites were told they have arthritis compared to all other race/ethnicity groups. Non-Hispanic whites and blacks were told they have hypertension more often than Hispanics and other non-Hispanics (Figure 17).

Figure 17. Existing Health Issues (%) by Race/Ethnicity, Westchester County, 2019.

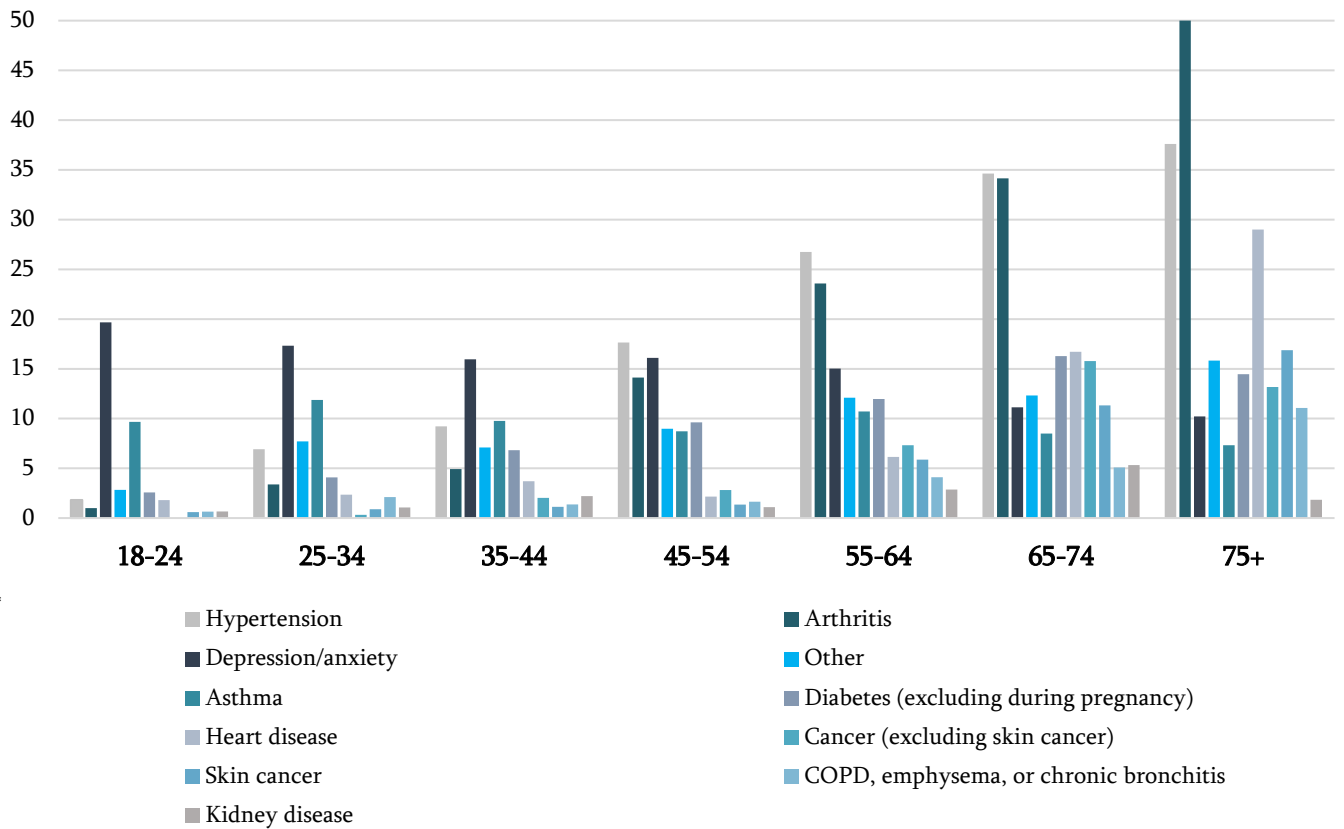


*Survey Source: Westchester County Community Health Needs.

AGE

A greater percentage of respondents who reported depression/anxiety were 18-24 years old (19.7%) followed by 25-34 year olds (17.3%). As age increased the frequency of reporting depression/anxiety as an existing health issues decreased (Figure 18).

Figure 18. Existing Health Issues (%) by Age, Westchester County, 2019.

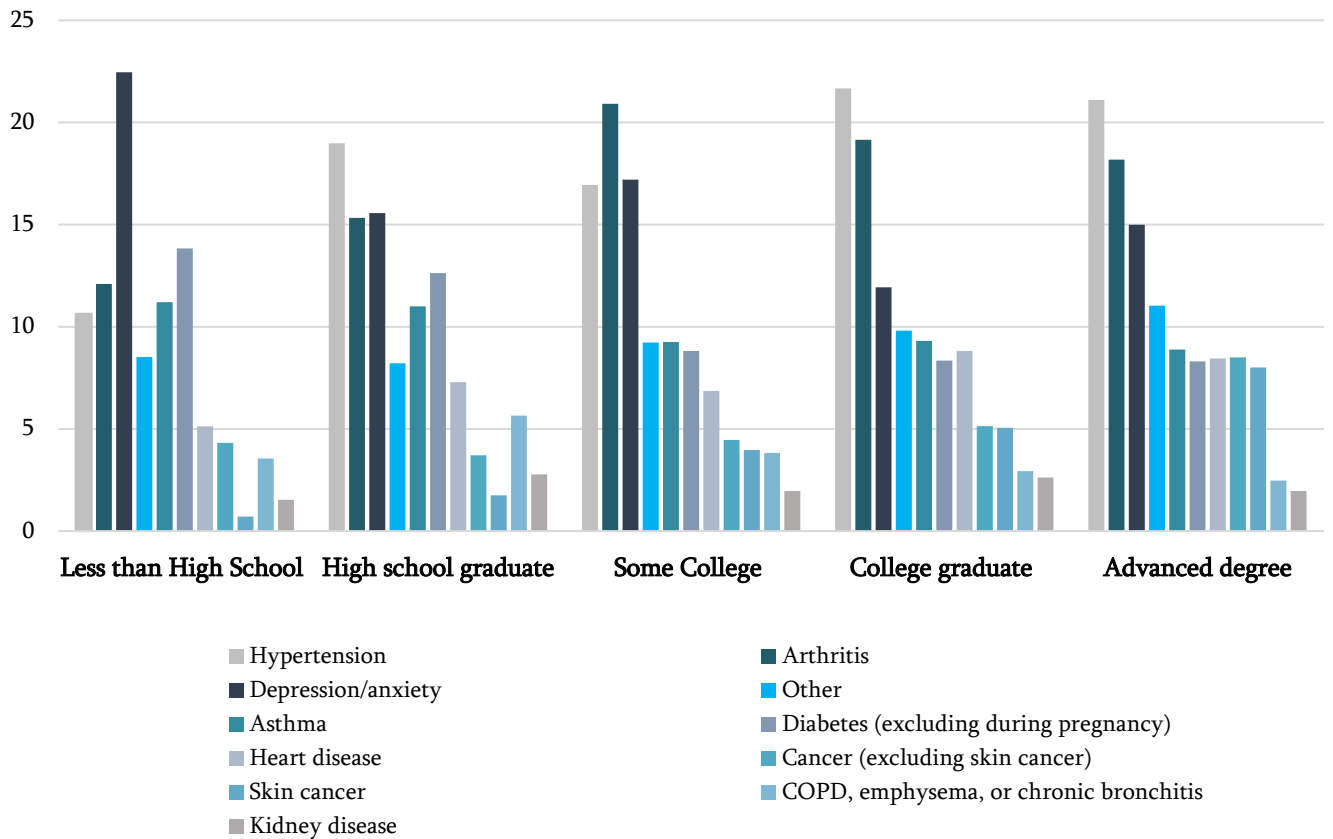


Survey Source: Westchester County Community Health Needs.

EDUCATIONAL ATTAINMENT

Respondents with less than a high school education reported the highest percentage of depression/anxiety (22.5%) and diabetes (excluding during pregnancy) (13.8%) compared to all other education levels. Those with higher educational attainment were more likely to report having been told they have hypertension than those with lower educational attainment (Figure 19).

Figure 19. Existing Health Issues (%) by Educational Attainment, Westchester County, 2019.

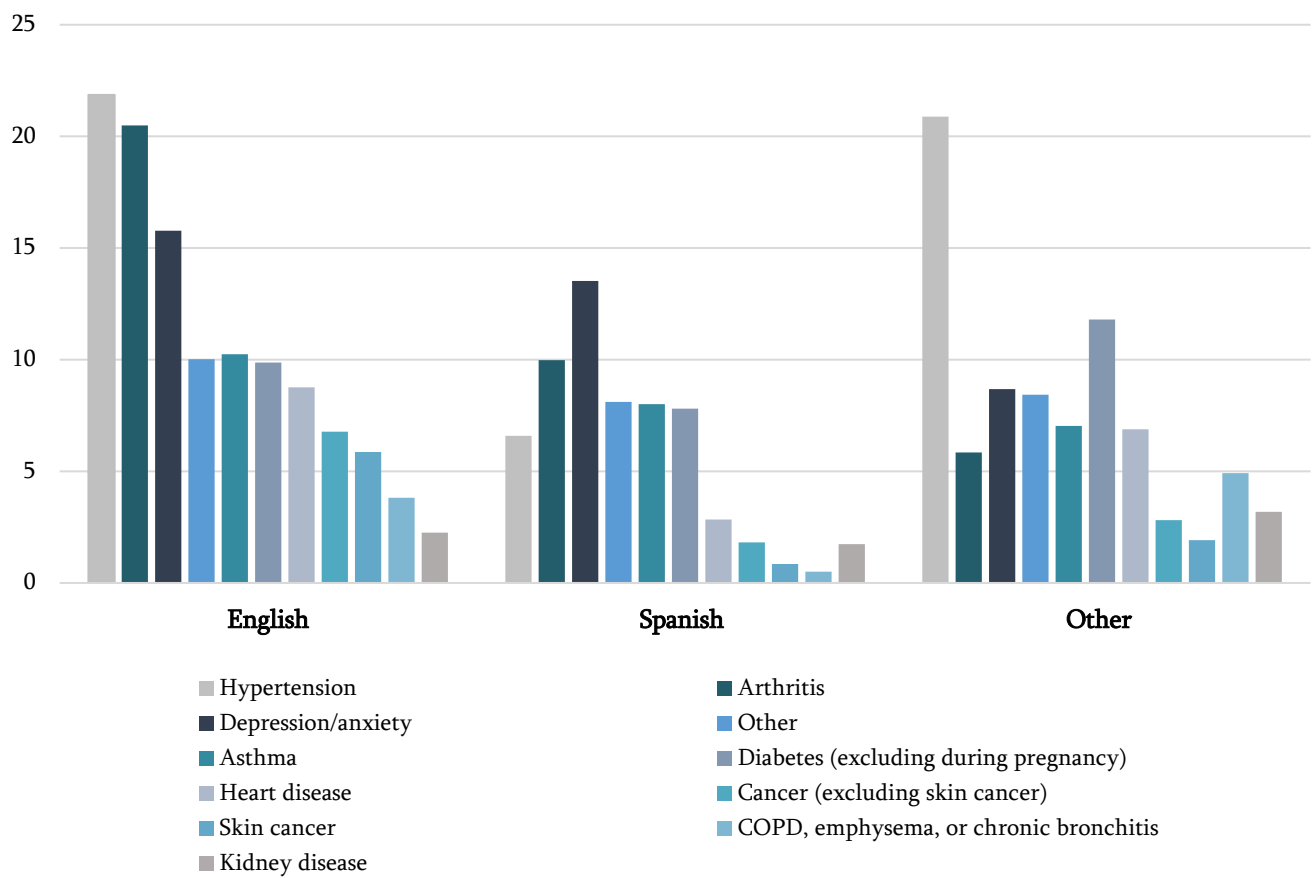


*Survey Source: Westchester County Community Health Needs.

LANGUAGE

The most frequently reported health issue from respondents who said Spanish was their primary language spoken at home was depression/anxiety, whereas, respondents who reported English and a language other than English and Spanish stated hypertension. Arthritis and depression were the second and third most common health issues among English speakers (Figure 20).

Figure 20. Existing Health Issues (%) by Language Spoken at Home, Westchester County, 2019.

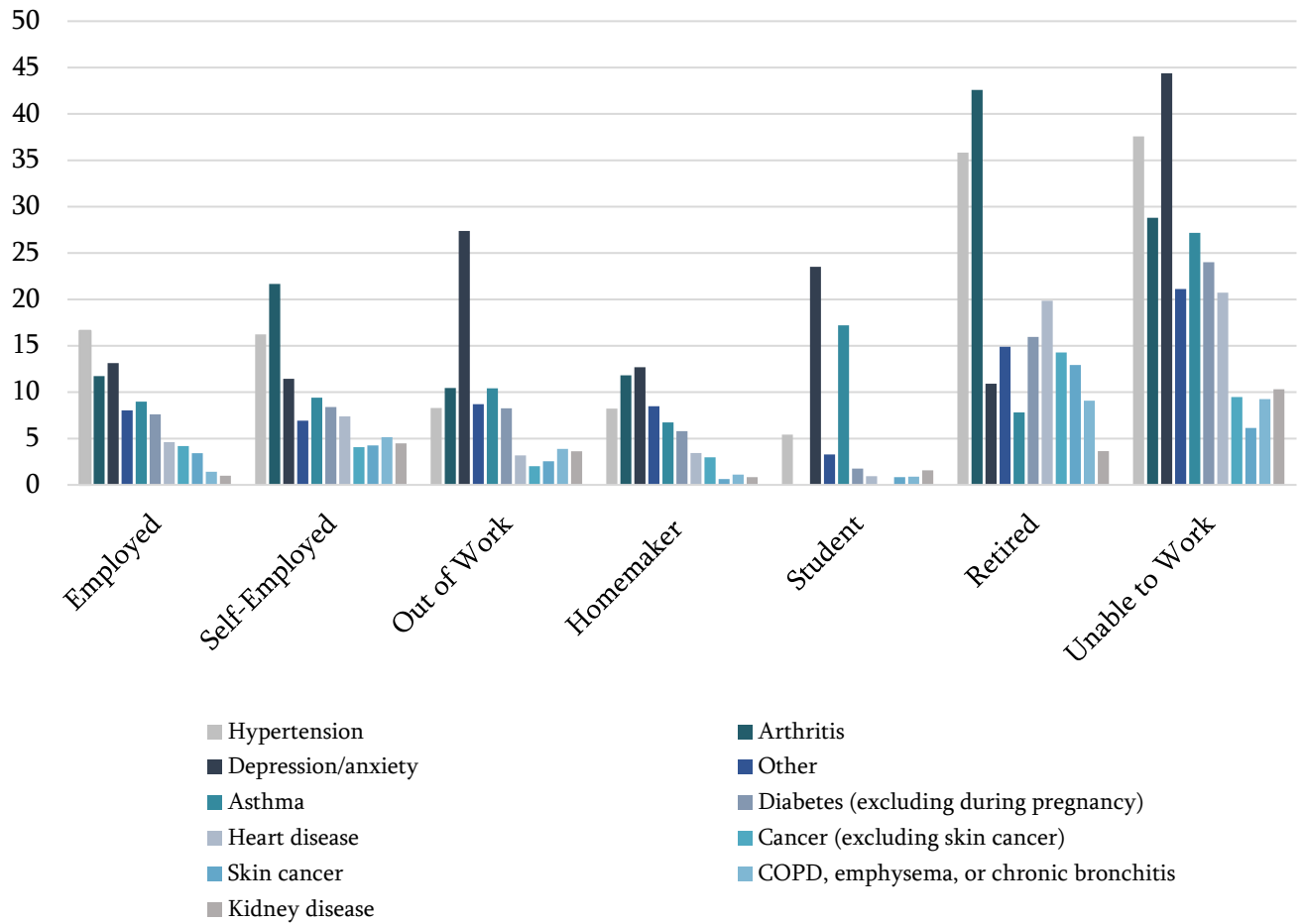


*Survey Source: Westchester County Community Health Needs.

EMPLOYMENT

About 45% of respondents who stated they were unable to work and 27.4% of respondents who reported being out of work had been told they have depression/anxiety. Those who were retired reported the greatest percentage of having arthritis compared to all other groups (Figure 21).

Figure 21. Existing Health Issues (%) by Employment Status, Westchester County, 2019.



*Survey Source: Westchester County Community Health Needs.

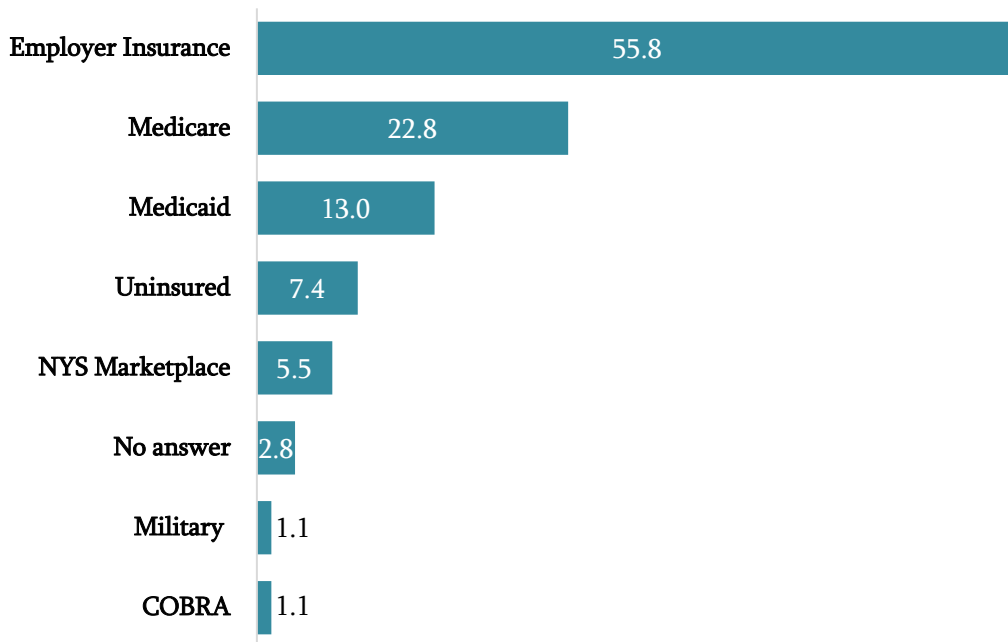
Access to Care

Health Insurance Type

More than half (56%) of the respondents reported using an employer or a family members employer health insurance. About a quarter of the respondents had Medicare (23%) and 13% had Medicaid. Seven percent of respondents reported they did not have health insurance (Figure 22).

Health insurance type varied by the respondent’s demographic and socioeconomic characteristics (Figures 23-28).

Figure 22. Health Insurance used by Respondents (%), Westchester County, 2019.

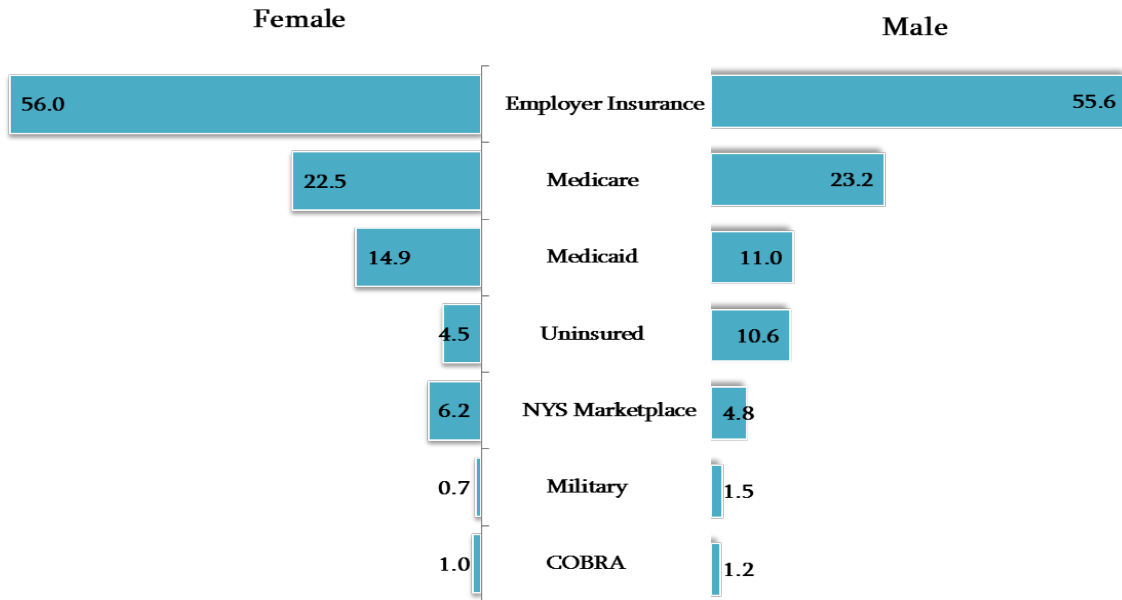


*Source: Westchester County Community Health Needs Survey.

GENDER

More women than men reported using Medicaid to pay for their medical bills whereas more men than women reported they did not have health insurance (Figure 23).

Figure 23. Health Insurance used by Respondents (%) by Gender, Westchester County, 2019.

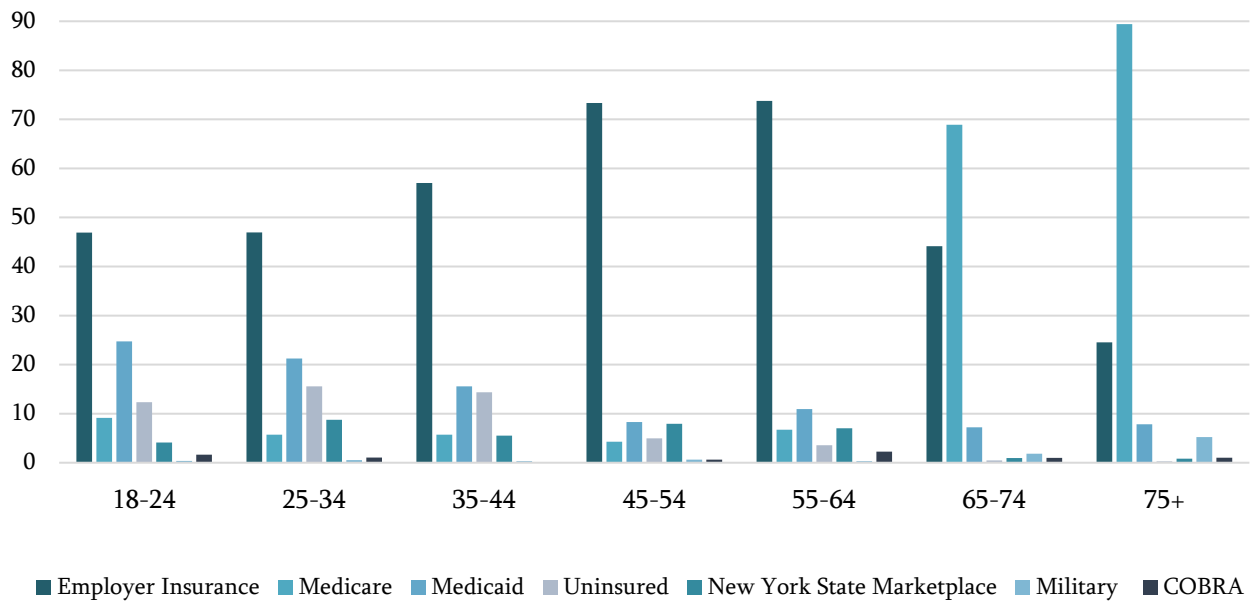


*Source: Westchester County Community Health Needs Survey.

AGE

A greater percentage of respondents between 45-64 years old reported they use insurance from their employer to pay for doctor or hospital bills. Respondents over the age of 65 were more likely to use Medicare as their insurance while those 18-24 and 25-34 years old were more likely to use Medicaid to pay for medical bills (Figure 24).

Figure 24. Health Insurance used by Respondents (%) by Age, Westchester County, 2019.

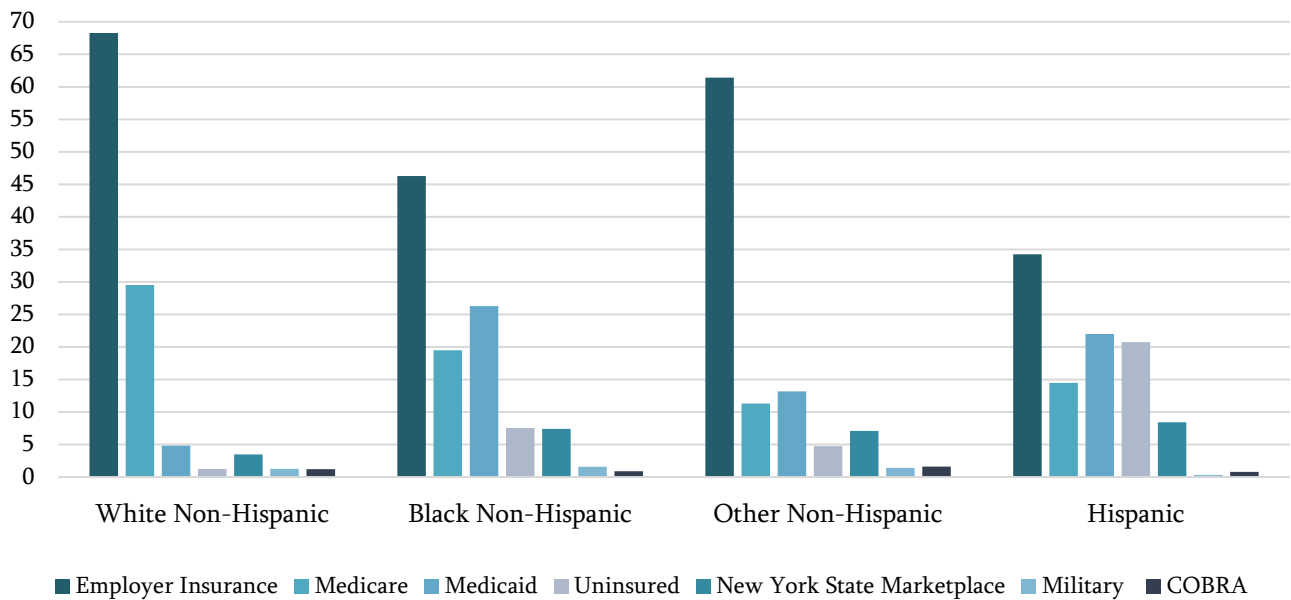


*Source: Westchester County Community Health Needs Survey.

RACE/ETHNICITY

A higher percentage of respondents who identified as white non-Hispanic and other non-Hispanic used employer provided insurance than black non-Hispanics and Hispanics. Moreover, white non-Hispanics were more likely than any other race/ethnicity group to report using Medicare as their insurance. Black Non-Hispanics and Hispanics reported using Medicaid more than white non-Hispanics and other non-Hispanics. A greater percentage of Hispanics reported not having health insurance compared to the other race/ethnicity groups (Figure 25).

Figure 25. Health Insurance used by Respondents (%) by Race/Ethnicity, Westchester County, 2019.

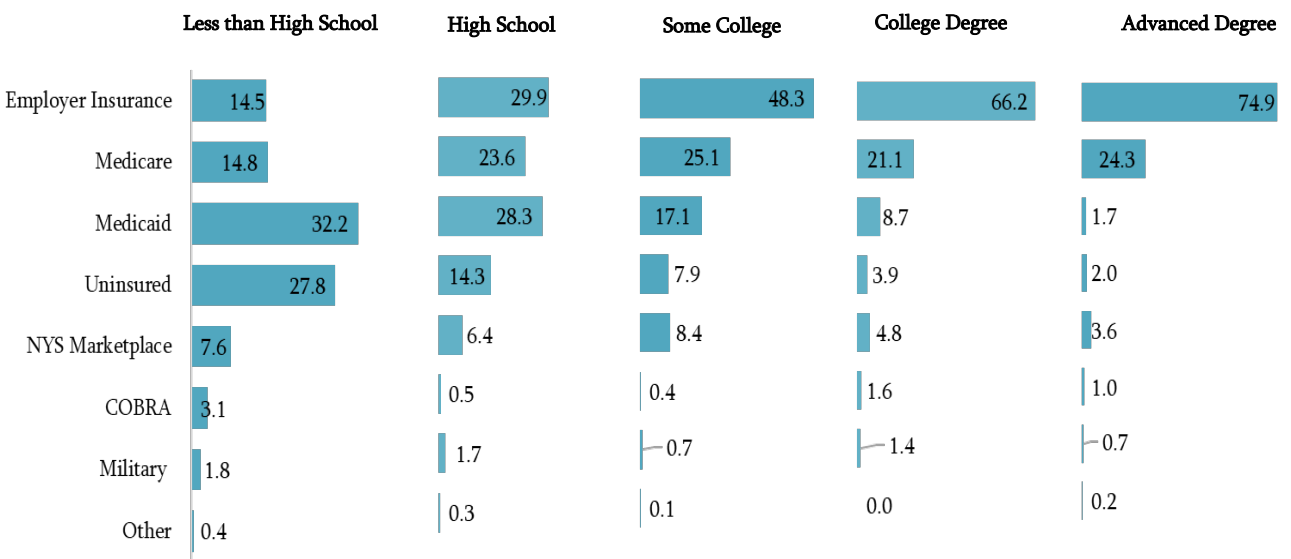


*Source: Westchester County Community Health Needs Survey.

EDUCATION

As educational attainment level increased there was a higher percentage of individuals who reported using employer insurance to pay their doctor or hospital bills. Whereas, the lower the educational attainment level the higher percentage respondents who used Medicaid. A higher percentage of those with less than a high school education or at least high school education reported not having health insurance compared to all other educational attainment levels (Figure 26).

Figure 26. Health Insurance used by Respondents (%) by Educational Attainment, Westchester County, 2019.

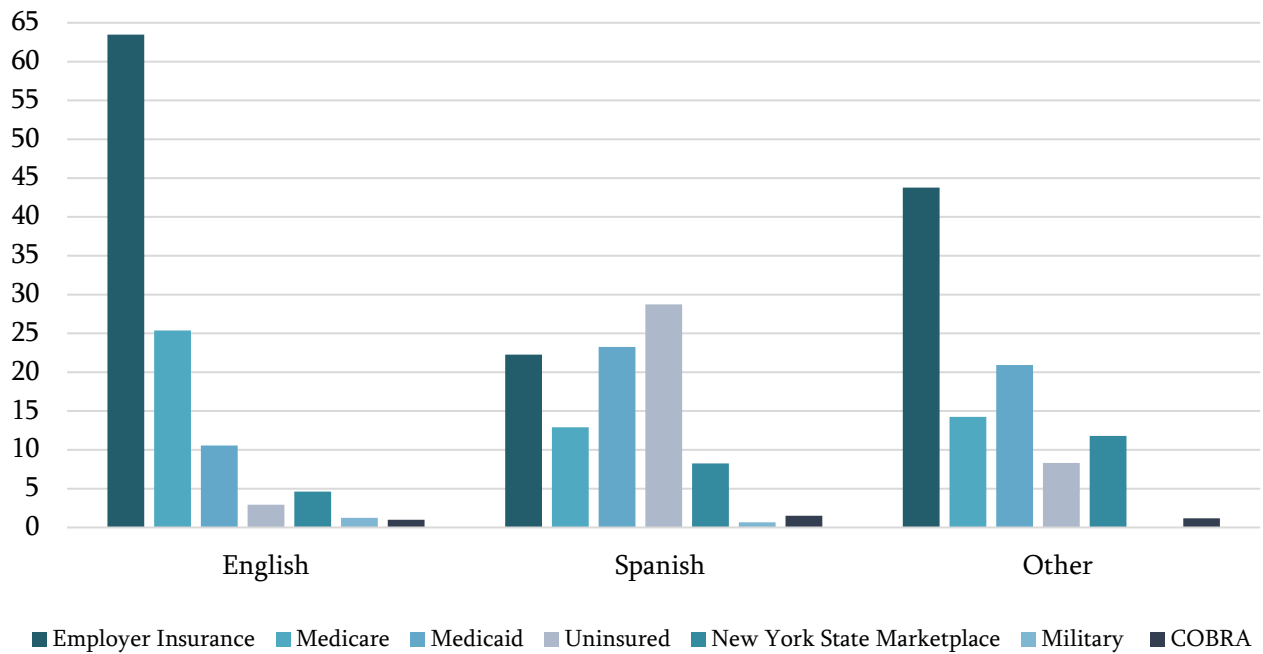


*Source: Westchester County Community Health Needs Survey.

LANGUAGE

Most (63.5%) respondents who said their primary language spoken at home was English reported using an employer’s insurance. respondents who said their primary language spoken at home was Spanish reported that they either did not have health insurance (28.7%) or used Medicaid (23.3%) to pay for their doctor or hospital bills. Among those who report other as their primary language spoken at home reported using an employer’s insurance (43.8%) and 20.9% reported using Medicare (Figure 27).

Figure 27. Health Insurance used by Respondents (%) by Language Spoken at Home, Westchester County, 2019.

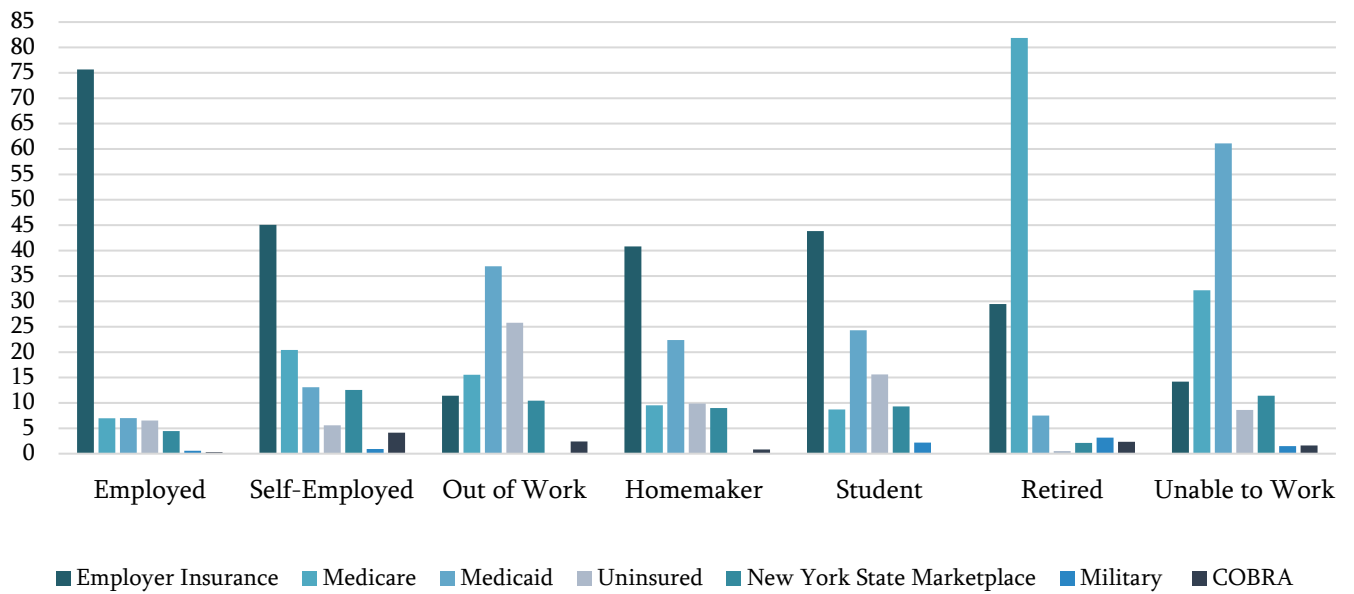


*Source: Westchester County Community Health Needs Survey.

EMPLOYMENT

A higher percentage of individuals who were unable to work, out of work, homemakers, or students reported using Medicaid to pay for their doctor or hospital bills (Figure 28).

Figure 28. Health Insurance used by Respondents (%) by Employment Status, Westchester County, 2019.



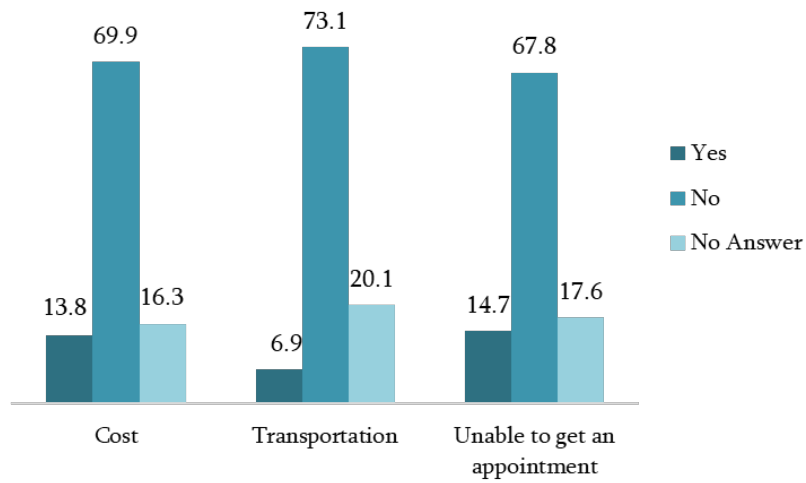
*Source: Westchester County Community Health Needs Survey.

Barriers to Obtaining Medical Care by a Health Care Provider

15% of respondents reported that not being able to get an appointment was a factor of why they were not able to see a doctor, followed by cost (14%) and transportation (6.9%) (Figure 29).

The percentage of and type of barriers encountered while seeking care vary by the respondent's age, sex, race/ethnicity and other socioeconomic characteristics (Figures 30-35).

Figure 29. Percent Distribution of Barriers to Obtaining Medical Care, Westchester County, 2019.

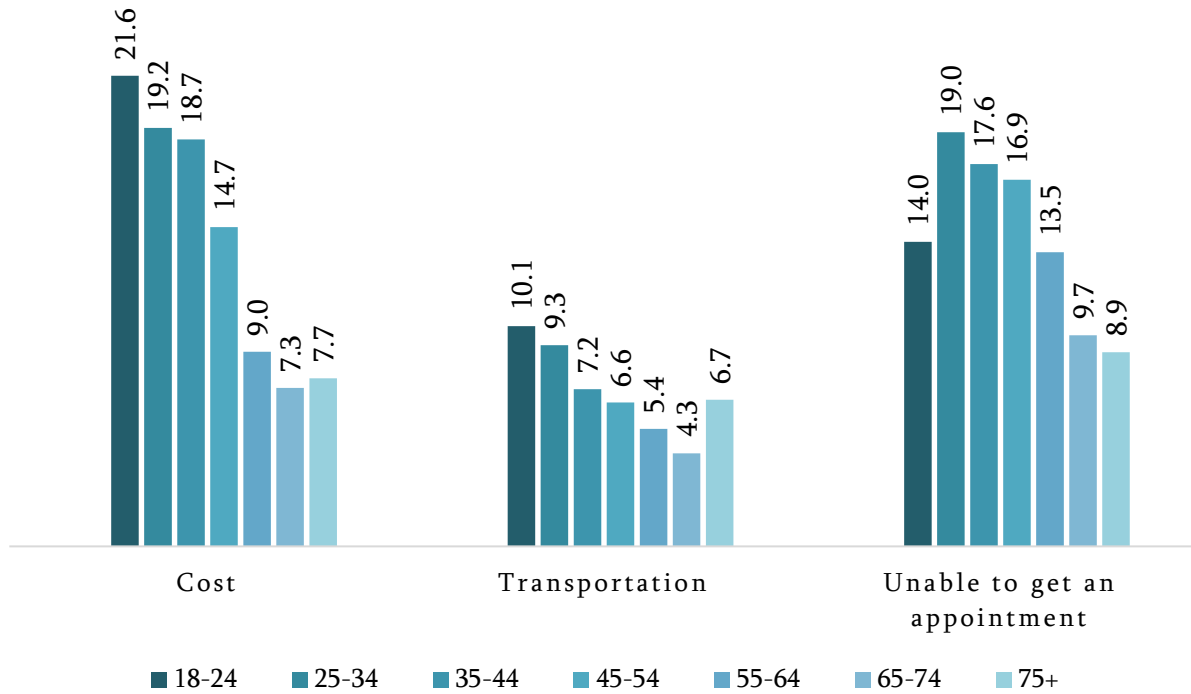


*Source: Westchester County Community Health Needs Survey.

AGE

About 22% of 18-24 year olds reported cost as a barrier to obtaining medical care. As age increased the percent of respondents who reported cost as a barrier decreased. Nearly 20% of adults 25-34 years old and 18% of 35-44 years old selected inability to get an appointment as a barrier to obtaining medical care (Figure 30).

Figure 30. Percent of Respondents who Reported Barriers to Obtaining Medical Care by Age, Westchester County, 2019.

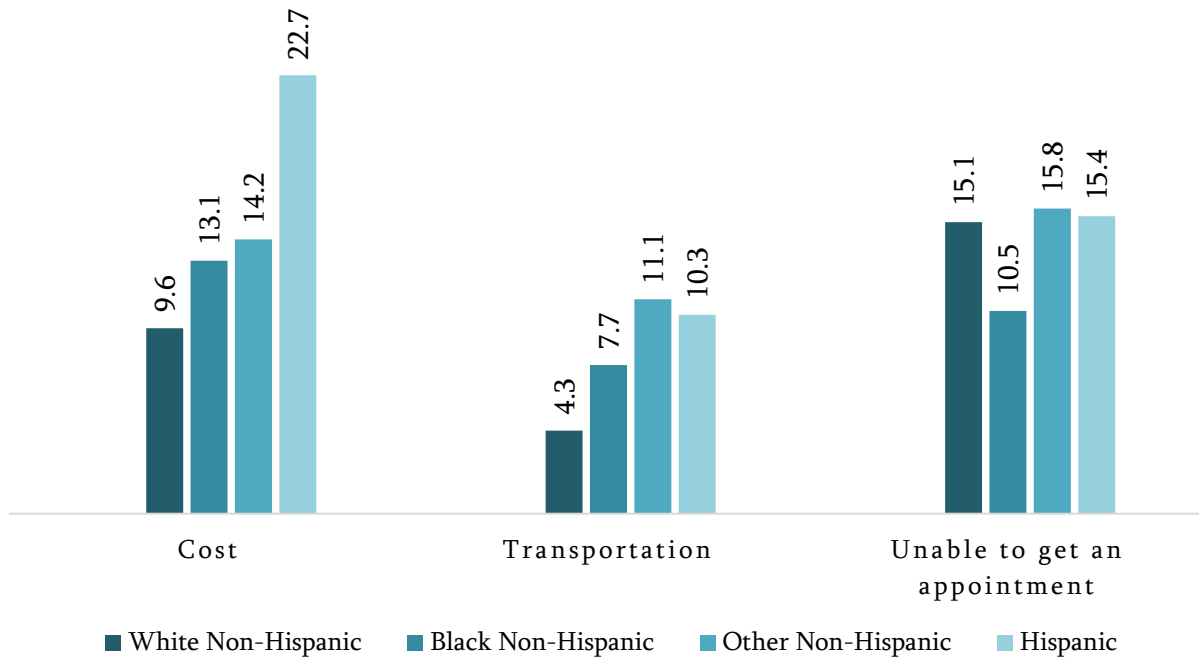


*Source: Westchester County Community Health Needs Survey.

RACE/ETHNICITY

Hispanics reported cost as a barrier to obtaining medical care more frequently than all other race/ethnicity groups (Figure 31).

Figure 31. Percent of Respondents who Reported Barriers to Obtaining Medical Care by Race/Ethnicity, Westchester County, 2019.

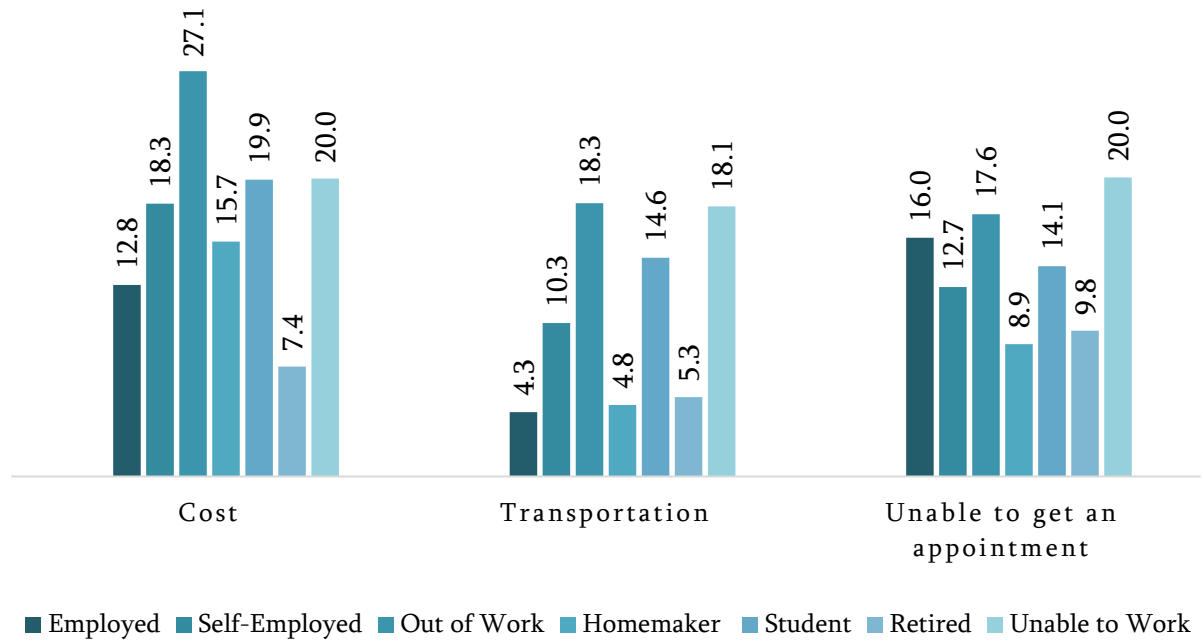


*Source: Westchester County Community Health Needs Survey.

EMPLOYMENT STATUS

A higher percentage of those who reported being out of work reported cost and transportation as a barrier to obtaining medical care by a provider. Additionally, those who were out of work or unable to work transportation as a barrier at the same rate (Figure 32).

Figure 32. Percent of Respondents who Reported Barriers to Obtaining Medical Care by Employment Status, Westchester County, 2019.

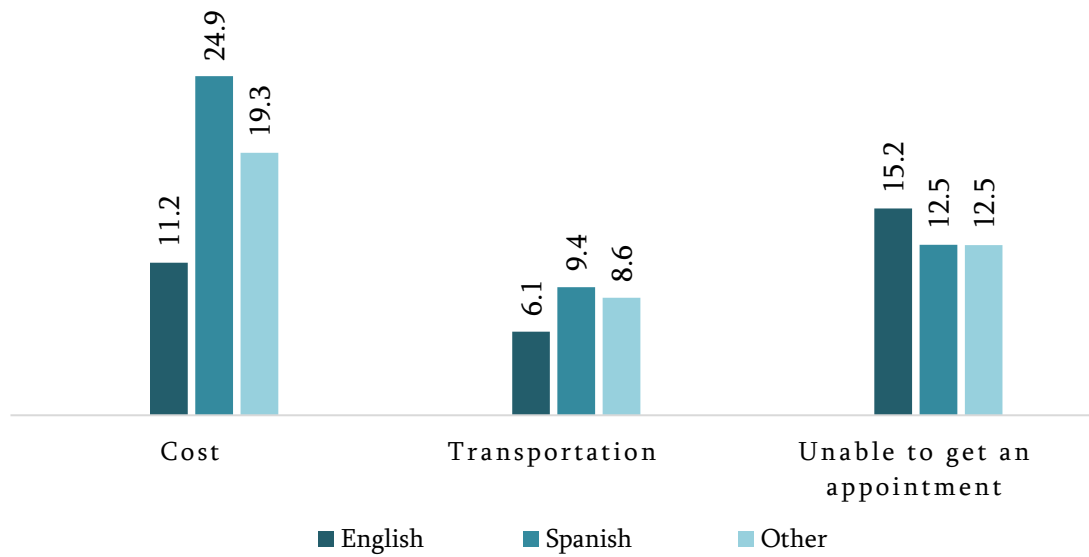


*Source: Westchester County Community Health Needs Survey.

LANGUAGE

A higher percentage of respondents who reported their primary language spoken at home was Spanish (24.9%) reported Cost as a reason for not being able to see a doctor. Respondents who said English (15.2%) was their primary language spoken at home reported that they were unable to get an appointment as the primary reason they could not see a doctor when they needed to (Figure 33).

Figure 33. Percent of Respondents who Reported Barriers to Obtaining Medical Care by Language Spoken at Home, Westchester County, 2019.

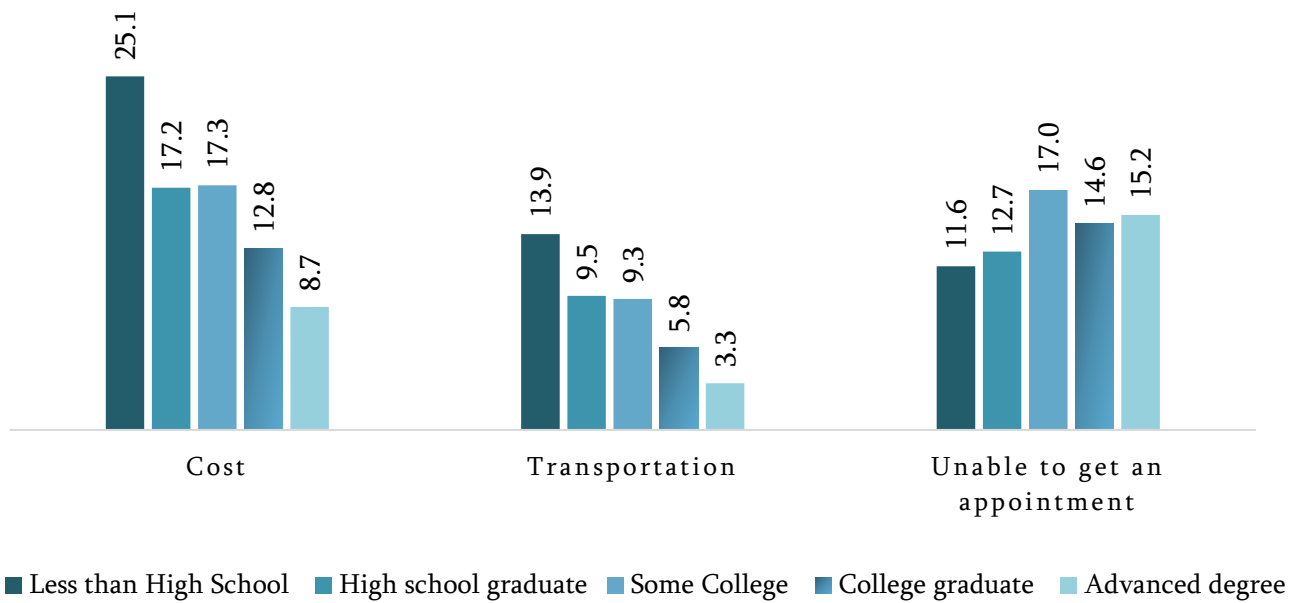


*Source: Westchester County Community Health Needs Survey.

EDUCATION

A higher percentage of respondents with less than a High School education reported cost and transportation as a barrier to obtaining medical care compared to all other education levels. Respondents who had some college education or greater reported that they were unable to get an appointment more often than those with less than college education. This trend increased with higher education level (Figure 34).

Figure 34. Percent of Respondents who Reported Barriers to Obtaining Medical Care by Educational Attainment, Westchester County, 2019.

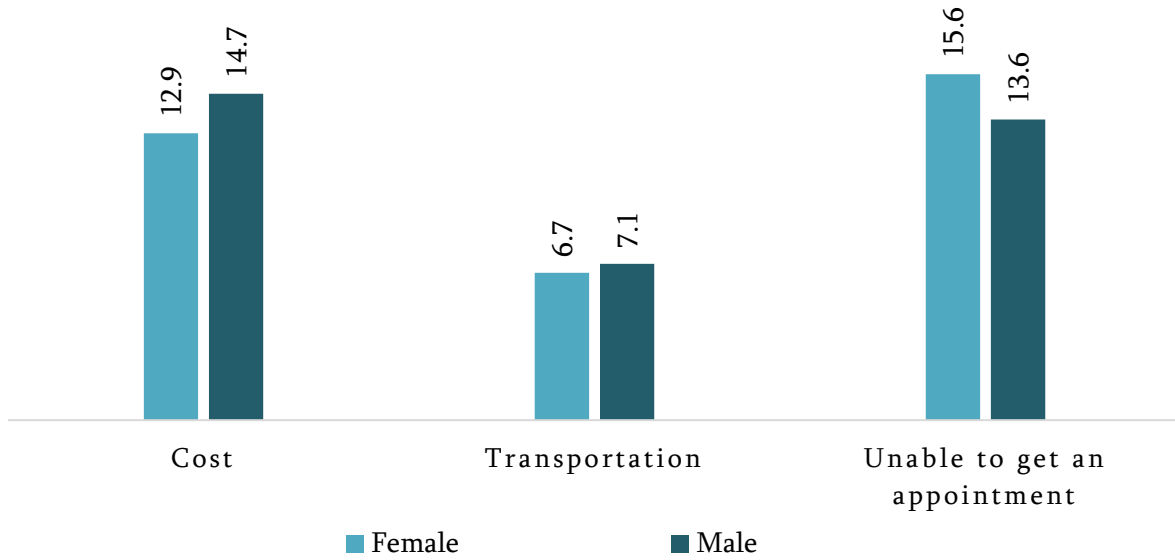


*Source: Westchester County Community Health Needs Survey.

GENDER

There were no differences between males and females (Figure 35).

Figure 35. Percent of Respondents who Reported Barriers to Obtaining Medical Care by Gender, Westchester County, 2019.

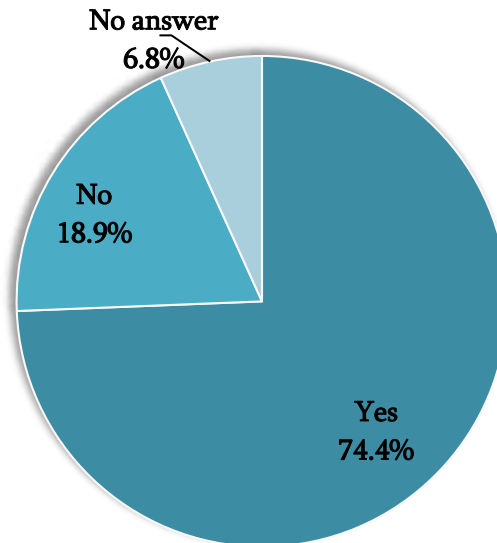


*Source: Westchester County Community Health Needs Survey.

Personal Health Care Provider

The majority of respondents (74.4%) reported having someone that they consider their personal doctor (Figure 36), with variation by respondent's demographics and socioeconomic characteristics (Figures 37-42).

Figure 36. Percent Distribution of Having a Primary Care Provider, Westchester County, 2019.

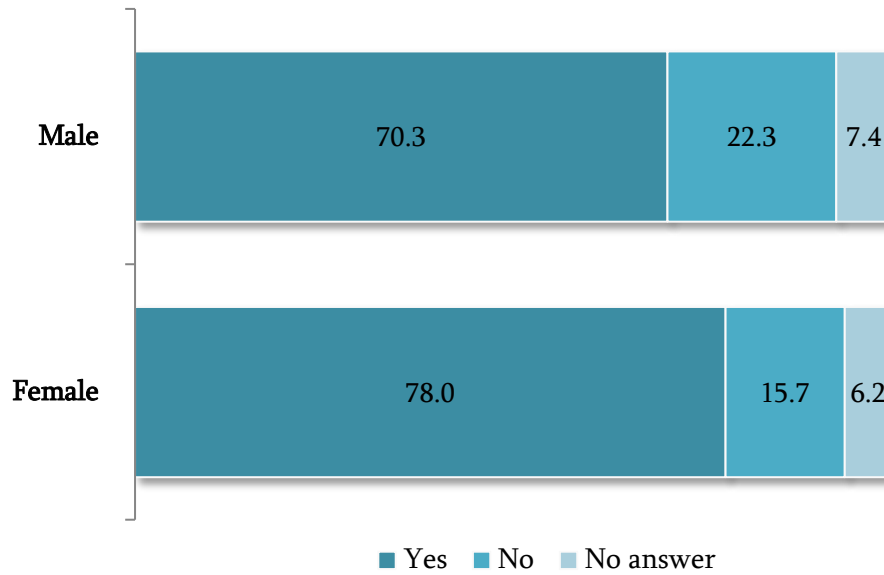


*Source: Westchester County Community Health Needs Survey.

GENDER

More woman than men reported having someone they considered a personal doctor or health care provider (Figure 37).

Figure 37. Percent Distribution of Having a Primary Care Provider by Gender, Westchester County, 2019.

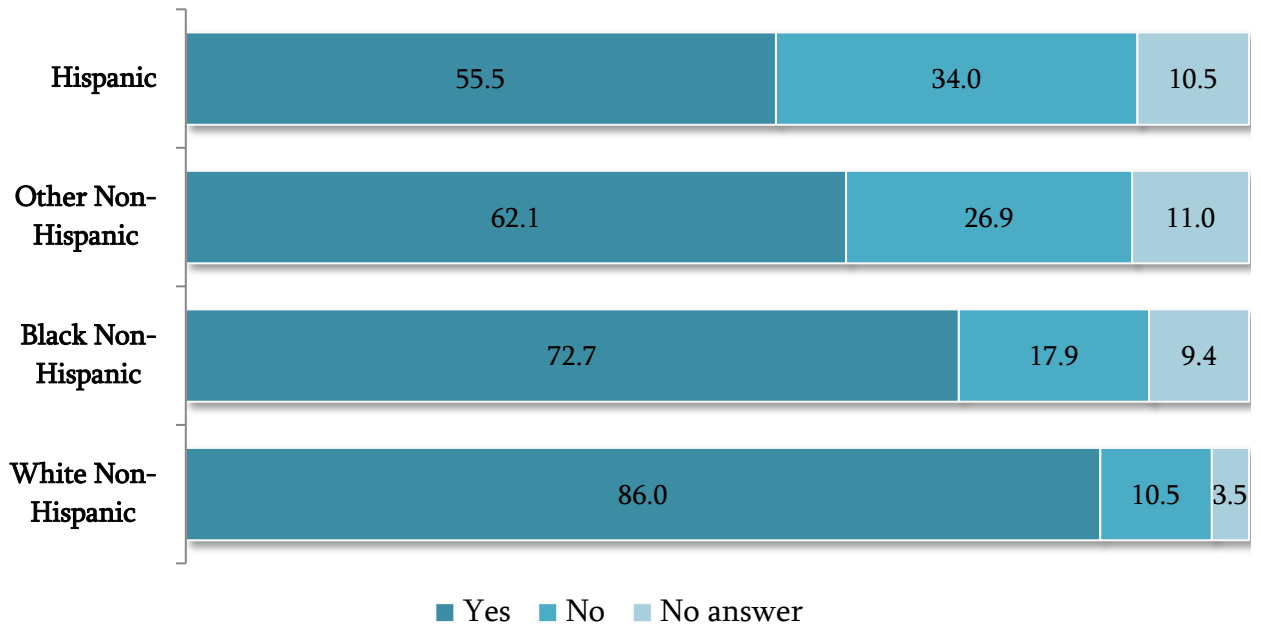


*Source: Westchester County Community Health Needs Survey.

RACE/ETHNICITY

Non-Hispanic white respondents reported a greater percentage of having a personal doctor or health care providers, followed by non-Hispanics blacks, other non-Hispanics and Hispanics (of any race-ethnicity) (Figure 38).

Figure 38. Percent Distribution of Having a Primary Care Provider by Race/Ethnicity, Westchester County, 2019.

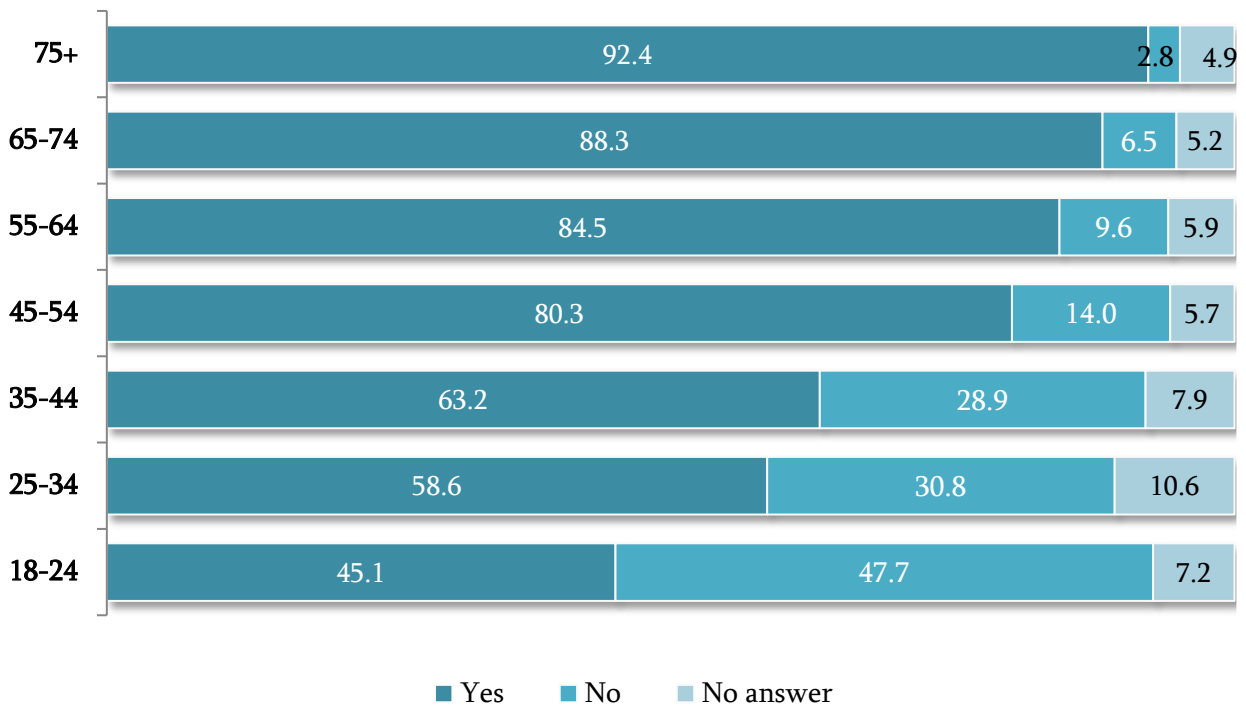


*Source: Westchester County Community Health Needs Survey.

AGE

Almost half (48%) of 18-24 years old reported not having a personal doctor or health care provider, compared to all other age groups. A greater percentage of adults, 45+ older reported having a personal doctor or health care providers compared to those less than 45 years old (Figure 39).

Figure 39. Percent Distribution of Having a Primary Care Provider by Age, Westchester County, 2019.

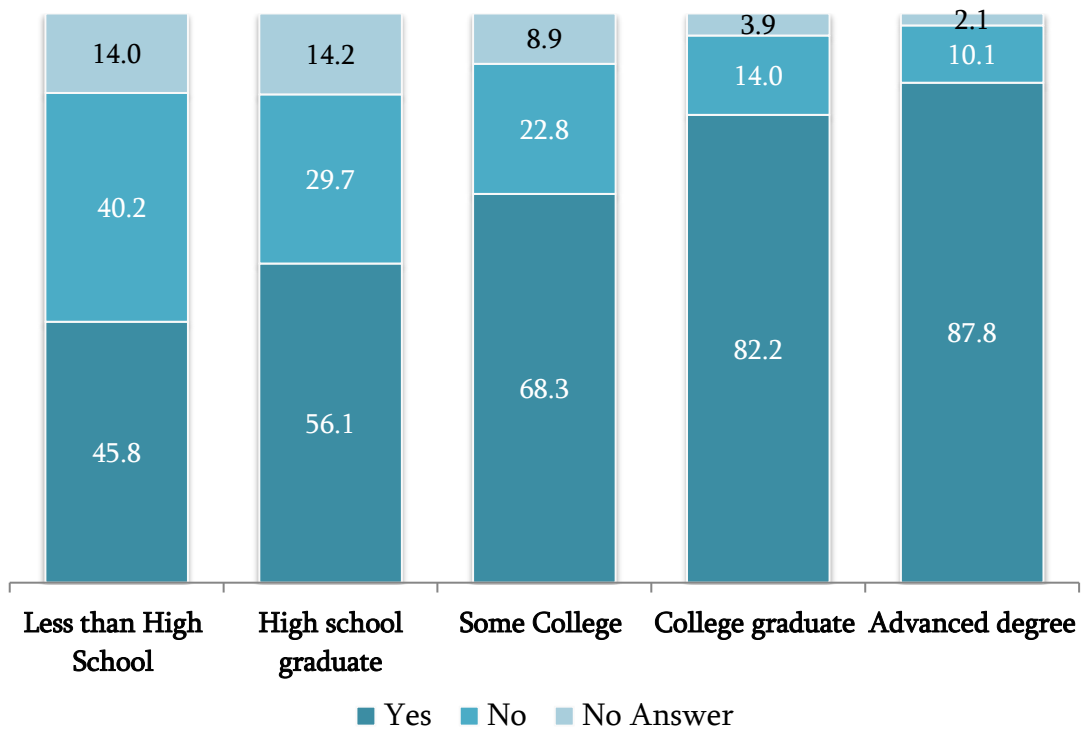


*Source: Westchester County Community Health Needs Survey.

EDUCATION

As education level increased the percent of respondents who reported having a personal health care provider increased (Figure 40).

Figure 40. Percent Distribution of Having a Primary Care Provider by Educational Attainment, Westchester County, 2019.

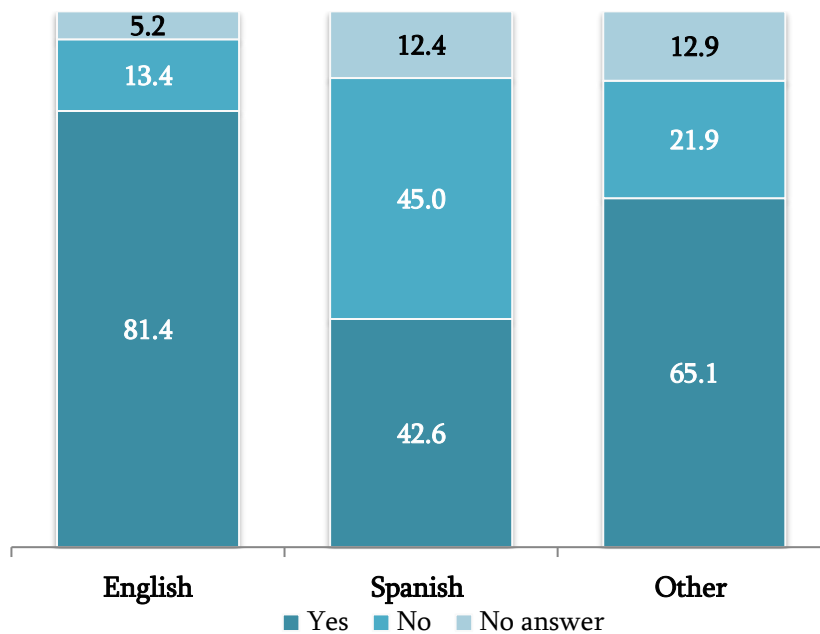


*Source: Westchester County Community Health Needs Survey.

LANGUAGE

The majority of respondents who reported English as the primary language spoken at home stated they have a personal doctor or health care provider (81.4%) versus only 42.6 % of those who said Spanish as the primary language spoken at home. More than half (65.1%) of respondents who spoke a language other than English or Spanish at home said they have someone who they think of as their personal doctor or health care provider (Figure 41).

Figure 41. Percent Distribution of Having a Primary Care Provider by Language Spoken at Home, Westchester County, 2019.

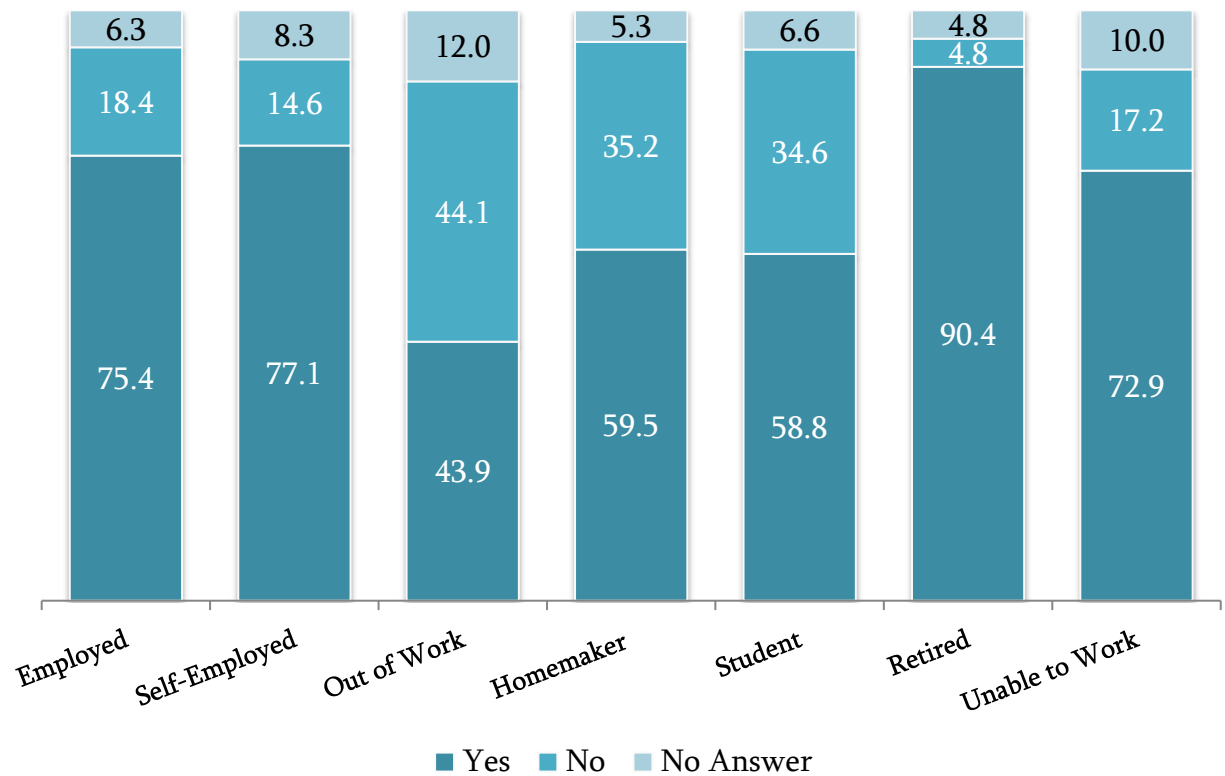


*Source: Westchester County Community Health Needs Survey.

EMPLOYMENT

A higher percentage of respondents who were employed or self-employed, retired or unable to work said they had a personal health care provider compared to home makers, students or those out of work (Figure 42).

Figure 42. Percent Distribution of Having a Primary Care Provider by Employment Status, Westchester County, 2019.



*Source: Westchester County Community Health Needs Survey.

Perceived Discrimination

Overall, 10.4% of respondents reported they felt emotionally upset based on treatment due to age, 4.4% due to gender identity, 11.6% due to race/ethnicity, 2.3% due to sexual orientation, 4.4% due to perceived immigration status, 4.0% due to religion, 4.2% due to disability.

The percent of respondents who reported discrimination varies by their demographic and socioeconomic characteristics (Table 2).

Table 2. Percent of Respondents Who Reported Feeling Emotionally Upset Based on Treatment due to: Age, Gender Identity, Race/Ethnicity, Sexual Orientation, Perceived Immigration Status, Religion and Disability, Westchester County, 2019.

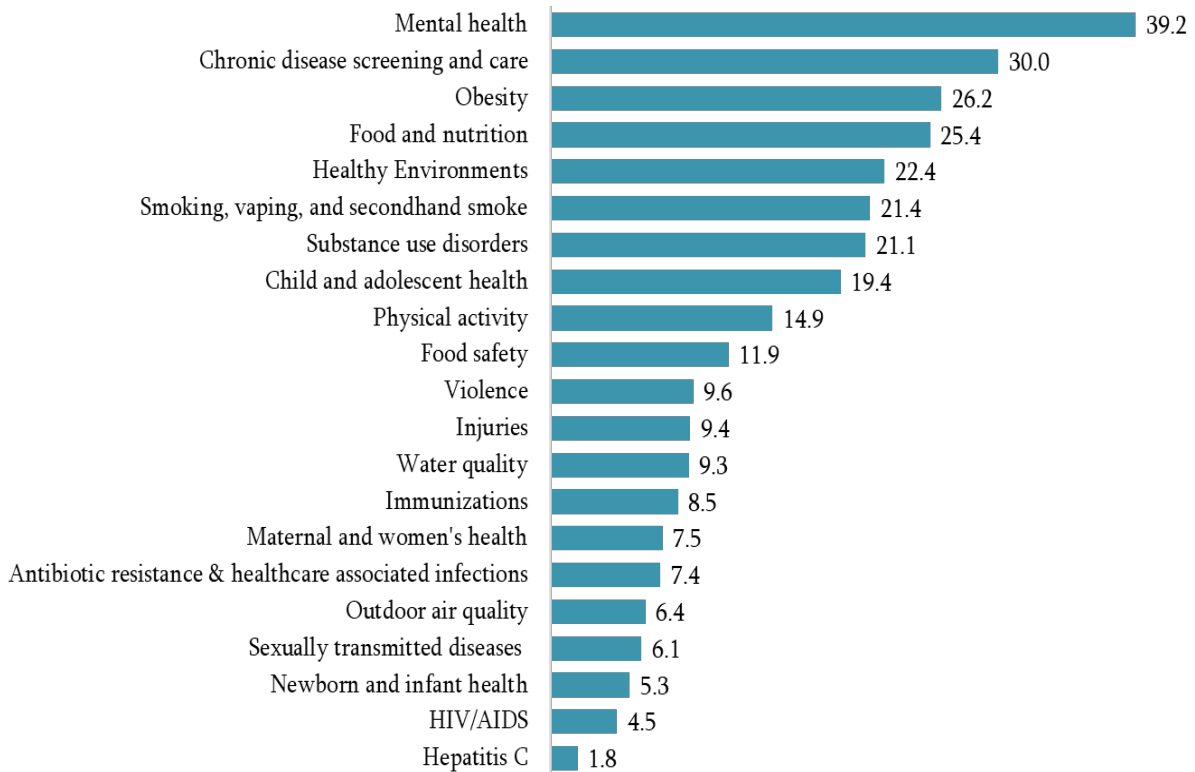
| | AGE | GENDER IDENTITY | RACE/ ETHNICITY | SEXUAL ORIENTATION | PERCEIVED IMMIGRATION STATUS | RELIGION | DISABILITY |
|--|------|--------------------|--------------------|-----------------------|------------------------------------|----------|------------|
| | % | % | % | % | % | % | % |
| Total | 10.4 | 4.4 | 11.6 | 2.3 | 4.4 | 4.0 | 4.2 |
| Gender | | | | | | | |
| Female | 11.6 | 6.3 | 11.0 | 1.6 | 3.8 | 3.3 | 3.8 |
| Male | 9.0 | 2.3 | 12.1 | 3.1 | 5.0 | 4.8 | 4.7 |
| Race/Ethnicity | | | | | | | |
| White Non-Hispanic | 9.2 | 3.3 | 4.0 | 1.1 | 0.6 | 3.5 | 2.7 |
| Black Non-Hispanic | 8.9 | 4.5 | 21.7 | 1.4 | 2.5 | 2.2 | 5.9 |
| Other Non-Hispanic | 16.1 | 7.6 | 22.6 | 2.3 | 8.9 | 9.1 | 8.7 |
| Hispanic | 12.6 | 6.4 | 22.8 | 6.9 | 15.3 | 4.8 | 6.1 |
| Age Group | | | | | | | |
| 18-24 | 12.3 | 7.7 | 18.5 | 5.6 | 5.6 | 2.7 | 1.6 |
| 25-34 | 12.6 | 7.2 | 17.5 | 6.0 | 9.0 | 3.6 | 3.5 |
| 35-44 | 7.9 | 5.0 | 16.6 | 2.8 | 11.0 | 2.8 | 2.9 |
| 45-54 | 8.7 | 3.0 | 10.4 | 0.7 | 3.0 | 4.3 | 4.5 |
| 55-64 | 10.6 | 4.6 | 10.8 | 1.2 | 1.1 | 6.2 | 5.8 |
| 65-74 | 10.6 | 3.4 | 6.8 | 2.0 | 1.9 | 3.4 | 6.8 |
| 75+ | 12.7 | 1.8 | 1.8 | 0 | -- | 3.3 | 2.0 |
| Education | | | | | | | |
| < HS | 14.9 | 6.3 | 12.3 | 5.1 | 18.1 | 4.4 | 7.6 |
| HS graduate | 9.3 | 5.5 | 16.1 | 3.3 | 11.4 | 5.6 | 7.1 |
| Some college | 10.7 | 3.6 | 13.5 | 2.5 | 2.7 | 1.9 | 5.7 |
| College graduate | 10.5 | 3.9 | 10.5 | 2.7 | 2.4 | 4.1 | 3.8 |
| Advanced degree | 9.9 | 4.6 | 9.7 | 1.2 | 2.5 | 4.3 | 2.3 |
| Employment Status | | | | | | | |
| Employed | 9.8 | 5.1 | 13.3 | 2.2 | 4.3 | 3.7 | 1.8 |
| Self-employed | 10.6 | 0.7 | 7.4 | 2.0 | 2.8 | 8.2 | 2.0 |
| Out of work | 18.3 | 4.6 | 16.2 | 3.8 | 16.6 | 3.3 | 12.9 |
| Homemaker | 1.3 | 3.5 | 5.8 | -- | 7.2 | 2.9 | 4.1 |
| Student | 10.0 | 8.8 | 24.1 | 12.5 | 8.1 | 3.5 | 5.8 |
| Retired | 9.1 | 2.9 | 5.2 | 1.1 | 0.7 | 3.3 | 5.3 |
| Unable to work | 19.4 | 4.4 | 14.3 | 0.8 | 1.4 | 9.7 | 24.6 |
| Primary Language Spoken at Home | | | | | | | |
| English | 9.6 | 3.9 | 10.7 | 1.6 | 1.5 | 3.7 | 3.7 |
| Spanish | 15.1 | 8.6 | 17.6 | 5.4 | 24.0 | 6.0 | 4.9 |
| Other | 14.1 | 6.3 | 14.8 | 10.3 | 18.0 | 6.8 | 11.4 |

Priority Health Issues for the Community

When asked to select the top three priority health issues in the community, the first health priority area was mental health, measured by the percent of respondents who selected it, followed by chronic diseases screening and obesity (Figure 43).

The ranking of the priority health issues changes depending on the respondent’s demographics and socioeconomic status (Figures 44-49).

Figure 43. Priority Health Issues* for the Community (%). Westchester County, 2019.

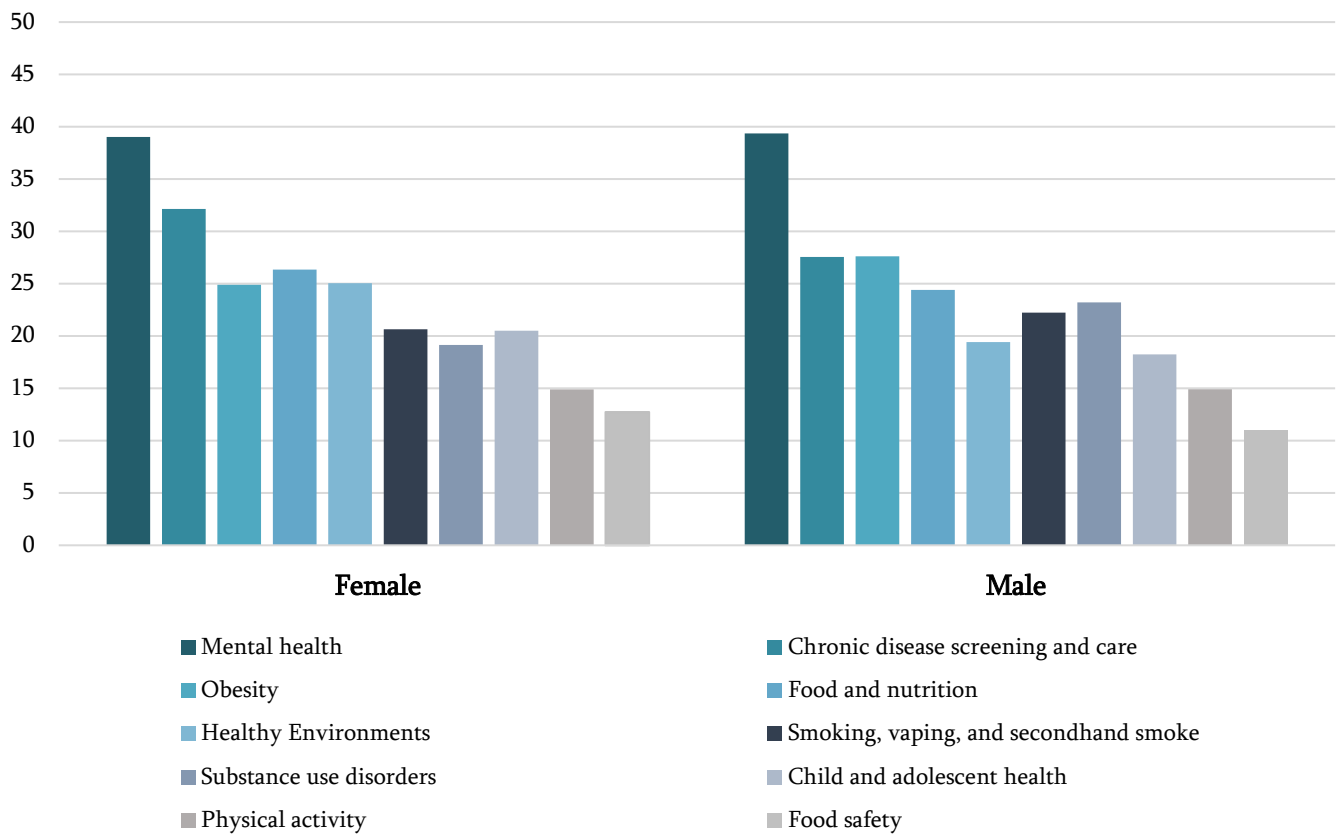


*Health issues are ranked by the percent of respondents who identified them as one of their top three choices out of 21 options.
Survey Source: Westchester County Community Health Needs.

GENDER

Both females and males reported mental health and chronic disease screening and care as priority health issues in the community. There were no considerable differences in the ranking of priority health issues for the community when comparing men and women (Figure 44).

Figure 44. Priority Health Issues* for the Community (%) by Gender, Westchester County, 2019.



*Health issues are ranked by the percent of respondents who identified them as one of their top three choices out of 21 options.

Survey Source: Westchester County Community Health Needs.

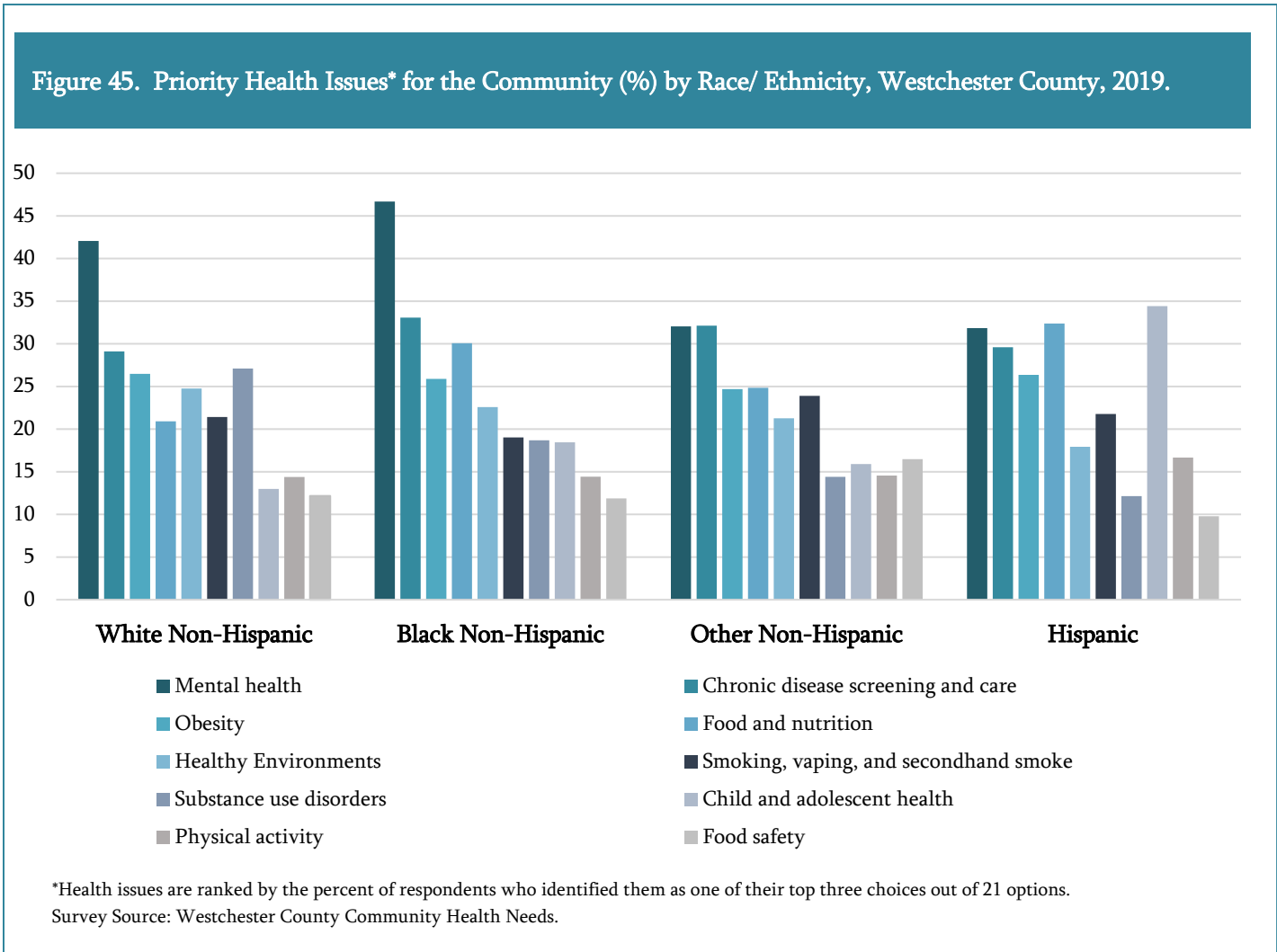
RACE/ETHNICITY

Non-Hispanic whites more often than non-Hispanic blacks and Hispanics reported substance use disorders as a health priority for the community. Hispanics more often than Non-Hispanic whites, blacks, and other non-Hispanics reported child and adolescent health as a top health priority for the community.

Respondents who identified as non-Hispanic white or non-Hispanic black reported mental health as the top priority health issue for the community followed by chronic disease screening.

Respondents who identified as other non-Hispanics reported chronic disease screening and care as the top priority for the community followed by mental health.

Hispanics reported child and adolescent health as the top priority for community followed by food and nutrition (Figure 45).

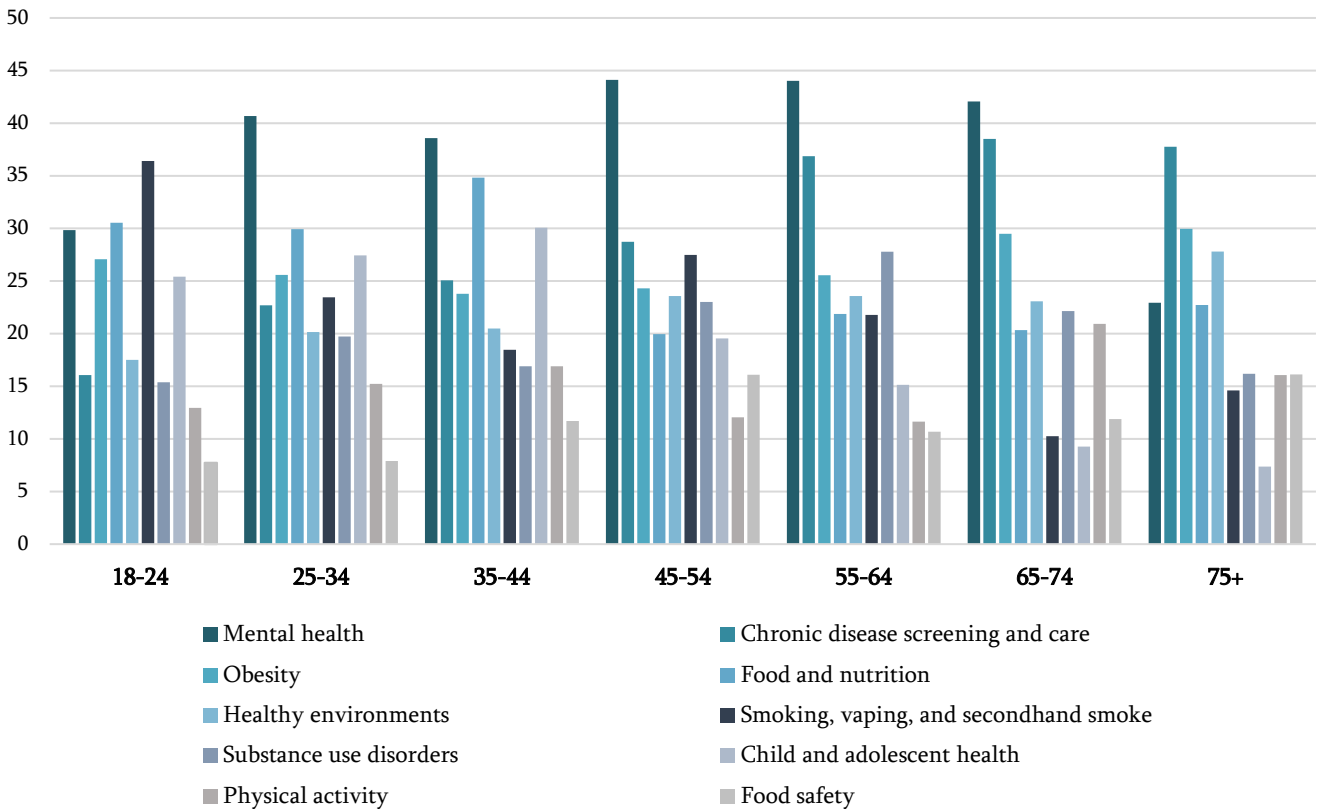


AGE

Respondents 18-24 years old reported smoking, vaping, and secondhand smoke as top priority in in the community they lived in whereas those between 25-74 years old reported mental health and 75 and older reported chronic disease screening and care.

Respondents between 18-44 years old reported Child and adolescent health as a health priority in the community they lived in more often than older adults 45+ years old. Younger adults (18-24 years old) reported sexually transmitted diseases as health priority in the community lived compared to all other age groups (Figure 46).

Figure 46. Priority Health Issues* for the Community (%) by Age, Westchester County, 2019.

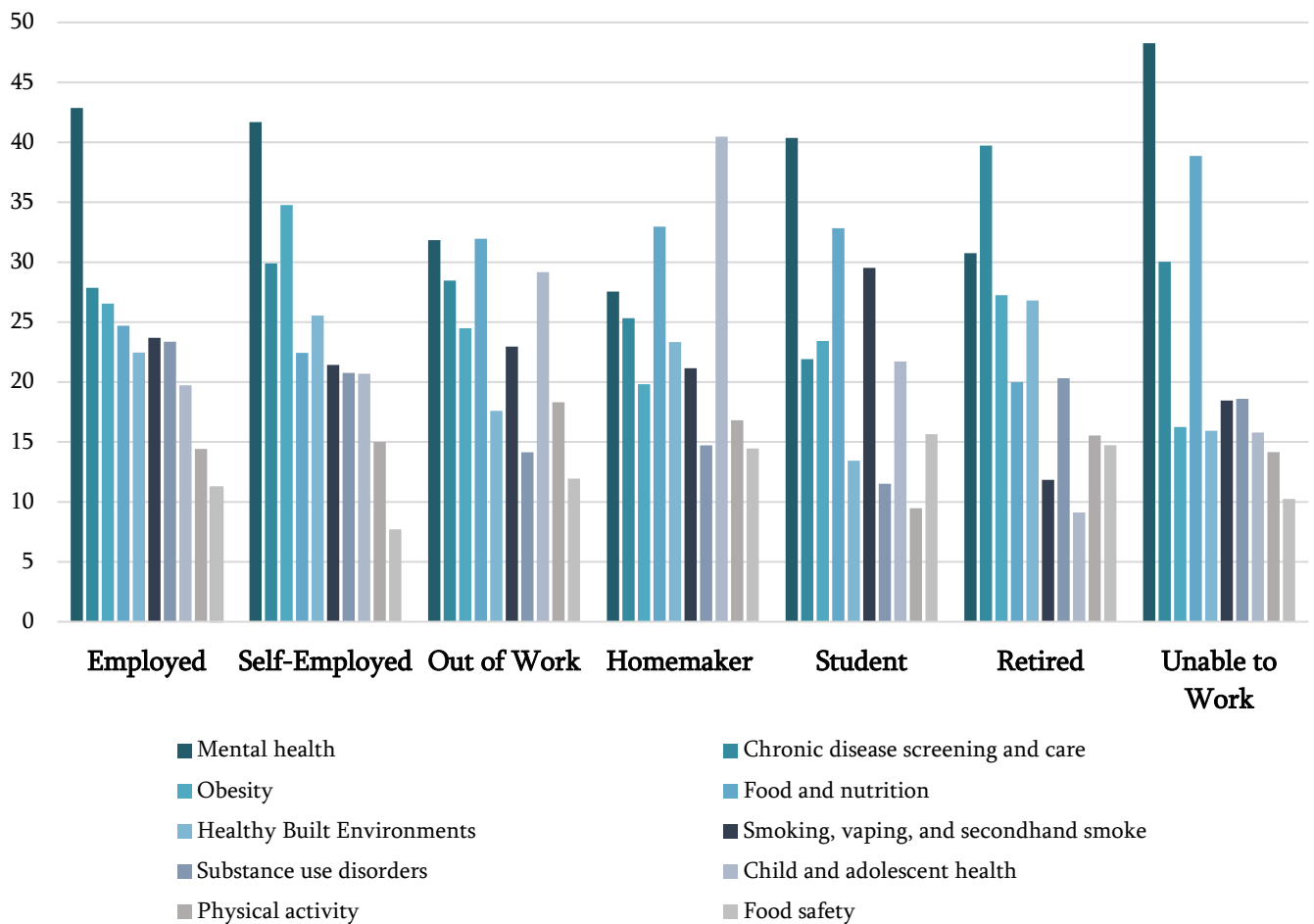


*Health issues are ranked by the percent of respondents who identified them as one of their top three choices out of 21 options.
 Survey Source: Westchester County Community Health Needs.

EMPLOYMENT

Those employed, students or unable to work reported mental health as a priority in their community. Homemakers reported child and adolescent health as one of the top health priorities for the community. Retirees reported chronic disease screening and care as one of the top health priorities for the community. Interestingly, students were more likely than any other employment group to report smoking, vaping and second hand smoke as a priority in the community (Figure 47).

Figure 47. Priority Health Issues* for the Community (%) by Employment Status, Westchester County, 2019.



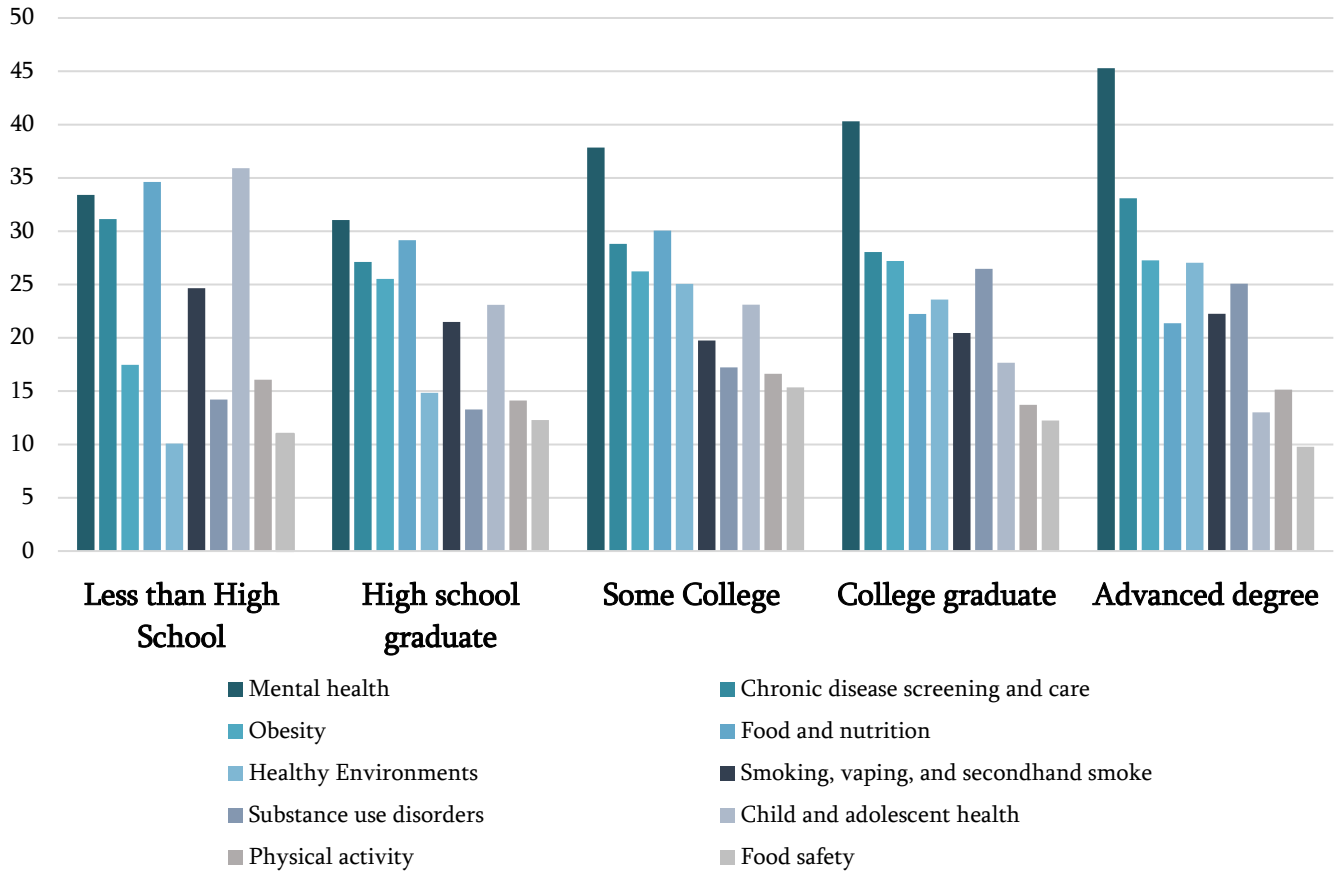
*Health issues are ranked by the percent of respondents who identified them as one of their top three choices out of 21 options. Survey Source: Westchester County Community Health Needs.

EDUCATION

As education level increased the percent of respondents who reported mental health as a priority health issue for the community increased.

Respondents with less than a high school education selected food and nutrition (34.6%) and child and adolescent health (35.9%) as priority health issues for the community more often than respondents of other education levels (Figure 48).

Figure 48. Priority Health Issues* for the Community (%) by Educational Attainment, Westchester County, 2019.

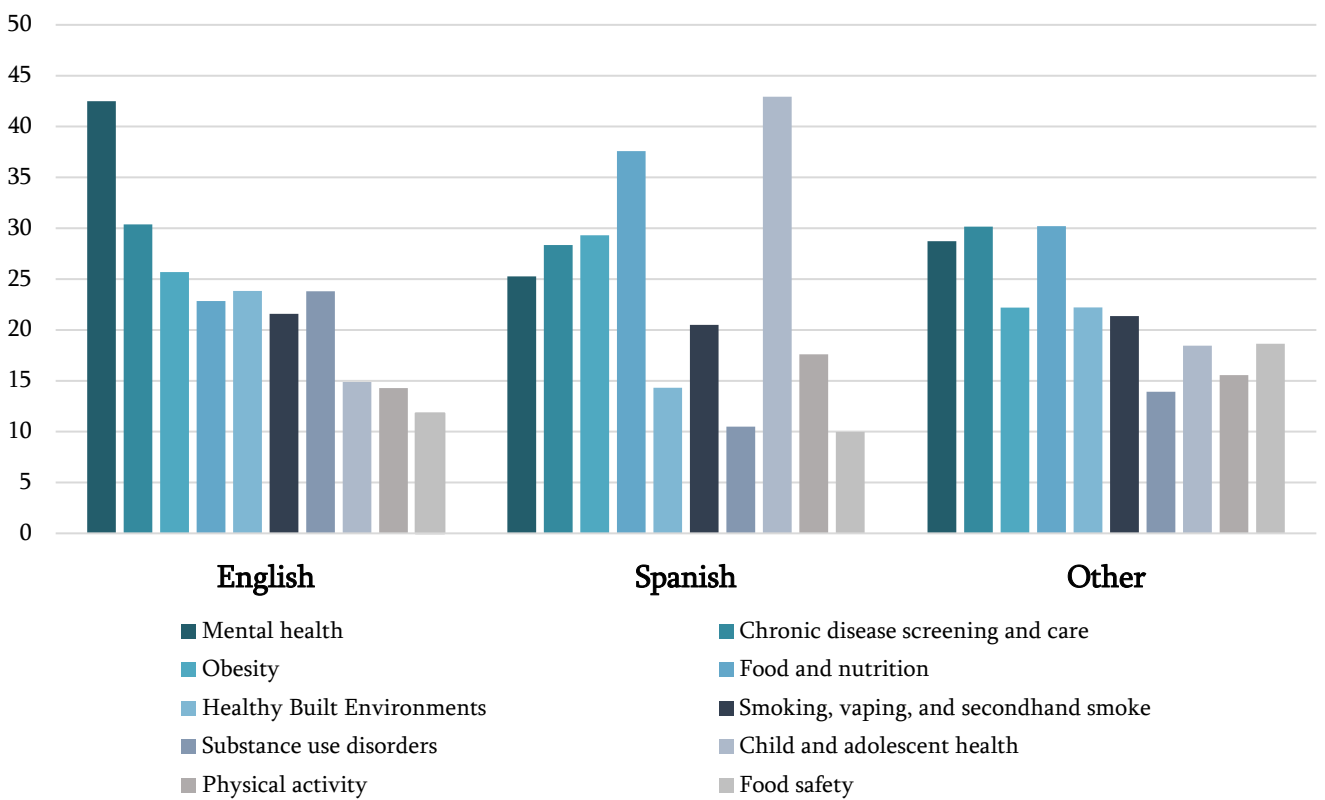


*Health issues are ranked by the percent of respondents who identified them as one of their top three choices out of 21 options.
Survey Source: Westchester County Community Health Needs.

LANGUAGE

Those who reported English as the primary language spoken at home reported mental health as a top priority health issue for the community followed by chronic disease screening and care. Among those who reported Spanish as the primary language spoken at home child and adolescent health was reported as a priority health issue for the community followed by food and nutrition (Figure 49).

Figure 49. Priority Health Issues* for the Community (%) by Language Spoken at Home, Westchester County, 2019.



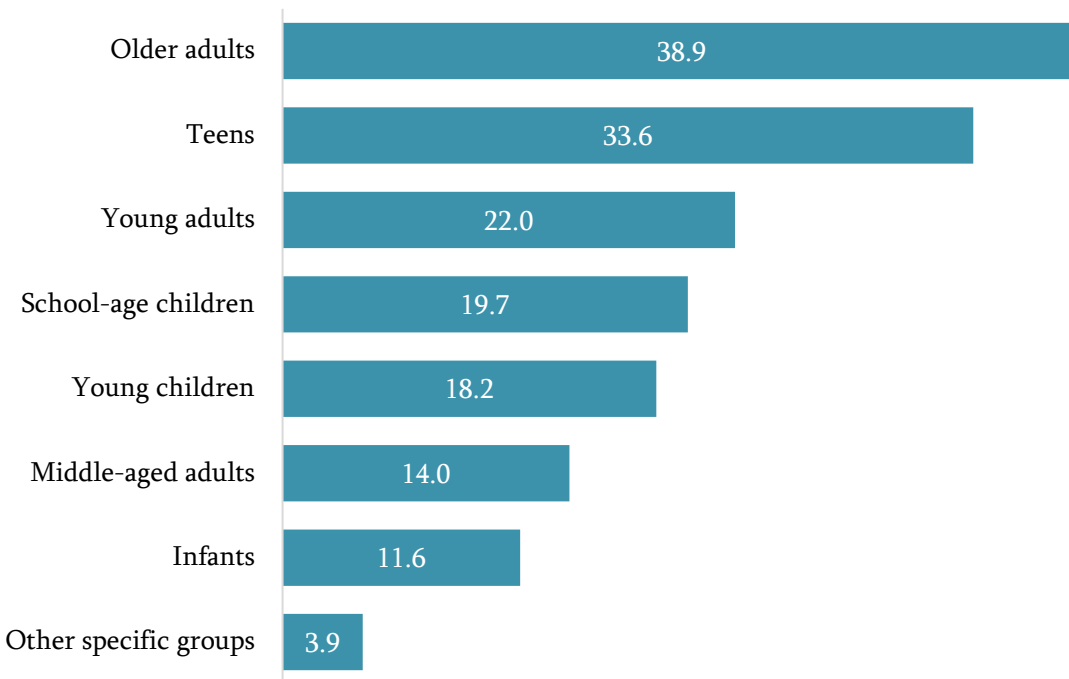
*Health issues are ranked by the percent of respondents who identified them as one of their top three choices out of 21 options.
 Survey Source: Westchester County Community Health Needs.

Population Needing the Greatest Attention

Overall, respondents reported that older adults and teens need the greatest attention in their communities (Figure 50).

The ranking changes according to the respondent's demographic and socioeconomic characteristics (Figures 51-56).

Figure 50. Population Needing the Greatest Attention Ranked by Percent of Respondents Selections, Westchester County, 2019.

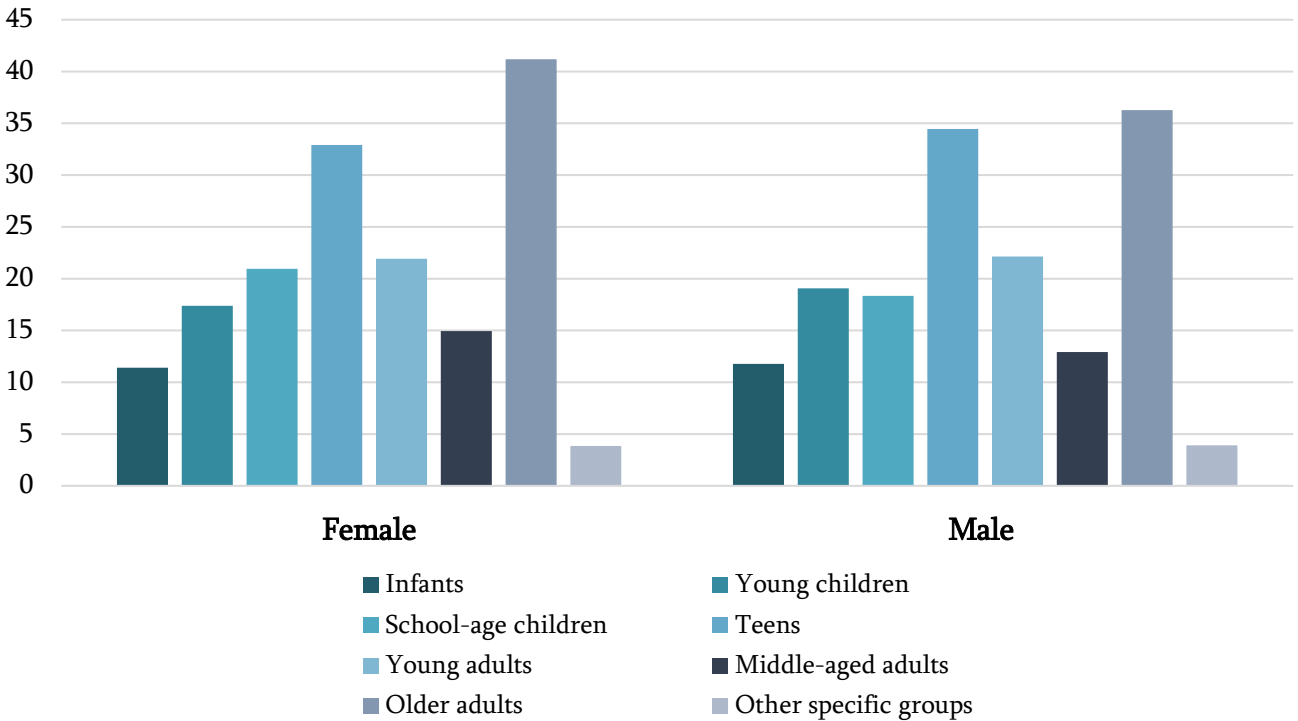


Survey Source: Westchester County Community Health Needs.

GENDER

Females and males did not differ by responses for top population needing the greatest attention (Figure 51).

Figure 51. Population Needing the Greatest Attention (%) by Gender, Westchester County, 2019.

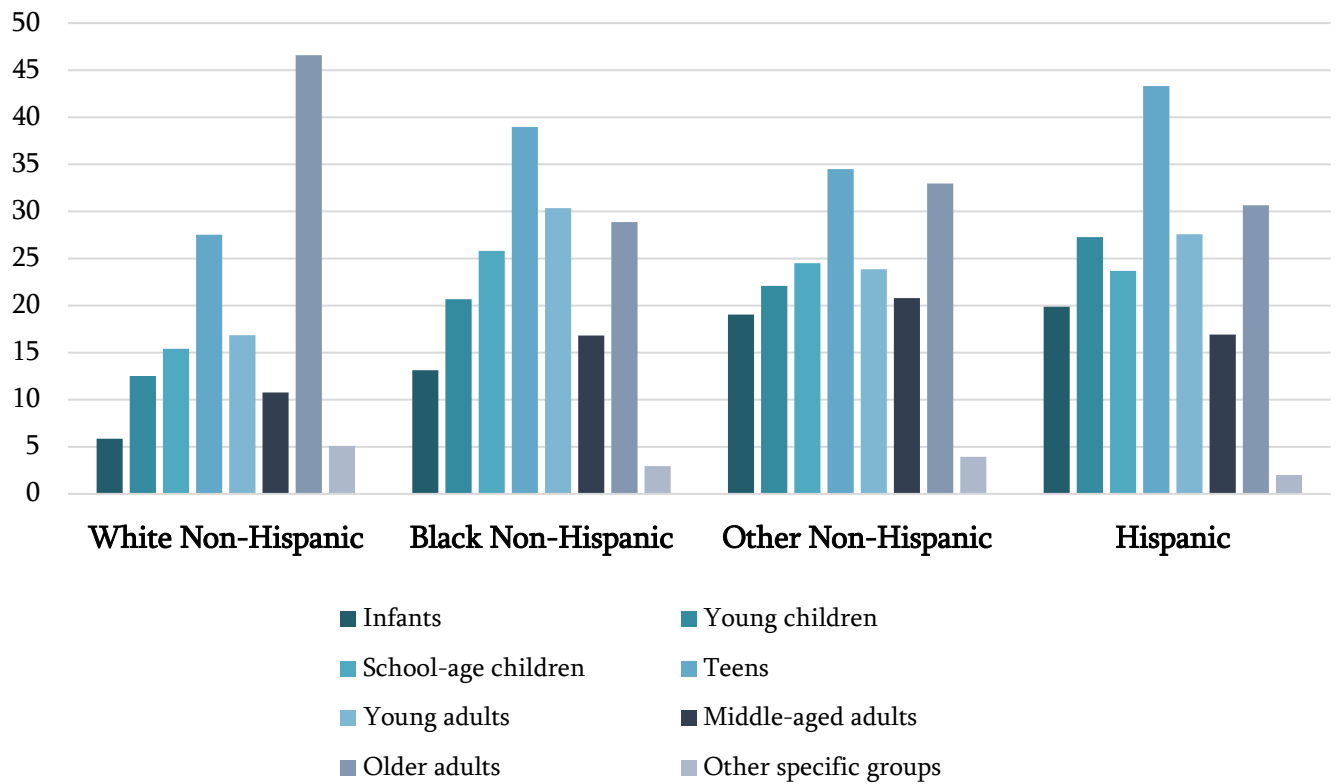


Survey Source: Westchester County Community Health Needs.

RACE/ETHNICITY

Almost 50% of non-Hispanic whites reported older adults as the population needing the greatest attention. A higher percentage of non-Hispanic blacks and Hispanics (of any race) stated teens population needing the greatest attention (Figure 52).

Figure 52. Population Needing the Greatest Attention (%) by Race/Ethnicity, Westchester County, 2019.

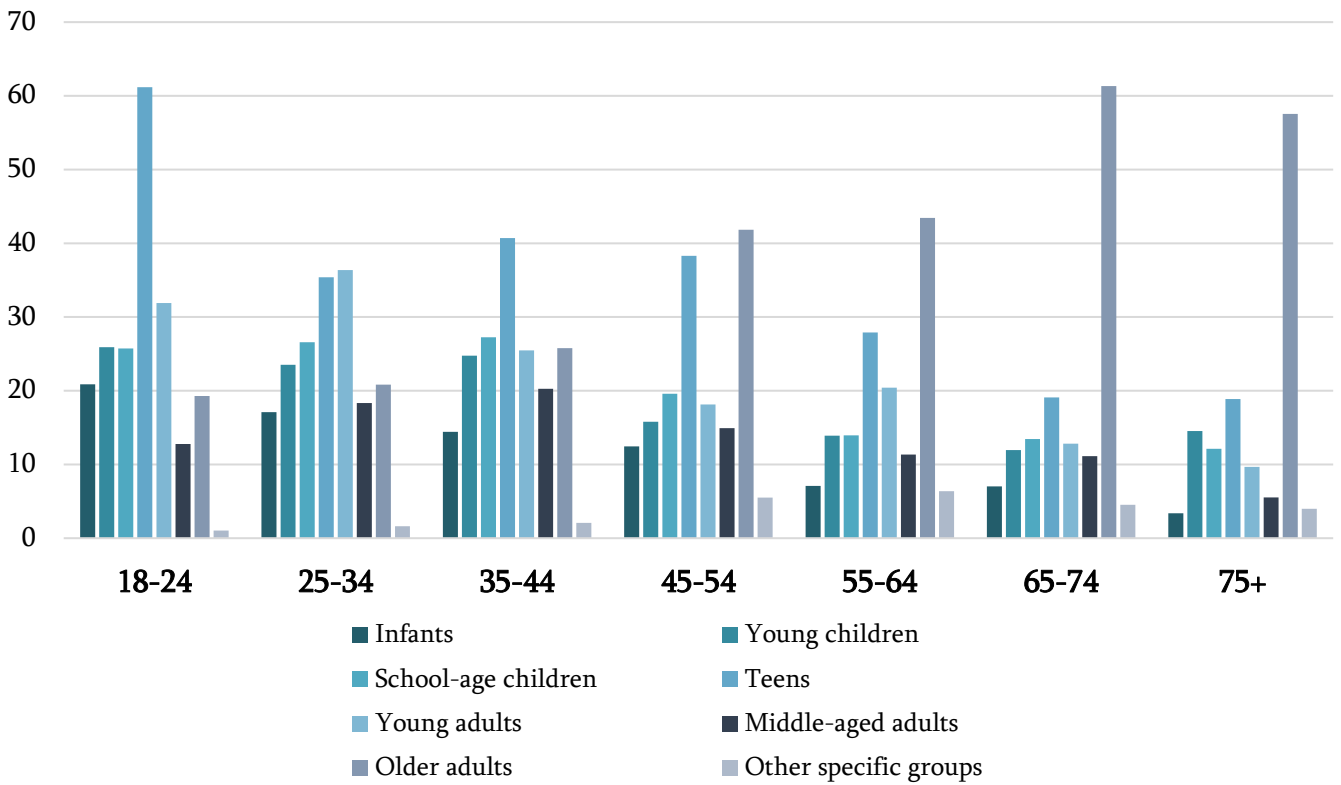


Survey Source: Westchester County Community Health Needs.

AGE

Individuals between the ages 35-44 years old reported teens were the populations with the greatest needs. While those who were 65 years and over reported older adults were the populations with the greatest needs. Those 25-34 years old had the highest percentage for young adults as the populations with the greatest needs (Figure 53).

Figure 53. Population Needing the Greatest Attention (%) by Age, Westchester County, 2019.

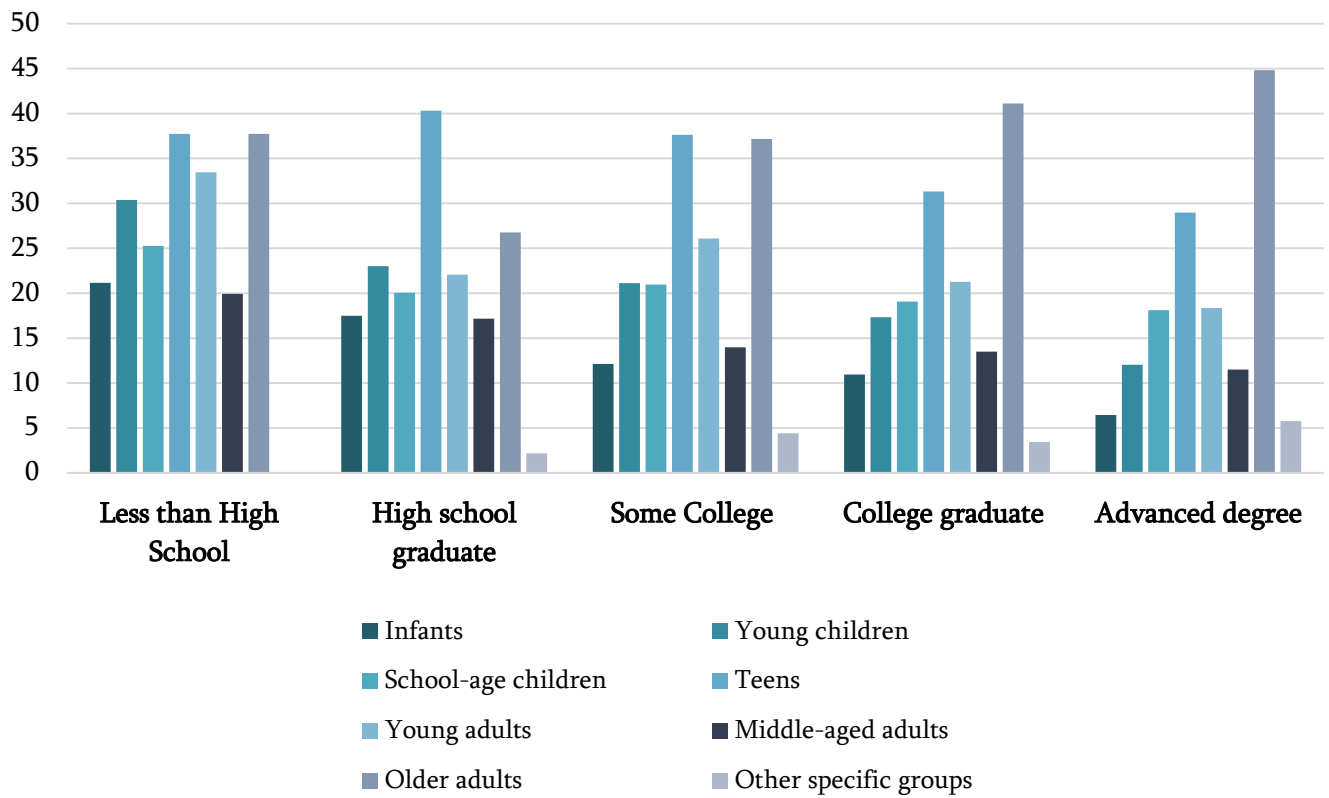


Survey Source: Westchester County Community Health Needs.

EDUCATION

Respondents with a college degree or advanced degree said older adults needed the greatest attention. Those with some college education stated teens and older adults equally needed the greatest attention (Figure 54).

Figure 54. Population Needing the Greatest Attention (%) by Educational Attainment, Westchester County, 2019.

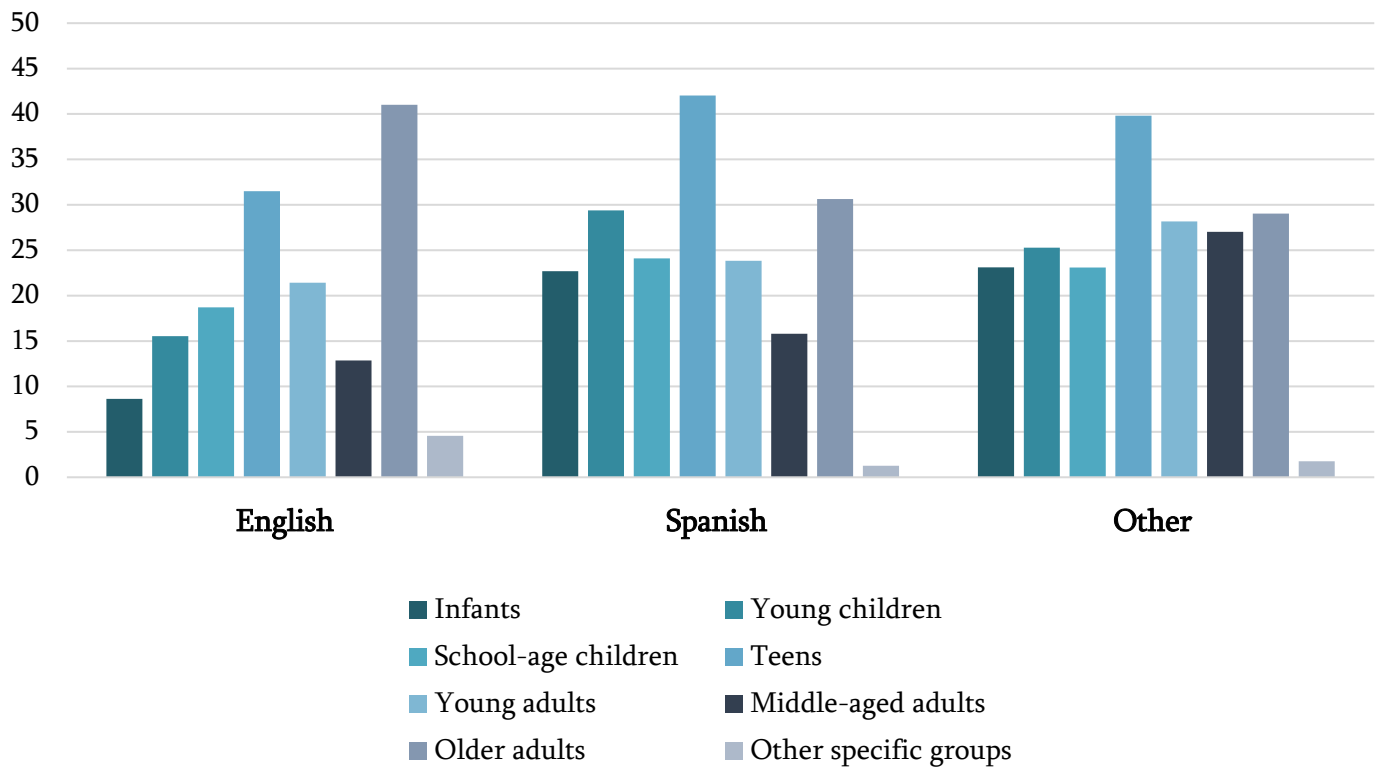


Survey Source: Westchester County Community Health Needs.

LANGUAGE

Those who reported Spanish (42%) and a language other (39.8%) than English or Spanish as the primary language spoken at home, said teens are the population that needs the greatest attention. Among those who reported English as the primary language spoken at home 41% said older adults are the population needing the greatest attention (Figure 55).

Figure 55. Population Needing the Greatest Attention (%) by Language Spoken at Home, Westchester County, 2019.

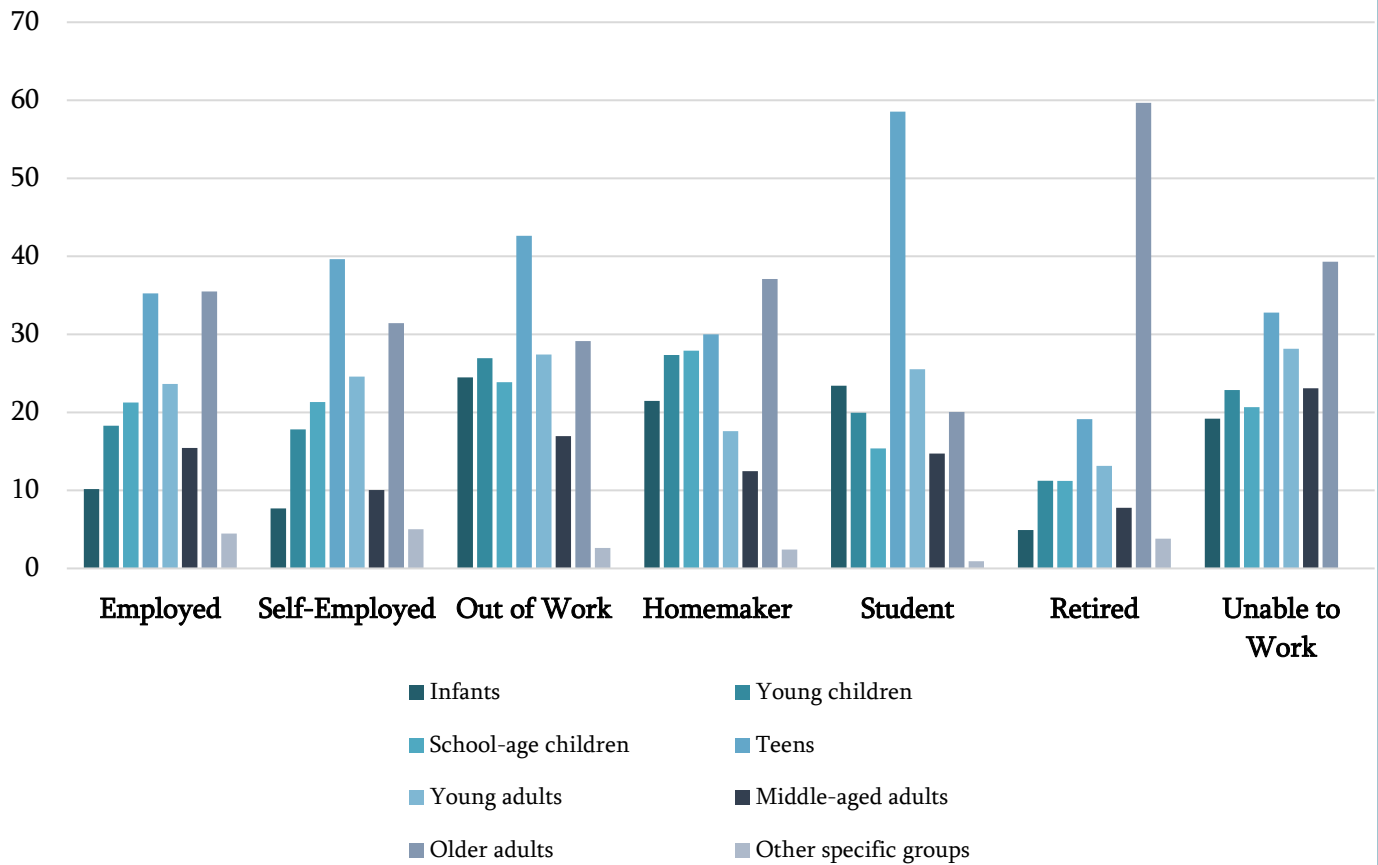


Survey Source: Westchester County Community Health Needs.

EMPLOYMENT

56% of students reported teens are the population needing the greatest attention while retired (60%) respondents reported older adults. There are no other appreciable differences between employment status and reported population with the greatest needs (Figure 56).

Figure 56. Population Needing the Greatest Attention (%) by Employment Status, Westchester County, 2019.



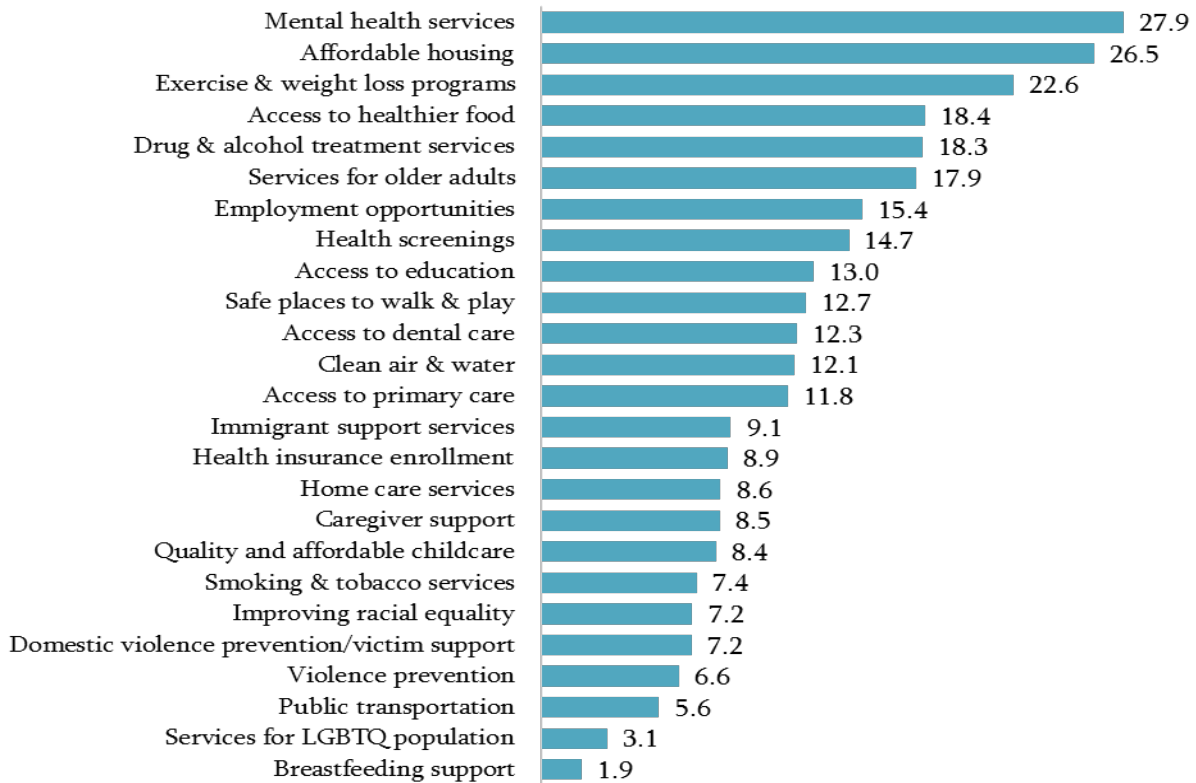
Survey Source: Westchester County Community Health Needs.

Actions Needed to Improve the Health of the Community

The top three actions that would best improve the health of the community were: mental health services with 27.9% of respondents listing it as one of the top three, affordable housing with 26.5% of respondents listing it as one of the top three, and exercise and weight loss programs with 22.6% of respondents listing it as one of the top three (Figure 57).

The ranking of actions needed to improve community health varied by respondent’s demographic and socioeconomic characteristics (Figures 58-63).

Figure 57. Actions Needed to Improve the Health of the Community* (%), Westchester County, 2019.



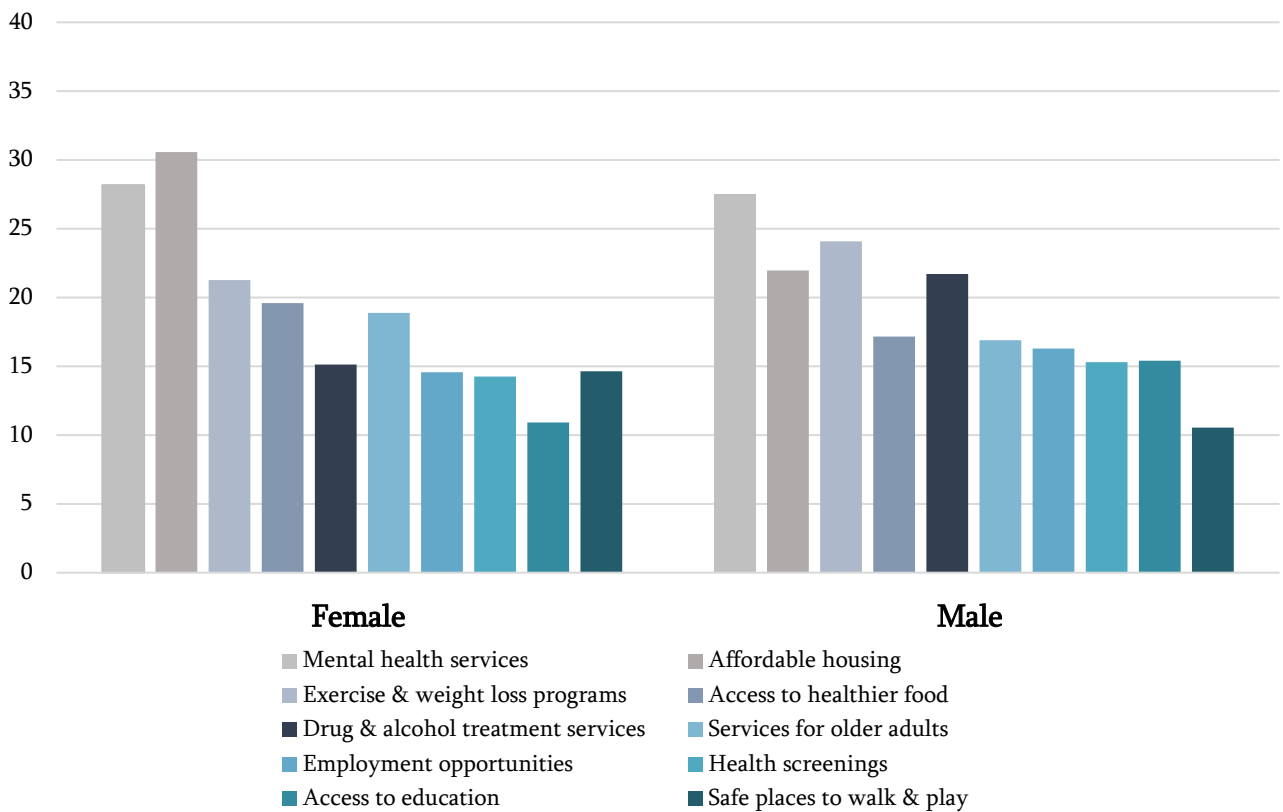
*Actions Needed to Improve the Health of the Community are ranked by the percent of respondents who identified them as one of their top three choices out of 25 options.

Source: Westchester County Community Health Needs Survey.

GENDER

More females than males (30.6% vs 22.0%, respectively) selected affordable housing to improve the health of the community and more males than females (21.7% vs 15.0%, respectively) selected drug and alcohol treatment services an action needed to improve the health of the community. There were no other appreciable differences between genders (Figure 58).

Figure 58. Actions Needed to Improve the Health of the Community* (%) by Gender, Westchester County, 2019.



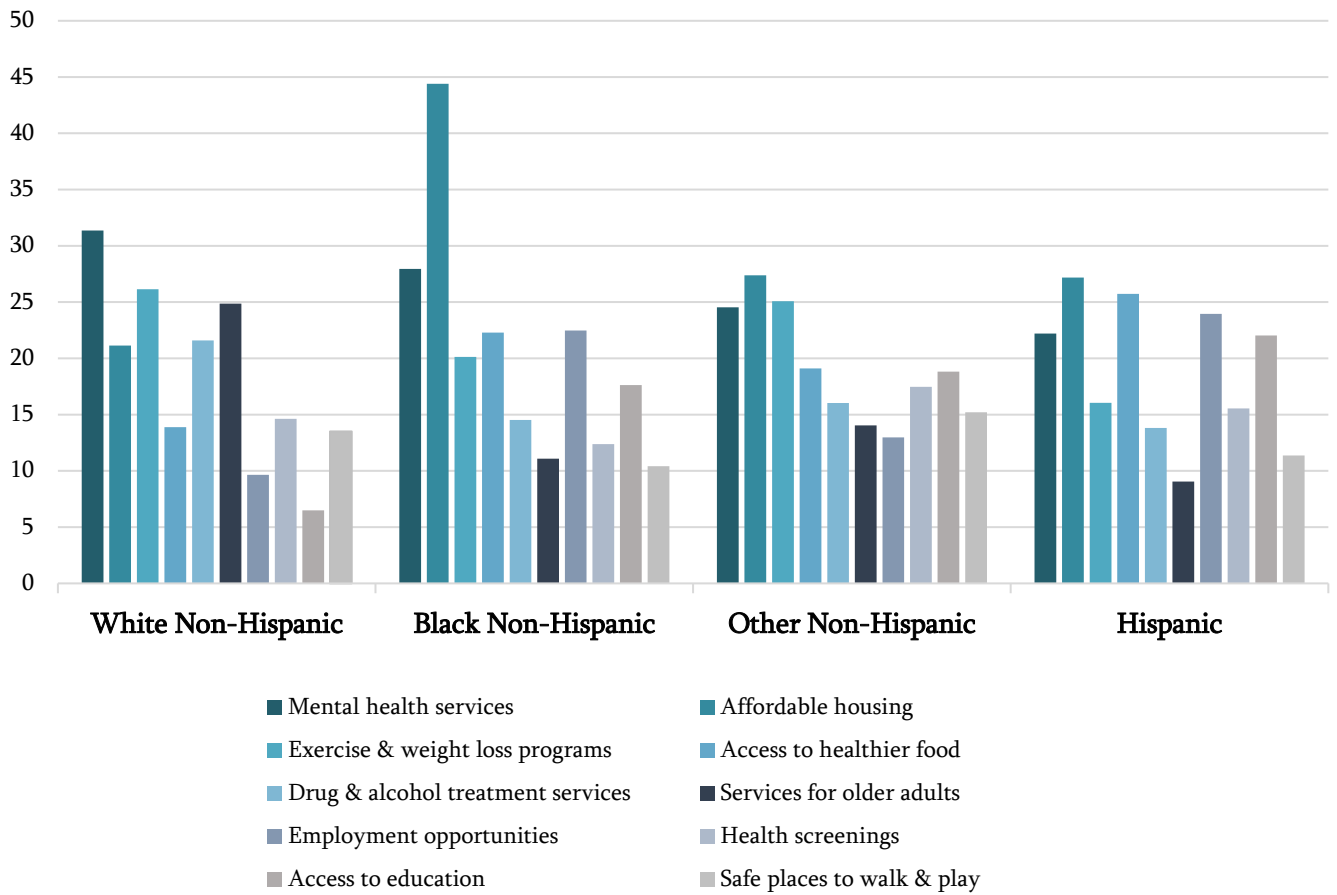
*Actions Needed to Improve the Health of the Community are ranked by the percent of respondents who identified them as one of their top three choices out of 25 options.

Source: Westchester County Community Health Needs Survey.

RACE/ETHNICITY

Non-Hispanic blacks were more likely to report affordable housing as top action to improve the health of the community compared to all other race/ethnicity groups. A higher percentage of non-Hispanic whites reported services for older adults as top action needed in the community compared to all other race/ethnicity groups (Figure 59).

Figure 59. Actions Needed to Improve the Health of the Community* (%) by Race/Ethnicity, Westchester County, 2019.



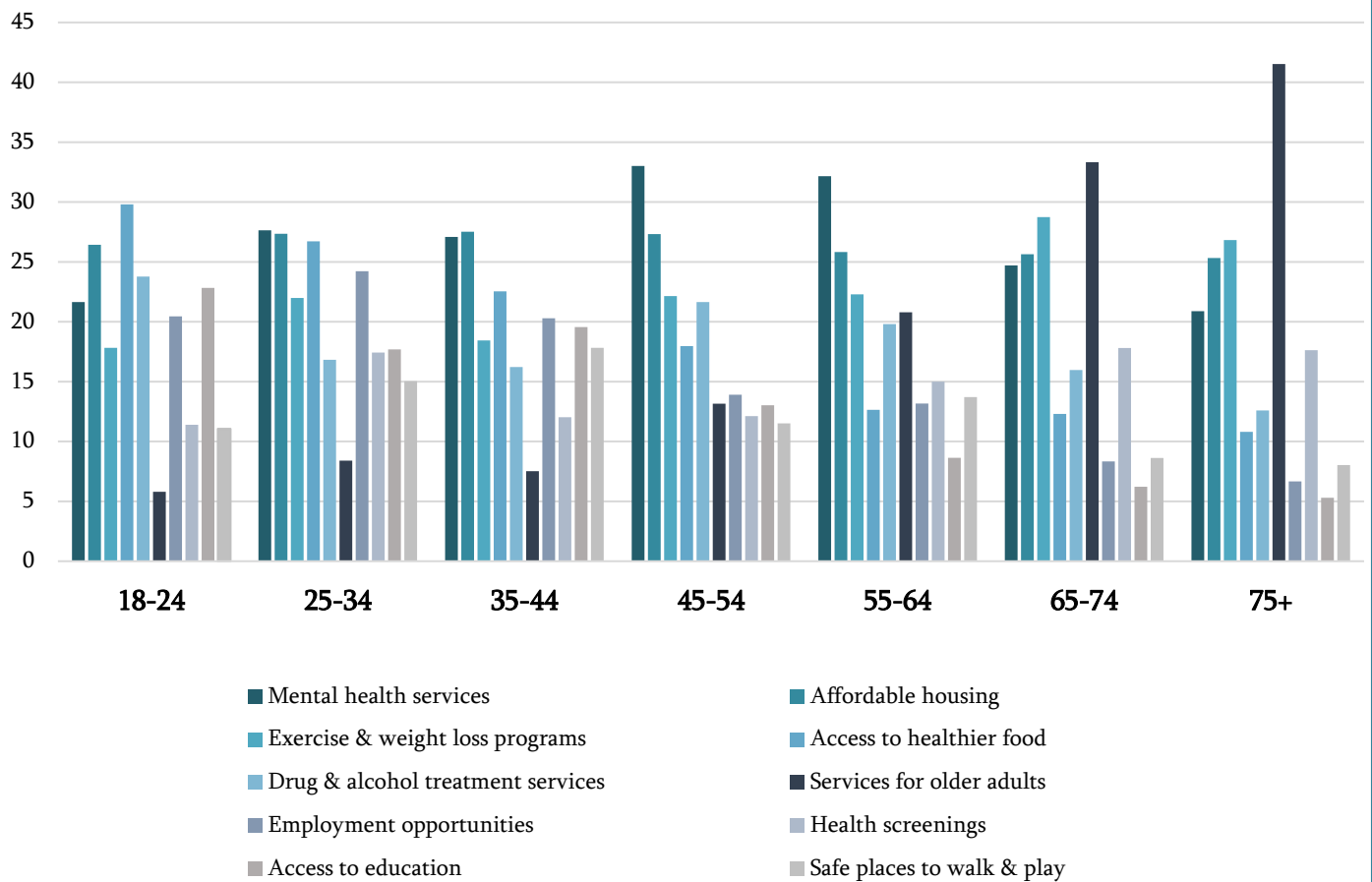
*Actions Needed to Improve the Health of the Community are ranked by the percent of respondents who identified them as one of their top three choices out of 25 options.

Source: Westchester County Community Health Needs Survey.

AGE

Older adults (65+) more frequently reported exercise and weight loss programs as an action needed in the community compared to all other age groups. Adults between the ages of 18-34 years old reported access to healthier food while 45-64 years old had a higher percentage of respondents report that mental health services are needed in the community (Figure 60).

Figure 60. Actions Needed to Improve the Health of the Community* (%) by Age, Westchester County, 2019.



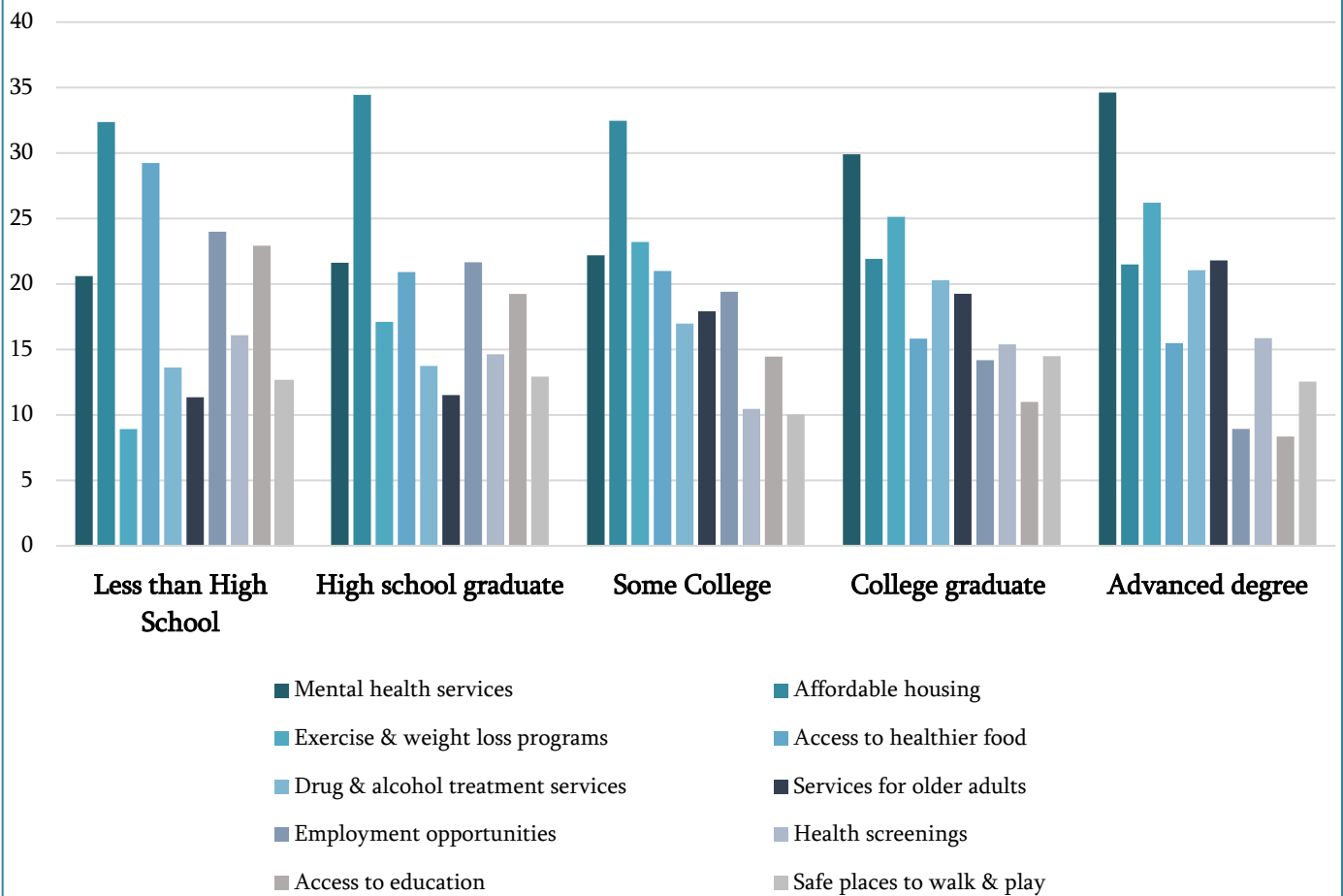
*Actions Needed to Improve the Health of the Community are ranked by the percent of respondents who identified them as one of their top three choices out of 25 options.

Source: Westchester County Community Health Needs Survey.

EDUCATION

Respondents with an advanced degree had the highest percentage response of mental health services as the most helpful action needed to improve the health of the community. Those with less than a high school education reported affordable housing and access to education as action needed to improve the health of the community. As education level increased the percent of respondents who selected mental health services increased whereas as education level increased the percent of respondents who selected affordable housing as an action needed decreased (Figure 61).

Figure 61. Actions Needed to Improve the Health of the Community* (%) by Educational Attainment, Westchester County, 2019.



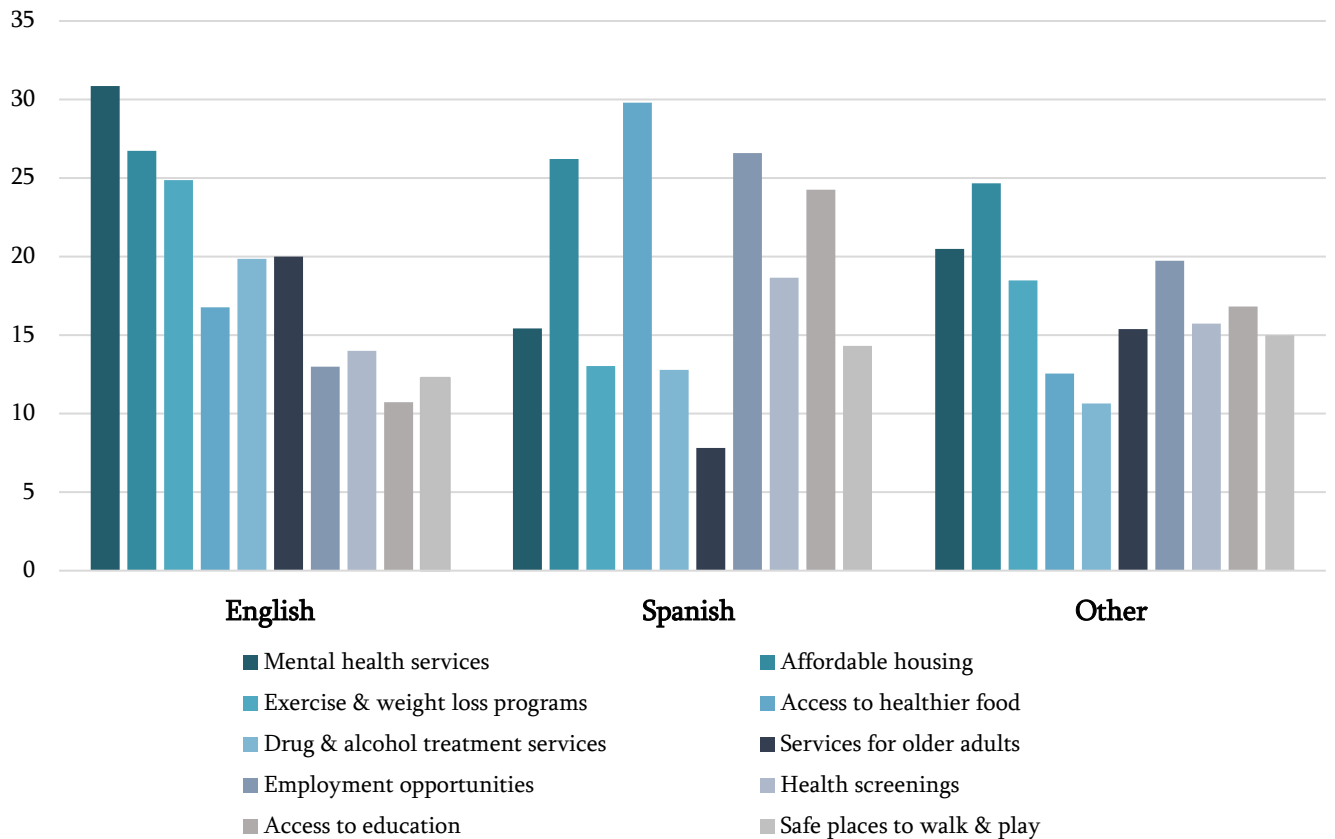
*Actions Needed to Improve the Health of the Community are ranked by the percent of respondents who identified them as one of their top three choices out of 25 options.

Source: Westchester County Community Health Needs Survey.

LANGUAGE

English speakers more frequently selected mental health services, primarily Spanish speakers chose access to healthier food and employment opportunities as actions needed to improve the health of the community (Figure 62).

Figure 62. Actions Needed to Improve the Health of the Community* by Language Spoken at Home, Westchester County, 2019.



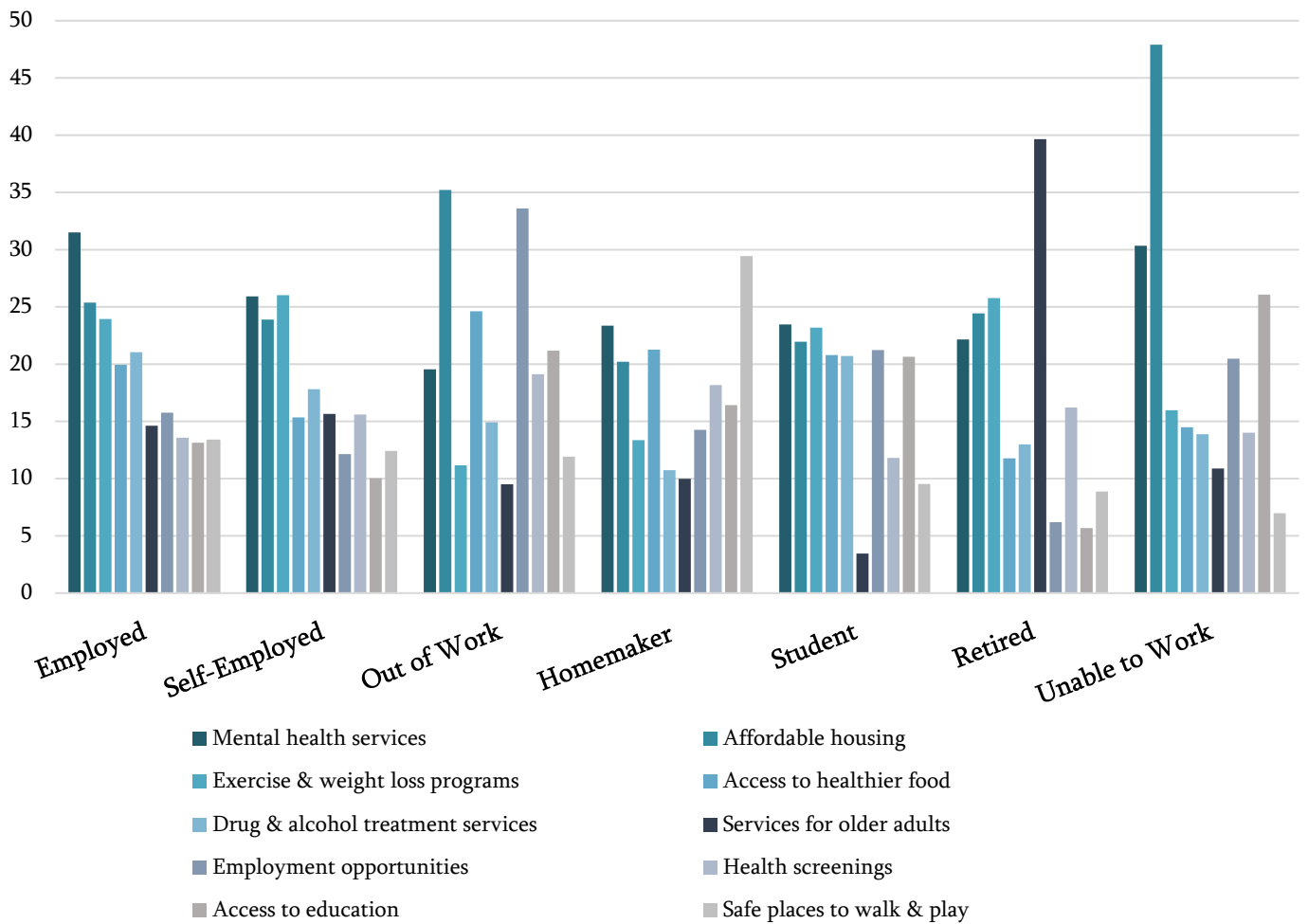
*Actions Needed to Improve the Health of the Community are ranked by the percent of respondents who identified them as one of their top three choices out of 25 options.

Source: Westchester County Community Health Needs Survey.

EMPLOYMENT

A higher percentage of individuals who are unable to work (47.9%) or out of work (35.2%) reported affordable housing as an action needed to improve the health of the community. Respondents who are employed (31.5%) or unable to work (30.3%) reported mental health services at the same frequency (Figure 63).

Figure 63. Actions Needed to Improve the Health of the Community* by Employment Status, Westchester County, 2019.



*Actions Needed to Improve the Health of the Community are ranked by the percent of respondents who identified them as one of their top three choices out of 25 options.

Source: Westchester County Community Health Needs Survey.

**COMMUNITY HEALTH ASSESSMENT
SURVEY QUESTIONNAIRES**

2019 WESTCHESTER COUNTY COMMUNITY HEALTH SURVEY

There are many areas where the healthcare system can make efforts to improve the community. We are interested to hear your thoughts on what issues should be a priority in your community and for your personal health. The Health Department and hospitals in Westchester County will use the results to help improve health programs. Please take a few minutes to fill out this survey if you are 18 years or older. Your responses are anonymous. Please return your finished responses to **Elissa Cestone, Department of Health, 10 County Center Road, 2nd Floor, White Plains, NY 10607. Phone #: 914-995-7499. email: eec9@westchestergov.com**

You may also take the survey online at: <https://www.surveymonkey.com/r/2019WCHealthSurvey>

Thank you for your participation!

The first few questions are about the health needs of the COMMUNITY WHERE YOU LIVE.

What THREE areas do you see as being priority health issues in the COMMUNITY WHERE YOU LIVE?

- | | |
|--|--|
| <input type="checkbox"/> Antibiotic resistance and healthcare associated infections | <input type="checkbox"/> Mental health |
| <input type="checkbox"/> Child and adolescent health | <input type="checkbox"/> Newborn and infant health |
| <input type="checkbox"/> Chronic disease screening and care for conditions like asthma, diabetes, cancer and heart disease | <input type="checkbox"/> Obesity |
| <input type="checkbox"/> Environments that promote well-being & active lifestyles | <input type="checkbox"/> Outdoor air quality |
| <input type="checkbox"/> Food and nutrition | <input type="checkbox"/> Physical activity |
| <input type="checkbox"/> Food safety and chemicals in consumer products | <input type="checkbox"/> Sexually transmitted diseases |
| <input type="checkbox"/> Hepatitis C | <input type="checkbox"/> Smoking, vaping, and secondhand smoke |
| <input type="checkbox"/> HIV/AIDS | <input type="checkbox"/> Substance use disorders |
| <input type="checkbox"/> Injuries, such as falls, work-injuries, or traffic-injuries | <input type="checkbox"/> Vaccinations/immunizations |
| <input type="checkbox"/> Maternal and women's health | <input type="checkbox"/> Violence |
| | <input type="checkbox"/> Water quality |

What THREE actions would be most helpful to improve the health of the COMMUNITY WHERE YOU LIVE?

- | | | |
|--|--|---|
| <input type="checkbox"/> Access to dental care | <input type="checkbox"/> Domestic violence prevention/victim support | <input type="checkbox"/> Mental health services |
| <input type="checkbox"/> Access to education | <input type="checkbox"/> Employment opportunities | <input type="checkbox"/> Public transportation |
| <input type="checkbox"/> Access to healthier food | <input type="checkbox"/> Exercise & weight loss programs | <input type="checkbox"/> Quality and affordable childcare |
| <input type="checkbox"/> Access to primary care | <input type="checkbox"/> Health insurance enrollment | <input type="checkbox"/> Safe places to walk & play |
| <input type="checkbox"/> Affordable housing | <input type="checkbox"/> Health screenings | <input type="checkbox"/> Services for LGBTQ population |
| <input type="checkbox"/> Breastfeeding support | <input type="checkbox"/> Home care services | <input type="checkbox"/> Services for older adults |
| <input type="checkbox"/> Caregiver support | <input type="checkbox"/> Immigrant support services | <input type="checkbox"/> Smoking & tobacco services |
| <input type="checkbox"/> Clean air & water | <input type="checkbox"/> Improving racial equality | <input type="checkbox"/> Violence prevention |
| <input type="checkbox"/> Drug & alcohol treatment services | | <input type="checkbox"/> Other _____ |

What population needs the greatest attention?

- | | | |
|--|---|--|
| <input type="checkbox"/> Infants | <input type="checkbox"/> Teens | <input type="checkbox"/> Older adults |
| <input type="checkbox"/> Young children | <input type="checkbox"/> Young adults | <input type="checkbox"/> Other specific groups _____ |
| <input type="checkbox"/> School-age children | <input type="checkbox"/> Middle-aged adults | |

The rest of the survey is about YOU and YOUR health needs

What THREE areas do you see as being priority health issues for YOURSELF?

- | | |
|--|--|
| <input type="checkbox"/> Antibiotic resistance and healthcare associated infections | <input type="checkbox"/> Mental health |
| <input type="checkbox"/> Child and adolescent health | <input type="checkbox"/> Newborn and infant health |
| <input type="checkbox"/> Chronic disease screening and care for conditions like asthma, diabetes, cancer and heart disease | <input type="checkbox"/> Obesity |
| <input type="checkbox"/> Environments that promote well-being & active lifestyles | <input type="checkbox"/> Outdoor air quality |
| <input type="checkbox"/> Food and nutrition | <input type="checkbox"/> Physical activity |
| <input type="checkbox"/> Food safety and chemicals in consumer products | <input type="checkbox"/> Sexually transmitted diseases |
| <input type="checkbox"/> Hepatitis C | <input type="checkbox"/> Smoking, vaping, and secondhand smoke |
| <input type="checkbox"/> HIV/AIDS | <input type="checkbox"/> Substance use disorders |
| <input type="checkbox"/> Injuries, such as falls, work-injuries, or traffic-injuries | <input type="checkbox"/> Vaccinations/immunizations |
| <input type="checkbox"/> Maternal and women's health | <input type="checkbox"/> Violence |
| | <input type="checkbox"/> Water quality |

| | | |
|--|---|--|
| <input type="checkbox"/> Excellent | <input type="checkbox"/> Good | <input type="checkbox"/> Poor |
| <input type="checkbox"/> Very good | <input type="checkbox"/> Fair | |
| Do you have somebody that you think of as your personal doctor or health care provider? | | |
| | <input type="checkbox"/> Yes _____ | <input type="checkbox"/> No _____ |
| Has a doctor, nurse or other health professional told you that you had any of the following (check all that apply)? | | |
| <input type="checkbox"/> Arthritis | <input type="checkbox"/> COPD, emphysema, or chronic bronchitis | <input type="checkbox"/> Heart disease |
| <input type="checkbox"/> Asthma | | <input type="checkbox"/> Kidney disease |
| <input type="checkbox"/> Cancer (excluding skin cancer) | <input type="checkbox"/> Depression/anxiety | <input type="checkbox"/> Hypertension |
| <input type="checkbox"/> Skin cancer | <input type="checkbox"/> Diabetes (excluding during pregnancy) | <input type="checkbox"/> Other _____ |
| Was there a time in the past 12 months when you needed to see a doctor but could not because of the following? | | |
| Cost | <input type="checkbox"/> Yes <input type="checkbox"/> No | Transportation |
| | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | Unable to get an appointment |
| | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| What type of insurance do you use to pay for your doctor or hospital bills (check all that apply)? | | |
| <input type="checkbox"/> Your employer or a family member's employer | <input type="checkbox"/> Medicare | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> The New York State Marketplace (Exchange/Obamacare) | <input type="checkbox"/> Medicaid | <input type="checkbox"/> I don't have health insurance |
| | <input type="checkbox"/> Military (TriCare or VA) | |
| | <input type="checkbox"/> COBRA | |
| During the past 30 days, have you felt emotionally upset, for example, angry, sad, or frustrated, as a result of how you were treated based on any of the following... | | |
| Age | <input type="checkbox"/> Yes <input type="checkbox"/> No | Sexual orientation |
| | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Gender identity | <input type="checkbox"/> Yes <input type="checkbox"/> No | Perceived immigration status |
| | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Race/Ethnicity | <input type="checkbox"/> Yes <input type="checkbox"/> No | Religion |
| | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| The next set of questions will be used to describe who responds to the survey and will not be examined individually. Please remember that your responses are anonymous. | | |
| What is your current gender identity? | | |
| <input type="checkbox"/> Female | <input type="checkbox"/> Trans female/Trans woman | <input type="checkbox"/> Gender not listed (please state): _____ |
| <input type="checkbox"/> Male | <input type="checkbox"/> Trans male/Trans man | |
| <input type="checkbox"/> Non-binary person/Gender non-conforming | | |
| What is your age? | | |
| <input type="checkbox"/> 18-24 | <input type="checkbox"/> 45-54 | <input type="checkbox"/> 75+ |
| <input type="checkbox"/> 25-34 | <input type="checkbox"/> 55-64 | |
| <input type="checkbox"/> 35-44 | <input type="checkbox"/> 65-74 | |
| What is the highest grade or year of school you completed? | | |
| <input type="checkbox"/> Less than high school | <input type="checkbox"/> Some college or technical school | <input type="checkbox"/> Advanced or professional degree |
| <input type="checkbox"/> High school grad/GED | <input type="checkbox"/> College graduate | |
| What is the ZIP Code where you currently live? _____ | | |
| Are you of Hispanic or Latino origin? | | |
| | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Which one the following best describes your race? | | |
| <input type="checkbox"/> White | <input type="checkbox"/> Asian/Pacific Islander | <input type="checkbox"/> Multi-racial |
| <input type="checkbox"/> Black/African American | <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Other _____ |
| Are you currently? | | |
| <input type="checkbox"/> Employed | <input type="checkbox"/> A homemaker | <input type="checkbox"/> Unable to work |
| <input type="checkbox"/> Self employed | <input type="checkbox"/> Student | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Out of work | <input type="checkbox"/> Retired | |
| What is the primary language spoken in your home? | | |
| <input type="checkbox"/> English | <input type="checkbox"/> Portuguese | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Spanish | <input type="checkbox"/> Chinese | |
| <input type="checkbox"/> Italian | <input type="checkbox"/> French | |

ENCUESTA COMUNITARIA DE SALUD DEL CONDADO DE WESTCHESTER 2019

Hay muchas áreas donde el sistema de salud puede hacer esfuerzos para mejorar la comunidad. Estamos interesados en escuchar su opinión sobre qué asuntos deben ser una prioridad en su comunidad y para su salud personal. El Departamento de Salud y los hospitales del Condado de Westchester usarán los resultados para ayudar a mejorar los programas de salud. Por favor tome unos pocos minutos para llenar esta encuesta si tiene 18 años o más. Sus respuestas serán confidenciales.

Si prefiere tomar esta encuesta en línea, por favor siga este enlace: <https://www.surveymonkey.com/r/2019WCHESPANOL>

¡Gracias por su participación!

Las primeras preguntas son sobre las necesidades de salud de la COMUNIDAD DONDE USTED VIVE.**¿Cuáles son las TRES áreas que usted considera como temas de salud prioritarios en la COMUNIDAD DONDE VIVE?**

- | | |
|--|---|
| <input type="checkbox"/> Resistencia a antibióticos e infecciones asociadas al cuidado de la salud | <input type="checkbox"/> Salud mental |
| <input type="checkbox"/> Salud de niños y adolescentes | <input type="checkbox"/> Salud de recién nacidos y infantes |
| <input type="checkbox"/> Exámenes de enfermedades crónicas y cuidado de condiciones como asma, diabetes, cancer y enfermedades del corazón | <input type="checkbox"/> Obesidad |
| <input type="checkbox"/> Ambientes que promuevan el bienestar y estilos de vida activa | <input type="checkbox"/> Calidad del aire exterior |
| <input type="checkbox"/> Alimentación y nutrición | <input type="checkbox"/> Actividad física |
| <input type="checkbox"/> Seguridad alimenticia y químicos en productos de consumo | <input type="checkbox"/> Enfermedades de transmisión sexual |
| <input type="checkbox"/> Hepatitis C | <input type="checkbox"/> Fumar, cigarros electrónicos, y humo de segunda mano |
| <input type="checkbox"/> VIH/SIDA | <input type="checkbox"/> Trastornos por uso de sustancias |
| <input type="checkbox"/> Lesiones, como caídas, accidentes laborales, o accidentes de tráfico | <input type="checkbox"/> Vacunas/inmunizaciones |
| <input type="checkbox"/> Salud materna y de la mujer | <input type="checkbox"/> Violencia |
| | <input type="checkbox"/> Calidad del agua |

¿Cuáles son las TRES acciones más útiles para mejorar la salud de la COMUNIDAD DONDE VIVE?

- | | | |
|---|---|--|
| <input type="checkbox"/> Acceso al cuidado dental | <input type="checkbox"/> Prevención de violencia doméstica/ apoyo para víctimas | <input type="checkbox"/> Servicios de salud mental |
| <input type="checkbox"/> Acceso a la educación | <input type="checkbox"/> Oportunidades de empleo | <input type="checkbox"/> Transporte público |
| <input type="checkbox"/> Acceso a alimentos más saludables | <input type="checkbox"/> Programas de ejercicio y pérdida de peso | <input type="checkbox"/> Cuidado infantil de calidad y accesible |
| <input type="checkbox"/> Acceso al cuidado primario | <input type="checkbox"/> Inscripción en seguros de salud | <input type="checkbox"/> Lugares seguros para caminar y jugar |
| <input type="checkbox"/> Vivienda accesible | <input type="checkbox"/> Exámenes de salud | <input type="checkbox"/> Servicios para la población LGBTQ |
| <input type="checkbox"/> Apoyo a la lactancia materna | <input type="checkbox"/> Servicios de cuidado en el hogar | <input type="checkbox"/> Servicios para adultos mayores |
| <input type="checkbox"/> Apoyo del cuidador | <input type="checkbox"/> Servicio de ayuda al inmigrante | <input type="checkbox"/> Servicios para fumadores y tabaco |
| <input type="checkbox"/> Aire y agua limpios | <input type="checkbox"/> Servicio de ayuda al inmigrante | <input type="checkbox"/> Prevención de violencia |
| <input type="checkbox"/> Servicio y tratamiento para alcohol y drogas | <input type="checkbox"/> Mejoramiento de la igualdad racial | <input type="checkbox"/> Otros _____ |

¿Qué población cree usted que necesita mayor atención?

- | | | |
|--|--|--|
| <input type="checkbox"/> Infantes | <input type="checkbox"/> Adolescentes | <input type="checkbox"/> Adultos mayores |
| <input type="checkbox"/> Niños jóvenes | <input type="checkbox"/> Jóvenes adultos | <input type="checkbox"/> Otro grupo específico _____ |
| <input type="checkbox"/> Niños en edad escolar | <input type="checkbox"/> Adultos de mediana edad | |

El resto de la encuesta es sobre USTED y SUS necesidades de salud**¿Cuáles son las TRES áreas que considera como temas de salud prioritarios para su salud?**

- | | |
|--|---|
| <input type="checkbox"/> Resistencia a antibióticos e infecciones asociadas al cuidado de la salud | <input type="checkbox"/> Salud mental |
| <input type="checkbox"/> Salud de niños y adolescentes | <input type="checkbox"/> Salud de recién nacidos y infantes |
| <input type="checkbox"/> Exámenes de enfermedades crónicas y cuidado de condiciones como asma, diabetes, cancer y enfermedades del corazón | <input type="checkbox"/> Obesidad |
| <input type="checkbox"/> Ambientes que promuevan el bienestar y estilos de vida activa. | <input type="checkbox"/> Calidad del aire exterior |
| <input type="checkbox"/> Alimentación y nutrición | <input type="checkbox"/> Actividad física |
| <input type="checkbox"/> Seguridad alimenticia y químicos en productos de consumo | <input type="checkbox"/> Enfermedades de transmisión sexual |
| <input type="checkbox"/> Hepatitis C | <input type="checkbox"/> Fumar, cigarros electrónicos, y humo de segunda mano |
| <input type="checkbox"/> VIH/SIDA | <input type="checkbox"/> Trastornos por uso de sustancias |
| <input type="checkbox"/> Lesiones, como caídas, accidentes laborales, o accidentes de tráfico | <input type="checkbox"/> Vacunas/inmunizaciones |
| <input type="checkbox"/> Salud materna y de la mujer | <input type="checkbox"/> Violencia |
| | <input type="checkbox"/> Calidad del agua |

| | | |
|--|--|---|
| <input type="checkbox"/> Excelente | <input type="checkbox"/> Buena | <input type="checkbox"/> Pobre |
| <input type="checkbox"/> Muy Buena | <input type="checkbox"/> Normal | |
| ¿Tiene a alguien que usted considere como su medico personal? | | |
| | | <input type="checkbox"/> Si _____ |
| | | <input type="checkbox"/> No _____ |
| ¿Algún doctor, enfermera u otro profesional de salud le ha dicho que padece de alguna de las siguientes enfermedades? (marque todas las que apliquen) | | |
| <input type="checkbox"/> Artritis | <input type="checkbox"/> | <input type="checkbox"/> Enfermedades del corazón |
| <input type="checkbox"/> Asma | <input type="checkbox"/> COPD, enfisema, o bronquitis crónica | <input type="checkbox"/> Enfermedades del riñón |
| <input type="checkbox"/> Cancer (excluyendo el cancer de piel) | <input type="checkbox"/> Depresión/ansiedad | <input type="checkbox"/> Hipertensión |
| <input type="checkbox"/> Cancer de piel | <input type="checkbox"/> Diabetes (excluyendo durante el embarazo) | <input type="checkbox"/> Otro _____ |
| ¿Hubo algún momento en los últimos 12 meses cuando necesitó ver a un doctor pero no pudo a causa de los siguientes? | | |
| Dinero | <input type="checkbox"/> Si <input type="checkbox"/> No | Transporte |
| | | <input type="checkbox"/> Si <input type="checkbox"/> No |
| | | No pudo hacer una cita |
| | | <input type="checkbox"/> Si <input type="checkbox"/> No |
| ¿Qué tipo de seguro usa para pagar a su doctor o las facturas del hospital (marque todas las que apliquen)? | | |
| <input type="checkbox"/> Su empleador o el empleador de un familiar | <input type="checkbox"/> Medicare | <input type="checkbox"/> Otro _____ |
| <input type="checkbox"/> Seguro del Estado de Nueva York (Intercambio/Obamacare) | <input type="checkbox"/> Medicaid | <input type="checkbox"/> No tengo seguro de salud |
| <input type="checkbox"/> | <input type="checkbox"/> Militar (TriCare o VA) | |
| <input type="checkbox"/> | <input type="checkbox"/> COBRA | |
| Durante los últimos 30 días, se ha sentido emocionalmente molesto, por ejemplo, enojado, triste, o frustrado, como resultado de cómo fue tratado en base a los siguientes... | | |
| Edad | <input type="checkbox"/> Si <input type="checkbox"/> No | Orientación sexual |
| | | <input type="checkbox"/> Si <input type="checkbox"/> No |
| Identidad de género | <input type="checkbox"/> Si <input type="checkbox"/> No | Percepcion de estado migratorio |
| | | <input type="checkbox"/> Si <input type="checkbox"/> No |
| Raza/Etnicidad | <input type="checkbox"/> Si <input type="checkbox"/> No | Religión |
| | | <input type="checkbox"/> Si <input type="checkbox"/> No |
| Por favor recuerde que sus respuestas son confidenciales, El siguiente grupo de preguntas serán usadas para describir mejor quién responde a la encuesta y no serán examinadas individualmente. | | |
| ¿Cuál es su identidad de género? | | |
| <input type="checkbox"/> Mujer | <input type="checkbox"/> Mujer transgénero | <input type="checkbox"/> Género no listado (por favor declare): _____ |
| <input type="checkbox"/> Hombre | <input type="checkbox"/> Hombre transgénero | |
| <input type="checkbox"/> Género no binario/Género unconforme | | |
| ¿Cuál es su edad? | | |
| <input type="checkbox"/> 18-24 | <input type="checkbox"/> 45-54 | <input type="checkbox"/> 75+ |
| <input type="checkbox"/> 25-34 | <input type="checkbox"/> 55-64 | |
| <input type="checkbox"/> 35-44 | <input type="checkbox"/> 65-74 | |
| ¿Cuál es su más alto grado de estudio o año de escuela que completó? | | |
| <input type="checkbox"/> Menos que la secundaria | <input type="checkbox"/> Algo de universidad o escuela técnica | <input type="checkbox"/> Título profesional o avanzado |
| <input type="checkbox"/> Graduado de secundaria/GED | <input type="checkbox"/> Graduado de universidad | |
| ¿Cuál es el Código postal donde usted vive actualmente? _____ | | |
| ¿Usted es de origen Hispano o Latino? | | |
| | | <input type="checkbox"/> Si <input type="checkbox"/> No |
| ¿Cuál de las siguientes describe mejor su raza? | | |
| <input type="checkbox"/> Blanco | <input type="checkbox"/> Asiático/Isleño del Pacífico | <input type="checkbox"/> Multiracial |
| <input type="checkbox"/> Negro/Afro Americano | <input type="checkbox"/> Nativo Americano/Nativo de Alaska | <input type="checkbox"/> Otro _____ |
| ¿Está usted actualmente? | | |
| <input type="checkbox"/> Empleado | <input type="checkbox"/> Cuida del hogar | <input type="checkbox"/> No puede trabajar |
| <input type="checkbox"/> Auto empleado | <input type="checkbox"/> Estudiante | <input type="checkbox"/> Otro _____ |
| <input type="checkbox"/> Sin trabajo | <input type="checkbox"/> Jubilado | |
| ¿Cuál es el lenguaje predominante que se habla en su casa? | | |
| <input type="checkbox"/> Inglés | <input type="checkbox"/> Portugués | <input type="checkbox"/> Otro _____ |
| <input type="checkbox"/> Español | <input type="checkbox"/> Chino | |
| <input type="checkbox"/> Italiano | <input type="checkbox"/> Francés | |

**COMMUNITY HEALTH ASSESSMENT
SURVEY RESPONSES**

| 2019 WESTCHESTER COUNTY COMMUNITY HEALTH SURVEY | | | | | | | |
|--|------------|------|-------|------|-------|------|------------------|
| Survey Responses - Westchester ZIP codes only | Unweighted | | | | | | Weighted average |
| | On-line | | Paper | | Total | | |
| Total Respondents | 1496 | % | 1220 | % | 2716 | % | % |
| Q1. What THREE areas do you see as being priority health issues in the community where you live? | | | | | | | |
| <input type="checkbox"/> Antibiotic resistance and healthcare associated infections | 117 | 7.8 | 64 | 5.2 | 181 | 6.7 | 7.4 |
| <input type="checkbox"/> Child and adolescent health | 227 | 15.2 | 348 | 28.5 | 575 | 21.2 | 19.4 |
| <input type="checkbox"/> Chronic disease screening and care for conditions like asthma, diabetes, cancer and heart disease | 516 | 34.5 | 326 | 26.7 | 842 | 31.0 | 30.0 |
| <input type="checkbox"/> Environments that promote well-being & active lifestyles | 394 | 26.3 | 222 | 18.2 | 616 | 22.7 | 22.4 |
| <input type="checkbox"/> Food and nutrition | 335 | 22.4 | 400 | 32.8 | 735 | 27.1 | 25.4 |
| <input type="checkbox"/> Food safety and chemicals in consumer products | 162 | 10.8 | 164 | 13.4 | 326 | 12.0 | 11.9 |
| <input type="checkbox"/> Hepatitis C | 4 | 0.3 | 49 | 4.0 | 53 | 2.0 | 1.8 |
| <input type="checkbox"/> HIV/AIDS | 15 | 1.0 | 102 | 8.4 | 117 | 4.3 | 4.5 |
| <input type="checkbox"/> Injuries, such as falls, work-injuries, or traffic-injuries | 110 | 7.4 | 142 | 11.6 | 252 | 9.3 | 9.4 |
| <input type="checkbox"/> Maternal and women's health | 84 | 5.6 | 164 | 13.4 | 248 | 9.1 | 7.5 |
| <input type="checkbox"/> Mental health | 683 | 45.7 | 349 | 28.6 | 1032 | 38.0 | 39.2 |
| <input type="checkbox"/> Newborn and infant health | 57 | 3.8 | 106 | 8.7 | 163 | 6.0 | 5.3 |
| <input type="checkbox"/> Obesity | 382 | 25.5 | 330 | 27.0 | 712 | 26.2 | 26.2 |
| <input type="checkbox"/> Outdoor air quality | 88 | 5.9 | 81 | 6.6 | 169 | 6.2 | 6.4 |
| <input type="checkbox"/> Physical activity | 221 | 14.8 | 185 | 15.2 | 406 | 14.9 | 14.9 |
| <input type="checkbox"/> Sexually transmitted diseases | 41 | 2.7 | 124 | 10.2 | 165 | 6.1 | 6.1 |
| <input type="checkbox"/> Smoking, vaping, and secondhand smoke | 285 | 19.1 | 281 | 23.0 | 566 | 20.8 | 21.4 |
| <input type="checkbox"/> Substance use disorders | 348 | 23.3 | 177 | 14.5 | 525 | 19.3 | 21.1 |
| <input type="checkbox"/> Vaccinations/immunizations | 120 | 8.0 | 93 | 7.6 | 213 | 7.8 | 8.5 |
| <input type="checkbox"/> Violence | 112 | 7.5 | 173 | 14.2 | 285 | 10.5 | 9.6 |
| <input type="checkbox"/> Water quality | 125 | 8.4 | 116 | 9.5 | 241 | 8.9 | 9.3 |
| Q2. What THREE actions would be most helpful to improve the health of the community where you live? | | | | | | | |
| <input type="checkbox"/> Access to dental care | 104 | 7.0 | 232 | 19.0 | 336 | 12.4 | 12.3 |
| <input type="checkbox"/> Access to education | 124 | 8.3 | 235 | 19.3 | 359 | 13.2 | 13.0 |
| <input type="checkbox"/> Access to healthier food | 254 | 17.0 | 290 | 23.8 | 544 | 20.0 | 18.4 |
| <input type="checkbox"/> Access to primary care | 168 | 11.2 | 130 | 10.7 | 298 | 11.0 | 11.8 |
| <input type="checkbox"/> Affordable housing | 393 | 26.3 | 397 | 32.5 | 790 | 29.1 | 26.5 |
| <input type="checkbox"/> Breastfeeding support | 22 | 1.5 | 47 | 3.9 | 69 | 2.5 | 1.9 |
| <input type="checkbox"/> Caregiver support | 167 | 11.2 | 67 | 5.5 | 234 | 8.6 | 8.5 |
| <input type="checkbox"/> Clean air & water | 152 | 10.2 | 176 | 14.4 | 328 | 12.1 | 12.1 |
| <input type="checkbox"/> Drug & alcohol treatment services | 299 | 20.0 | 139 | 11.4 | 438 | 16.1 | 18.3 |
| <input type="checkbox"/> Domestic violence prevention/victim support | 72 | 4.8 | 130 | 10.7 | 202 | 7.4 | 7.2 |
| <input type="checkbox"/> Employment opportunities | 167 | 11.2 | 271 | 22.2 | 438 | 16.1 | 15.4 |
| <input type="checkbox"/> Exercise & weight loss programs | 373 | 24.9 | 213 | 17.5 | 586 | 21.6 | 22.6 |
| <input type="checkbox"/> Health insurance enrollment | 122 | 8.2 | 127 | 10.4 | 249 | 9.2 | 8.9 |
| <input type="checkbox"/> Health screenings | 224 | 15.0 | 179 | 14.7 | 403 | 14.8 | 14.7 |
| <input type="checkbox"/> Home care services | 145 | 9.7 | 77 | 6.3 | 222 | 8.2 | 8.6 |
| <input type="checkbox"/> Immigrant support services | 95 | 6.4 | 163 | 13.4 | 258 | 9.5 | 9.1 |
| <input type="checkbox"/> Improving racial equality | 84 | 5.6 | 111 | 9.1 | 195 | 7.2 | 7.2 |
| <input type="checkbox"/> Mental health services | 508 | 34.0 | 214 | 17.5 | 722 | 26.6 | 27.9 |
| <input type="checkbox"/> Public transportation | 85 | 5.7 | 73 | 6.0 | 158 | 5.8 | 5.6 |

Continued

| | | | | | | | | |
|--|---|-----|------|-----|------|------|------|------|
| Q2. Continued | | | | | | | | |
| <input type="checkbox"/> | Quality and affordable childcare | 146 | 9.8 | 99 | 8.1 | 245 | 9.0 | 8.4 |
| <input type="checkbox"/> | Safe places to walk & play | 199 | 13.3 | 170 | 13.9 | 369 | 13.6 | 12.7 |
| <input type="checkbox"/> | Services for LGBTQ population | 33 | 2.2 | 38 | 3.1 | 71 | 2.6 | 3.1 |
| <input type="checkbox"/> | Services for older adults | 317 | 21.2 | 143 | 11.7 | 460 | 16.9 | 17.9 |
| <input type="checkbox"/> | Smoking & tobacco services | 103 | 6.9 | 85 | 7.0 | 188 | 6.9 | 7.4 |
| <input type="checkbox"/> | Violence prevention | 90 | 6.0 | 92 | 7.5 | 182 | 6.7 | 6.6 |
| Q3. What population needs the greatest attention? | | | | | | | | |
| <input type="checkbox"/> | Infants | 113 | 7.6 | 231 | 18.9 | 344 | 12.7 | 11.6 |
| <input type="checkbox"/> | Young children | 216 | 14.4 | 303 | 24.8 | 519 | 19.1 | 18.2 |
| <input type="checkbox"/> | School-age children | 313 | 20.9 | 264 | 21.6 | 577 | 21.2 | 19.7 |
| <input type="checkbox"/> | Teens | 453 | 30.3 | 463 | 38.0 | 916 | 33.7 | 33.6 |
| <input type="checkbox"/> | Young adults | 309 | 20.7 | 302 | 24.8 | 611 | 22.5 | 22.0 |
| <input type="checkbox"/> | Middle-aged adults | 228 | 15.2 | 181 | 14.8 | 409 | 15.1 | 14.0 |
| <input type="checkbox"/> | Older adults | 677 | 45.3 | 373 | 30.6 | 1050 | 38.7 | 38.9 |
| <input type="checkbox"/> | Other specific groups | 81 | 5.4 | 20 | 1.6 | 101 | 3.7 | 3.9 |
| Q4. What THREE areas do you see as being priority health issues for YOURSELF? | | | | | | | | |
| <input type="checkbox"/> | Antibiotic resistance and healthcare associated infections | 100 | 6.7 | 64 | 5.2 | 164 | 6.0 | 6.2 |
| <input type="checkbox"/> | Child and adolescent health | 72 | 4.8 | 223 | 18.3 | 295 | 10.9 | 8.8 |
| <input type="checkbox"/> | Chronic disease screening and care for conditions like asthma, diabetes, cancer and heart disease | 428 | 28.6 | 298 | 24.4 | 726 | 26.7 | 26.8 |
| <input type="checkbox"/> | Environments that promote well-being & active lifestyles | 633 | 42.3 | 278 | 22.8 | 911 | 33.5 | 33.2 |
| <input type="checkbox"/> | Food and nutrition | 600 | 40.1 | 505 | 41.4 | 1105 | 40.7 | 40.1 |
| <input type="checkbox"/> | Food safety and chemicals in consumer products | 281 | 18.8 | 141 | 11.6 | 422 | 15.5 | 15.2 |
| <input type="checkbox"/> | Hepatitis C | 2 | 0.1 | 31 | 2.5 | 33 | 1.2 | 1.4 |
| <input type="checkbox"/> | HIV/AIDS | 5 | 0.3 | 56 | 4.6 | 61 | 2.2 | 2.8 |
| <input type="checkbox"/> | Injuries, such as falls, work-injuries, or traffic-injuries | 168 | 11.2 | 123 | 10.1 | 291 | 10.7 | 12.2 |
| <input type="checkbox"/> | Maternal and women's health | 148 | 9.9 | 160 | 13.1 | 308 | 11.3 | 8.9 |
| <input type="checkbox"/> | Mental health | 334 | 22.3 | 248 | 20.3 | 582 | 21.4 | 21.9 |
| <input type="checkbox"/> | Newborn and infant health | 15 | 1.0 | 103 | 8.4 | 118 | 4.3 | 3.3 |
| <input type="checkbox"/> | Obesity | 262 | 17.5 | 242 | 19.8 | 504 | 18.6 | 18.7 |
| <input type="checkbox"/> | Outdoor air quality | 171 | 11.4 | 115 | 9.4 | 286 | 10.5 | 11.1 |
| <input type="checkbox"/> | Physical activity | 761 | 50.9 | 364 | 29.8 | 1125 | 41.4 | 43.9 |
| <input type="checkbox"/> | Sexually transmitted diseases | 10 | 0.7 | 93 | 7.6 | 103 | 3.8 | 4.2 |
| <input type="checkbox"/> | Smoking, vaping, and secondhand smoke | 62 | 4.1 | 125 | 10.2 | 187 | 6.9 | 6.9 |
| <input type="checkbox"/> | Substance use disorders | 29 | 1.9 | 53 | 4.3 | 82 | 3.0 | 3.3 |
| <input type="checkbox"/> | Vaccinations/immunizations | 45 | 3.0 | 71 | 5.8 | 116 | 4.3 | 4.4 |
| <input type="checkbox"/> | Violence | 34 | 2.3 | 97 | 8.0 | 131 | 4.8 | 4.9 |
| <input type="checkbox"/> | Water quality | 189 | 12.6 | 131 | 10.7 | 320 | 11.8 | 12.7 |
| Q5. Would you say that in general your health is: | | | | | | | | |
| <input type="checkbox"/> | Excellent | 216 | 14.4 | 130 | 10.7 | 346 | 12.7 | 13.6 |
| <input type="checkbox"/> | Very good | 600 | 40.1 | 288 | 23.6 | 888 | 32.7 | 34.7 |
| <input type="checkbox"/> | Good | 497 | 33.2 | 509 | 41.7 | 1006 | 37.0 | 36.0 |
| <input type="checkbox"/> | Fair | 147 | 9.8 | 242 | 19.8 | 389 | 14.3 | 12.6 |
| <input type="checkbox"/> | Poor | 30 | 2.0 | 26 | 2.1 | 56 | 2.1 | 2.6 |
| <input type="checkbox"/> | No answer | 6 | 0.4 | 25 | 2.0 | 31 | 1.1 | 0.5 |

| Q6. Do you have somebody that you think of as your personal doctor or health care provider? | | | | | | | | |
|---|------------------------------------|------|------|------|------|------|------|------|
| <input type="checkbox"/> Yes _____ | 1330 | 88.9 | 670 | 54.9 | 2000 | 73.6 | 74.4 | |
| <input type="checkbox"/> No _____ | 141 | 9.4 | 369 | 30.2 | 510 | 18.8 | 18.9 | |
| <input type="checkbox"/> No answer | 25 | 1.7 | 181 | 14.8 | 206 | 7.6 | 6.8 | |
| Q7. Has a doctor, nurse or other health professional told you that you had any of the following (check all that apply)? | | | | | | | | |
| <input type="checkbox"/> Arthritis | 338 | 22.6 | 154 | 12.6 | 492 | 18.1 | 18.0 | |
| <input type="checkbox"/> Asthma | 174 | 11.6 | 118 | 9.7 | 292 | 10.8 | 9.6 | |
| <input type="checkbox"/> Cancer (excluding skin cancer) | 112 | 7.5 | 33 | 2.7 | 145 | 5.3 | 5.8 | |
| <input type="checkbox"/> Skin cancer | 89 | 5.9 | 22 | 1.8 | 111 | 4.1 | 5.0 | |
| <input type="checkbox"/> COPD, emphysema, or chronic bronchitis | 42 | 2.8 | 44 | 3.6 | 86 | 3.2 | 3.4 | |
| <input type="checkbox"/> Depression/anxiety | 247 | 16.5 | 155 | 12.7 | 402 | 14.8 | 15.1 | |
| <input type="checkbox"/> Diabetes (excluding during pregnancy) | 142 | 9.5 | 109 | 8.9 | 251 | 9.2 | 9.6 | |
| <input type="checkbox"/> Heart disease | 111 | 7.4 | 61 | 5.0 | 172 | 6.3 | 7.8 | |
| <input type="checkbox"/> Kidney disease | 19 | 1.3 | 28 | 2.3 | 47 | 1.7 | 2.2 | |
| <input type="checkbox"/> Hypertension | 327 | 21.9 | 181 | 14.8 | 508 | 18.7 | 19.4 | |
| <input type="checkbox"/> Other _____ | 191 | 12.8 | 75 | 6.1 | 266 | 9.8 | 9.7 | |
| Q8. Was there a time in the past 12 months when you needed to see a doctor but could not because of the following? | | | | | | | | |
| Cost | <input type="checkbox"/> Yes | 167 | 11.2 | 221 | 18.1 | 388 | 14.3 | 13.8 |
| | <input type="checkbox"/> No | 1249 | 83.5 | 586 | 48.0 | 1835 | 67.6 | 69.9 |
| | <input type="checkbox"/> No answer | 80 | 5.3 | 413 | 33.9 | 493 | 18.2 | 16.3 |
| Transportation | <input type="checkbox"/> Yes | 80 | 5.3 | 112 | 9.2 | 192 | 7.1 | 6.9 |
| | <input type="checkbox"/> No | 1296 | 86.6 | 605 | 49.6 | 1901 | 70.0 | 73.1 |
| | <input type="checkbox"/> No answer | 120 | 8.0 | 503 | 41.2 | 623 | 22.9 | 20.1 |
| Unable to get an appointment | <input type="checkbox"/> Yes | 267 | 17.8 | 137 | 11.2 | 404 | 14.9 | 14.7 |
| | <input type="checkbox"/> No | 1151 | 76.9 | 606 | 49.7 | 1757 | 64.7 | 67.8 |
| | <input type="checkbox"/> No answer | 78 | 5.2 | 477 | 39.1 | 555 | 20.4 | 17.6 |
| Q9. What type of insurance do you use to pay for your doctor or hospital bills (check all that apply)? | | | | | | | | |
| <input type="checkbox"/> Your employer or a family member's employer | 1065 | 71.2 | 365 | 29.9 | 1430 | 52.7 | 55.8 | |
| <input type="checkbox"/> The New York State Marketplace (Ex | 62 | 4.1 | 107 | 8.8 | 169 | 6.2 | 5.5 | |
| <input type="checkbox"/> Medicare | 336 | 22.5 | 253 | 20.7 | 589 | 21.7 | 22.8 | |
| <input type="checkbox"/> Medicaid | 107 | 7.2 | 322 | 26.4 | 429 | 15.8 | 13.0 | |
| <input type="checkbox"/> Military (TriCare or VA) | 14 | 0.9 | 9 | 0.7 | 23 | 0.8 | 1.1 | |
| <input type="checkbox"/> COBRA | 15 | 1.0 | 13 | 1.1 | 28 | 1.0 | 1.1 | |
| <input type="checkbox"/> Other _____ | 3 | 0.2 | 3 | 0.2 | 6 | 0.2 | 0.2 | |
| <input type="checkbox"/> I don't have health insurance | 20 | 1.3 | 169 | 13.9 | 189 | 7.0 | 7.4 | |
| <input type="checkbox"/> No answer | 9 | 0.6 | 97 | 8.0 | 106 | 3.9 | 2.8 | |
| Q10. During the past 30 days, have you felt emotionally upset, for example, angry, sad, or frustrated, as a result of how you were treated based on any of the following... | | | | | | | | |
| Age | <input type="checkbox"/> Yes | 167 | 11.2 | 78 | 6.4 | 245 | 9.0 | 8.8 |
| | <input type="checkbox"/> No | 1284 | 85.8 | 708 | 58.0 | 1992 | 73.3 | 75.6 |
| | <input type="checkbox"/> No answer | 45 | 3.0 | 434 | 35.6 | 479 | 17.6 | 15.6 |
| Gender identity | <input type="checkbox"/> Yes | 88 | 5.9 | 38 | 3.1 | 126 | 4.6 | 3.6 |
| | <input type="checkbox"/> No | 1337 | 89.4 | 711 | 58.3 | 2048 | 75.4 | 78.1 |
| | <input type="checkbox"/> No answer | 71 | 4.7 | 471 | 38.6 | 542 | 20.0 | 18.3 |
| Race/Ethnicity | <input type="checkbox"/> Yes | 180 | 12.0 | 97 | 8.0 | 277 | 10.2 | 9.6 |
| | <input type="checkbox"/> No | 1255 | 83.9 | 674 | 55.2 | 1929 | 71.0 | 73.4 |
| | <input type="checkbox"/> No answer | 61 | 4.1 | 449 | 36.8 | 510 | 18.8 | 17.0 |

Continued

| <i>Q10. Continued</i> | | | | | | | | |
|--|------------------------------------|------|------|------|------|------|------|------|
| Sexual orientation | <input type="checkbox"/> Yes | 28 | 1.9 | 24 | 2.0 | 52 | 1.9 | 1.9 |
| | <input type="checkbox"/> No | 1385 | 92.6 | 707 | 58.0 | 2092 | 77.0 | 79.0 |
| | <input type="checkbox"/> No answer | 83 | 5.5 | 489 | 40.1 | 572 | 21.1 | 19.2 |
| Perceived immigration status | <input type="checkbox"/> Yes | 40 | 2.7 | 64 | 5.2 | 104 | 3.8 | 3.6 |
| | <input type="checkbox"/> No | 1374 | 91.8 | 693 | 56.8 | 2067 | 76.1 | 78.3 |
| | <input type="checkbox"/> No answer | 82 | 5.5 | 463 | 38.0 | 545 | 20.1 | 18.2 |
| Religion | <input type="checkbox"/> Yes | 55 | 3.7 | 29 | 2.4 | 84 | 3.1 | 3.2 |
| | <input type="checkbox"/> No | 1362 | 91.0 | 692 | 56.7 | 2054 | 75.6 | 77.3 |
| | <input type="checkbox"/> No answer | 79 | 5.3 | 499 | 40.9 | 578 | 21.3 | 19.4 |
| Disability | <input type="checkbox"/> Yes | 45 | 3.0 | 44 | 3.6 | 89 | 3.3 | 3.4 |
| | <input type="checkbox"/> No | 1343 | 89.8 | 701 | 57.5 | 2044 | 75.3 | 77.3 |
| | <input type="checkbox"/> No answer | 108 | 7.2 | 475 | 38.9 | 583 | 21.5 | 19.2 |
| Other | <input type="checkbox"/> Yes | 31 | 2.1 | 20 | 1.6 | 51 | 1.9 | 1.6 |
| | <input type="checkbox"/> No | .. | .. | .. | .. | .. | .. | .. |
| | <input type="checkbox"/> No answer | 1465 | 97.9 | 1200 | 98.4 | 2665 | 98.1 | 98.4 |
| Q11. What is your current gender identity? | | | | | | | | |
| <input type="checkbox"/> Female | | 1101 | 73.6 | 887 | 72.7 | 1988 | 73.2 | 52.6 |
| <input type="checkbox"/> Male | | 385 | 25.7 | 308 | 25.2 | 693 | 25.5 | 47.4 |
| <input type="checkbox"/> Non-binary person/Gender non-conforming | | 2 | 0.1 | 4 | 0.3 | 6 | 0.2 | .. |
| <input type="checkbox"/> Trans female/Trans woman | | 2 | 0.1 | 2 | 0.2 | 4 | 0.1 | .. |
| <input type="checkbox"/> Trans male/Trans man | | 2 | 0.1 | 3 | 0.2 | 5 | 0.2 | .. |
| <input type="checkbox"/> Gender not listed (please state): | | 4 | 0.3 | 4 | 0.3 | 8 | 0.3 | .. |
| <input type="checkbox"/> No answer | | 0 | 0.0 | 12 | 1.0 | 12 | 0.4 | .. |
| Q12. What is your age? | | | | | | | | |
| <input type="checkbox"/> 18-24 | | 52 | 3.5 | 153 | 12.5 | 205 | 7.5 | 8.1 |
| <input type="checkbox"/> 25-34 | | 150 | 10.0 | 320 | 26.2 | 470 | 17.3 | 14.9 |
| <input type="checkbox"/> 35-44 | | 224 | 15.0 | 248 | 20.3 | 472 | 17.4 | 16.1 |
| <input type="checkbox"/> 45-54 | | 294 | 19.7 | 159 | 13.0 | 453 | 16.7 | 17.9 |
| <input type="checkbox"/> 55-64 | | 386 | 25.8 | 118 | 9.7 | 504 | 18.6 | 19.2 |
| <input type="checkbox"/> 65-74 | | 252 | 16.8 | 111 | 9.1 | 363 | 13.4 | 14.1 |
| <input type="checkbox"/> 75+ | | 138 | 9.2 | 92 | 7.5 | 230 | 8.5 | 9.5 |
| <input type="checkbox"/> No answer | | 0 | 0.0 | 19 | 1.6 | 19 | 0.7 | 0.2 |
| Q13. What is the highest grade or year of school you completed? | | | | | | | | |
| <input type="checkbox"/> Less than high school | | 29 | 1.9 | 168 | 13.8 | 197 | 7.3 | 6.5 |
| <input type="checkbox"/> High school grad/GED | | 100 | 6.7 | 394 | 32.3 | 494 | 18.2 | 17.2 |
| <input type="checkbox"/> Some college or technical school | | 215 | 14.4 | 283 | 23.2 | 498 | 18.3 | 17.7 |
| <input type="checkbox"/> College graduate | | 430 | 28.7 | 223 | 18.3 | 653 | 24.0 | 25.4 |
| <input type="checkbox"/> Advanced or professional degree | | 712 | 47.6 | 111 | 9.1 | 823 | 30.3 | 32.1 |
| <input type="checkbox"/> No answer | | 10 | 0.7 | 41 | 3.4 | 51 | 1.9 | 1.0 |
| Q14. What is the ZIP Code where you currently live? | | 1496 | | 1220 | | 2716 | | |
| Q15. Are you of Hispanic or Latino origin? | | | | | | | | |
| <input type="checkbox"/> Yes | | 222 | 14.8 | 625 | 51.2 | 847 | 31.2 | .. |
| <input type="checkbox"/> No | | 1252 | 83.7 | 478 | 39.2 | 1730 | 63.7 | .. |
| <input type="checkbox"/> No answer | | 22 | 1.5 | 117 | 9.6 | 139 | 5.1 | .. |

| Q16. Which one the following best describes your race? | | | | | | | | |
|---|--------------------------------|------|------|-----|------|------|------|------|
| <input type="checkbox"/> | White | 1049 | 70.1 | 353 | 28.9 | 1402 | 51.6 | .. |
| <input type="checkbox"/> | Black/African American | 213 | 14.2 | 244 | 20.0 | 457 | 16.8 | .. |
| <input type="checkbox"/> | Asian/Pacific Islander | 54 | 3.6 | 39 | 3.2 | 93 | 3.4 | .. |
| <input type="checkbox"/> | American Indian/Alaskan Native | 11 | 0.7 | 5 | 0.4 | 16 | 0.6 | .. |
| <input type="checkbox"/> | Multi-racial | 68 | 4.5 | 85 | 7.0 | 153 | 5.6 | .. |
| <input type="checkbox"/> | Other | 79 | 5.3 | 170 | 13.9 | 249 | 9.2 | .. |
| <input type="checkbox"/> | No answer | 22 | 1.5 | 324 | 26.6 | 346 | 12.7 | .. |
| Q16A. Which one the following best describes your race/Ethnicity (Combining from Q15 & Q16)? | | | | | | | | |
| <input type="checkbox"/> | White non-Hispanic | 968 | 64.7 | 244 | 20.0 | 1212 | 44.6 | 52.0 |
| <input type="checkbox"/> | Black non-Hispanic | 192 | 12.8 | 228 | 18.7 | 420 | 15.5 | 13.9 |
| <input type="checkbox"/> | Other non-Hispanic | 109 | 7.3 | 113 | 9.3 | 222 | 8.2 | 7.9 |
| <input type="checkbox"/> | Hispanic | 219 | 14.6 | 605 | 49.6 | 824 | 30.3 | 25.6 |
| <input type="checkbox"/> | No answer | 8 | 0.5 | 30 | 2.5 | 38 | 1.4 | 0.6 |
| Q17. Are you currently? | | | | | | | | |
| <input type="checkbox"/> | Employed | 975 | 65.2 | 541 | 44.3 | 1516 | 55.8 | 57.6 |
| <input type="checkbox"/> | Self employed | 78 | 5.2 | 55 | 4.5 | 133 | 4.9 | 5.7 |
| <input type="checkbox"/> | Out of work | 37 | 2.5 | 199 | 16.3 | 236 | 8.7 | 7.4 |
| <input type="checkbox"/> | A homemaker | 49 | 3.3 | 113 | 9.3 | 162 | 6.0 | 4.1 |
| <input type="checkbox"/> | Student | 17 | 1.1 | 54 | 4.4 | 71 | 2.6 | 2.8 |
| <input type="checkbox"/> | Retired | 280 | 18.7 | 159 | 13.0 | 439 | 16.2 | 17.5 |
| <input type="checkbox"/> | Unable to work | 52 | 3.5 | 56 | 4.6 | 108 | 4.0 | 3.8 |
| <input type="checkbox"/> | No answer | 8 | 0.5 | 43 | 3.5 | 51 | 1.9 | 1.2 |
| Q18. What is the primary language spoken in your home? | | | | | | | | |
| <input type="checkbox"/> | English | 1371 | 91.6 | 654 | 53.6 | 2025 | 74.6 | 78.7 |
| <input type="checkbox"/> | Spanish | 78 | 5.2 | 440 | 36.1 | 518 | 19.1 | 15.4 |
| <input type="checkbox"/> | Other | 40 | 2.7 | 108 | 8.9 | 148 | 5.4 | 5.4 |
| <input type="checkbox"/> | No answer | 7 | 0.5 | 18 | 1.5 | 25 | 0.9 | 0.6 |

**COMMUNITY HEALTH
REGIONAL PROFILES**

WESTCHESTER COUNTY REGIONAL PROFILES

As part of the Community Health Assessment (CHA), the regional profile provides detailed information on geographic, demographic, socioeconomic, and health related indicators for the overall County, each of the six cities and 19 towns within the County.

Each profile contains four pages, presenting the following information:

1. Population, map boundaries and square mileage of the region. Municipalities and zip codes are listed for each region.
2. Population composition, including age, sex, race/ethnicity, country of origin, language spoken at home, education, family structure, income, employment, and commuting methods.
3. Births in the County, including number of births, births by mother's age, race/ethnicity, education, country of origin, prenatal care, health insurance coverage at delivery, and the infants' birthweight.
4. Deaths in the County, including number of deaths, infant mortality, average age at death, sex, race/ethnicity of the deceased, and major causes of death.
4. Top reported communicable diseases, and sexually transmitted diseases by sex, race and ethnicity.
5. Emergency Room visits and Hospitalizations by sex, age, race/ethnicity, top causes, major receiving hospitals, and insurance coverage.

REGION PROFILE DEFINITIONS & DATA SOURCES

Demographics: From the 2013-2017 American Community Survey (ACS) conducted by the U.S. Census Bureau.

Commuters Using Alternative Mode of Transportation: Including carpooling, public transportation, bicycling, walking, or telecommuting.

Births & Deaths (2016): Annual certificate records of live births and deaths of Westchester County residents. From New York State Department of Health Vital Statistics.

Birth Rate (per 1,000): Number of live births per 1,000 population.

Late or No Prenatal Care: Time starting prenatal care is measured by the number of months of the pregnancy at the time when prenatal care was initiated. Late prenatal care is defined as those starting prenatal care during the third trimester. The percentage calculation excludes those with no information.

Birthweight: Low birthweight is defined as a birthweight less than 2,500 grams.

Death Rate (per 100,000): Number of deaths per 100,000 population.

Infant Mortality Rate: Number of deaths under one year of age per 1,000 live births occurring during the year.

Communicable Diseases & Major Reportable STDs (2018): Per 100,000 population. From New York State Department of Health Communicable Disease Electronic Surveillance System (CDESS).

Emergency Room Visits (2016): Annual number of cases that received treatment from a hospital emergency room or ambulatory surgery service per 100,000 population. From New York Statewide Planning and Research Cooperative System (SPARCS).

Hospitalization (2016): Annual number of cases admitted to an acute-care or specialty hospital per 100,000 population. From New York Statewide Planning and Research Cooperative System (SPARCS).

Top Causes of ER Visits and Top Causes of Hospitalization: Defined by principal diagnosis. Excluding newborns and other obstetric cases.

Major Acute Care and Specialty Hospitals: Including general medical & surgical hospitals, psychiatric & substance abuse hospitals, and other specialty hospitals. Data from New York State Department of Health.

Race/Ethnicity: Data is from 2012 SPARCS, due to reporting errors and inconsistencies among hospitals during 2013-2016.

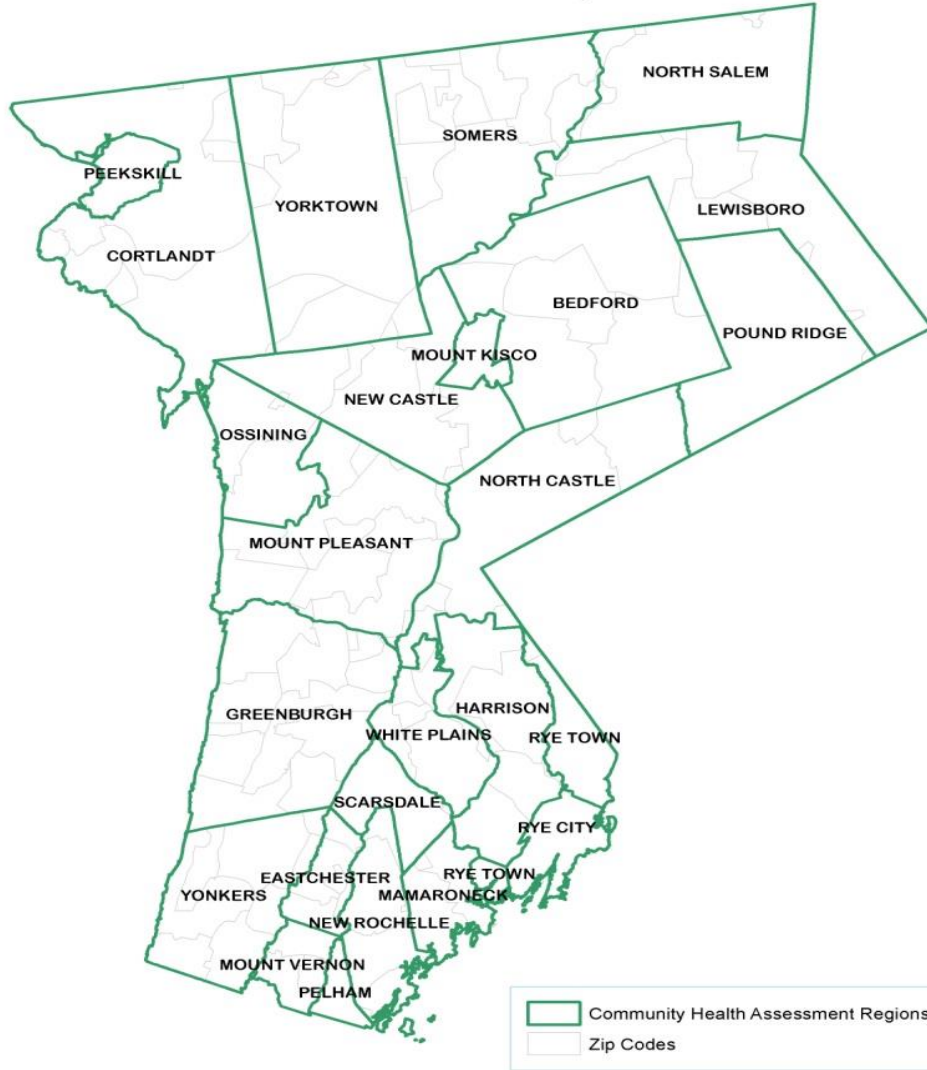
Townlines: The geographic information for each region is based on the patients' residence ZIP codes. If a ZIP code serves multiple regions, the emergency room visit and hospitalization cases are allocated to the corresponding regions according to the geographic locations and population densities of the regions. In some areas with high population densities, the assumption of homogeneity distribution of such cases within the ZIP code is applied.

REGION PROFILE DEFINITIONS & DATA SOURCES IN MAPS

Briarcliff and Mamaroneck Villages: Both villages overlap with multiple towns. Mamaroneck Village overlaps with Mamaroneck Town and Mount Pleasant Town. Briarcliff Village overlaps with Ossining Town and Rye Town. In order to create the best approximation for average maternal age and average age at death, cases were geocoded by zip and address to determine on which side of the town line they fell. For Mother's Age: geocoding was able to capture 99% of cases for Rye Town, 99% of cases for Ossining Town, 99% of cases for Mount Pleasant Town and 98% of cases for Mamaroneck Town. For Age at Death: geocoding was able to capture 97% of Rye Town cases, 97% of Ossining Town cases, 98% of Mount Pleasant Cases, and 98% of Mamaroneck Cases. These numbers are reflected in the data reported for the Region Profile.

REGION PROFILE

WESTCHESTER COUNTY



Region Area: 450.5 sq miles
Population: 975,321

County Municipalities & ZIP codes in the Region

45 Municipalities

6 Cities

19 Towns (3 of which are Town/Villages)

23 Incorporated Villages

82 Zip Codes

4 P.O. Box Zip Codes

6 zip codes serving special rural communities

REGION PROFILE

WESTCHESTER COUNTY

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | | |
|---|---------|----------------|------------------------------|-----------------------|----------------|-----------------------|---|
| Sex | N | % | | N | % ¹ | | |
| Male | 471,874 | 48.4 | White | 637,798 | 65.4 | | |
| Female | 503,447 | 51.6 | Black | 142,677 | 14.6 | | |
| Total | 975,321 | 100.0 | Other | 194,846 | 20.0 | | |
| | | | Hispanic ¹ | 234,081 | 24.0 | | |
| | | | Non-Hispanic | 741,240 | 76.0 | | |
| Age | Total | Male | Female | White | Black | Hispanic ¹ | |
| 0-4 | 55,593 | 28,704 | 26,889 | 31,248 | 8,313 | 20,161 | |
| 5-9 | 59,931 | 31,244 | 28,687 | 36,197 | 8,058 | 17,827 | |
| 10-14 | 64,652 | 32,771 | 31,881 | 40,530 | 9,008 | 19,149 | |
| 15-17 | 40,698 | 21,175 | 19,523 | 25,250 | 6,265 | 10,688 | |
| 18-24 | 86,345 | 43,218 | 43,127 | 51,562 | 15,493 | 25,300 | |
| 25-44 | 237,677 | 117,566 | 120,111 | 136,130 | 38,357 | 75,228 | |
| 45-64 | 274,165 | 131,489 | 142,676 | 193,090 | 38,772 | 50,129 | |
| 65-74 | 82,712 | 37,593 | 45,119 | 63,261 | 10,524 | 9,431 | |
| 75+ | 73,548 | 28,114 | 45,434 | 60,530 | 7,887 | 6,168 | |
| Country of Origin | N | % | Language Spoken at Home (5+) | | | N | % |
| U.S. | 727,351 | 74.6 | English | 613,330 | | 66.7 | |
| Foreign Countries | 247,970 | 25.4 | Spanish | 182,282 | | 19.8 | |
| Non-Citizen | 120,692 | 12.4 | Other non-English | 124,116 | | 13.5 | |
| Education (25+) | Total | Male | Female | | | | |
| Less than High School | 82,929 | 42,622 | 40,307 | | | | |
| High School/GED | 130,493 | 62,204 | 68,289 | | | | |
| Some College/Associate Degree | 135,807 | 63,177 | 72,630 | | | | |
| Bachelor's Degree or Higher | 318,873 | 146,759 | 172,114 | | | | |
| Family Structure | Total | White | Black | Hispanic ¹ | | | |
| Total Family Households | 239,896 | 165,244 | 31,442 | 51,379 | | | |
| Families with Own Children < 18 | 108,664 | -- | -- | -- | | | |
| Single Mother Families with Own Children <18 | 20,302 | -- | -- | -- | | | |
| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ | |
| Unemployment Rate | 6.5 | 6.6 | 6.3 | 5.5 | 9.9 | 7.4 | |
| Median Household Income (\$) | 89,968 | -- | -- | 104,724 | 56,859 | 57,809 | |
| Poverty Rate (%) | 9.4 | 8.6 | 10.2 | 6.7 | 16.2 | 17.1 | |
| Commuters | N | % ² | | | | | |
| Commuters Using Alternative Mode of Transportation ² | 192,727 | 41.1 | | | | | |

¹ Hispanic may be of any race.² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

WESTCHESTER COUNTY

| BIRTHS (2016) | | | DEATHS (2016) | | |
|--|----------|----------|---|--------------|-------------------------|
| Total Births | 10273 | | Birthweight¹ | N | % |
| Birth Rate (per 1,000) | 10.6 | | Low Birthweight | 808 | 7.9 |
| Average Maternal Age | 31.6 | | | | |
| Mother's Race/Ethnicity¹ | N | % | Total | Male | Female |
| White | 5606 | 54.6 | Total Deaths | 7094 | 3373 |
| Black | 1667 | 16.2 | Death Rate (per 100,000) | 731.9 | 720.2 |
| Other | 2997 | 29.2 | | | 3721 |
| Hispanic ² | 3597 | 35.0 | | | 742.9 |
| | | | Infant Mortality Rate (per 1,000 live birth) | | 3.3 |
| Mother's Education¹ | N | % | Top Five Causes of Death | N | % |
| Less than High School | 1401 | 13.7 | 1 Circulatory System Diseases | 2572 | 36.3 |
| High School or GED | 1513 | 14.8 | 2 Neoplasms (any) | 1716 | 24.2 |
| Some College (no degree) | 1988 | 19.4 | 3 Respiratory System Diseases | 654 | 9.2 |
| Bachelor's Degree or above | 5349 | 52.2 | 4 External Causes | 409 | 5.8 |
| | | | 5 Nervous System Diseases | 326 | 4.6 |
| Mother's Country of Origin¹ | N | % | Average Age at Death | Total | Male |
| Foreign | 4293 | 41.8 | Total | 78 | 74 |
| | | | White | 79 | 76 |
| Mother's Age¹ | N | % | Black | 70 | 66 |
| Teenage Mothers | 279 | 2.7 | Other | 71 | 67 |
| | | | Hispanic ² | 69 | 65 |
| Prenatal Care¹ | N | % | | | |
| Late or No Prenatal Care | 1978 | 19.3 | | | |
| Financial Coverage at Birth¹ | N | % | COMMUNICABLE DISEASES (2018) | | |
| MEDICAID, Child Health Plus | 3587 | 40.9 | Top Five Reported Diseases | N | Rate³ |
| Private or Other Insurance | 5145 | 58.7 | 1 Chlamydia | 3,927 | 402.6 |
| Self Pay | 34 | 0.4 | 2 Gonorrhea | 765 | 78.4 |
| | | | 3 Hepatitis C Chronic | 730 | 74.8 |
| | | | 4 Hepatitis B Chronic | 253 | 25.9 |
| | | | 5 Campylobacteriosis | 246 | 25.2 |

¹ Excluding unknown or not stated.
² Hispanics may be of any race.

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | Total | Male | Female | White | Black | Hispanic ⁴ |
|-----------------------|-------|------|--------|-------|-------|-----------------------|
| Chlamydia | 3,927 | 1476 | 2451 | 202 | 329 | 155 |
| Gonorrhea | 765 | 490 | 275 | 87 | 196 | 94 |
| Syphilis (all stages) | 242 | 197 | 45 | 61 | 47 | 57 |

REGION PROFILE

WESTCHESTER COUNTY

EMERGENCY ROOM VISITS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 349,563 | 3,606.6 |
| Male | 160,493 | 3,426.9 |
| Female | 189,063 | 3,774.5 |
| White | 160,617 | 2,499.4 |
| Black | 84,399 | 6,163.4 |
| Other | 93,755 | 5,493.4 |
| Hispanic ² | 76,791 | 3,705.6 |

HOSPITALIZATIONS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 101,664 | 1,048.9 |
| Male | 45,342 | 968.2 |
| Female | 56,320 | 1,124.4 |
| White | 63,296 | 985.0 |
| Black | 20,582 | 1,503.0 |
| Other | 27,017 | 1,583.0 |
| Hispanic ² | 17,123 | 826.3 |

| | | |
|---------|--------|---------|
| Under 5 | 26,983 | 4,877.5 |
| 5-9 | 16,295 | 2,671.1 |
| 10-14 | 14,679 | 2,257.4 |
| 15-17 | 11,367 | 2,771.0 |
| 18-24 | 33,590 | 3,925.3 |
| 25-44 | 88,505 | 3,735.3 |
| 45-64 | 84,569 | 3,101.3 |
| 65-74 | 28,344 | 3,567.6 |
| 75+ | 45,231 | 6,264.2 |

| | | |
|----------------------|--------|---------|
| Under 5 ³ | 11,163 | 2,017.9 |
| 5-9 | 1,019 | 167.0 |
| 10-14 | 1,322 | 203.3 |
| 15-17 | 1,232 | 300.3 |
| 18-24 | 4,158 | 485.9 |
| 25-44 | 18,456 | 778.9 |
| 45-64 | 23,713 | 869.6 |
| 65-74 | 14,149 | 1,780.9 |
| 75+ | 26,452 | 3,663.4 |

| Top Causes of ER Visits | <u>N</u> | <u>%</u> |
|-------------------------------------|----------|----------|
| 1 Injuries | 66,681 | 19.1 |
| 2 Acute Respiratory Infections | 16,875 | 4.8 |
| 3 Infectious And Parasitic Diseases | 15,665 | 4.5 |
| 4 Mental Disorders | 13,656 | 3.9 |
| 5 Abdominal Pain | 11,715 | 3.4 |

| Top Causes of Hospitalization⁴ | <u>N</u> | <u>%</u> |
|--|----------|----------|
| 1 Circulatory System Diseases | 13,379 | 13.2 |
| 2 Mental & Behavioral Disorders | 9,271 | 9.1 |
| 3 Digestive System Diseases | 8,630 | 8.5 |
| 4 Respiratory System Diseases | 7,162 | 7.0 |
| 5 Infectious And Parasitic Diseases | 6,627 | 6.5 |

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|--------------------------------|----------|----------|
| 1 White Plains Hospital Center | 44,454 | 12.7 |
| 2 SRJH - St. Johns Division | 38,572 | 11.0 |
| 3 Westchester Medical Center | 32,465 | 9.3 |

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|--------------------------------|----------|----------|
| 1 White Plains Hospital Center | 14,364 | 14.1 |
| 2 Westchester Medical Center | 11,085 | 10.9 |
| 3 SRJH - St. Johns Division | 8,889 | 8.7 |

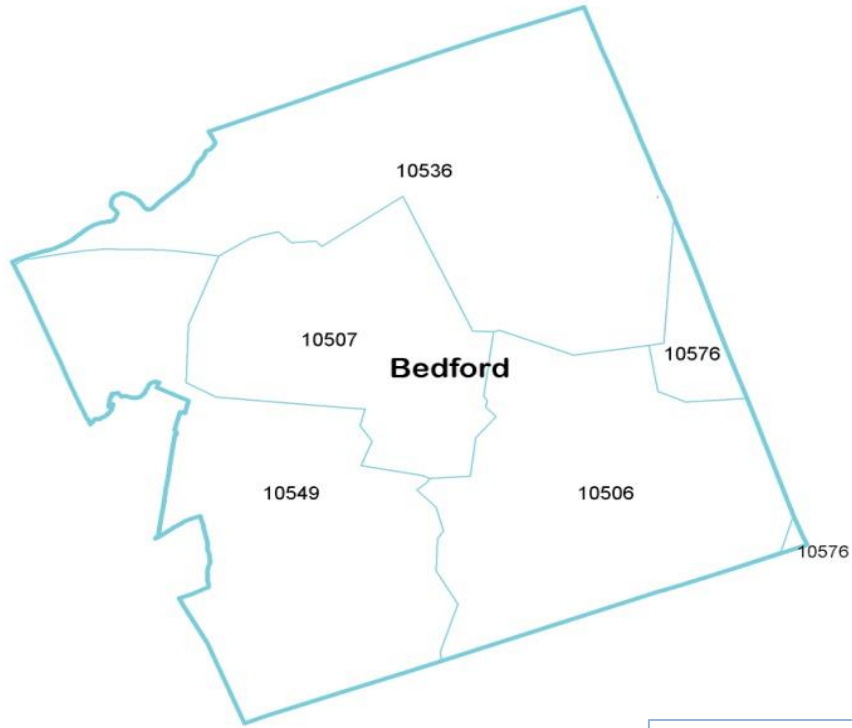
| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 172,341 | 49.3 |
| Medicare | 74,787 | 21.4 |
| Medicaid | 64,326 | 18.4 |
| Other | 20,266 | 5.8 |
| Self-Pay | 17,843 | 5.1 |

| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 46,595 | 45.8 |
| Medicare | 38,867 | 38.2 |
| Medicaid | 13,410 | 13.2 |
| Other | 1,598 | 1.6 |
| Self-Pay | 1,194 | 1.2 |

¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Includes 8,545 newborns. ⁴ Excludes obstetrics & newborns.

REGION PROFILE

BEDFORD TOWN



Region Area: 39.5 sq miles

Population: 17,955

ZIP Codes Serving the Region

10506* 10507 10536* 10549* 10576*

* Also serve other regions.

Municipalities Included in Region

Bedford (T)

REGION PROFILE

BEDFORD TOWN

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | |
|------------------------------|--------|-------|-----------------------|--------|----------------|--|
| Sex | N | % | | N | % ¹ | |
| Male | 8,341 | 46.5 | White | 14,659 | 81.6 | |
| Female | 9,614 | 53.5 | Black | 744 | 4.1 | |
| Total | 17,955 | 100.0 | Other | 2,552 | 14.2 | |
| | | | Hispanic ¹ | 2,845 | 15.8 | |
| | | | Non-Hispanic | 15,110 | 84.2 | |

| Age | Total | Male | Female | White | Black | Hispanic ¹ |
|-------|-------|-------|--------|-------|-------|-----------------------|
| 0-4 | 867 | 519 | 348 | 645 | 18 | 185 |
| 5-9 | 1,082 | 541 | 541 | 862 | 17 | 195 |
| 10-14 | 1,511 | 782 | 729 | 1,261 | 0 | 262 |
| 15-17 | 944 | 544 | 400 | 786 | 4 | 190 |
| 18-24 | 1,373 | 648 | 725 | 1,132 | 104 | 168 |
| 25-44 | 4,469 | 1,927 | 2,542 | 2,987 | 392 | 1,334 |
| 45-64 | 5,192 | 2,161 | 3,031 | 4,604 | 179 | 449 |
| 65-74 | 1,515 | 828 | 687 | 1,406 | 30 | 47 |
| 75+ | 1,002 | 391 | 611 | 976 | 0 | 15 |

| Country of Origin | N | % | Language Spoken at Home (5+) | N | % |
|-------------------|--------|------|------------------------------|--------|------|
| U.S. | 14,885 | 82.9 | English | 13,528 | 79.2 |
| Foreign Countries | 3,070 | 17.1 | Spanish | 2,151 | 12.6 |
| Non-Citizen | 2,025 | 11.3 | (Other) non-English | 1,409 | 8.2 |

| Education (25+) | Total | Male | Female |
|-------------------------------|-------|-------|--------|
| Less than High School | 1,431 | 674 | 757 |
| High School/GED | 1,770 | 530 | 1,240 |
| Some College/Associate Degree | 1,858 | 752 | 1,106 |
| Bachelor's Degree or Higher | 7,119 | 3,351 | 3,768 |

| Family Structure | Total | White | Black | Hispanic ¹ |
|--|-------|-------|-------|-----------------------|
| Total Family Households | 4,725 | 4,022 | 42 | 784 |
| Families with Own Children < 18 | 2,180 | -- | -- | -- |
| Single Mother Families with Own Children <18 | 307 | -- | -- | -- |

| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ |
|------------------------------|---------|------|--------|---------|-------|-----------------------|
| Unemployment Rate | 5.2 | 5.4 | 5.0 | 4.4 | 0.0 | 13.8 |
| Median Household Income (\$) | 121,797 | -- | -- | 140,568 | -- | 37,227 |
| Poverty Rate (%) | 5.3 | 5.5 | 5.2 | 5.6 | 7.8 | 9.1 |

| Commuters | N | % |
|---|-------|------|
| Commuters Using Alternative Mode of Transportation ² | 3,128 | 41.5 |

¹ Hispanic may be of any race.

² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

BEDFORD TOWN

| BIRTHS (2016) | | | Birthweight¹ | | |
|--|----------|----------|---|----------------|-------------------------|
| Total Births | 185 | | Low Birthweight | <u>N</u> 12 | <u>%</u> 6.5 |
| Birth Rate (per 1,000) | 10.4 | | | | |
| Average Maternal Age | 33.1 | | | | |
| Mother's Race/Ethnicity¹ | | | DEATHS (2016) | | |
| | <u>N</u> | <u>%</u> | | <u>Total</u> | <u>Male</u> |
| White | 141 | 76.2 | Total Deaths | 84 | 43 |
| Black | 5 | 2.7 | Death Rate (per 100,000) | 471.9 | 520.5 |
| Other | 39 | 21.1 | | | 41 |
| <i>Hispanic²</i> | 34 | 18.4 | | | 429.9 |
| Mother's Education¹ | | | Infant Mortality Rate (per 1,000 live birth) | | |
| | <u>N</u> | <u>%</u> | | | 0.0 |
| Less than High School | 25 | 13.5 | | | |
| High School or GED | 28 | 15.1 | Top Five Causes of Death | <u>N</u> | <u>%</u> |
| Some College (no degree) | 26 | 14.1 | 1 Circulatory System Diseases | 39 | 46.4 |
| Bachelor's Degree or above | 106 | 57.3 | 2 Neoplasms (any) | 16 | 19.0 |
| Mother's Country of Origin¹ | | | 3 Respiratory System Diseases | 7 | 8.3 |
| | <u>N</u> | <u>%</u> | 4 External Causes | 6 | 7.1 |
| Foreign | 37 | 20.0 | 5 Nervous System Diseases | 3 | 3.6 |
| Mother's Age¹ | | | Average Age at Death | | |
| | <u>N</u> | <u>%</u> | | <u>Total</u> | <u>Male</u> |
| Teenage Mothers | 1 | 0.5 | Total | 79 | 77 |
| | | | White | 79 | 77 |
| | | | Black | -- | -- |
| | | | Other | -- | -- |
| | | | <i>Hispanic²</i> | 85 | -- |
| | | | | | 85 |
| Prenatal Care¹ | | | COMMUNICABLE DISEASES (2018) | | |
| | <u>N</u> | <u>%</u> | | | |
| Late or No Prenatal Care | 23 | 12.4 | Top Five Reported Diseases | <u>N</u> | <u>Rate³</u> |
| | | | 1 Hepatitis C Chronic | 63 | 350.9 |
| | | | 2 Chlamydia | 41 | 228.3 |
| | | | 3 Anaplasmosis | 15 | 83.5 |
| | | | 4 Gonorrhea, Uncomplicated | 8 | 44.6 |
| | | | 5 Lyme Disease | 6 | 33.4 |
| Financial Coverage at Birth¹ | | | | | |
| | <u>N</u> | <u>%</u> | | | |
| MEDICAID, Child Health Plus | 40 | 24.4 | | | |
| Private or Other Insurance | 124 | 75.6 | | | |
| Self Pay | 0 | 0.0 | | | |

¹ Excluding unknown or not stated.
² Hispanics may be of any race.

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | <u>Total</u> | <u>Male</u> | <u>Female</u> | <u>White</u> | <u>Black</u> | <u>Hispanic⁴</u> |
|-----------------------|--------------|-------------|---------------|--------------|--------------|-----------------------------|
| Chlamydia | 41 | 13 | 28 | 3 | 1 | 0 |
| Gonorrhea | 8 | 4 | 4 | 1 | 1 | 1 |
| Syphilis (all stages) | 4 | 2 | 2 | 4 | 0 | 1 |

REGION PROFILE

BEDFORD TOWN

| EMERGENCY ROOM VISITS (2016) ¹ | | | HOSPITALIZATIONS (2016) ¹ | | |
|---|----------|-------------------|--|----------|-------------------|
| | N | Rate (per 10,000) | | N | Rate (per 10,000) |
| Total | 4,067 | 2,284.8 | Total | 1,458 | 819.1 |
| Male | 1,787 | 2,162.9 | Male | 592 | 716.5 |
| Female | 2,280 | 2,390.4 | Female | 866 | 907.9 |
| White | 3,134 | 2,156.0 | White | 1,089 | 749.2 |
| Black | 406 | 3,380.5 | Black | 147 | 1,224.0 |
| Other | 1,053 | 6,282.8 | Other | 331 | 1,974.9 |
| Hispanic ² | 807 | 3,684.9 | Hispanic ² | 163 | 744.3 |
| Under 5 | 275 | 3,005.5 | Under 5 | 209 | 2,284.2 |
| 5-9 | 180 | 1,630.4 | 5-9 | 11 | 99.6 |
| 10-14 | 195 | 1,288.0 | 10-14 | 14 | 92.5 |
| 15-17 | 131 | 1,559.5 | 15-17 | 11 | 131.0 |
| 18-24 | 403 | 3,055.3 | 18-24 | 241 | 1,827.1 |
| 25-44 | 1,044 | 2,335.0 | 25-44 | 210 | 469.7 |
| 45-64 | 970 | 1,837.5 | 45-64 | 250 | 473.6 |
| 65-74 | 318 | 2,442.4 | 65-74 | 194 | 1,490.0 |
| 75+ | 551 | 5,217.8 | 75+ | 318 | 3,011.4 |
| Top Causes of ER Visits | N | % | Top Causes of Hospitalization³ | N | % |
| 1 Injuries | 891 | 21.9 | 1 Circulatory System Diseases | 176 | 12.1 |
| 2 Abdominal Pain | 189 | 4.6 | 2 Other ^A | 111 | 7.6 |
| 3 Infectious And Parasitic Disease | 132 | 3.2 | 3 Digestive System Diseases | 108 | 7.4 |
| 4 Mental Disorders | 126 | 3.1 | 4 Respiratory System Diseases | 89 | 6.1 |
| 5 Acute Respiratory Infections | 118 | 2.9 | 5 Mental & Behavioral Disorders | 83 | 5.7 |
| | | | ^A Musculoskeletal System & Connective Tissue Diseases | | |
| Top Receiving Hospitals | N | % | Top Receiving Hospitals | N | % |
| 1 Northern Westchester Hospital | 2,985 | 73.4 | 1 Northern Westchester Hospital | 824 | 56.5 |
| 2 Westchester Medical Center | 345 | 8.5 | 2 Westchester Medical Center | 197 | 13.5 |
| 3 Mount Vernon Hospital | 210 | 5.2 | 3 Mount Vernon Hospital | 106 | 7.3 |
| Insurance Type | N | % | Insurance Type | N | % |
| Private | 1,606 | 39.5 | Private | 533 | 36.6 |
| Medicare | 852 | 20.9 | Medicare | 480 | 32.9 |
| Medicaid | 865 | 21.3 | Medicaid | 301 | 20.6 |
| Other | 467 | 11.5 | Other | 127 | 8.7 |
| Self-Pay | 277 | 6.8 | Self-Pay | 17 | 1.2 |

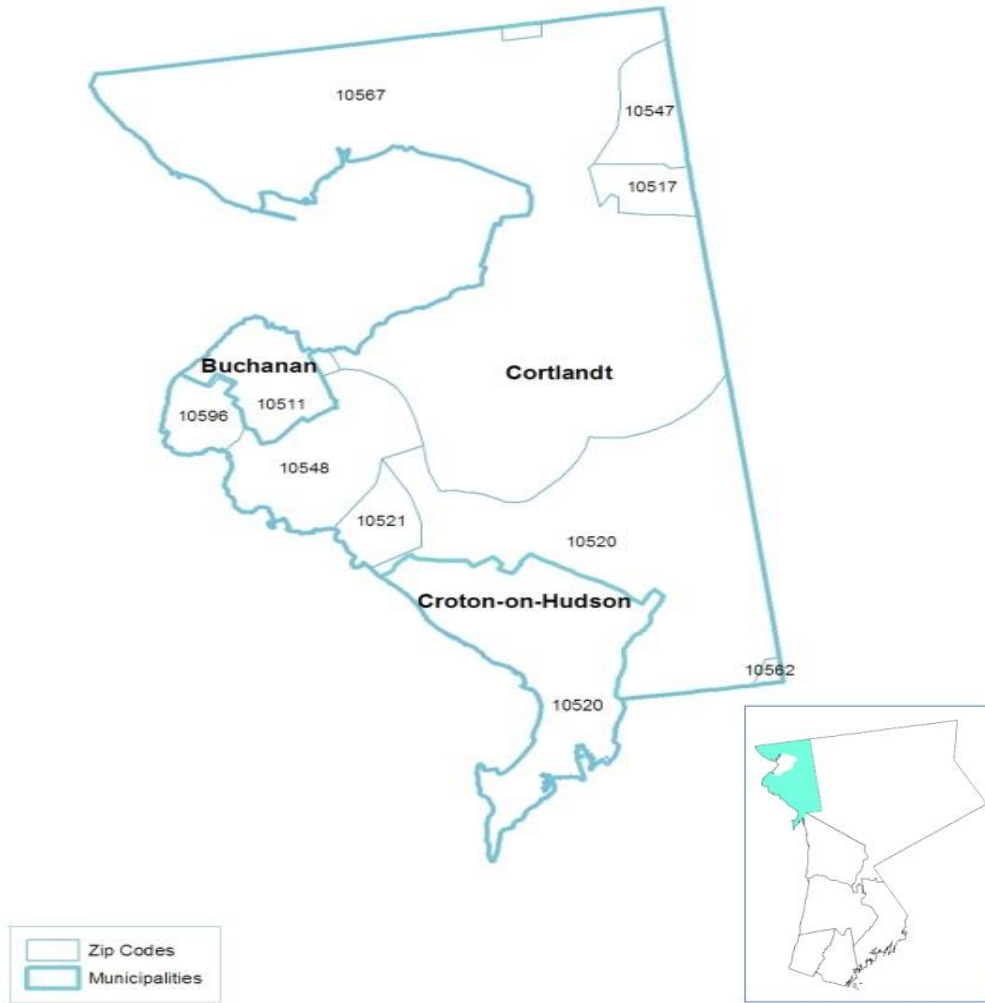
¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ¹ Hispanic may be of any race. ⁵ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:

10506 (50%) 10507 10536 (40%) 10549 (18%), representing 96.2% of the region population according to the 2012-2016 ACS.

REGION PROFILE

CORTLANDT TOWN



Region Area: 41.1 sq miles

Population: 42,816

ZIP Codes Serving the Region

10511 10517 10520* 10521 10537* 10547* 10548
10562* 10567* 10596

* Also serve other regions.

Municipalities Included in Region

Buchanan (V)
Croton-on-Hudson (V)
Cortlandt (TOV)

REGION PROFILE

CORTLANDT TOWN

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | | |
|---|---------|----------------|------------------------------|-----------------------|----------------|-----------------------|------|
| Sex | N | % | | N | % ¹ | | |
| Male | 20,892 | 48.8 | White | 33,622 | 78.5 | | |
| Female | 21,924 | 51.2 | Black | 2,764 | 6.5 | | |
| Total | 42,816 | 100.0 | Other | 6,430 | 15.0 | | |
| | | | Hispanic ¹ | 7,068 | 16.5 | | |
| | | | Non-Hispanic | 35,748 | 83.5 | | |
| Age | Total | Male | Female | White | Black | Hispanic ¹ | |
| 0-4 | 2,201 | 984 | 1,217 | 1,578 | 73 | 732 | |
| 5-9 | 2,378 | 1,270 | 1,108 | 1,608 | 158 | 705 | |
| 10-14 | 3,279 | 1,734 | 1,545 | 2,218 | 314 | 890 | |
| 15-17 | 1,987 | 1,042 | 945 | 1,568 | 169 | 317 | |
| 18-24 | 3,813 | 1,856 | 1,957 | 3,040 | 272 | 452 | |
| 25-44 | 8,369 | 4,040 | 4,329 | 5,871 | 629 | 1,991 | |
| 45-64 | 13,785 | 6,711 | 7,074 | 11,463 | 711 | 1,627 | |
| 65-74 | 3,890 | 1,939 | 1,951 | 3,444 | 267 | 180 | |
| 75+ | 3,114 | 1,316 | 1,798 | 2,832 | 171 | 174 | |
| Country of Origin | N | % | Language Spoken at Home (5+) | | | N | % |
| U.S. | 36,405 | 85.0 | English | 32,703 | | | 80.5 |
| Foreign Countries | 6,411 | 15.0 | Spanish | 4,631 | | | 11.4 |
| Non-Citizen | 1,949 | 4.6 | (Other) non-English | 3,281 | | | 8.1 |
| Education (25+) | Total | Male | Female | | | | |
| Less than High School | 1,905 | 931 | 974 | | | | |
| High School/GED | 5,862 | 2,756 | 3,106 | | | | |
| Some College/Associate Degree | 7,039 | 3,397 | 3,642 | | | | |
| Bachelor's Degree or Higher | 14,352 | 6,922 | 7,430 | | | | |
| Family Structure | Total | White | Black | Hispanic ¹ | | | |
| Total Family Households | 11,286 | 9,176 | 594 | 1,561 | | | |
| Families with Own Children < 18 | 5,205 | -- | -- | -- | | | |
| Single Mother Families with Own Children <18 | 940 | -- | -- | -- | | | |
| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ | |
| Unemployment Rate | 6.2 | 7.4 | 4.9 | 6.0 | 14.5 | 4.8 | |
| Median Household Income (\$) | 103,266 | -- | -- | 106,764 | 61,029 | 69,240 | |
| Poverty Rate (%) | 5.5 | 5.6 | 5.4 | 5.0 | 8.9 | 10.7 | |
| Commuters | N | % ² | | | | | |
| Commuters Using Alternative Mode of Transportation ² | 6,215 | 29.7 | | | | | |

¹ Hispanic may be of any race.² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

CORTLANDT TOWN

| BIRTHS (2016) | | | Birthweight¹ | | |
|--|-----------------|------------------|---|----------------|-------------------------|
| Total Births | 342 | | Low Birthweight | <u>N</u> 30 | <u>%</u> 8.8 |
| Birth Rate (per 1,000) | 8.0 | | | | |
| Average Maternal Age | 32.7 | | | | |
| | | | DEATHS (2016) | | |
| | | | <u>Total</u> | <u>Male</u> | <u>Female</u> |
| Mother's Race/Ethnicity¹ | | | Total Deaths | 408 | 203 |
| White | <u>N</u> 231 | <u>%</u> 67.5 | Death Rate (per 100,000) | 958.3 | 975.9 |
| Black | 26 | 7.6 | | | |
| Other | 85 | 24.9 | | | |
| Hispanic ² | 83 | 24.3 | | | |
| | | | Infant Mortality Rate (per 1,000 live birth) | | 5.8 |
| Mother's Education¹ | | | Top Five Causes of Death | | |
| Less than High School | <u>N</u> 22 | <u>%</u> 6.5 | | <u>N</u> | <u>%</u> |
| High School or GED | 36 | 10.6 | 1 Circulatory System Diseases | 149 | 36.5 |
| Some College (no degree) | 63 | 18.6 | 2 Neoplasms (any) | 78 | 19.1 |
| Bachelor's Degree or above | 218 | 64.3 | 3 Respiratory System Diseases | 52 | 12.7 |
| | | | 4 External Causes | 25 | 6.1 |
| | | | 5 Nervous System Diseases | 18 | 4.4 |
| Mother's Country of Origin¹ | | | Average Age at Death | | |
| Foreign | <u>N</u> 97 | <u>%</u> 28.4 | Total | <u>Male</u> | <u>Female</u> |
| | | | Total | 77 | 73 |
| | | | White | 78 | 74 |
| | | | Black | 68 | 61 |
| | | | Other | 78 | 72 |
| | | | Hispanic ² | 64 | 56 |
| | | | | | |
| Mother's Age¹ | | | COMMUNICABLE DISEASES (2018) | | |
| Teenage Mothers | <u>N</u> 6 | <u>%</u> 1.8 | Top Five Reported Diseases | | |
| | | | | <u>N</u> | <u>Rate³</u> |
| | | | 1 Chlamydia | 75 | 175.2 |
| | | | 2 Hepatitis C Chronic | 31 | 72.4 |
| | | | 3 Anaplasmosis | 18 | 42.0 |
| | | | 4 Babesiosis | 14 | 32.7 |
| | | | 5 Campylobacteriosis | 14 | 32.7 |
| Prenatal Care¹ | | | | | |
| Late or No Prenatal Care | <u>N</u> 51 | <u>%</u> 14.9 | | | |
| Financial Coverage at Birth¹ | | | | | |
| MEDICAID, Child Health Plus | <u>N</u> 71 | <u>%</u> 21.2 | | | |
| Private or Other Insurance | 263 | 78.5 | | | |
| Self Pay | 1 | 0.3 | | | |

¹ Excluding unknown or not stated.
² Hispanics may be of any race.

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | <u>Total</u> | <u>Male</u> | <u>Female</u> | <u>White</u> | <u>Black</u> | <u>Hispanic⁴</u> |
|-----------------------|--------------|-------------|---------------|--------------|--------------|-----------------------------|
| Chlamydia | 75 | 37 | 38 | 9 | 2 | 2 |
| Gonorrhea | 14 | 12 | 2 | 1 | 2 | 4 |
| Syphilis (all stages) | 1 | 1 | 0 | 0 | 0 | 0 |

REGION PROFILE

CORTLANDT TOWN

EMERGENCY ROOM VISITS (2016)¹

| | N | Rate (per 10,000) |
|-----------------------|--------|-------------------|
| Total | 14,690 | 3,450.3 |
| Male | 7,036 | 3,382.4 |
| Female | 7,654 | 3,515.2 |
| White | 10,780 | 3,129.4 |
| Black | 1,093 | 4,613.8 |
| Other | 2,702 | 5,675.3 |
| Hispanic ² | 1,586 | 2,483.2 |

HOSPITALIZATIONS (2016)¹

| | N | Rate (per 10,000) |
|-----------------------|-------|-------------------|
| Total | 4,717 | 1,107.9 |
| Male | 2,272 | 1,092.2 |
| Female | 2,445 | 1,122.9 |
| White | 3,377 | 980.3 |
| Black | 240 | 1,013.1 |
| Other | 819 | 1,720.2 |
| Hispanic ² | 305 | 477.5 |

| | | |
|---------|-------|---------|
| Under 5 | 770 | 3,163.5 |
| 5-9 | 509 | 2,105.0 |
| 10-14 | 707 | 2,210.8 |
| 15-17 | 520 | 2,701.3 |
| 18-24 | 1,279 | 4,098.0 |
| 25-44 | 2,907 | 3,376.7 |
| 45-64 | 3,846 | 2,753.2 |
| 65-74 | 1,480 | 3,751.6 |
| 75+ | 2,672 | 9,036.2 |

| | | |
|---------|-------|---------|
| Under 5 | 392 | 1,610.5 |
| 5-9 | 14 | 57.9 |
| 10-14 | 55 | 172.0 |
| 15-17 | 48 | 249.4 |
| 18-24 | 510 | 1,634.1 |
| 25-44 | 499 | 579.6 |
| 45-64 | 934 | 668.6 |
| 65-74 | 782 | 1,982.3 |
| 75+ | 1,483 | 5,015.2 |

| Top Causes of ER Visits | N | % |
|------------------------------------|-------|------|
| 1 Injuries | 3,343 | 22.8 |
| 2 Infectious And Parasitic Disease | 625 | 4.3 |
| 3 Abdominal Pain | 580 | 3.9 |
| 4 Acute Respiratory Infections | 520 | 3.5 |
| 5 Mental Disorders | 491 | 3.3 |

| Top Causes of Hospitalization ³ | N | % |
|--|-----|------|
| 1 Circulatory System Diseases | 665 | 14.1 |
| 2 Infectious and Parasitic Disease | 452 | 9.6 |
| 3 Digestive System Diseases | 419 | 8.9 |
| 4 Other ⁴ | 357 | 7.6 |
| 5 Respiratory System Diseases | 345 | 7.3 |

⁴ Musculoskeletal System & Connective Tissue Diseases

| Top Receiving Hospitals | N | % |
|-----------------------------------|-------|------|
| 1 NY Presbyterian/Hudson Valley H | 9,892 | 67.3 |
| 2 Phelps Memorial Hospital | 1,902 | 12.9 |
| 3 Westchester Medical Center | 1,169 | 8.0 |

| Top Receiving Hospitals | N | % |
|-----------------------------------|-------|------|
| 1 NY Presbyterian/Hudson Valley H | 2,219 | 47.0 |
| 2 Phelps Memorial Hospital | 629 | 13.3 |
| 3 Westchester Medical Center | 569 | 12.1 |

| Insurance Type | N | % |
|----------------|-------|------|
| Private | 6,578 | 44.8 |
| Medicare | 4,408 | 30.0 |
| Medicaid | 2,491 | 17.0 |
| Other | 463 | 3.2 |
| Self-Pay | 750 | 5.1 |

| Insurance Type | N | % |
|----------------|-------|------|
| Private | 1,806 | 38.3 |
| Medicare | 2,295 | 48.7 |
| Medicaid | 487 | 10.3 |
| Other | 87 | 1.8 |
| Self-Pay | 42 | 0.9 |

¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations: 10511 10517

10520 (85%) 10547 (1/3) 10548 10567 10596, representing 98.6% of the region population according to the 2012-2016 ACS.

REGION PROFILE

EASTCHESTER TOWN



Region Area: 5.0 sq miles

Population: 33,183

ZIP Codes Serving the Region

10583* 10707* 10708* 10709

* Also serve other regions.

Municipalities Included in Region

Bronxville (V)
 Tuckahoe (V)
 Eastchester Unincorporated

REGION PROFILE

EASTCHESTER TOWN

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | | |
|---|---------|----------------|------------------------------|-----------------------|----------------|-----------------------|---|
| Sex | N | % | | N | % ¹ | | |
| Male | 15,580 | 47.0 | White | 28,189 | 85.0 | | |
| Female | 17,603 | 53.0 | Black | 909 | 2.7 | | |
| Total | 33,183 | 100.0 | Other | 4,085 | 12.3 | | |
| | | | Hispanic ¹ | 2,471 | 7.4 | | |
| | | | Non-Hispanic | 30,712 | 92.6 | | |
| Age | Total | Male | Female | White | Black | Hispanic ¹ | |
| 0-4 | 1,681 | 823 | 858 | 1,342 | 28 | 191 | |
| 5-9 | 2,373 | 1,194 | 1,179 | 1,858 | 57 | 108 | |
| 10-14 | 2,156 | 942 | 1,214 | 1,730 | 68 | 92 | |
| 15-17 | 1,243 | 599 | 644 | 1,083 | 20 | 52 | |
| 18-24 | 2,560 | 1,449 | 1,111 | 2,081 | 102 | 278 | |
| 25-44 | 7,782 | 3,832 | 3,950 | 6,192 | 246 | 966 | |
| 45-64 | 9,511 | 4,418 | 5,093 | 8,474 | 306 | 582 | |
| 65-74 | 2,963 | 1,280 | 1,683 | 2,679 | 69 | 135 | |
| 75+ | 2,914 | 1,043 | 1,871 | 2,750 | 13 | 67 | |
| Country of Origin | N | % | Language Spoken at Home (5+) | | | N | % |
| U.S. | 27,137 | 81.8 | English | 24,591 | | 78.1 | |
| Foreign Countries | 6,046 | 18.2 | Spanish | 1,771 | | 5.6 | |
| Non-Citizen | 2,678 | 8.1 | (Other) non-English | 5,140 | | 16.3 | |
| Education (25+) | Total | Male | Female | | | | |
| Less than High School | 1,347 | 614 | 733 | | | | |
| High School/GED | 3,126 | 1,286 | 1,840 | | | | |
| Some College/Associate Degree | 4,684 | 2,141 | 2,543 | | | | |
| Bachelor's Degree or Higher | 14,013 | 6,532 | 7,481 | | | | |
| Family Structure | Total | White | Black | Hispanic ¹ | | | |
| Total Family Households | 8,678 | 7,621 | 234 | 556 | | | |
| Families with Own Children < 18 | 3,966 | -- | -- | -- | | | |
| Single Mother Families with Own Children <18 | 550 | -- | -- | -- | | | |
| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ | |
| Unemployment Rate | 5.7 | 6.7 | 4.6 | 5.5 | 8.4 | 2.7 | |
| Median Household Income (\$) | 116,014 | -- | -- | 116,952 | 113,375 | 77,044 | |
| Poverty Rate (%) | 3.2 | 2.5 | 3.8 | 2.9 | 3.2 | 8.4 | |
| Commuters | N | % ² | | | | | |
| Commuters Using Alternative Mode of Transportation ² | 6,928 | 42.8 | | | | | |

¹ Hispanic may be of any race.² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

EASTCHESTER TOWN

| BIRTHS (2016) | | | Birthweight¹ | | | |
|--|----------|----------|---|-----------------------------|-------------------------|---------------|
| Total Births | 334 | | Low Birthweight | <u>N</u> 24 | <u>%</u> 7.2 | |
| Birth Rate (per 1,000) | 10.2 | | DEATHS (2016) | | | |
| Average Maternal Age | 33.6 | | | <u>Total</u> | <u>Male</u> | <u>Female</u> |
| Mother's Race/Ethnicity¹ | <u>N</u> | <u>%</u> | Total Deaths | 253 | 110 | 143 |
| White | 268 | 80.2 | Death Rate (per 100,000) | 768.9 | 711.3 | 820.0 |
| Black | 7 | 2.1 | Infant Mortality Rate (per 1,000 live birth) | | | |
| Other | 59 | 17.7 | 3.0 | | | |
| Hispanic ² | 39 | 11.7 | Top Five Causes of Death | | | |
| Mother's Education¹ | <u>N</u> | <u>%</u> | | <u>N</u> | <u>%</u> | |
| Less than High School | 3 | 0.9 | 1 | Circulatory System Diseases | 87 | 34.4 |
| High School or GED | 10 | 3.0 | 2 | Neoplasms (any) | 58 | 22.9 |
| Some College (no degree) | 39 | 11.7 | 3 | Respiratory System Diseases | 20 | 7.9 |
| Bachelor's Degree or above | 281 | 84.4 | 4 | Nervous System Diseases | 17 | 6.7 |
| Mother's Country of Origin¹ | <u>N</u> | <u>%</u> | 5 | External Causes | 16 | 6.3 |
| Foreign | 70 | 21.0 | Average Age at Death | | | |
| Mother's Age¹ | <u>N</u> | <u>%</u> | | <u>Total</u> | <u>Male</u> | <u>Female</u> |
| Teenage Mothers | 1 | 0.3 | Total | 79 | 76 | 82 |
| Prenatal Care¹ | <u>N</u> | <u>%</u> | White | 80 | 77 | 83 |
| Late or No Prenatal Care | 40 | 12.0 | Black | 71 | 65 | 81 |
| Financial Coverage at Birth¹ | <u>N</u> | <u>%</u> | Other | 60 | 65 | 56 |
| MEDICAID, Child Health Plus | 24 | 9.4 | Hispanic ² | 55 | 55 | -- |
| Private or Other Insurance | 229 | 90.2 | COMMUNICABLE DISEASES (2018) | | | |
| Self Pay | 1 | 0.4 | Top Five Reported Diseases | <u>N</u> | <u>Rate³</u> | |
| ¹ Excluding unknown or not stated. | | | 1 | Chlymdia | 55 | 165.7 |
| ² Hispanics may be of any race. | | | 2 | Hepatitis C Chronic | 29 | 87.4 |
| | | | 3 | Gonorrhea, Uncomplicated | 15 | 45.2 |
| | | | 4 | Hepatitis B Chronic | 9 | 27.1 |
| | | | 5 | Campylobacteriosis | 8 | 24.1 |

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | <u>Total</u> | <u>Male</u> | <u>Female</u> | <u>White</u> | <u>Black</u> | <u>Hispanic⁴</u> |
|-----------------------|--------------|-------------|---------------|--------------|--------------|-----------------------------|
| Chlamydia | 55 | 22 | 33 | 3 | 4 | 1 |
| Gonorrhea | 15 | 9 | 6 | 2 | 1 | 1 |
| Syphilis (all stages) | 1 | 1 | 0 | 1 | 0 | 0 |

REGION PROFILE

EASTCHESTER TOWN

EMERGENCY ROOM VISITS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 7,410 | 2,252.1 |
| Male | 3,477 | 2,248.3 |
| Female | 3,933 | 2,255.4 |
| White | 6,307 | 2,277.8 |
| Black | 537 | 4,071.3 |
| Other | 1,310 | 3,895.3 |
| Hispanic ² | 666 | 2,696.4 |

HOSPITALIZATIONS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 3,165 | 961.9 |
| Male | 1,431 | 925.3 |
| Female | 1,734 | 994.4 |
| White | 2,884 | 1,041.6 |
| Black | 181 | 1,372.3 |
| Other | 595 | 1,769.3 |
| Hispanic ² | 180 | 728.7 |

| | | |
|---------|-------|---------|
| Under 5 | 398 | 2,326.1 |
| 5-9 | 259 | 1,089.2 |
| 10-14 | 285 | 1,209.7 |
| 15-17 | 236 | 2,247.6 |
| 18-24 | 548 | 2,121.6 |
| 25-44 | 1,372 | 1,772.2 |
| 45-64 | 1,722 | 1,865.5 |
| 65-74 | 822 | 2,889.3 |
| 75+ | 1,768 | 5,879.6 |

| | | |
|---------|-------|---------|
| Under 5 | 315 | 1,841.0 |
| 5-9 | 28 | 117.7 |
| 10-14 | 31 | 131.6 |
| 15-17 | 28 | 266.7 |
| 18-24 | 293 | 1,134.3 |
| 25-44 | 350 | 452.1 |
| 45-64 | 523 | 566.6 |
| 65-74 | 472 | 1,659.1 |
| 75+ | 1,125 | 3,741.3 |

| Top Causes of ER Visits | <u>N</u> | <u>%</u> |
|------------------------------------|----------|----------|
| 1 Injuries | 1,595 | 21.5 |
| 2 Infectious And Parasitic Disease | 295 | 4.0 |
| 3 Mental Disorders | 264 | 3.6 |
| 4 Abdominal Pain | 246 | 3.3 |
| 5 Back, Neck, Or Spine Disorders | 206 | 2.8 |

| Top Causes of Hospitalization³ | <u>N</u> | <u>%</u> |
|--|----------|----------|
| 1 Circulatory System Diseases | 457 | 14.4 |
| 2 Digestive System Diseases | 282 | 8.9 |
| 3 Other ^A | 240 | 7.6 |
| 4 Respiratory System Diseases | 199 | 6.3 |
| 5 Mental and Behavioral Disorders | 198 | 6.3 |

^A Musculoskeletal System & Connective Tissue Diseases

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|--------------------------------|----------|----------|
| 1 NY Presbyterian/Lawrence | 3,704 | 50.0 |
| 2 White Plains Hospital Center | 1,533 | 20.7 |
| 3 Westchester Medical Center | 402 | 5.4 |

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|--------------------------------|----------|----------|
| 1 NY Presbyterian/Lawrence | 1,069 | 33.8 |
| 2 White Plains Hospital Center | 630 | 19.9 |
| 3 NY Presbyterian Columbia | 212 | 6.7 |

| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 4,128 | 55.7 |
| Medicare | 2,505 | 33.8 |
| Medicaid | 299 | 4.0 |
| Other | 243 | 3.3 |
| Self-Pay | 235 | 3.2 |

| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 1,495 | 47.2 |
| Medicare | 1,498 | 47.3 |
| Medicaid | 103 | 3.3 |
| Other | 38 | 1.2 |
| Self-Pay | 31 | 1.0 |

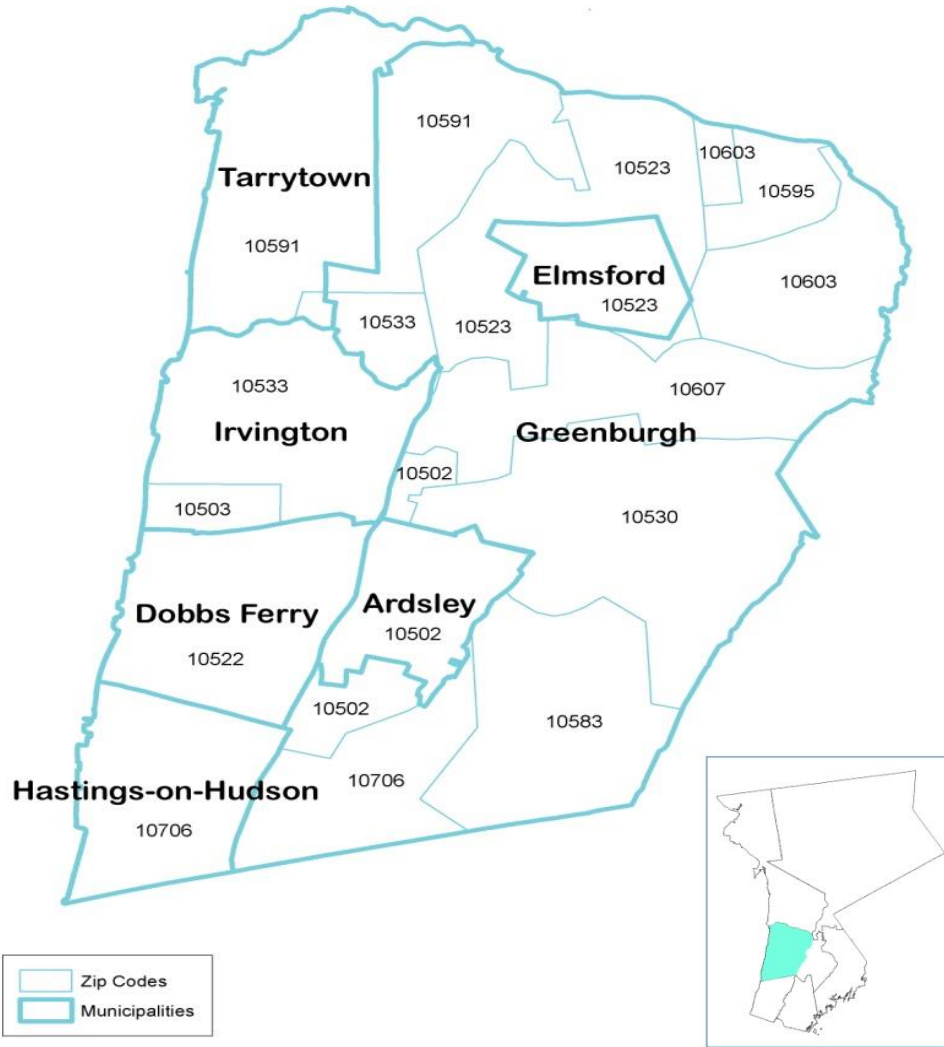
¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:

10583 (15%) 10707 (67%) 10708 (50%) 10709, over representing the region population by 1.0% according to 2012-2016 ACS.

REGION PROFILE

GREENBURGH TOWN



Region Area: 30.4 sq miles

Population: 91,799

ZIP Codes Serving the Region

10502 10503 10522 10523 10530 10533 10583*
 10591* 10595* 10603* 10607 10706

* Also serve other regions.

Municipalities Included in Region

| | |
|------------------------|------------------|
| Ardsley (V) | Irvington (V) |
| Dobbs Ferry (V) | Tarrytown (V) |
| Elmsford (V) | Greenburgh (TOV) |
| Hastings-on-Hudson (V) | |

REGION PROFILE

GREENBURGH TOWN

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | |
|------------------------------|--------|-------|-----------------------|--------|----------------|--|
| Sex | N | % | | N | % ¹ | |
| Male | 44,572 | 48.6 | White | 62,582 | 68.2 | |
| Female | 47,227 | 51.4 | Black | 12,045 | 13.1 | |
| Total | 91,799 | 100.0 | Other | 17,172 | 18.7 | |
| | | | Hispanic ¹ | 13,997 | 15.2 | |
| | | | Non-Hispanic | 77,802 | 84.8 | |

| Age | Total | Male | Female | White | Black | Hispanic ¹ |
|-------|--------|--------|--------|--------|-------|-----------------------|
| 0-4 | 4,885 | 2,299 | 2,586 | 3,236 | 558 | 1,025 |
| 5-9 | 5,208 | 2,972 | 2,236 | 3,173 | 770 | 714 |
| 10-14 | 5,681 | 2,976 | 2,705 | 3,544 | 1,022 | 979 |
| 15-17 | 4,421 | 2,492 | 1,929 | 3,040 | 441 | 891 |
| 18-24 | 6,823 | 3,702 | 3,121 | 4,370 | 1,210 | 1,354 |
| 25-44 | 21,658 | 10,790 | 10,868 | 13,399 | 2,852 | 4,398 |
| 45-64 | 27,471 | 12,943 | 14,528 | 19,518 | 3,431 | 3,564 |
| 65-74 | 8,492 | 3,758 | 4,734 | 6,598 | 958 | 630 |
| 75+ | 7,160 | 2,640 | 4,520 | 5,704 | 803 | 442 |

| Country of Origin | N | % | Language Spoken at Home (5+) | N | % |
|-------------------|--------|------|------------------------------|--------|------|
| U.S. | 70,886 | 77.2 | English | 62,529 | 71.9 |
| Foreign Countries | 20,913 | 22.8 | Spanish | 10,509 | 12.1 |
| Non-Citizen | 8,546 | 9.3 | (Other) non-English | 13,876 | 16.0 |

| Education (25+) | Total | Male | Female |
|-------------------------------|--------|--------|--------|
| Less than High School | 4,301 | 2,233 | 2,068 |
| High School/GED | 8,959 | 3,912 | 5,047 |
| Some College/Associate Degree | 11,773 | 5,704 | 6,069 |
| Bachelor's Degree or Higher | 39,748 | 18,282 | 21,466 |

| Family Structure | Total | White | Black | Hispanic ¹ |
|--|--------|--------|-------|-----------------------|
| Total Family Households | 23,062 | 16,317 | 2,896 | 2,958 |
| Families with Own Children < 18 | 10,114 | -- | -- | -- |
| Single Mother Families with Own Children <18 | 1,312 | -- | -- | -- |

| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ |
|------------------------------|---------|------|--------|---------|--------|-----------------------|
| Unemployment Rate | 5.5 | 5.5 | 5.5 | 5.0 | 10.1 | 5.3 |
| Median Household Income (\$) | 120,256 | -- | -- | 126,440 | 92,546 | 89,366 |
| Poverty Rate (%) | 4.8 | 3.7 | 5.8 | 3.9 | 9.6 | 5.5 |

| Commuters | N | % |
|---|--------|------|
| Commuters Using Alternative Mode of Transportation ² | 19,562 | 40.5 |

¹ Hispanic may be of any race.

² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

GREENBURGH TOWN

| BIRTHS (2016) | | | Birthweight¹ | | | | | | |
|--|----------|----------|--|-----------------------------|-------------------------|---------------|--------------|--------------|-----------------------------|
| Total Births | 883 | | Low Birthweight | <u>N</u> 61 | <u>%</u> 6.9 | | | | |
| Birth Rate (per 1,000) | 9.7 | | DEATHS (2016) | | | | | | |
| Average Maternal Age | 33.2 | | | <u>Total</u> | <u>Male</u> | <u>Female</u> | | | |
| Mother's Race/Ethnicity¹ | <u>N</u> | <u>%</u> | Total Deaths | 644 | 301 | 343 | | | |
| White | 516 | 58.4 | Death Rate (per 100,000) | 705.5 | 682.1 | 727.4 | | | |
| Black | 85 | 9.6 | Infant Mortality Rate (per 1,000 live birth) | | | | | | |
| Other | 282 | 31.9 | 1.1 | | | | | | |
| <i>Hispanic²</i> | 196 | 22.2 | Top Five Causes of Death | | | | | | |
| Mother's Education¹ | <u>N</u> | <u>%</u> | | <u>N</u> | <u>%</u> | | | | |
| Less than High School | 42 | 4.8 | 1 | Circulatory System Diseases | 237 | 36.8 | | | |
| High School or GED | 66 | 7.5 | 2 | Neoplasms (any) | 167 | 25.9 | | | |
| Some College (no degree) | 126 | 14.3 | 3 | Respiratory System Diseases | 46 | 7.1 | | | |
| Bachelor's Degree or above | 649 | 73.5 | 4 | External Causes | 36 | 5.6 | | | |
| Mother's Country of Origin¹ | <u>N</u> | <u>%</u> | 5 | Infectious Diseases | 23 | 3.6 | | | |
| Foreign | 328 | 37.1 | Average Age at Death | | | | | | |
| Mother's Age¹ | <u>N</u> | <u>%</u> | | <u>Total</u> | <u>Male</u> | <u>Female</u> | | | |
| Teenage Mothers | 6 | 0.7 | Total | 79 | 76 | 82 | | | |
| Prenatal Care¹ | <u>N</u> | <u>%</u> | White | 81 | 78 | 83 | | | |
| Late or No Prenatal Care | 107 | 12.1 | Black | 73 | 69 | 78 | | | |
| Financial Coverage at Birth¹ | <u>N</u> | <u>%</u> | Other | 68 | 66 | 69 | | | |
| MEDICAID, Child Health Plus | 121 | 15.6 | <i>Hispanic²</i> | 73 | 68 | 79 | | | |
| Private or Other Insurance | 650 | 84.0 | COMMUNICABLE DISEASES (2018) | | | | | | |
| Self Pay | 3 | 0.4 | | <u>N</u> | <u>Rate³</u> | | | | |
| Mother's Age¹ | <u>N</u> | <u>%</u> | 1 | Chlamydia | 255 | 277.8 | | | |
| Teenage Mothers | 6 | 0.7 | 2 | Gonorrhea, Uncomplicated | 65 | 70.8 | | | |
| Prenatal Care¹ | <u>N</u> | <u>%</u> | 3 | Hepatitis C Chronic | 44 | 47.9 | | | |
| Late or No Prenatal Care | 107 | 12.1 | 4 | Lyme Disease | 24 | 26.1 | | | |
| Financial Coverage at Birth¹ | <u>N</u> | <u>%</u> | 5 | Campylobacteriosis | 23 | 25.1 | | | |
| MEDICAID, Child Health Plus | 121 | 15.6 | MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018) | | | | | | |
| Private or Other Insurance | 650 | 84.0 | | <u>Total</u> | <u>Male</u> | <u>Female</u> | <u>White</u> | <u>Black</u> | <u>Hispanic⁴</u> |
| Self Pay | 3 | 0.4 | Chlamydia | 255 | 110 | 145 | 17 | 17 | 8 |
| Mother's Age¹ | <u>N</u> | <u>%</u> | Gonorrhea | 65 | 42 | 23 | 9 | 7 | 5 |
| Teenage Mothers | 6 | 0.7 | Syphilis (all stages) | 10 | 9 | 1 | 3 | 1 | 0 |
| Prenatal Care¹ | <u>N</u> | <u>%</u> | | | | | | | |
| Late or No Prenatal Care | 107 | 12.1 | | | | | | | |
| Financial Coverage at Birth¹ | <u>N</u> | <u>%</u> | | | | | | | |
| MEDICAID, Child Health Plus | 121 | 15.6 | | | | | | | |
| Private or Other Insurance | 650 | 84.0 | | | | | | | |
| Self Pay | 3 | 0.4 | | | | | | | |

¹ Excluding unknown or not stated.

² Hispanics may be of any race.

REGION PROFILE

GREENBURGH TOWN

EMERGENCY ROOM VISITS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 26,836 | 2,939.9 |
| Male | 12,387 | 2,807.0 |
| Female | 14,449 | 3,064.2 |
| White | 16,222 | 2,595.8 |
| Black | 4,879 | 4,131.6 |
| Other | 6,787 | 4,704.7 |
| Hispanic ² | 5,141 | 4,663.5 |

HOSPITALIZATIONS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 9,125 | 999.6 |
| Male | 4,016 | 910.1 |
| Female | 5,109 | 1,083.5 |
| White | 6,560 | 1,049.7 |
| Black | 1,302 | 1,102.5 |
| Other | 2,227 | 1,543.7 |
| Hispanic ² | 1,166 | 1,057.7 |

| | | |
|---------|-------|---------|
| Under 5 | 1,689 | 3,814.4 |
| 5-9 | 1,137 | 2,157.1 |
| 10-14 | 1,192 | 2,034.1 |
| 15-17 | 1,074 | 2,442.0 |
| 18-24 | 2,292 | 3,431.1 |
| 25-44 | 5,779 | 2,676.6 |
| 45-64 | 6,381 | 2,317.0 |
| 65-74 | 2,603 | 3,172.8 |
| 75+ | 4,689 | 6,413.6 |

| | | |
|---------|-------|---------|
| Under 5 | 994 | 2,244.8 |
| 5-9 | 88 | 167.0 |
| 10-14 | 132 | 225.3 |
| 15-17 | 138 | 313.8 |
| 18-24 | 1,177 | 1,762.0 |
| 25-44 | 1,063 | 492.3 |
| 45-64 | 1,556 | 565.0 |
| 65-74 | 1,295 | 1,578.5 |
| 75+ | 2,682 | 3,668.4 |

| Top Causes of ER Visits | <u>N</u> | <u>%</u> |
|------------------------------------|----------|----------|
| 1 Injuries | 5,577 | 20.8 |
| 2 Infectious And Parasitic Disease | 1,256 | 4.7 |
| 3 Mental Disorders | 1,226 | 4.6 |
| 4 Abdominal Pain | 895 | 3.3 |
| 5 Acute Respiratory Infections | 895 | 3.3 |

| Top Causes of Hospitalization³ | <u>N</u> | <u>%</u> |
|--|----------|----------|
| 1 Circulatory System Diseases | 1,167 | 12.8 |
| 2 Mental & Behavioral Disorders | 885 | 9.7 |
| 3 Digestive System Diseases | 743 | 8.1 |
| 4 Infectious And Parasitic Disease | 618 | 6.8 |
| 5 Other ^A | 602 | 6.6 |

^A Musculoskeletal System & Connective Tissue Diseases

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|--------------------------------|----------|----------|
| 1 White Plains Hospital Center | 7,888 | 29.4 |
| 2 Westchester Medical Center | 4,977 | 18.5 |
| 3 Phelps Memorial Hospital | 4,737 | 17.7 |

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|--------------------------------|----------|----------|
| 1 White Plains Hospital Center | 2,549 | 27.9 |
| 2 Westchester Medical Center | 1,446 | 15.8 |
| 3 Phelps Memorial Hospital | 1,196 | 13.1 |

| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 13,758 | 51.3 |
| Medicare | 7,087 | 26.4 |
| Medicaid | 3,951 | 14.7 |
| Other | 968 | 3.6 |
| Self-Pay | 1,072 | 4.0 |

| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 4,380 | 48.0 |
| Medicare | 3,612 | 39.6 |
| Medicaid | 940 | 10.3 |
| Other | 108 | 1.2 |
| Self-Pay | 85 | 0.9 |

¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:

10502 10503 10522 10523 10530 10533 10583 (11%) 10591 (62%) 10595 (1%) 10603 (60%) 10607 10706, representing 99.9% of the region population according to the 2012-2016 ACS.

REGION PROFILE

HARRISON TOWN/VILLAGE



Region Area: 17.4 sq miles

Population: 28,319

ZIP Codes Serving the Region

10528 10577 10580* 10604*

* Also serve other regions.

Municipalities Included in Region

Harrison (TOV)

REGION PROFILE

HARRISON TOWN/VILLAGE

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | | |
|---|---------|----------------|------------------------------|-----------------------|----------------|-----------------------|------|
| Sex | N | % | | N | % ¹ | | |
| Male | 13,685 | 48.3 | White | 22,253 | 78.6 | | |
| Female | 14,634 | 51.7 | Black | 1,288 | 4.5 | | |
| Total | 28,319 | 100.0 | Other | 4,778 | 16.9 | | |
| | | | Hispanic ¹ | 3,511 | 12.4 | | |
| | | | Non-Hispanic | 24,808 | 87.6 | | |
| Age | Total | Male | Female | White | Black | Hispanic ¹ | |
| 0-4 | 1,360 | 674 | 686 | 1,013 | 50 | 301 | |
| 5-9 | 1,522 | 772 | 750 | 1,024 | 5 | 182 | |
| 10-14 | 2,083 | 1,050 | 1,033 | 1,514 | 119 | 321 | |
| 15-17 | 1,162 | 627 | 535 | 949 | 59 | 76 | |
| 18-24 | 5,250 | 2,264 | 2,986 | 3,717 | 695 | 953 | |
| 25-44 | 5,869 | 3,077 | 2,792 | 4,425 | 215 | 813 | |
| 45-64 | 7,152 | 3,504 | 3,648 | 5,975 | 143 | 629 | |
| 65-74 | 1,867 | 841 | 1,026 | 1,718 | 1 | 172 | |
| 75+ | 2,054 | 876 | 1,178 | 1,918 | 1 | 64 | |
| Country of Origin | N | % | Language Spoken at Home (5+) | | | N | % |
| U.S. | 21,781 | 76.9 | English | 18,742 | | | 69.5 |
| Foreign Countries | 6,538 | 23.1 | Spanish | 2,255 | | | 8.4 |
| Non-Citizen | 3,769 | 13.3 | (Other) non-English | 5,962 | | | 22.1 |
| Education (25+) | Total | Male | Female | | | | |
| Less than High School | 1,414 | 779 | 635 | | | | |
| High School/GED | 3,167 | 1,322 | 1,845 | | | | |
| Some College/Associate Degree | 3,205 | 1,440 | 1,765 | | | | |
| Bachelor's Degree or Higher | 9,156 | 4,757 | 4,399 | | | | |
| Family Structure | Total | White | Black | Hispanic ¹ | | | |
| Total Family Households | 6,312 | 5,254 | 99 | 482 | | | |
| Families with Own Children < 18 | 2,996 | -- | -- | -- | | | |
| Single Mother Families with Own Children <18 | 293 | -- | -- | -- | | | |
| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ | |
| Unemployment Rate | 7.5 | 8.6 | 6.1 | 7.2 | 12.6 | 8.5 | |
| Median Household Income (\$) | 117,453 | -- | -- | 118,716 | 133,036 | 70,750 | |
| Poverty Rate (%) | 6.6 | 6.5 | 6.8 | 6.0 | 19.3 | 16.9 | |
| Commuters | N | % ² | | | | | |
| Commuters Using Alternative Mode of Transportation ² | 5,263 | 41.5 | | | | | |

¹ Hispanic may be of any race.² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

HARRISON TOWN/VILLAGE

| BIRTHS (2016) | | | Birthweight¹ | | |
|--|----------|----------|---|----------------|-------------------------|
| Total Births | 204 | | Low Birthweight | <u>N</u> 13 | <u>%</u> 6.4 |
| Birth Rate (per 1,000) | 7.3 | | | | |
| Average Maternal Age | 33.2 | | | | |
| Mother's Race/Ethnicity¹ | | | DEATHS (2016) | | |
| | <u>N</u> | <u>%</u> | | <u>Total</u> | <u>Male</u> |
| White | 154 | 75.5 | Total Deaths | 168 | 83 |
| Black | 7 | 3.4 | Death Rate (per 100,000) | 598.2 | 613.5 |
| Other | 43 | 21.1 | | | 85 |
| Hispanic ² | 37 | 18.1 | | | 584.1 |
| Mother's Education¹ | | | | | |
| | <u>N</u> | <u>%</u> | Infant Mortality Rate (per 1,000 live birth) | | 0.0 |
| Less than High School | 3 | 1.5 | | | |
| High School or GED | 28 | 13.7 | | | |
| Some College (no degree) | 30 | 14.7 | | | |
| Bachelor's Degree or above | 143 | 70.1 | | | |
| Mother's Country of Origin¹ | | | | | |
| | <u>N</u> | <u>%</u> | Top Five Causes of Death | <u>N</u> | <u>%</u> |
| Foreign | 58 | 28.4 | 1 Circulatory System Diseases | 65 | 38.7 |
| | | | 2 Neoplasms (any) | 38 | 22.6 |
| | | | 3 Respiratory System Diseases | 18 | 10.7 |
| | | | 4 Nervous System Diseases | 10 | 6.0 |
| | | | 5 External Causes | 8 | 4.8 |
| Mother's Age¹ | | | | | |
| | <u>N</u> | <u>%</u> | Average Age at Death | <u>Total</u> | <u>Male</u> |
| Teenage Mothers | 1 | 0.5 | Total | 79 | 78 |
| | | | White | 80 | 78 |
| | | | Black | 76 | -- |
| | | | Other | 69 | 93 |
| | | | Hispanic ² | 63 | 79 |
| | | | | | 44 |
| | | | | | 47 |
| Prenatal Care¹ | | | | | |
| | <u>N</u> | <u>%</u> | | | |
| Late or No Prenatal Care | 24 | 11.8 | | | |
| Financial Coverage at Birth¹ | | | | | |
| | <u>N</u> | <u>%</u> | COMMUNICABLE DISEASES (2018) | | |
| MEDICAID, Child Health Plus | 17 | 14.7 | | | |
| Private or Other Insurance | 99 | 85.3 | Top Five Reported Diseases | <u>N</u> | <u>Rate³</u> |
| Self Pay | 0 | 0.0 | 1 Chlamydia | 87 | 307.2 |
| | | | 2 Gonorrhea, Uncomplicated | 10 | 35.3 |
| | | | 3 Hepatitis C Chronic | 9 | 31.8 |
| | | | 4 Campylobacteriosis | 8 | 28.2 |
| | | | 5 Meningitis, Aseptic | 4 | 14.1 |

¹ Excluding unknown or not stated.

² Hispanics may be of any race.

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | <u>Total</u> | <u>Male</u> | <u>Female</u> | <u>White</u> | <u>Black</u> | <u>Hispanic⁴</u> |
|-----------------------|--------------|-------------|---------------|--------------|--------------|-----------------------------|
| Chlamydia | 87 | 33 | 54 | 8 | 3 | 3 |
| Gonorrhea | 10 | 10 | 0 | 1 | 0 | 2 |
| Syphilis (all stages) | 2 | 2 | 0 | 1 | 0 | 0 |

REGION PROFILE

HARRISON TOWN/VILLAGE

EMERGENCY ROOM VISITS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 4,267 | 1,519.5 |
| Male | 2,075 | 1,533.6 |
| Female | 2,191 | 1,505.6 |
| White | 2,930 | 1,326.2 |
| Black | 417 | 5,906.5 |
| Other | 1,138 | 2,486.3 |
| Hispanic ² | 916 | 2,158.3 |

HOSPITALIZATIONS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 1,741 | 620.0 |
| Male | 852 | 629.7 |
| Female | 889 | 610.9 |
| White | 1,357 | 614.2 |
| Black | 148 | 2,096.3 |
| Other | 390 | 852.1 |
| Hispanic ² | 198 | 466.5 |

| | | |
|---------|-------|---------|
| Under 5 | 276 | 2,495.5 |
| 5-9 | 168 | 1,013.3 |
| 10-14 | 201 | 1,017.7 |
| 15-17 | 168 | 1,293.3 |
| 18-24 | 444 | 810.4 |
| 25-44 | 947 | 1,740.2 |
| 45-64 | 1,058 | 1,490.4 |
| 65-74 | 356 | 1,848.4 |
| 75+ | 649 | 3,093.4 |

| | | |
|---------|-----|---------|
| Under 5 | 150 | 1,356.2 |
| 5-9 | 24 | 144.8 |
| 10-14 | 33 | 167.1 |
| 15-17 | 29 | 223.2 |
| 18-24 | 232 | 423.4 |
| 25-44 | 213 | 391.4 |
| 45-64 | 336 | 473.3 |
| 65-74 | 247 | 1,282.5 |
| 75+ | 477 | 2,273.6 |

| Top Causes of ER Visits | <u>N</u> | <u>%</u> |
|------------------------------------|----------|----------|
| 1 Injuries | 796 | 18.7 |
| 2 Mental Disorders | 229 | 5.4 |
| 3 Abdominal Pain | 175 | 4.1 |
| 4 Abuse of Drugs or Alcohol | 163 | 3.8 |
| 5 Infectious and Parasitic Disease | 159 | 3.7 |

| Top Causes of Hospitalization³ | <u>N</u> | <u>%</u> |
|--|----------|----------|
| 1 Circulatory System Diseases | 241 | 13.8 |
| 2 Mental & Behavioral Disorders | 217 | 12.5 |
| 3 Digestive System Diseases | 157 | 9.0 |
| 4 Other ^A | 146 | 8.4 |
| 5 Respiratory System Diseases | 134 | 7.7 |

^A Musculoskeletal System & Connective Tissue Diseases

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|--------------------------------|----------|----------|
| 1 White Plains Hospital Center | 2,907 | 68.1 |
| 2 Westchester Medical Center | 473 | 11.1 |
| 3 Montefiore New Rochelle | 102 | 2.4 |

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|--------------------------------|----------|----------|
| 1 White Plains Hospital Center | 890 | 51.1 |
| 2 Westchester Medical Center | 173 | 9.9 |
| 3 St Vincents Westchester | 103 | 5.9 |

| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 2,515 | 58.9 |
| Medicare | 1,050 | 24.6 |
| Medicaid | 386 | 9.0 |
| Other | 130 | 3.0 |
| Self-Pay | 186 | 4.4 |

| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 906 | 52.0 |
| Medicare | 674 | 38.7 |
| Medicaid | 123 | 7.1 |
| Other | 22 | 1.3 |
| Self-Pay | 16 | 0.9 |

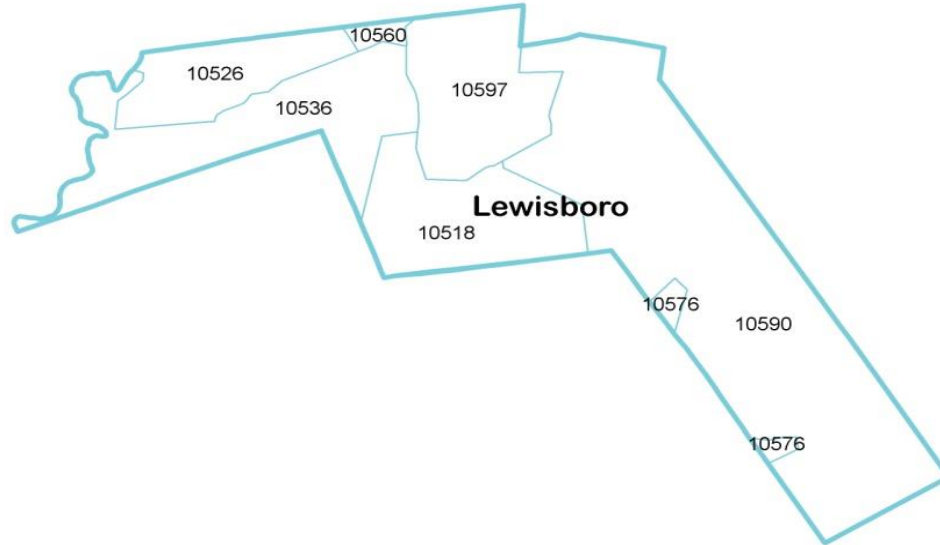
¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:

10528 10577 10580 (9%) 10604 (63%), over representing the region population by 0.3% according to the 2012-2016 ACS.

REGION PROFILE

LEWISBORO TOWN



Region Area: 29.3 sq miles

Population: 12,741

ZIP Codes Serving the Region

10518 10526 10536* 10560* 10576* 10590
10597

* Also serve other regions.

Municipalities Included in Region

Lewisboro (T)

REGION PROFILE

LEWISBORO TOWN

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | |
|------------------------------|--------|-------|-----------------------|--------|----------------|--|
| Sex | N | % | | N | % ¹ | |
| Male | 6,158 | 48.3 | White | 11,579 | 90.9 | |
| Female | 6,583 | 51.7 | Black | 423 | 3.3 | |
| Total | 12,741 | 100.0 | Other | 739 | 5.8 | |
| | | | Hispanic ¹ | 734 | 5.8 | |
| | | | Non-Hispanic | 12,007 | 94.2 | |

| Age | Total | Male | Female | White | Black | Hispanic ¹ |
|-------|-------|-------|--------|-------|-------|-----------------------|
| 0-4 | 655 | 347 | 308 | 532 | 33 | 130 |
| 5-9 | 788 | 433 | 355 | 741 | 23 | 24 |
| 10-14 | 889 | 364 | 525 | 834 | 0 | 52 |
| 15-17 | 565 | 229 | 336 | 428 | 63 | 36 |
| 18-24 | 942 | 488 | 454 | 933 | 0 | 0 |
| 25-44 | 2,173 | 984 | 1,189 | 1,867 | 103 | 360 |
| 45-64 | 4,566 | 2,257 | 2,309 | 4,202 | 188 | 110 |
| 65-74 | 1,361 | 633 | 728 | 1,277 | 13 | 22 |
| 75+ | 802 | 423 | 379 | 765 | 0 | 0 |

| Country of Origin | N | % | Language Spoken at Home (5+) | N | % |
|-------------------|--------|------|------------------------------|--------|------|
| U.S. | 11,280 | 88.5 | English | 10,622 | 87.9 |
| Foreign Countries | 1,461 | 11.5 | Spanish | 338 | 2.8 |
| Non-Citizen | 359 | 2.8 | (Other) non-English | 1,126 | 9.3 |

| Education (25+) | Total | Male | Female |
|-------------------------------|-------|------|--------|
| Less than High School | 258 | 93 | 165 |
| High School/GED | 861 | 475 | 386 |
| Some College/Associate Degree | 1460 | 734 | 726 |
| Bachelor's Degree or Higher | 6323 | 2995 | 3328 |

| Family Structure | Total | White | Black | Hispanic ¹ |
|--|-------|-------|-------|-----------------------|
| Total Family Households | 3,579 | 3,297 | 109 | 220 |
| Families with Own Children < 18 | 1,526 | -- | -- | -- |
| Single Mother Families with Own Children <18 | 79 | -- | -- | -- |

| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ |
|------------------------------|---------|------|--------|---------|---------|-----------------------|
| Unemployment Rate | 5.2 | 5.5 | 4.9 | 5.3 | 4.6 | 0.0 |
| Median Household Income (\$) | 148,824 | -- | -- | 153,125 | 171,129 | 118,646 |
| Poverty Rate (%) | 3.7 | 4.8 | 2.7 | 3.7 | 3.1 | 1.4 |

| Commuters | N | % |
|---|-------|------|
| Commuters Using Alternative Mode of Transportation ² | 1,883 | 30.1 |

¹ Hispanic may be of any race.

² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

LEWISBORO TOWN

| BIRTHS (2016) | | | Birthweight¹ | | | |
|--|----------|----------|---|---------------|-------------------------|---------------|
| Total Births | 81 | | Low Birthweight | <u>N</u> 7 | <u>%</u> 8.6 | |
| Birth Rate (per 1,000) | 6.4 | | DEATHS (2016) | | | |
| Average Maternal Age | 33.1 | | | <u>Total</u> | <u>Male</u> | <u>Female</u> |
| Mother's Race/Ethnicity¹ | <u>N</u> | <u>%</u> | Total Deaths | 63 | 32 | 31 |
| White | 73 | 90.1 | Death Rate (per 100,000) | 497.3 | 509.3 | 485.5 |
| Black | 1 | 1.2 | Infant Mortality Rate (per 1,000 live birth) | | | |
| Other | 7 | 8.6 | 12.3 | | | |
| Hispanic ² | 5 | 6.2 | Top Five Causes of Death | | | |
| Mother's Education¹ | <u>N</u> | <u>%</u> | | <u>N</u> | <u>%</u> | |
| Less than High School | 1 | 1.2 | 1 Neoplasms (any) | 21 | 33.3 | |
| High School or GED | 5 | 6.2 | 2 Circulatory System Diseases | 15 | 23.8 | |
| Some College (no degree) | 10 | 12.3 | 3 Respiratory System Diseases | 6 | 9.5 | |
| Bachelor's Degree or above | 65 | 80.2 | 4 Digestive System Diseases | 4 | 6.3 | |
| Mother's Country of Origin¹ | <u>N</u> | <u>%</u> | 5 External Causes | 3 | 4.8 | |
| Foreign | 11 | 13.6 | Average Age at Death | | | |
| Mother's Age¹ | <u>N</u> | <u>%</u> | | <u>Total</u> | <u>Male</u> | <u>Female</u> |
| Teenage Mothers | 1 | 1.2 | Total | 73 | 72 | 74 |
| Prenatal Care¹ | <u>N</u> | <u>%</u> | White | 74 | 74 | 74 |
| Late or No Prenatal Care | 10 | 12.3 | Black | -- | -- | -- |
| Financial Coverage at Birth¹ | <u>N</u> | <u>%</u> | Other | 0 | 0 | -- |
| MEDICAID, Child Health Plus | 4 | 6.3 | Hispanic ² | -- | -- | -- |
| Private or Other Insurance | 60 | 93.8 | COMMUNICABLE DISEASES (2018) | | | |
| Self Pay | 0 | 0.0 | Top Five Reported Diseases | <u>N</u> | <u>Rate³</u> | |
| ¹ Excluding unknown or not stated. | | | 1 Chlamydia | 19 | 149.1 | |
| ² Hispanics may be of any race. | | | 2 Babesiosis | 6 | 47.1 | |
| | | | 3 Pertussis | 5 | 39.2 | |
| | | | 4 Campylobacteriosis | 4 | 31.4 | |
| | | | 5 Anaplasmosis | 3 | 23.5 | |

| MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018) | | | | | | |
|--|--------------|-------------|---------------|--------------|--------------|-----------------------------|
| | <u>Total</u> | <u>Male</u> | <u>Female</u> | <u>White</u> | <u>Black</u> | <u>Hispanic⁴</u> |
| Chlamydia | 19 | 8 | 11 | 3 | 0 | 0 |
| Gonorrhea | 2 | 1 | 1 | 0 | 0 | 0 |
| Syphilis (all stages) | 2 | 2 | 0 | 2 | 0 | 1 |

REGION PROFILE

LEWISBORO TOWN

| EMERGENCY ROOM VISITS (2016) ¹ | | | HOSPITALIZATIONS (2016) ¹ | | |
|---|----------|-------------------|--|----------|-------------------|
| | N | Rate (per 10,000) | | N | Rate (per 10,000) |
| Total | 1,684 | 1,329.3 | Total | 684 | 539.9 |
| Male | 828 | 1,317.8 | Male | 315 | 501.4 |
| Female | 856 | 1,340.6 | Female | 369 | 577.9 |
| White | 1,580 | 1,379.4 | White | 574 | 501.1 |
| Black | 64 | 5,120.0 | Black | 17 | 1,360.0 |
| Other | 241 | 2,808.9 | Other | 93 | 1,083.9 |
| Hispanic ² | 87 | 1,679.5 | Hispanic ² | 24 | 463.3 |
| Under 5 | 94 | 1,587.8 | Under 5 | 67 | 1,131.8 |
| 5-9 | 56 | 638.5 | 5-9 | 9 | 102.6 |
| 10-14 | 88 | 953.4 | 10-14 | 4 | 43.3 |
| 15-17 | 77 | 1,112.7 | 15-17 | 4 | 57.8 |
| 18-24 | 147 | 1,458.3 | 18-24 | 78 | 773.8 |
| 25-44 | 290 | 1,398.9 | 25-44 | 82 | 395.6 |
| 45-64 | 486 | 1,052.9 | 45-64 | 149 | 322.8 |
| 65-74 | 193 | 1,595.0 | 65-74 | 130 | 1,074.4 |
| 75+ | 253 | 3,737.1 | 75+ | 161 | 2,378.1 |
| Top Causes of ER Visits | N | % | Top Causes of Hospitalization³ | N | % |
| 1 Injuries | 422 | 25.1 | 1 Circulatory System Diseases | 94 | 13.7 |
| 2 Abdominal Pain | 69 | 4.1 | 2 Other ^A | 69 | 10.1 |
| 3 Infectious And Parasitic Disease | 50 | 3.0 | 3 Neoplasms | 58 | 8.5 |
| 4 Acute Respiratory Infections | 49 | 2.9 | 4 Digestive System Diseases | 53 | 7.7 |
| 5 Mental Disorders | 48 | 2.9 | 5 Respiratory System Diseases | 53 | 7.7 |
| | | | ^A Musculoskeletal System & Connective Tissue Diseases | | |
| Top Receiving Hospitals | N | % | Top Receiving Hospitals | N | % |
| 1 Northern Westchester Hospital | 1,213 | 72.0 | 1 Northern Westchester Hospital | 398 | 58.2 |
| 2 Westchester Medical Center | 132 | 7.8 | 2 Westchester Medical Center | 80 | 11.7 |
| 3 Putnam Hospital Center | 92 | 5.5 | 3 Putnam Hospital Center | 29 | 4.2 |
| Insurance Type | N | % | Insurance Type | N | % |
| Private | 961 | 57.1 | Private | 351 | 51.3 |
| Medicare | 439 | 26.1 | Medicare | 278 | 40.6 |
| Medicaid | 203 | 12.1 | Medicaid | 46 | 6.7 |
| Other | 29 | 1.7 | Other | 4 | 0.6 |
| Self-Pay | 52 | 3.1 | Self-Pay | 5 | 0.7 |

¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:

10518 10526 10536 (10%) 10590 10597, representing 96.0% of the region population according to the 2012-2016 ACS.

REGION PROFILE

MAMARONECK TOWN



Region Area: 6.6 sq miles
 Population: 29,945

ZIP Codes Serving the Region

10538 10543* 10583*

* Also serve other regions.

Municipalities Included in Region

- Larchmont (V)
- Mamaroneck (V) (Mamaroneck part)
- Mamaroneck (TOV)

REGION PROFILE

MAMARONECK TOWN

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | |
|---|---------|----------------|-----------------------|------------------------------|----------------|-----------------------|
| Sex | N | % | | N | % ¹ | |
| Male | 14,759 | 49.3 | White | 24,453 | 81.7 | |
| Female | 15,186 | 50.7 | Black | 1,175 | 3.9 | |
| Total | 29,945 | 100.0 | Other | 4,317 | 14.4 | |
| | | | Hispanic ¹ | 5,308 | 17.7 | |
| | | | Non-Hispanic | 24,637 | 82.3 | |
| Age | Total | Male | Female | White | Black | Hispanic ¹ |
| 0-4 | 2,197 | 1,145 | 1,052 | 1,629 | 56 | 484 |
| 5-9 | 1,989 | 1,082 | 907 | 1,494 | 27 | 265 |
| 10-14 | 2,485 | 1,260 | 1,225 | 2,030 | 83 | 566 |
| 15-17 | 1,194 | 809 | 385 | 992 | 45 | 259 |
| 18-24 | 1,791 | 838 | 953 | 1,500 | 20 | 529 |
| 25-44 | 7,376 | 3,607 | 3,769 | 5,584 | 377 | 1,577 |
| 45-64 | 8,508 | 4,058 | 4,450 | 7,246 | 448 | 1,265 |
| 65-74 | 2,134 | 1,073 | 1,061 | 1,866 | 55 | 145 |
| 75+ | 2,271 | 887 | 1,384 | 2,112 | 64 | 218 |
| Country of Origin | N | % ¹ | | Language Spoken at Home (5+) | N | % ¹ |
| U.S. | 23,062 | 77.0 | | English | 19,922 | 71.8 |
| Foreign Countries | 6,883 | 23.0 | | Spanish | 3,940 | 14.2 |
| Non-Citizen | 3,451 | 11.5 | | (Other) non-English | 3,886 | 14.0 |
| Education (25+) | Total | Male | Female | | | |
| Less than High School | 1,614 | 839 | 775 | | | |
| High School/GED | 2,163 | 843 | 1,320 | | | |
| Some College/Associate Degree | 2,860 | 1,371 | 1,489 | | | |
| Bachelor's Degree or Higher | 13,652 | 6,572 | 7,080 | | | |
| Family Structure | Total | White | Black | Hispanic ¹ | | |
| Total Family Households | 7,619 | 6,377 | 193 | 1,148 | | |
| Families with Own Children < 18 | 3,902 | -- | -- | -- | | |
| Single Mother Families with Own Children <18 | 408 | -- | -- | -- | | |
| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ |
| Unemployment Rate | 5.6 | 5.5 | 5.7 | 5.7 | 6.6 | 4.0 |
| Median Household Income (\$) | 121,261 | -- | -- | 128,652 | 74,653 | 59,649 |
| Poverty Rate (%) | 5.5 | 3.9 | 7.1 | 4.8 | 20.4 | 9.4 |
| Commuters | N | % ¹ | | | | |
| Commuters Using Alternative Mode of Transportation ² | 7,848 | 53.8 | | | | |

¹ Hispanic may be of any race.² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

MAMARONECK TOWN

| BIRTHS (2016) | | | Birthweight¹ | | | |
|--|----------|----------|---|-----------------------------|-------------------------|---------------|
| Total Births | 304 | | Low Birthweight | <u>N</u> 18 | <u>%</u> 5.9 | |
| Birth Rate (per 1,000) | 10.2 | | DEATHS (2016) | | | |
| Average Maternal Age | 33.1 | | | <u>Total</u> | <u>Male</u> | <u>Female</u> |
| Mother's Race/Ethnicity¹ | <u>N</u> | <u>%</u> | Total Deaths | 213 | 103 | 110 |
| White | 238 | 78.3 | Death Rate (per 100,000) | 701.4 | 714.7 | 717.1 |
| Black | 7 | 2.3 | Infant Mortality Rate (per 1,000 live birth) | | | |
| Other | 59 | 19.4 | 0.0 | | | |
| Hispanic ² | 61 | 20.1 | Top Five Causes of Death | | | |
| Mother's Education¹ | <u>N</u> | <u>%</u> | | <u>N</u> | <u>%</u> | |
| Less than High School | 25 | 8.2 | 1 | Circulatory System Diseases | 74 | 34.7 |
| High School or GED | 15 | 4.9 | 2 | Neoplasms (any) | 52 | 24.4 |
| Some College (no degree) | 25 | 8.2 | 3 | Respiratory System Diseases | 22 | 10.3 |
| Bachelor's Degree or above | 239 | 78.6 | 4 | External Causes | 13 | 6.1 |
| Mother's Country of Origin¹ | <u>N</u> | <u>%</u> | 5 | Infectious Diseases | 8 | 3.8 |
| Foreign | 97 | 31.9 | Average Age at Death | | | |
| Mother's Age¹ | <u>N</u> | <u>%</u> | | <u>Total</u> | <u>Male</u> | <u>Female</u> |
| Teenage Mothers | 3 | 1.0 | Total | 79 | 76 | 82 |
| Prenatal Care¹ | <u>N</u> | <u>%</u> | White | 80 | 77 | 83 |
| Late or No Prenatal Care | 40 | 13.2 | Black | 62 | 33 | 74 |
| Financial Coverage at Birth¹ | <u>N</u> | <u>%</u> | Other | 67 | 63 | 71 |
| MEDICAID, Child Health Plus | 47 | 26.7 | Hispanic ² | 71 | 65 | 98 |
| Private or Other Insurance | 129 | 73.3 | COMMUNICABLE DISEASES (2018) | | | |
| Self Pay | 0 | 0.0 | Top Five Reported Diseases | | | |
| ¹ Excluding unknown or not stated. | | | | <u>N</u> | <u>Rate³</u> | |
| ² Hispanics may be of any race. | | | 1 | Chlamydia | 66 | 220.4 |
| | | | 2 | Hepatitis C Chronic | 14 | 46.8 |
| | | | 3 | Gonorrhea, Uncomplicated | 8 | 26.7 |
| | | | 4 | Giardiasis | 6 | 20.0 |
| | | | 5 | Campylobacteriosis | 5 | 16.7 |

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | <u>Total</u> | <u>Male</u> | <u>Female</u> | <u>White</u> | <u>Black</u> | <u>Hispanic⁴</u> |
|-----------------------|--------------|-------------|---------------|--------------|--------------|-----------------------------|
| Chlamydia | 66 | 29 | 37 | 7 | 1 | 0 |
| Gonorrhea | 8 | 6 | 2 | 3 | 1 | 1 |
| Syphilis (all stages) | 1 | 1 | 0 | 0 | 0 | 0 |

REGION PROFILE

MAMARONECK TOWN

EMERGENCY ROOM VISITS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 4,635 | 1,560.2 |
| Male | 2,152 | 1,495.6 |
| Female | 2,483 | 1,621.0 |
| White | 3,519 | 1,442.0 |
| Black | 339 | 7,865.4 |
| Other | 840 | 1,930.6 |
| Hispanic ² | 852 | 2,338.7 |

HOSPITALIZATIONS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 1,905 | 641.3 |
| Male | 895 | 622.0 |
| Female | 1,010 | 659.4 |
| White | 1,746 | 715.5 |
| Black | 85 | 1,972.2 |
| Other | 443 | 1,018.2 |
| Hispanic ² | 214 | 587.4 |

| | | |
|---------|-------|---------|
| Under 5 | 226 | 1,098.2 |
| 5-9 | 186 | 847.0 |
| 10-14 | 185 | 730.1 |
| 15-17 | 149 | 1,176.0 |
| 18-24 | 356 | 1,888.6 |
| 25-44 | 1,168 | 1,720.9 |
| 45-64 | 1,135 | 1,383.8 |
| 65-74 | 408 | 1,752.6 |
| 75+ | 822 | 3,355.1 |

| | | |
|---------|-----|---------|
| Under 5 | 197 | 957.2 |
| 5-9 | 16 | 72.9 |
| 10-14 | 27 | 106.6 |
| 15-17 | 20 | 157.9 |
| 18-24 | 220 | 1,167.1 |
| 25-44 | 290 | 427.3 |
| 45-64 | 318 | 387.7 |
| 65-74 | 265 | 1,138.3 |
| 75+ | 552 | 2,253.1 |

| Top Causes of ER Visits | <u>N</u> | <u>%</u> |
|------------------------------------|----------|----------|
| 1 Injuries | 971 | 20.9 |
| 2 Mental Disorders | 255 | 5.5 |
| 3 Infectious And Parasitic Disease | 195 | 4.2 |
| 4 Abdominal Pain | 180 | 3.9 |
| 5 Abuse of Drugs or Alcohol | 130 | 2.8 |

| Top Causes of Hospitalization³ | <u>N</u> | <u>%</u> |
|--|----------|----------|
| 1 Circulatory System Diseases | 241 | 12.7 |
| 2 Digestive System Diseases | 176 | 9.2 |
| 3 Mental & Behavioral Disorders | 174 | 9.1 |
| 4 Other ^A | 143 | 7.5 |
| 5 Neoplasms | 124 | 6.5 |

^A Musculoskeletal System & Connective Tissue Diseases

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|--------------------------------|----------|----------|
| 1 White Plains Hospital Center | 1,831 | 39.5 |
| 2 Montefiore New Rochelle | 1,328 | 28.7 |
| 3 Westchester Medical Center | 368 | 7.9 |

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|--------------------------------|----------|----------|
| 1 White Plains Hospital Center | 660 | 34.6 |
| 2 Montefiore New Rochelle | 268 | 14.1 |
| 3 Westchester Medical Center | 110 | 5.8 |

| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 2,735 | 59.0 |
| Medicare | 1,171 | 25.3 |
| Medicaid | 354 | 7.6 |
| Other | 264 | 5.7 |
| Self-Pay | 111 | 2.4 |

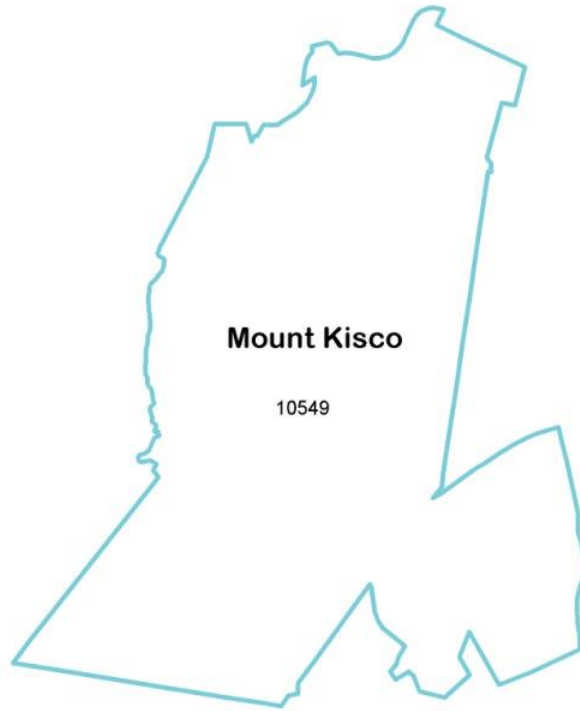
| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 1,019 | 53.5 |
| Medicare | 716 | 37.6 |
| Medicaid | 118 | 6.2 |
| Other | 33 | 1.7 |
| Self-Pay | 19 | 1.0 |

¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations: 10538 10543 (63%), over representing the region population by 0.1% according to 2012-2016 ACS.

REGION PROFILE

MOUNT KISCO TOWN/VILLAGE



Region Area: 214 sq miles

Population: 10,994

ZIP Codes Serving the Region

10549*

* Also serve other regions.

Municipalities Included in Region

Mount Kisco (T)

REGION PROFILE

MOUNT KISCO TOWN/VILLAGE

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | |
|---|--------|----------------|-----------------------|------------------------------|----------------|-----------------------|
| Sex | N | % | | N | % ¹ | |
| Male | 5,948 | 54.1 | White | 7,271 | 66.1 | |
| Female | 5,046 | 45.9 | Black | 602 | 5.5 | |
| Total | 10,994 | 100.0 | Other | 3,121 | 28.4 | |
| | | | Hispanic ¹ | 4,776 | 43.4 | |
| | | | Non-Hispanic | 6,218 | 56.6 | |
| Age | Total | Male | Female | White | Black | Hispanic ¹ |
| 0-4 | 542 | 385 | 157 | 313 | 0 | 393 |
| 5-9 | 521 | 199 | 322 | 302 | 25 | 400 |
| 10-14 | 802 | 526 | 276 | 567 | 20 | 333 |
| 15-17 | 540 | 299 | 241 | 343 | 43 | 249 |
| 18-24 | 898 | 616 | 282 | 531 | 74 | 463 |
| 25-44 | 3,024 | 1,750 | 1,274 | 1,454 | 159 | 1,863 |
| 45-64 | 3,169 | 1,543 | 1,626 | 2,479 | 236 | 902 |
| 65-74 | 774 | 322 | 452 | 643 | 45 | 64 |
| 75+ | 724 | 308 | 416 | 639 | 0 | 109 |
| Country of Origin | N | % ¹ | | Language Spoken at Home (5+) | N | % ¹ |
| U.S. | 6,853 | 62.3 | | English | 5,212 | 49.9 |
| Foreign Countries | 4,141 | 37.7 | | Spanish | 4,174 | 39.9 |
| Non-Citizen | 2,891 | 26.3 | | (Other) non-English | 1066 | 10.2 |
| Education (25+) | Total | Male | Female | | | |
| Less than High School | 1,408 | 911 | 497 | | | |
| High School/GED | 1,548 | 706 | 842 | | | |
| Some College/Associate Degree | 1,587 | 780 | 807 | | | |
| Bachelor's Degree or Higher | 3,148 | 1,526 | 1,622 | | | |
| Family Structure | Total | White | Black | Hispanic ¹ | | |
| Total Family Households | 2,561 | 1,843 | 213 | 879 | | |
| Families with Own Children < 18 | 1,306 | -- | -- | -- | | |
| Single Mother Families with Own Children <18 | 203 | -- | -- | -- | | |
| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ |
| Unemployment Rate | 3.7 | 4.0 | 3.2 | 4.5 | 0.0 | 4.5 |
| Median Household Income (\$) | 77,801 | -- | -- | 87,344 | 69,583 | 56,231 |
| Poverty Rate (%) | 9.5 | 8.7 | 10.4 | 5.1 | 13.3 | 13.7 |
| Commuters | N | % ¹ | | | | |
| Commuters Using Alternative Mode of Transportation ² | 2,309 | 38.1 | | | | |

¹ Hispanic may be of any race.² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

MOUNT KISCO TOWN/VILLAGE

| BIRTHS (2016) | | | Birthweight¹ | | |
|--|----------|----------|---|---------------|-------------------------|
| Total Births | 131 | | Low Birthweight | <u>N</u> 8 | <u>%</u> 6.1 |
| Birth Rate (per 1,000) | 11.8 | | | | |
| Average Maternal Age | 31.8 | | | | |
| | | | DEATHS (2016) | | |
| | | | <u>Total</u> | <u>Male</u> | <u>Female</u> |
| Mother's Race/Ethnicity¹ | | | Total Deaths | 63 | 33 |
| | <u>N</u> | <u>%</u> | Death Rate (per 100,000) | 569.5 | 545.6 |
| White | 46 | 35.1 | | | |
| Black | 1 | 0.8 | | | |
| Other | 84 | 64.1 | | | |
| Hispanic ² | 80 | 61.1 | | | |
| | | | Infant Mortality Rate (per 1,000 live birth) | | 0.0 |
| Mother's Education¹ | | | Top Five Causes of Death | | |
| | <u>N</u> | <u>%</u> | | <u>N</u> | <u>%</u> |
| Less than High School | 51 | 38.9 | 1 Circulatory System Diseases | 22 | 34.9 |
| High School or GED | 18 | 13.7 | 2 Neoplasms (any) | 19 | 30.2 |
| Some College (no degree) | 14 | 10.7 | 3 Respiratory System Diseases | 9 | 14.3 |
| Bachelor's Degree or above | 48 | 36.6 | 4 External Causes | 4 | 6.3 |
| | | | 5 Nervous System Diseases | 3 | 4.8 |
| Mother's Country of Origin¹ | | | Average Age at Death | | |
| | <u>N</u> | <u>%</u> | | <u>Total</u> | <u>Male</u> |
| Foreign | 82 | 62.6 | Total | 76 | 71 |
| | | | White | 78 | 73 |
| Mother's Age¹ | | | Black | 68 | 62 |
| | <u>N</u> | <u>%</u> | Other | 48 | -- |
| Teenage Mothers | 3 | 2.3 | Hispanic ² | 46 | 39 |
| | | | COMMUNICABLE DISEASES (2018) | | |
| Prenatal Care¹ | | | Top Five Reported Diseases | | |
| | <u>N</u> | <u>%</u> | | <u>N</u> | <u>Rate³</u> |
| Late or No Prenatal Care | 20 | 15.3 | 1 Chlamydia | 51 | 463.9 |
| | | | 2 Hepatitis C Chronic | 6 | 54.6 |
| Financial Coverage at Birth¹ | | | 3 Lyme Disease | 5 | 45.5 |
| | <u>N</u> | <u>%</u> | 4 Babesiosis | 4 | 36.4 |
| MEDICAID, Child Health Plus | 76 | 60.3 | 5 Campylobacteriosis | 3 | 27.3 |
| Private or Other Insurance | 50 | 39.7 | | | |
| Self Pay | 0 | 0.0 | | | |

¹ Excluding unknown or not stated.

² Hispanics may be of any race.

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | <u>Total</u> | <u>Male</u> | <u>Female</u> | <u>White</u> | <u>Black</u> | <u>Hispanic⁴</u> |
|-----------------------|--------------|-------------|---------------|--------------|--------------|-----------------------------|
| Chlamydia | 51 | 23 | 28 | 5 | 0 | 3 |
| Gonorrhea | 3 | 3 | 0 | 0 | 0 | 0 |
| Syphilis (all stages) | 1 | 1 | 0 | 1 | 0 | 0 |

REGION PROFILE

MOUNT KISCO TOWN/VILLAGE

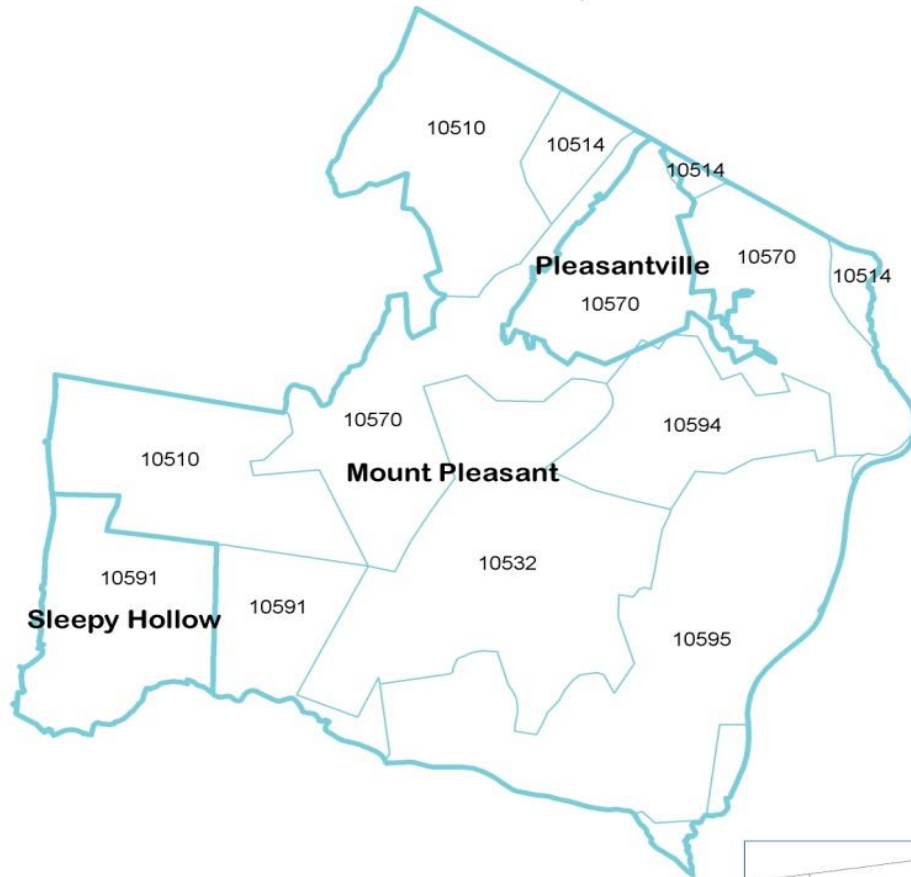
| EMERGENCY ROOM VISITS (2016) ¹ | | | HOSPITALIZATIONS (2016) ¹ | | |
|---|----------|-------------------|--|----------|-------------------|
| | N | Rate (per 10,000) | | N | Rate (per 10,000) |
| Total | 3,217 | 2,908.2 | Total | 1,038 | 938.3 |
| Male | 1,663 | 2,749.7 | Male | 483 | 798.6 |
| Female | 1,554 | 3,099.3 | Female | 555 | 1,106.9 |
| White | 2,118 | 3,068.7 | White | 809 | 1,172.1 |
| Black | 251 | 3,438.4 | Black | 69 | 945.2 |
| Other | 1,279 | 3,968.4 | Other | 302 | 937.0 |
| Hispanic ² | 1,093 | 2,634.4 | Hispanic ² | 205 | 494.1 |
| Under 5 | 298 | 4,203.1 | Under 5 | 157 | 2,214.4 |
| 5-9 | 158 | 2,920.5 | 5-9 | 7 | 129.4 |
| 10-14 | 152 | 2,313.5 | 10-14 | 7 | 106.5 |
| 15-17 | 115 | 1,982.8 | 15-17 | 5 | 86.2 |
| 18-24 | 256 | 2,617.6 | 18-24 | 139 | 1,421.3 |
| 25-44 | 796 | 2,362.7 | 25-44 | 131 | 388.8 |
| 45-64 | 740 | 2,679.2 | 45-64 | 167 | 604.6 |
| 65-74 | 229 | 2,920.9 | 65-74 | 124 | 1,581.6 |
| 75+ | 473 | 6,935.5 | 75+ | 301 | 4,413.5 |
| Top Causes of ER Visits | N | % | Top Causes of Hospitalization³ | N | % |
| 1 Injuries | 665 | 20.7 | 1 Circulatory System Diseases | 127 | 12.2 |
| 2 Abdominal Pain | 145 | 4.5 | 2 Respiratory System Diseases | 85 | 8.2 |
| 3 Infectious And Parasitic Disease | 125 | 3.9 | 3 Digestive System Diseases | 78 | 7.5 |
| 4 Acute Respiratory Infections | 120 | 3.7 | 4 Other ^A | 75 | 7.2 |
| 5 Abuse of Drugs and Alcohol | 111 | 3.5 | 5 Infectious and Parasitic Disease | 69 | 6.6 |
| | | | ^A Musculoskeletal System & Connective Tissue Diseases | | |
| Top Receiving Hospitals | N | % | Top Receiving Hospitals | N | % |
| 1 Northern Westchester Hospital | 2,747 | 85.4 | 1 Northern Westchester Hospital | 746 | 71.9 |
| 2 Westchester Medical Center | 180 | 5.6 | 2 Westchester Medical Center | 87 | 8.4 |
| 3 Phelps Memorial Hospital | 40 | 1.2 | 3 NY Presbyterian Columbia | 29 | 2.8 |
| Insurance Type | N | % | Insurance Type | N | % |
| Private | 1,123 | 34.9 | Private | 359 | 34.6 |
| Medicare | 754 | 23.4 | Medicare | 425 | 40.9 |
| Medicaid | 913 | 28.4 | Medicaid | 235 | 22.6 |
| Other | 91 | 2.8 | Other | 11 | 1.1 |
| Self-Pay | 336 | 10.4 | Self-Pay | 8 | 0.8 |

¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:
10549 (65%), representing 97.3% of the region population according to the 2012-2016 ACS.

REGION PROFILE

MOUNT PLEASANT TOWN



Region Area: 30.2 sq miles

Population: 44,635

ZIP Codes Serving the Region

10510* 10514* 10532 10570 10591* 10594
 10595*

* Also serve other regions.

Municipalities Included in Region

Briarcliff Manor (V) (Mount Pleasant part)
 Pleasantville (V)
 Sleepy Hollow (V)
 Mount Pleasant (TOV)

REGION PROFILE

MOUNT PLEASANT TOWN

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | |
|------------------------------|--------|-------|-----------------------|--------|----------------|--|
| Sex | N | % | | N | % ¹ | |
| Male | 22,194 | 49.7 | White | 34,735 | 77.8 | |
| Female | 22,441 | 50.3 | Black | 1,890 | 4.2 | |
| Total | 44,635 | 100.0 | Other | 8,010 | 17.9 | |
| | | | Hispanic ¹ | 9,586 | 21.5 | |
| | | | Non-Hispanic | 35,049 | 78.5 | |

| Age | Total | Male | Female | White | Black | Hispanic ¹ |
|-------|--------|-------|--------|--------|-------|-----------------------|
| 0-4 | 2,387 | 1,312 | 1,075 | 1,623 | 24 | 700 |
| 5-9 | 2,973 | 1,526 | 1,447 | 2,328 | 89 | 714 |
| 10-14 | 3,088 | 1,527 | 1,561 | 2,320 | 129 | 808 |
| 15-17 | 1,881 | 923 | 958 | 1,478 | 138 | 283 |
| 18-24 | 4,832 | 2,295 | 2,537 | 3,422 | 363 | 1,497 |
| 25-44 | 10,138 | 5,358 | 4,780 | 7,034 | 588 | 2,784 |
| 45-64 | 12,704 | 6,389 | 6,315 | 10,457 | 458 | 2,058 |
| 65-74 | 3,698 | 1,565 | 2,133 | 3,328 | 20 | 435 |
| 75+ | 2,934 | 1,299 | 1,635 | 2,745 | 81 | 307 |

| Country of Origin | N | % | Language Spoken at Home (5+) | N | % |
|-------------------|--------|------|------------------------------|--------|------|
| U.S. | 35,510 | 79.6 | English | 29,882 | 70.7 |
| Foreign Countries | 9,125 | 20.4 | Spanish | 7,447 | 17.6 |
| Non-Citizen | 4,335 | 9.7 | (Other) non-English | 4,919 | 11.6 |

| Education (25+) | Total | Male | Female |
|-------------------------------|--------|-------|--------|
| Less than High School | 3,462 | 2,151 | 1,311 |
| High School/GED | 5,549 | 2,793 | 2,756 |
| Some College/Associate Degree | 5,333 | 2,669 | 2,664 |
| Bachelor's Degree or Higher | 15,130 | 6,998 | 8,132 |

| Family Structure | Total | White | Black | Hispanic ¹ |
|--|--------|-------|-------|-----------------------|
| Total Family Households | 11,056 | 9,049 | 132 | 2,147 |
| Families with Own Children < 18 | 4,937 | -- | -- | -- |
| Single Mother Families with Own Children <18 | 583 | -- | -- | -- |

| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ |
|------------------------------|---------|------|--------|---------|-------|-----------------------|
| Unemployment Rate | 5.6 | 5.2 | 6.0 | 5.1 | 12.1 | 6.2 |
| Median Household Income (\$) | 111,023 | -- | -- | 122,878 | -- | 45,185 |
| Poverty Rate (%) | 8.3 | 7.4 | 9.2 | 5.6 | 32.0 | 22.2 |

| Commuters | N | % |
|---|-------|------|
| Commuters Using Alternative Mode of Transportation ² | 7,148 | 34.7 |

¹ Hispanic may be of any race.

² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

MOUNT PLEASANT TOWN

| BIRTHS (2016) | | | DEATHS (2016) | | |
|--|----------|----------|---|--------------|-------------------------|
| Total Births | 459 | | Birthweight¹ | N | % |
| Birth Rate (per 1,000) | 10.3 | | Low Birthweight | 32 | 7.0 |
| Average Maternal Age | 32.4 | | | | |
| Mother's Race/Ethnicity¹ | N | % | Total Deaths | Total | Male |
| White | 310 | 67.5 | Death Rate (per 100,000) | 285 | 141 |
| Black | 12 | 2.6 | | 615.3 | 627.6 |
| Other | 137 | 29.8 | | | 144 |
| Hispanic ² | 144 | 31.4 | | | 655.2 |
| Mother's Education¹ | N | % | Infant Mortality Rate (per 1,000 live birth) | | 0.0 |
| Less than High School | 43 | 9.4 | | | |
| High School or GED | 53 | 11.5 | Top Five Causes of Death | N | % |
| Some College (no degree) | 83 | 18.1 | 1 Circulatory System Diseases | 112 | 39.3 |
| Bachelor's Degree or above | 280 | 61.0 | 2 Neoplasms (any) | 67 | 23.5 |
| Mother's Country of Origin¹ | N | % | 3 Respiratory System Diseases | 25 | 8.8 |
| Foreign | 157 | 34.2 | 4 External Causes | 18 | 6.3 |
| Mother's Age¹ | N | % | 5 Kidney Diseases | 13 | 4.6 |
| Teenage Mothers | 10 | 2.2 | Average Age at Death | Total | Male |
| Prenatal Care¹ | N | % | Total | 79 | 75 |
| Late or No Prenatal Care | 68 | 14.8 | White | 80 | 78 |
| Financial Coverage at Birth¹ | N | % | Black | 64 | 64 |
| MEDICAID, Child Health Plus | 112 | 27.7 | Other | 73 | 72 |
| Private or Other Insurance | 292 | 72.1 | Hispanic ² | 63 | 61 |
| Self Pay | 1 | 0.2 | | | 65 |
| ¹ Excluding unknown or not stated. | | | COMMUNICABLE DISEASES (2018) | | |
| ² Hispanics may be of any race. | | | Top Five Reported Diseases | N | Rate³ |
| | | | 1 Chlamydia | 168 | 376.4 |
| | | | 2 Gonorrhea, Uncomplicated | 39 | 87.4 |
| | | | 3 Hepatitis C Chronic | 30 | 67.2 |
| | | | 4 Campylobacteriosis | 13 | 29.1 |
| | | | 5 Syphilis | 17 | 38.1 |

| MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018) | | | | | | |
|--|--------------|-------------|---------------|--------------|--------------|-----------------------------|
| | Total | Male | Female | White | Black | Hispanic⁴ |
| Chlamydia | 168 | 59 | 109 | 10 | 30 | 6 |
| Gonorrhea | 39 | 19 | 20 | 6 | 6 | 2 |
| Syphilis (all stages) | 15 | 12 | 3 | 2 | 3 | 4 |

REGION PROFILE

MOUNT PLEASANT TOWN

| EMERGENCY ROOM VISITS (2016) ¹ | | | HOSPITALIZATIONS (2016) ¹ | | |
|---|----------|-------------------|--|----------|-------------------|
| | N | Rate (per 10,000) | | N | Rate (per 10,000) |
| Total | 13,020 | 2,925.4 | Total | 4,409 | 990.6 |
| Male | 6,505 | 2,897.3 | Male | 2,100 | 935.3 |
| Female | 6,514 | 2,953.5 | Female | 2,308 | 1,046.5 |
| White | 9,125 | 2,527.1 | White | 3,400 | 941.6 |
| Black | 1,157 | 6,305.2 | Black | 332 | 1,809.3 |
| Other | 2,531 | 4,336.9 | Other | 851 | 1,458.2 |
| Hispanic ² | 2,097 | 2,506.0 | Hispanic ² | 499 | 596.3 |
| Under 5 | 722 | 3,084.2 | Under 5 | 450 | 1,922.3 |
| 5-9 | 456 | 1,541.1 | 5-9 | 53 | 179.1 |
| 10-14 | 826 | 2,615.6 | 10-14 | 144 | 456.0 |
| 15-17 | 973 | 4,872.3 | 15-17 | 200 | 1,001.5 |
| 18-24 | 1,317 | 2,682.3 | 18-24 | 651 | 1,325.9 |
| 25-44 | 2,665 | 2,703.1 | 25-44 | 535 | 542.7 |
| 45-64 | 3,078 | 2,398.3 | 45-64 | 772 | 601.5 |
| 65-74 | 1,039 | 2,952.5 | 65-74 | 509 | 1,446.4 |
| 75+ | 1,944 | 6,634.8 | 75+ | 1,095 | 3,737.2 |
| Top Causes of ER Visits | N | % | Top Causes of Hospitalization³ | N | % |
| 1 Injuries | 2,967 | 22.8 | 1 Mental & Behavioral Disorders | 728 | 16.5 |
| 2 Mental Disorders | 991 | 7.6 | 2 Circulatory System Diseases | 508 | 11.5 |
| 3 Infectious and Parasitic Disease | 483 | 3.7 | 3 Digestive System Diseases | 333 | 7.6 |
| 4 Abdominal Pain | 390 | 3.0 | 4 Other ^A | 277 | 6.3 |
| 5 Acute Respiratory Infections | 363 | 2.8 | 5 Injury and Poisoning | 274 | 6.2 |
| | | | ^A Musculoskeletal System & Connective Tissue Diseases | | |
| Top Receiving Hospitals | N | % | Top Receiving Hospitals | N | % |
| 1 Westchester Medical Center | 4,818 | 37.0 | 1 Westchester Medical Center | 1,395 | 31.6 |
| 2 Phelps Memorial Hospital | 3,945 | 30.3 | 2 Phelps Memorial Hospital | 877 | 19.9 |
| 3 Northern Westchester Hospital | 1,514 | 11.6 | 3 Northern Westchester Hospital | 600 | 13.6 |
| Insurance Type | N | % | Insurance Type | N | % |
| Private | 5,471 | 42.0 | Private | 1,815 | 41.2 |
| Medicare | 3,154 | 24.2 | Medicare | 1,595 | 36.2 |
| Medicaid | 3,123 | 24.0 | Medicaid | 861 | 19.5 |
| Other | 719 | 5.5 | Other | 94 | 2.1 |
| Self-Pay | 553 | 4.2 | Self-Pay | 44 | 1.0 |

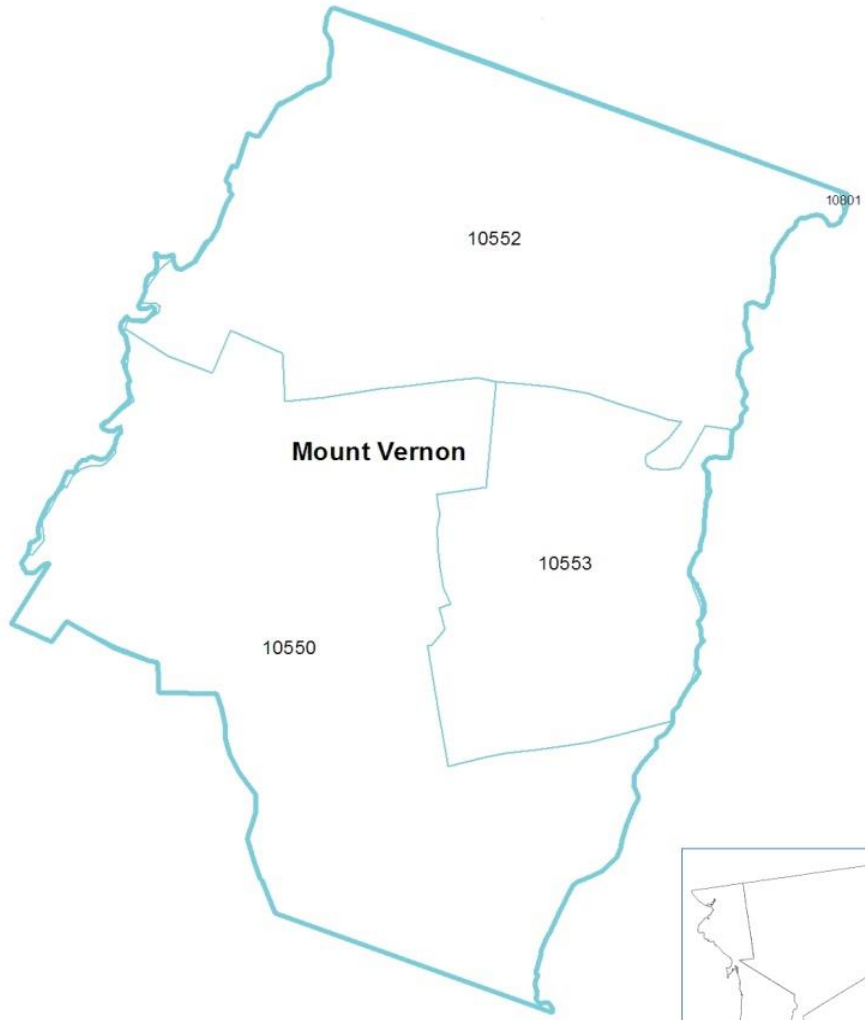
¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:

10510 (30%) 10532 10570 10591 (38%) 10594 10595 (99%), representing 97.8% of the region population according to the 2012-2016 ACS.

REGION PROFILE

MOUNT VERNON CITY



Region Area: 4.4 sq miles
Population: 68,671

ZIP Codes Serving the Region

10550, 10551** 10552, 10553

** PO Box

Municipalities Included in Region

Mount Vernon (C)

REGION PROFILE

MOUNT VERNON CITY

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | | |
|---|--------|----------------|------------------------------|-----------------------|----------------|-----------------------|------|
| Sex | N | % | | N | % ¹ | | |
| Male | 31,233 | 45.5 | White | 15,146 | 22.1 | | |
| Female | 37,438 | 54.5 | Black | 45,832 | 66.7 | | |
| Total | 68,671 | 100.0 | Other | 7,693 | 11.2 | | |
| | | | Hispanic ¹ | 10,549 | 15.4 | | |
| | | | Non-Hispanic | 58,122 | 84.6 | | |
| Age | Total | Male | Female | White | Black | Hispanic ¹ | |
| 0-4 | 4,831 | 2,529 | 2,302 | 829 | 3,260 | 1,297 | |
| 5-9 | 3,968 | 1,873 | 2,095 | 643 | 2,725 | 954 | |
| 10-14 | 3,386 | 1,521 | 1,865 | 490 | 2,520 | 738 | |
| 15-17 | 2,145 | 1,099 | 1,046 | 329 | 1,490 | 344 | |
| 18-24 | 6,534 | 3,202 | 3,332 | 1,028 | 4,699 | 1,088 | |
| 25-44 | 19,091 | 8,752 | 10,339 | 3,597 | 13,093 | 3,311 | |
| 45-64 | 18,344 | 8,053 | 10,291 | 4,343 | 12,300 | 2,025 | |
| 65-74 | 5,633 | 2,576 | 3,057 | 1,703 | 3,476 | 529 | |
| 75+ | 4,739 | 1,628 | 3,111 | 2,184 | 2,269 | 263 | |
| Country of Origin | N | % | Language Spoken at Home (5+) | | | N | % |
| U.S. | 45,990 | 67.0 | English | 48,355 | | | 75.7 |
| Foreign Countries | 22,681 | 33.0 | Spanish | 7,883 | | | 12.3 |
| Non-Citizen | 9,519 | 13.9 | (Other) non-English | 7,602 | | | 11.9 |
| Education (25+) | Total | Male | Female | | | | |
| Less than High School | 7,594 | 3,492 | 4,102 | | | | |
| High School/GED | 13,889 | 6,784 | 7,105 | | | | |
| Some College/Associate Degree | 12,751 | 5,536 | 7,215 | | | | |
| Bachelor's Degree or Higher | 13,573 | 5,197 | 8,376 | | | | |
| Family Structure | Total | White | Black | Hispanic ¹ | | | |
| Total Family Households | 15,538 | 3,574 | 10,310 | 2,350 | | | |
| Families with Own Children < 18 | 6,350 | -- | -- | -- | | | |
| Single Mother Families with Own Children <18 | 2,810 | -- | -- | -- | | | |
| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ | |
| Unemployment Rate | 8.7 | 10.3 | 7.4 | 6.0 | 9.9 | 7.6 | |
| Median Household Income (\$) | 54,573 | -- | -- | 64,286 | 51,448 | 49,938 | |
| Poverty Rate (%) | 14.8 | 14.0 | 15.5 | 13.5 | 14.9 | 22.7 | |
| Commuters | N | % ² | | | | | |
| Commuters Using Alternative Mode of Transportation ² | 15,053 | 45.7 | | | | | |

¹ Hispanic may be of any race.² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

MOUNT VERNON CITY

| BIRTHS (2016) | | | DEATHS (2016) | | |
|--|----------|----------|---|--------------|-------------------------|
| Total Births | 897 | | Birthweight¹ | <u>N</u> | <u>%</u> |
| Birth Rate (per 1,000) | 13.1 | | Low Birthweight | 90 | 10.0 |
| Average Maternal Age | 29.8 | | | | |
| Mother's Race/Ethnicity¹ | <u>N</u> | <u>%</u> | Total Deaths | <u>Total</u> | <u>Male</u> |
| White | 154 | 17.2 | Death Rate (per 100,000) | 483 | 237 |
| Black | 584 | 65.3 | | 708.0 | 761.7 |
| Other | 157 | 17.5 | | | 246 |
| Hispanic ² | 198 | 22.1 | | | 663.1 |
| Mother's Education¹ | <u>N</u> | <u>%</u> | Infant Mortality Rate (per 1,000 live birth) | | 6.7 |
| Less than High School | 138 | 15.5 | | | |
| High School or GED | 213 | 23.9 | Top Five Causes of Death | <u>N</u> | <u>%</u> |
| Some College (no degree) | 261 | 29.3 | 1 Circulatory System Diseases | 171 | 35.4 |
| Bachelor's Degree or above | 280 | 31.4 | 2 Neoplasms (any) | 123 | 25.5 |
| Mother's Country of Origin¹ | <u>N</u> | <u>%</u> | 3 Respiratory System Diseases | 43 | 8.9 |
| Foreign | 443 | 49.4 | 4 External Causes | 29 | 6.0 |
| Mother's Age¹ | <u>N</u> | <u>%</u> | 5 Infectious Diseases | 21 | 4.3 |
| Teenage Mothers | 31 | 3.5 | | | |
| Prenatal Care¹ | <u>N</u> | <u>%</u> | Average Age at Death | <u>Total</u> | <u>Male</u> |
| Late or No Prenatal Care | 287 | 32.0 | Total | 73 | 68 |
| | | | White | 80 | 73 |
| | | | Black | 69 | 65 |
| | | | Other | 69 | 69 |
| | | | Hispanic ² | 74 | 68 |
| | | | | | 86 |
| Financial Coverage at Birth¹ | <u>N</u> | <u>%</u> | COMMUNICABLE DISEASES (2018) | | |
| MEDICAID, Child Health Plus | 528 | 63.2 | Top Five Reported Diseases | <u>N</u> | <u>Rate³</u> |
| Private or Other Insurance | 302 | 36.2 | 1 Chlamydia | 721 | 1049.9 |
| Self Pay | 5 | 0.6 | 2 Gonorrhea, Uncomplicated | 164 | 238.8 |
| | | | 3 Hepatitis C Chronic | 67 | 97.6 |
| | | | 4 Syphilis, All Stages | 45 | 65.5 |
| | | | 5 Hepatitis B Chronic | 41 | 59.7 |

¹ Excluding unknown or not stated.

² Hispanics may be of any race.

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | <u>Total</u> | <u>Male</u> | <u>Female</u> | <u>White</u> | <u>Black</u> | <u>Hispanic⁴</u> |
|-----------------------|--------------|-------------|---------------|--------------|--------------|-----------------------------|
| Chlamydia | 721 | 263 | 458 | 5 | 122 | 10 |
| Gonorrhea | 164 | 100 | 64 | 4 | 66 | 10 |
| Syphilis (all stages) | 45 | 37 | 8 | 5 | 24 | 6 |

REGION PROFILE

MOUNT VERNON CITY

| EMERGENCY ROOM VISITS (2016) ¹ | | | HOSPITALIZATIONS (2016) ¹ | | |
|---|----------|-------------------|--|----------|-------------------|
| | N | Rate (per 10,000) | | N | Rate (per 10,000) |
| Total | 42,451 | 6,222.9 | Total | 9,152 | 1,341.6 |
| Male | 18,195 | 5,847.5 | Male | 3,748 | 1,204.5 |
| Female | 24,256 | 6,537.8 | Female | 5,404 | 1,456.6 |
| White | 6,810 | 3,841.2 | White | 2,317 | 1,306.9 |
| Black | 26,073 | 6,331.2 | Black | 6,173 | 1,499.0 |
| Other | 4,264 | 5,014.7 | Other | 1,537 | 1,807.6 |
| Hispanic ² | 4,857 | 4,663.9 | Hispanic ² | 1,056 | 1,014.0 |
| Under 5 | 3,432 | 6,720.2 | Under 5 | 1,077 | 2,108.9 |
| 5-9 | 1,940 | 5,031.1 | 5-9 | 75 | 194.5 |
| 10-14 | 1,454 | 3,776.6 | 10-14 | 89 | 231.2 |
| 15-17 | 1,014 | 4,565.5 | 15-17 | 77 | 346.7 |
| 18-24 | 4,643 | 7,324.5 | 18-24 | 1,435 | 2,263.8 |
| 25-44 | 12,385 | 6,547.0 | 25-44 | 1,380 | 729.5 |
| 45-64 | 11,279 | 6,202.0 | 45-64 | 2,025 | 1,113.5 |
| 65-74 | 2,904 | 5,631.2 | 65-74 | 1,131 | 2,193.1 |
| 75+ | 3,400 | 7,417.1 | 75+ | 1,863 | 4,064.1 |
| Top Causes of ER Visits | N | % | Top Causes of Hospitalization³ | N | % |
| 1 Injuries | 7,331 | 17.3 | 1 Circulatory System Diseases | 1,277 | 14.0 |
| 2 Acute Respiratory Infections | 2,406 | 5.7 | 2 Mental & Behavioral Disorders | 868 | 9.5 |
| 3 Infectious And Parasitic Diseases | 1,795 | 4.2 | 3 Digestive System Diseases | 735 | 8.0 |
| 4 Mental Disorders | 1,421 | 3.3 | 4 Respiratory System Diseases | 683 | 7.5 |
| 5 Abdominal Pain | 1,381 | 3.3 | 5 Neoplasms | 458 | 5.0 |
| Top Receiving Hospitals | N | % | Top Receiving Hospitals | N | % |
| 1 Mount Vernon Hospital | 17,431 | 41.1 | 1 NY Presbyterian Lawrence | 2,017 | 22.0 |
| 2 NY Presbyterian Lawrence | 8,699 | 20.5 | 2 Montefiore Mount Vernon | 1,939 | 21.2 |
| 3 Montefiore New Rochelle | 5,433 | 12.8 | 3 Montefiore New Rochelle | 1,046 | 11.4 |
| Insurance Type | N | % | Insurance Type | N | % |
| Private | 26,330 | 62.0 | Private | 5,039 | 55.1 |
| Medicare | 5,574 | 13.1 | Medicare | 2,606 | 28.5 |
| Medicaid | 4,991 | 11.8 | Medicaid | 1,223 | 13.4 |
| Other | 3,898 | 9.2 | Other | 142 | 1.6 |
| Self-Pay | 1,658 | 3.9 | Self-Pay | 142 | 1.6 |

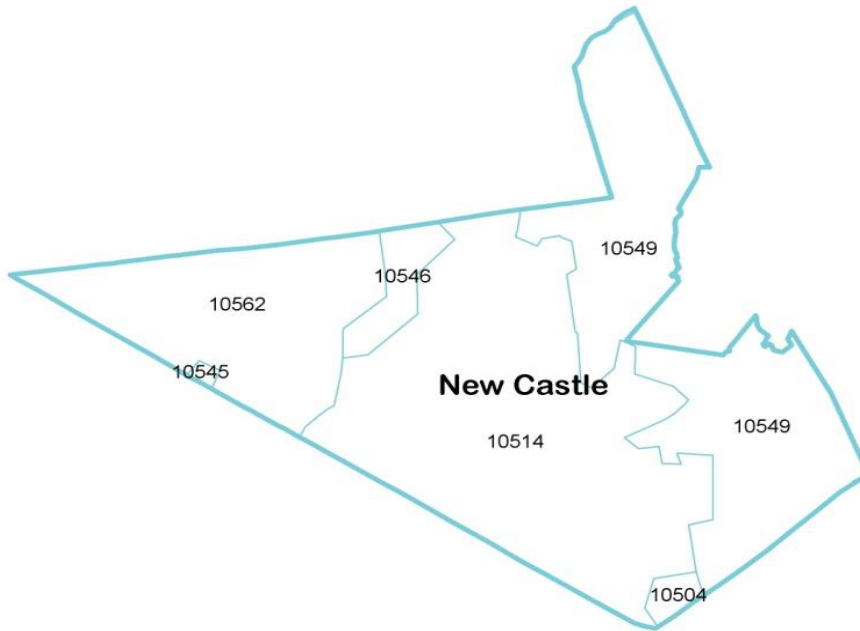
¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:

10550 10552 10553, representing 99.5% of the region population according to the 2012-2016 ACS.

REGION PROFILE

NEW CASTLE TOWN



Region Area: 23.5 sq miles

Population: 18,035

ZIP Codes Serving the Region

10504* 10514* 10545* 10546 10549* 10562*

* Also serve other regions.

Municipalities Included in Region

New Castle (T)

REGION PROFILE

NEW CASTLE TOWN

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | |
|------------------------------|--------|-------|-----------------------|--------|----------------|--|
| Sex | N | % | | N | % ¹ | |
| Male | 9,367 | 51.9 | White | 15,657 | 86.8 | |
| Female | 8,668 | 48.1 | Black | 320 | 1.8 | |
| Total | 18,035 | 100.0 | Other | 2,058 | 11.4 | |
| | | | Hispanic ¹ | 593 | 3.3 | |
| | | | Non-Hispanic | 17,442 | 96.7 | |

| Age | Total | Male | Female | White | Black | Hispanic ¹ |
|-------|-------|-------|--------|-------|-------|-----------------------|
| 0-4 | 1,017 | 536 | 481 | 795 | 35 | 22 |
| 5-9 | 1,461 | 769 | 692 | 1,207 | 30 | 53 |
| 10-14 | 1,622 | 1,042 | 580 | 1,391 | 52 | 159 |
| 15-17 | 1,056 | 647 | 409 | 952 | 31 | 15 |
| 18-24 | 1,409 | 800 | 609 | 1,184 | 13 | 43 |
| 25-44 | 2,986 | 1,438 | 1,548 | 2,514 | 61 | 47 |
| 45-64 | 6,006 | 2,847 | 3,159 | 5,370 | 71 | 205 |
| 65-74 | 1,417 | 753 | 664 | 1,292 | 20 | 9 |
| 75+ | 1,061 | 535 | 526 | 952 | 7 | 40 |

| Country of Origin | N | % | Language Spoken at Home (5+) | N | % |
|-------------------|--------|------|------------------------------|--------|------|
| U.S. | 15,671 | 86.9 | English | 14,644 | 86.1 |
| Foreign Countries | 2,364 | 13.1 | Spanish | 298 | 1.8 |
| Non-Citizen | 628 | 3.5 | (Other) non-English | 2,076 | 12.2 |

| Education (25+) | Total | Male | Female |
|-------------------------------|-------|-------|--------|
| Less than High School | 210 | 115 | 95 |
| High School/GED | 606 | 284 | 322 |
| Some College/Associate Degree | 1,079 | 573 | 506 |
| Bachelor's Degree or Higher | 9,575 | 4,601 | 4,974 |

| Family Structure | Total | White | Black | Hispanic ¹ |
|--|-------|-------|-------|-----------------------|
| Total Family Households | 5,096 | 4,461 | 49 | 93 |
| Families with Own Children < 18 | 2,515 | -- | -- | -- |
| Single Mother Families with Own Children <18 | 113 | -- | -- | -- |

| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ |
|------------------------------|---------|------|--------|---------|---------|-----------------------|
| Unemployment Rate | 4.9 | 4.1 | 6.0 | 4.8 | 0.0 | 2.7 |
| Median Household Income (\$) | 211,105 | -- | -- | 212,175 | 161,875 | -- |
| Poverty Rate (%) | 2.0 | 2.2 | 1.8 | 2.1 | 5.4 | 2.8 |

| Commuters | N | % |
|---|-------|------|
| Commuters Using Alternative Mode of Transportation ² | 3,586 | 43.7 |

¹ Hispanic may be of any race.

² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

NEW CASTLE TOWN

| BIRTHS (2016) | | | DEATHS (2016) | | |
|--|----------|----------|---|--------------|-------------------------|
| Total Births | 136 | | Birthweight¹ | N | % |
| Birth Rate (per 1,000) | 7.6 | | Low Birthweight | 11 | 8.1 |
| Average Maternal Age | 34.5 | | | | |
| Mother's Race/Ethnicity¹ | N | % | Total | Male | Female |
| White | 113 | 83.1 | Total Deaths | 74 | 40 |
| Black | 1 | 0.7 | Death Rate (per 100,000) | 412.2 | 435.2 |
| Other | 22 | 16.2 | | | 34 |
| Hispanic ² | 12 | 8.8 | | | 388.0 |
| | | | Infant Mortality Rate (per 1,000 live birth) | | 0.0 |
| Mother's Education¹ | N | % | Top Five Causes of Death | N | % |
| Less than High School | 7 | 5.1 | 1 Neoplasms (any) | 26 | 34.7 |
| High School or GED | 10 | 7.4 | 2 Circulatory System Diseases | 22 | 29.3 |
| Some College (no degree) | 6 | 4.4 | 3 Nervous System Diseases | 6 | 8.6 |
| Bachelor's Degree or above | 113 | 83.1 | 4 Respiratory System Diseases | 5 | 6.3 |
| | | | 5 External Causes | 5 | 6.8 |
| Mother's Country of Origin¹ | N | % | Average Age at Death | Total | Male |
| Foreign | 22 | 16.2 | Total | 76 | 72 |
| | | | White | 75 | 72 |
| Mother's Age¹ | N | % | Black | 92 | -- |
| Teenage Mothers | 1 | 0.7 | Other | 92 | -- |
| | | | Hispanic ² | 77 | 77 |
| Prenatal Care¹ | N | % | | | |
| Late or No Prenatal Care | 10 | 7.4 | | | |
| Financial Coverage at Birth¹ | N | % | COMMUNICABLE DISEASES (2018) | | |
| MEDICAID, Child Health Plus | 16 | 13.0 | Top Five Reported Diseases | N | Rate³ |
| Private or Other Insurance | 107 | 87.0 | 1 Chlamydia | 35 | 194.1 |
| Self Pay | 0 | 0.0 | 2 Hepatitis B Chronic | 7 | 38.8 |
| | | | 3 Anaplasmosis | 5 | 27.7 |
| | | | 4 Hepatitis C Chronic | 5 | 27.7 |
| | | | 5 Campylobacteriosis | 5 | 27.7 |

¹ Excluding unknown or not stated.

² Hispanics may be of any race.

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | Total | Male | Female | White | Black | Hispanic ⁴ |
|-----------------------|-------|------|--------|-------|-------|-----------------------|
| Chlamydia | 35 | 13 | 22 | 0 | 1 | 2 |
| Gonorrhea | 2 | 2 | 0 | 0 | 1 | 0 |
| Syphilis (all stages) | 1 | 1 | 0 | 0 | 0 | 1 |

REGION PROFILE

NEW CASTLE TOWN

| EMERGENCY ROOM VISITS (2016) ¹ | | | HOSPITALIZATIONS (2016) ¹ | | |
|---|----------|-------------------|--|----------|-------------------|
| | N | Rate (per 10,000) | | N | Rate (per 10,000) |
| Total | 3,458 | 1,926.0 | Total | 1,171 | 652.2 |
| Male | 1,706 | 1,856.0 | Male | 538 | 585.3 |
| Female | 1,752 | 1,999.5 | Female | 633 | 722.4 |
| White | 2,885 | 1,908.2 | White | 945 | 625.0 |
| Black | 253 | 8,754.3 | Black | 68 | 2,352.9 |
| Other | 835 | 3,790.3 | Other | 280 | 1,271.0 |
| Hispanic ² | 531 | 7,878.3 | Hispanic ² | 103 | 1,528.2 |
| Under 5 | 281 | 3,008.6 | Under 5 | 163 | 1,745.2 |
| 5-9 | 208 | 1,337.6 | 5-9 | 29 | 186.5 |
| 10-14 | 241 | 1,381.1 | 10-14 | 21 | 120.3 |
| 15-17 | 147 | 1,504.6 | 15-17 | 24 | 245.6 |
| 18-24 | 284 | 2,015.6 | 18-24 | 142 | 1,007.8 |
| 25-44 | 673 | 2,153.6 | 25-44 | 152 | 486.4 |
| 45-64 | 834 | 1,399.1 | 45-64 | 198 | 332.2 |
| 65-74 | 311 | 2,347.2 | 65-74 | 165 | 1,245.3 |
| 75+ | 479 | 5,189.6 | 75+ | 277 | 3,001.1 |
| Top Causes of ER Visits | N | % | Top Causes of Hospitalization³ | N | % |
| 1 Injuries | 888 | 25.7 | 1 Circulatory System Diseases | 137 | 11.7 |
| 2 Acute Respiratory Infections | 122 | 3.5 | 2 Other ^A | 106 | 9.1 |
| 3 Abdominal Pain | 121 | 3.5 | 3 Digestive System Diseases | 99 | 8.5 |
| 4 Infectious And Parasitic Disease | 120 | 3.5 | 4 Neoplasms | 76 | 6.5 |
| 5 Mental Disorders | 97 | 2.8 | 5 Respiratory System Diseases | 75 | 6.4 |
| | | | ^A Musculoskeletal System & Connective Tissue Diseases | | |
| Top Receiving Hospitals | N | % | Top Receiving Hospitals | N | % |
| 1 Northern Westchester Hospital | 2,130 | 61.6 | 1 Northern Westchester Hospital | 537 | 45.9 |
| 2 Phelps Memorial Hospital | 459 | 13.3 | 2 Westchester Medical Center | 127 | 10.8 |
| 3 Westchester Medical Center | 381 | 11.0 | 3 Phelps Memorial Hospital | 105 | 9.0 |
| Insurance Type | N | % | Insurance Type | N | % |
| Private | 1,911 | 55.3 | Private | 623 | 53.2 |
| Medicare | 741 | 21.4 | Medicare | 393 | 33.6 |
| Medicaid | 545 | 15.8 | Medicaid | 133 | 11.4 |
| Other | 84 | 2.4 | Other | 14 | 1.2 |
| Self-Pay | 177 | 5.1 | Self-Pay | 8 | 0.7 |

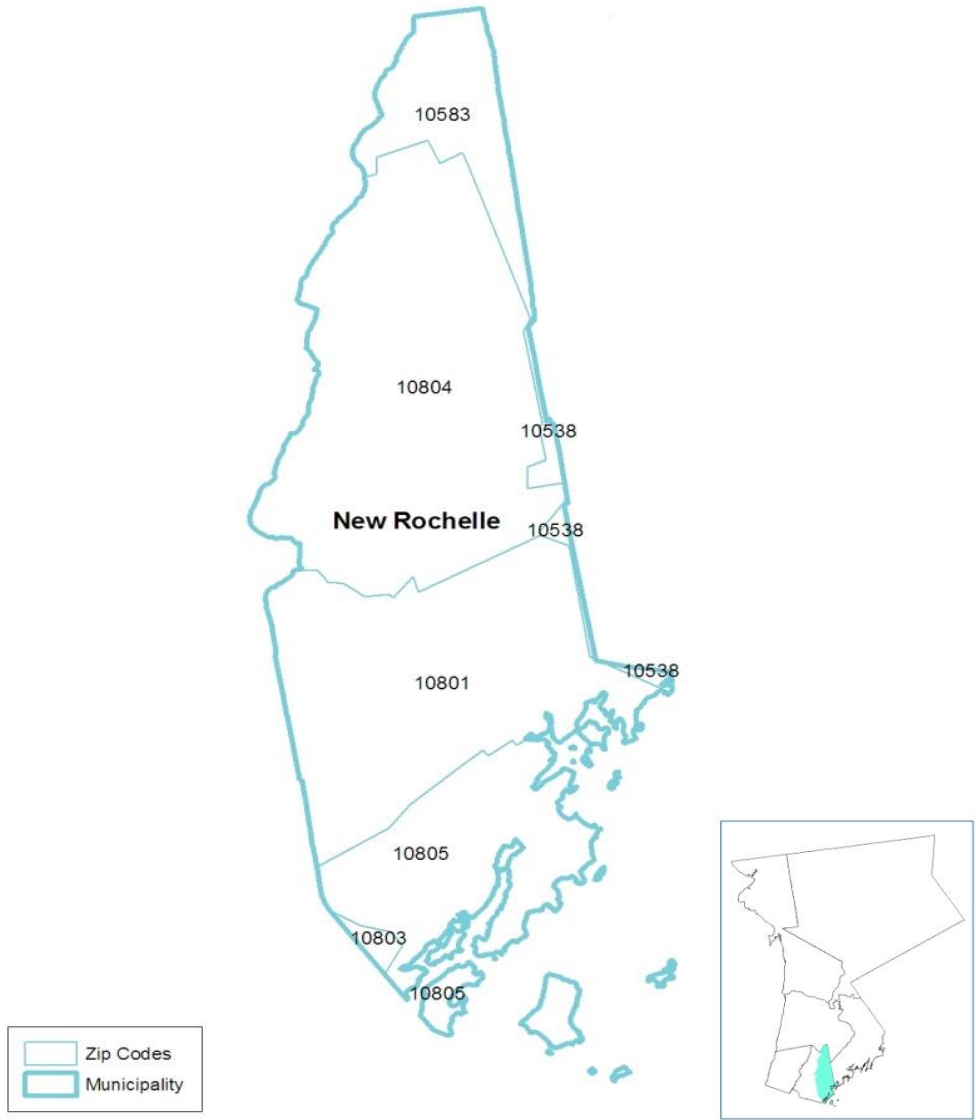
¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:

10514 10546 10549 (15%) 10562 (5%), over representing the region population by 1.3% according to the 2012-2016 ACS.

REGION PROFILE

NEW ROCHELLE CITY



Region Area: 10.4 sq miles
 Population: 79,877

ZIP Codes Serving the Region

10538* 10583* 10801 10802** 10803* 10804
 10805

* Also serve other regions. ** PO Box

Municipalities Included in Region

New Rochelle (C)

REGION PROFILE

NEW ROCHELLE CITY

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | |
|------------------------------|--------|-------|-----------------------|--------|----------------|--|
| Sex | N | % | | N | % ¹ | |
| Male | 39,365 | 49.3 | White | 47,894 | 60.0 | |
| Female | 40,512 | 50.7 | Black | 15,941 | 20.0 | |
| Total | 79,877 | 100.0 | Other | 16,042 | 20.1 | |
| | | | Hispanic ¹ | 23,473 | 29.4 | |
| | | | Non-Hispanic | 56,404 | 70.6 | |

| Age | Total | Male | Female | White | Black | Hispanic ¹ |
|-------|--------|--------|--------|--------|-------|-----------------------|
| 0-4 | 4,400 | 2,367 | 2,033 | 2,601 | 457 | 2,237 |
| 5-9 | 4,566 | 2,375 | 2,191 | 2,609 | 654 | 1,939 |
| 10-14 | 4,690 | 2,395 | 2,295 | 2,685 | 904 | 1,707 |
| 15-17 | 2,931 | 1,668 | 1,263 | 1,415 | 830 | 896 |
| 18-24 | 9,388 | 4,489 | 4,899 | 5,200 | 2,264 | 3,115 |
| 25-44 | 19,470 | 10,043 | 9,427 | 10,276 | 3,581 | 7,669 |
| 45-64 | 21,281 | 10,429 | 10,852 | 13,809 | 4,397 | 4,678 |
| 65-74 | 6,343 | 2,954 | 3,389 | 4,348 | 1,468 | 711 |
| 75+ | 6,808 | 2,645 | 4,163 | 4,951 | 1,386 | 521 |

| Country of Origin | N | % | Language Spoken at Home (5+) | N | % |
|-------------------|--------|------|------------------------------|--------|------|
| U.S. | 56,213 | 70.4 | English | 45,340 | 60.1 |
| Foreign Countries | 23,664 | 29.6 | Spanish | 18,955 | 25.1 |
| Non-Citizen | 12,758 | 16.0 | (Other) non-English | 11,182 | 14.8 |

| Education (25+) | Total | Male | Female |
|-------------------------------|--------|--------|--------|
| Less than High School | 9,280 | 5,023 | 4,257 |
| High School/GED | 10,479 | 5,442 | 5,037 |
| Some College/Associate Degree | 10,400 | 4,977 | 5,423 |
| Bachelor's Degree or Higher | 23,743 | 10,629 | 13,114 |

| Family Structure | Total | White | Black | Hispanic ¹ |
|--|--------|--------|-------|-----------------------|
| Total Family Households | 19,211 | 11,775 | 3,680 | 5,221 |
| Families with Own Children < 18 | 8,392 | -- | -- | -- |
| Single Mother Families with Own Children <18 | 1,278 | -- | -- | -- |

| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ |
|------------------------------|--------|------|--------|--------|--------|-----------------------|
| Unemployment Rate | 7.3 | 6.8 | 8.0 | 7.0 | 7.7 | 9.5 |
| Median Household Income (\$) | 77,320 | -- | -- | 84,018 | 64,915 | 59,022 |
| Poverty Rate (%) | 11.2 | 10.7 | 11.7 | 8.8 | 12.5 | 18.1 |

| Commuters | N | % |
|---|--------|------|
| Commuters Using Alternative Mode of Transportation ² | 17,332 | 45.0 |

¹ Hispanic may be of any race.

² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

NEW ROCHELLE CITY

| BIRTHS (2016) | | | DEATHS (2016) | | |
|--|----------|----------|---|--------------|-------------------------|
| Total Births | 897 | | Birthweight¹ | N | % |
| Birth Rate (per 1,000) | 11.3 | | Low Birthweight | 49 | 5.5 |
| Average Maternal Age | 30.8 | | | | |
| Mother's Race/Ethnicity¹ | N | % | Total | Male | Female |
| White | 377 | 42.0 | Total Deaths | 677 | 312 |
| Black | 157 | 17.5 | Death Rate (per 100,000) | 853.7 | 798.1 |
| Other | 363 | 40.5 | | | 365 |
| Hispanic ² | 418 | 46.6 | | | 907.9 |
| Mother's Education¹ | N | % | Infant Mortality Rate (per 1,000 live birth) | 1.1 | |
| Less than High School | 157 | 17.6 | | | |
| High School or GED | 162 | 18.2 | Top Five Causes of Death | N | % |
| Some College (no degree) | 157 | 17.6 | 1 Circulatory System Diseases | 268 | 39.6 |
| Bachelor's Degree or above | 416 | 46.6 | 2 Neoplasms (any) | 149 | 22.0 |
| Mother's Country of Origin¹ | N | % | 3 Respiratory System Diseases | 63 | 9.3 |
| Foreign | 460 | 51.3 | 4 External Causes | 36 | 5.3 |
| Mother's Age¹ | N | % | 5 Nervous System Diseases | 36 | 5.3 |
| Teenage Mothers | 36 | 4.0 | Average Age at Death | Total | Male |
| Prenatal Care¹ | N | % | Total | 79 | 74 |
| Late or No Prenatal Care | 219 | 24.4 | White | 80 | 76 |
| Financial Coverage at Birth¹ | N | % | Black | 74 | 67 |
| MEDICAID, Child Health Plus | 343 | 50.0 | Other | 80 | 78 |
| Private or Other Insurance | 338 | 49.3 | Hispanic ² | 74 | 73 |
| Self Pay | 5 | 0.7 | | | 75 |
| COMMUNICABLE DISEASES (2018) | | | Top Five Reported Diseases | N | Rate³ |
| | | | 1 Chlamydia | 347 | 434.4 |
| | | | 2 Gonorrhea, Uncomplicated | 66 | 82.6 |
| | | | 3 Hepatitis C Chronic | 52 | 65.1 |
| | | | 4 Syphilis, All Stages | 24 | 30.0 |
| | | | 5 Hepatitis B Chronic | 18 | 22.5 |

¹ Excluding unknown or not stated.

² Hispanics may be of any race.

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | Total | Male | Female | White | Black | Hispanic ⁴ |
|-----------------------|-------|------|--------|-------|-------|-----------------------|
| Chlamydia | 347 | 125 | 222 | 24 | 14 | 9 |
| Gonorrhea | 66 | 47 | 19 | 10 | 18 | 8 |
| Syphilis (all stages) | 24 | 23 | 1 | 3 | 4 | 5 |

REGION PROFILE

NEW ROCHELLE CITY

EMERGENCY ROOM VISITS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 31,378 | 3,956.9 |
| Male | 14,561 | 3,724.5 |
| Female | 16,817 | 4,182.9 |
| White | 16,040 | 3,083.7 |
| Black | 8,568 | 5,809.2 |
| Other | 3,423 | 3,320.1 |
| Hispanic ² | 7,996 | 3,999.6 |

HOSPITALIZATIONS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 8,326 | 1,050.0 |
| Male | 3,791 | 969.7 |
| Female | 4,535 | 1,128.0 |
| White | 5,635 | 1,083.3 |
| Black | 2,220 | 1,505.2 |
| Other | 1,656 | 1,606.2 |
| Hispanic ² | 1,701 | 850.8 |

| | | |
|---------|-------|---------|
| Under 5 | 2,249 | 4,960.3 |
| 5-9 | 1,336 | 2,895.5 |
| 10-14 | 1,216 | 2,634.3 |
| 15-17 | 952 | 3,106.0 |
| 18-24 | 3,480 | 3,951.4 |
| 25-44 | 7,965 | 3,998.1 |
| 45-64 | 7,288 | 3,417.1 |
| 65-74 | 2,668 | 4,533.6 |
| 75+ | 4,224 | 6,470.6 |

| | | |
|---------|-------|---------|
| Under 5 | 847 | 1,868.1 |
| 5-9 | 55 | 119.2 |
| 10-14 | 104 | 225.3 |
| 15-17 | 89 | 290.4 |
| 18-24 | 1,100 | 1,249.0 |
| 25-44 | 933 | 468.3 |
| 45-64 | 1,500 | 703.3 |
| 65-74 | 1,344 | 2,283.8 |
| 75+ | 2,354 | 3,606.0 |

| Top Causes of ER Visits | <u>N</u> | <u>%</u> |
|------------------------------------|----------|----------|
| 1 Injuries | 6,436 | 20.5 |
| 2 Acute Respiratory Infections | 1,751 | 5.6 |
| 3 Infectious And Parasitic Disease | 1,621 | 5.2 |
| 4 Mental Disorders | 1,175 | 3.7 |
| 5 Abdominal Pain | 883 | 2.8 |

| Top Causes of Hospitalization³ | <u>N</u> | <u>%</u> |
|--|----------|----------|
| 1 Circulatory System Diseases | 1,160 | 13.9 |
| 2 Mental & Behavioral Disorders | 792 | 9.5 |
| 3 Digestive System Diseases | 740 | 8.9 |
| 4 Infectious and Parasitic Disease | 570 | 6.8 |
| 5 Respiratory System Diseases | 555 | 6.7 |

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|--------------------------------|----------|----------|
| 1 Montefiore New Rochelle | 21,701 | 69.2 |
| 2 White Plains Hospital Center | 2,564 | 8.2 |
| 3 Westchester Medical Center | 1,327 | 4.2 |

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|--------------------------------|----------|----------|
| 1 Montefiore New Rochelle | 3,408 | 40.9 |
| 2 White Plains Hospital Center | 1,099 | 13.2 |
| 3 Westchester Medical Center | 487 | 5.8 |

| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 18,499 | 59.0 |
| Medicare | 6,018 | 19.2 |
| Medicaid | 3,403 | 10.8 |
| Other | 2,928 | 9.3 |
| Self-Pay | 530 | 1.7 |

| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 4,189 | 50.3 |
| Medicare | 3,158 | 37.9 |
| Medicaid | 801 | 9.6 |
| Other | 111 | 1.3 |
| Self-Pay | 67 | 0.8 |

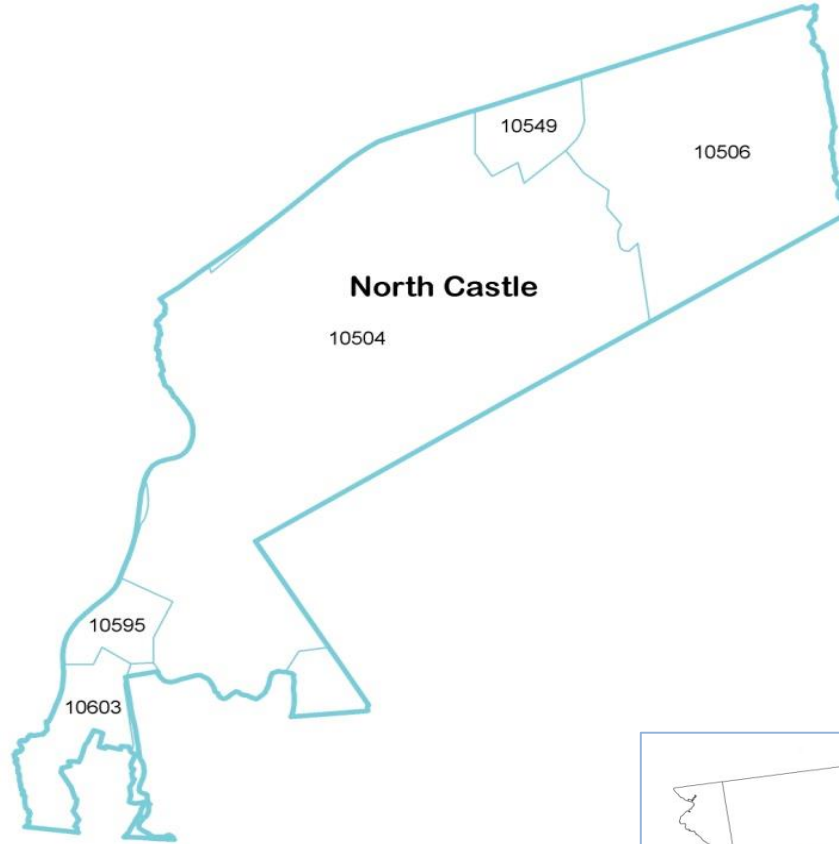
¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:

10583 (10%) 10801 10804 10805, representing 100.0% of the region population according to 2012-2016 ACS.

REGION PROFILE

NORTH CASTLE TOWN



Region Area: 26.2 sq miles

Population: 12,309

ZIP Codes Serving the Region

10504* 10506* 10549* 10595* 10603*

* Also serve other regions.

Municipalities Included in Region

North Castle (T)

REGION PROFILE

NORTH CASTLE TOWN

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | |
|---|---------|----------------|-----------------------|--|----------------|-----------------------|
| Sex | N | % | | N | % ¹ | |
| Male | 6,004 | 48.8 | White | 10,950 | 89.0 | |
| Female | 6,305 | 51.2 | Black | 275 | 2.2 | |
| Total | 12,309 | 100.0 | Other | 1,084 | 8.8 | |
| | | | Hispanic ¹ | 1,223 | 9.9 | |
| | | | Non-Hispanic | 11,086 | 90.1 | |
| Age | Total | Male | Female | White | Black | Hispanic ¹ |
| 0-4 | 599 | 300 | 299 | 514 | 16 | 36 |
| 5-9 | 893 | 473 | 420 | 736 | 14 | 81 |
| 10-14 | 1,080 | 620 | 460 | 976 | 39 | 79 |
| 15-17 | 751 | 274 | 477 | 676 | 33 | 66 |
| 18-24 | 843 | 378 | 465 | 771 | 14 | 105 |
| 25-44 | 2,164 | 1,031 | 1,133 | 1,802 | 54 | 399 |
| 45-64 | 4,311 | 2,088 | 2,223 | 3,845 | 94 | 379 |
| 65-74 | 1,028 | 543 | 485 | 999 | 11 | 60 |
| 75+ | 640 | 297 | 343 | 631 | 0 | 18 |
| Country of Origin | N | % ¹ | | Language Spoken at Home (5+) | N | % ¹ |
| U.S. | 10,712 | 87.0 | | English | 9,289 | 79.3 |
| Foreign Countries | 1,597 | 13.0 | | Spanish | 1,011 | 8.6 |
| Non-Citizen | 509 | 4.1 | | (Other) non-English | 1,410 | 12.0 |
| Education (25+) | Total | Male | Female | | | |
| Less than High School | 233 | 86 | 147 | | | |
| High School/GED | 789 | 265 | 524 | | | |
| Some College/Associate Degree | 1,074 | 571 | 503 | | | |
| Bachelor's Degree or Higher | 6,047 | 3,037 | 3,010 | | | |
| Family Structure | Total | White | Black | Hispanic ¹ | | |
| Total Family Households | 3,561 | 3,240 | 71 | 307 | | |
| Families with Own Children < 18 | 1,725 | -- | -- | -- | | |
| Single Mother Families with Own Children <18 | 155 | -- | -- | -- | | |
| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ |
| Unemployment Rate | 5.0 | 3.5 | 6.7 | 4.2 | 25.5 | 3.6 |
| Median Household Income (\$) | 180,859 | -- | -- | 185,139 | 139,028 | 92,679 |
| Poverty Rate (%) | 2.0 | 2.2 | 1.8 | 2.0 | 0.0 | 0.6 |
| Commuters | N | % ¹ | | ¹ Hispanic may be of any race. ² Including carpooling, public transportation, bicycling, walking, or telecommuting. | | |
| Commuters Using Alternative Mode of Transportation ² | 2,034 | 33.6 | | | | |

REGION PROFILE

NORTH CASTLE TOWN

| BIRTHS (2016) | | | Birthweight¹ | | |
|--|----------|----------|---|---------------|-------------------------|
| Total Births | 94 | | Low Birthweight | <u>N</u> 3 | <u>%</u> 3.2 |
| Birth Rate (per 1,000) | 7.7 | | | | |
| Average Maternal Age | 34.1 | | | | |
| | | | DEATHS (2016) | | |
| | | | | <u>Total</u> | <u>Male</u> |
| | | | | | <u>Female</u> |
| Mother's Race/Ethnicity¹ | <u>N</u> | <u>%</u> | Total Deaths | 55 | 31 |
| White | 72 | 76.6 | Death Rate (per 100,000) | 450.9 | 512.1 |
| Black | 2 | 2.1 | | | 390.6 |
| Other | 20 | 21.3 | | | |
| Hispanic ² | 10 | 10.6 | | | |
| | | | Infant Mortality Rate (per 1,000 live birth) | | 0.0 |
| | | | | | |
| Mother's Education¹ | <u>N</u> | <u>%</u> | Top Five Causes of Death | <u>N</u> | <u>%</u> |
| Less than High School | 3 | 3.2 | 1 Circulatory System Diseases | 18 | 32.7 |
| High School or GED | 2 | 2.1 | 2 Neoplasms (any) | 14 | 25.5 |
| Some College (no degree) | 13 | 13.8 | 3 Nervous System Diseases | 5 | 9.1 |
| Bachelor's Degree or above | 76 | 80.9 | 4 Diabetes | 5 | 9.1 |
| | | | 5 External Causes | 4 | 7.3 |
| | | | | | |
| Mother's Country of Origin¹ | <u>N</u> | <u>%</u> | Average Age at Death | <u>Total</u> | <u>Male</u> |
| Foreign | 23 | 24.5 | Total | 81 | 81 |
| | | | White | 82 | 81 |
| | | | Black | 46 | -- |
| | | | Other | 70 | -- |
| | | | Hispanic ² | -- | -- |
| | | | | | |
| Mother's Age¹ | <u>N</u> | <u>%</u> | | | |
| Teenage Mothers | 0 | 0.0 | | | |
| | | | | | |
| Prenatal Care¹ | <u>N</u> | <u>%</u> | | | |
| Late or No Prenatal Care | 9 | 9.6 | | | |
| | | | | | |
| Financial Coverage at Birth¹ | <u>N</u> | <u>%</u> | COMMUNICABLE DISEASES (2018) | | |
| MEDICAID, Child Health Plus | 8 | 12.7 | Top Five Reported Diseases | <u>N</u> | <u>Rate³</u> |
| Private or Other Insurance | 55 | 87.3 | 1 Chlamydia | 28 | 227.5 |
| Self Pay | 0 | 0.0 | 2 Hepatitis C Chronic | 7 | 56.9 |
| | | | 3 Babesiosis | 6 | 48.7 |
| | | | 4 Lyme Disease | 4 | 32.5 |
| | | | 5 Campylobacteriosis | 3 | 24.4 |
| | | | | | |

¹ Excluding unknown or not stated.

² Hispanics may be of any race.

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | <u>Total</u> | <u>Male</u> | <u>Female</u> | <u>White</u> | <u>Black</u> | <u>Hispanic⁴</u> |
|-----------------------|--------------|-------------|---------------|--------------|--------------|-----------------------------|
| Chlamydia | 28 | 8 | 20 | 4 | 0 | 2 |
| Gonorrhea | 2 | 1 | 1 | 0 | 0 | 0 |
| Syphilis (all stages) | 1 | 1 | 0 | 0 | 0 | 0 |

REGION PROFILE

NORTH CASTLE TOWN

EMERGENCY ROOM VISITS (2016)¹

| | N | Rate (per 10,000) |
|-----------------------|-------|-------------------|
| Total | 2,125 | 1,742.1 |
| Male | 1,084 | 1,790.6 |
| Female | 1,041 | 1,694.3 |
| White | 2,024 | 1,930.0 |
| Black | 77 | 2,730.5 |
| Other | 299 | 2,815.4 |
| Hispanic ² | 139 | 1,868.3 |

HOSPITALIZATIONS (2016)¹

| | N | Rate (per 10,000) |
|-----------------------|-----|-------------------|
| Total | 778 | 637.8 |
| Male | 378 | 624.4 |
| Female | 400 | 651.0 |
| White | 664 | 633.2 |
| Black | 20 | 709.2 |
| Other | 132 | 1,242.9 |
| Hispanic ² | 30 | 403.2 |

| | | |
|---------|-----|---------|
| Under 5 | 115 | 1,975.9 |
| 5-9 | 92 | 1,050.2 |
| 10-14 | 88 | 850.2 |
| 15-17 | 88 | 1,074.5 |
| 18-24 | 212 | 2,646.7 |
| 25-44 | 319 | 1,450.0 |
| 45-64 | 478 | 1,134.3 |
| 65-74 | 215 | 2,069.3 |
| 75+ | 518 | 8,196.2 |

| | | |
|---------|-----|---------|
| Under 5 | 72 | 1,237.1 |
| 5-9 | 8 | 91.3 |
| 10-14 | 9 | 87.0 |
| 15-17 | 6 | 73.3 |
| 18-24 | 75 | 936.3 |
| 25-44 | 80 | 363.6 |
| 45-64 | 119 | 282.4 |
| 65-74 | 117 | 1,126.1 |
| 75+ | 292 | 4,620.3 |

| Top Causes of ER Visits | N | % |
|------------------------------------|-----|------|
| 1 Injuries | 519 | 24.4 |
| 2 Abdominal Pain | 87 | 4.1 |
| 3 Infectious And Parasitic Disease | 78 | 3.7 |
| 4 Mental Disorders | 61 | 2.9 |
| 5 Acute Respiratory Infections | 61 | 2.9 |

| Top Causes of Hospitalization ³ | N | % |
|--|-----|------|
| 1 Circulatory System Diseases | 129 | 16.6 |
| 2 Other ^A | 62 | 8.0 |
| 3 Digestive System Diseases | 59 | 7.6 |
| 4 Respiratory System Diseases | 57 | 7.3 |
| 5 Neoplasms | 53 | 6.8 |

^A Musculoskeletal System & Connective Tissue Diseases

| Top Receiving Hospitals | N | % |
|---------------------------------|-------|------|
| 1 Northern Westchester Hospital | 1,425 | 67.1 |
| 2 White Plains Hospital Center | 267 | 12.6 |
| 3 Westchester Medical Center | 162 | 7.6 |

| Top Receiving Hospitals | N | % |
|---------------------------------|-----|------|
| 1 Northern Westchester Hospital | 401 | 51.5 |
| 2 White Plains Hospital Center | 95 | 12.2 |
| 3 Westchester Medical Center | 69 | 8.9 |

| Insurance Type | N | % |
|----------------|-------|------|
| Private | 1,156 | 54.4 |
| Medicare | 693 | 32.6 |
| Medicaid | 190 | 8.9 |
| Other | 44 | 2.1 |
| Self-Pay | 42 | 2.0 |

| Insurance Type | N | % |
|----------------|-----|------|
| Private | 346 | 44.5 |
| Medicare | 377 | 48.5 |
| Medicaid | 47 | 6.0 |
| Other | 6 | 0.8 |
| Self-Pay | 2 | 0.3 |

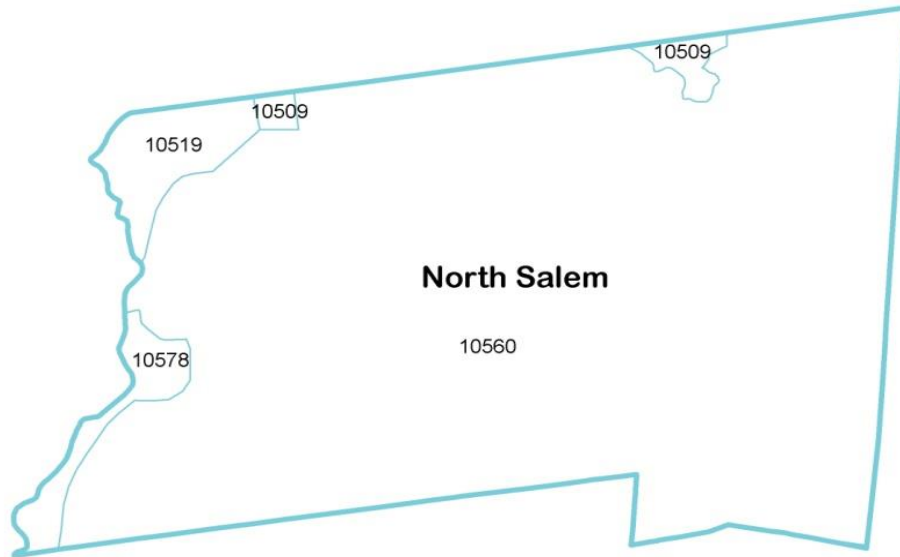
¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:

10504 10506 (50%) 10549 (2%) 10603 (2%), representing 94.8% of the region population according to the 2012-2016 ACS.

REGION PROFILE

NORTH SALEM TOWN



Region Area: 23.4 sq miles
Population: 5,205

ZIP Codes Serving the Region

10509 10519 10560* 10578*

* Also serve other regions.

Municipalities Included in Region

North Salem (T)

REGION PROFILE

NORTH SALEM TOWN

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | |
|------------------------------|-------|-------|-----------------------|-------|----------------|--|
| Sex | N | % | | N | % ¹ | |
| Male | 2,473 | 47.5 | White | 4,562 | 87.6 | |
| Female | 2,732 | 52.5 | Black | 182 | 3.5 | |
| Total | 5,205 | 100.0 | Other | 461 | 8.9 | |
| | | | Hispanic ¹ | 417 | 8.0 | |
| | | | Non-Hispanic | 4,788 | 92.0 | |

| Age | Total | Male | Female | White | Black | Hispanic ¹ |
|-------|-------|------|--------|-------|-------|-----------------------|
| 0-4 | 135 | 88 | 47 | 111 | 0 | 11 |
| 5-9 | 325 | 159 | 166 | 233 | 11 | 29 |
| 10-14 | 322 | 174 | 148 | 240 | 28 | 24 |
| 15-17 | 297 | 169 | 128 | 225 | 0 | 15 |
| 18-24 | 366 | 113 | 253 | 347 | 0 | 69 |
| 25-44 | 823 | 339 | 484 | 656 | 70 | 87 |
| 45-64 | 1,878 | 960 | 918 | 1,723 | 47 | 146 |
| 65-74 | 549 | 297 | 252 | 549 | 0 | 0 |
| 75+ | 510 | 174 | 336 | 478 | 26 | 36 |

| Country of Origin | N | % | Language Spoken at Home (5+) | N | % |
|-------------------|-------|------|------------------------------|-------|------|
| U.S. | 4,438 | 85.3 | English | 4,342 | 85.6 |
| Foreign Countries | 767 | 14.7 | Spanish | 249 | 4.9 |
| Non-Citizen | 238 | 4.6 | (Other) non-English | 479 | 9.4 |

| Education (25+) | Total | Male | Female |
|-------------------------------|-------|-------|--------|
| Less than High School | 148 | 83 | 65 |
| High School/GED | 654 | 219 | 435 |
| Some College/Associate Degree | 704 | 358 | 346 |
| Bachelor's Degree or Higher | 2,254 | 1,110 | 1,144 |

| Family Structure | Total | White | Black | Hispanic ¹ |
|--|-------|-------|-------|-----------------------|
| Total Family Households | 1,404 | 1,292 | 29 | 104 |
| Families with Own Children < 18 | 529 | -- | -- | -- |
| Single Mother Families with Own Children <18 | 31 | -- | -- | -- |

| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ |
|------------------------------|---------|------|--------|---------|-------|-----------------------|
| Unemployment Rate | 2.9 | 3.5 | 2.3 | 2.8 | 0.0 | 4.0 |
| Median Household Income (\$) | 137,414 | -- | -- | 136,897 | -- | 130,556 |
| Poverty Rate (%) | 5.2 | 5.6 | 4.9 | 5.5 | 7.3 | 22.6 |

| Commuters | N | % |
|---|-----|------|
| Commuters Using Alternative Mode of Transportation ² | 775 | 29.5 |

¹ Hispanic may be of any race.

² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

NORTH SALEM TOWN

| BIRTHS (2016) | | | DEATHS (2016) | | |
|--|----------|----------|---|--------------|-------------------------|
| Total Births | 43 | | Birthweight¹ | N | % |
| Birth Rate (per 1,000) | 8.3 | | Low Birthweight | 3 | 7.0 |
| Average Maternal Age | 31.8 | | | | |
| Mother's Race/Ethnicity¹ | N | % | Total | Male | Female |
| White | 36 | 83.7 | Total Deaths | 48 | 20 |
| Black | 2 | 4.7 | Death Rate (per 100,000) | 927.0 | 809.1 |
| Other | 5 | 11.6 | | | 28 |
| Hispanic ² | 9 | 20.9 | | | 1034.7 |
| Mother's Education¹ | N | % | Infant Mortality Rate (per 1,000 live birth) | 0.0 | |
| Less than High School | 2 | 4.7 | | | |
| High School or GED | 2 | 4.7 | Top Five Causes of Death | N | % |
| Some College (no degree) | 7 | 16.3 | 1 Circulatory System Diseases | 22 | 45.8 |
| Bachelor's Degree or above | 32 | 74.4 | 2 Neoplasms (any) | 7 | 14.6 |
| Mother's Country of Origin¹ | N | % | 3 Nervous System Diseases | 7 | 14.6 |
| Foreign | 5 | 11.6 | 4 Respiratory System Diseases | 6 | 12.5 |
| Mother's Age¹ | N | % | 5 External Causes | 3 | 6.3 |
| Teenage Mothers | 1 | 2.3 | Average Age at Death | Total | Male |
| Prenatal Care¹ | N | % | Total | 86 | 82 |
| Late or No Prenatal Care | 4 | 9.3 | White | 86 | 82 |
| Financial Coverage at Birth¹ | N | % | Black | 89 | 89 |
| MEDICAID, Child Health Plus | 7 | 18.4 | Other | -- | -- |
| Private or Other Insurance | 31 | 81.6 | Hispanic ² | -- | -- |
| Self Pay | 0 | 0.0 | | | |
| COMMUNICABLE DISEASES (2018) | | | Top Five Reported Diseases | N | Rate³ |
| | | | 1 Chlamydia | 10 | 192.1 |
| | | | 2 Hepatitis C Chronic | 7 | 134.5 |
| | | | 3 Babesiosis | 6 | 115.3 |
| | | | 4 Campylobacteriosis | 4 | 76.8 |
| | | | 5 Anaplasmosis | 3 | 57.6 |

¹ Excluding unknown or not stated.

² Hispanics may be of any race.

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | Total | Male | Female | White | Black | Hispanic ⁴ |
|-----------------------|-------|------|--------|-------|-------|-----------------------|
| Chlamydia | 10 | 4 | 6 | 0 | 0 | 0 |
| Gonorrhea | 1 | 0 | 1 | 0 | 0 | 0 |
| Syphilis (all stages) | 0 | 0 | 0 | 0 | 0 | 0 |

REGION PROFILE

NORTH SALEM TOWN

| EMERGENCY ROOM VISITS (2016) ¹ | | | HOSPITALIZATIONS (2016) ¹ | | |
|---|----------|-------------------|--|----------|-------------------|
| | N | Rate (per 10,000) | | N | Rate (per 10,000) |
| Total | 1,056 | 2,039.4 | Total | 398 | 768.6 |
| Male | 467 | 1,889.2 | Male | 168 | 679.6 |
| Female | 589 | 2,176.6 | Female | 230 | 850.0 |
| White | 575 | 1,207.2 | White | 223 | 468.2 |
| Black | 17 | 1,666.7 | Black | 3 | 294.1 |
| Other | 398 | 15,607.8 | Other | 114 | 4,470.6 |
| Hispanic ² | 60 | 1,892.7 | Hispanic ² | 17 | 536.3 |
| Under 5 | 62 | 4,335.7 | Under 5 | 47 | 3,286.7 |
| 5-9 | 38 | 1,092.0 | 5-9 | 8 | 229.9 |
| 10-14 | 36 | 1,309.1 | 10-14 | 4 | 145.5 |
| 15-17 | 24 | 745.3 | 15-17 | 2 | 62.1 |
| 18-24 | 121 | 3,324.2 | 18-24 | 49 | 1,346.2 |
| 25-44 | 194 | 2,477.7 | 25-44 | 30 | 383.1 |
| 45-64 | 327 | 1,763.8 | 45-64 | 104 | 560.9 |
| 65-74 | 108 | 1,806.0 | 65-74 | 67 | 1,120.4 |
| 75+ | 146 | 2,973.5 | 75+ | 87 | 1,771.9 |
| Top Causes of ER Visits | N | % | Top Causes of Hospitalization³ | N | % |
| 1 Injuries | 274 | 25.9 | 1 Circulatory System Diseases | 62 | 15.6 |
| 2 Acute Respiratory Infections | 42 | 4.0 | 2 Other ^A | 45 | 11.3 |
| 3 Abdominal Pain | 40 | 3.8 | 3 Digestive System Diseases | 35 | 8.8 |
| 4 Infectious And Parasitic Disease | 29 | 2.7 | 4 Neoplasms | 23 | 5.8 |
| 5 Mental Disorders | 25 | 2.4 | 5 Injury and Poisoning | 23 | 5.8 |
| | | | ^A Musculoskeletal System & Connective Tissue Diseases | | |
| Top Receiving Hospitals | N | % | Top Receiving Hospitals | N | % |
| 1 Northern Westchester Hospital | 453 | 42.9 | 1 Northern Westchester Hospital | 178 | 44.7 |
| 2 Putnam Hospital Center | 395 | 37.4 | 2 Putnam Hospital Center | 93 | 23.4 |
| 3 Westchester Medical Center | 51 | 4.8 | 3 Westchester Medical Center | 29 | 7.3 |
| Insurance Type | N | % | Insurance Type | N | % |
| Private | 553 | 52.4 | Private | 205 | 51.5 |
| Medicare | 258 | 24.4 | Medicare | 144 | 36.2 |
| Medicaid | 173 | 16.4 | Medicaid | 40 | 10.1 |
| Other | 25 | 2.4 | Other | 7 | 1.8 |
| Self-Pay | 47 | 4.5 | Self-Pay | 2 | 0.5 |

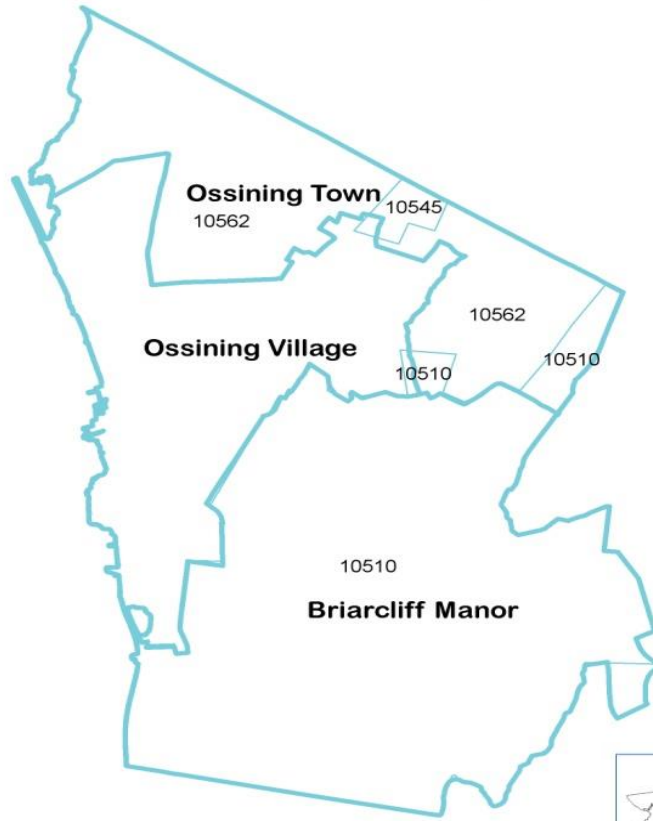
¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:

10519 10560 10578 (10%), representing 99.5% of the region population according to 2012-2016 ACS.

REGION PROFILE

OSSINING TOWN



Region Area: 10.2 sq miles

Population: 38,257

ZIP Codes Serving the Region

10510* 10545 10562*

* Also serve other regions.

Municipalities Included in Region

Briarcliff Manor (V) (Ossining Part)
 Ossining (V)
 Ossining (TOV)

REGION PROFILE

OSSINING TOWN

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | | |
|---|--------|----------------|------------------------------|-----------------------|----------------|-----------------------|---|
| Sex | N | % | | N | % ¹ | | |
| Male | 19,600 | 51.2 | White | 21,441 | 56.0 | | |
| Female | 18,657 | 48.8 | Black | 4,748 | 12.4 | | |
| Total | 38,257 | 100.0 | Other | 12,068 | 31.5 | | |
| | | | Hispanic ¹ | 13,389 | 35.0 | | |
| | | | Non-Hispanic | 24,868 | 65.0 | | |
| Age | Total | Male | Female | White | Black | Hispanic ¹ | |
| 0-4 | 2,175 | 1,104 | 1,071 | 860 | 251 | 1,311 | |
| 5-9 | 2,038 | 1,201 | 837 | 1,112 | 275 | 892 | |
| 10-14 | 2,779 | 1,299 | 1,480 | 1,083 | 236 | 1,505 | |
| 15-17 | 1,562 | 914 | 648 | 730 | 108 | 642 | |
| 18-24 | 2,655 | 1,250 | 1,405 | 1,444 | 350 | 916 | |
| 25-44 | 10,774 | 6,027 | 4,747 | 4,839 | 1,611 | 5,232 | |
| 45-64 | 10,783 | 5,538 | 5,245 | 6,938 | 1,400 | 2,449 | |
| 65-74 | 2,768 | 1,161 | 1,607 | 2,171 | 258 | 326 | |
| 75+ | 2,723 | 1,106 | 1,617 | 2,264 | 259 | 116 | |
| Country of Origin | N | % | Language Spoken at Home (5+) | | | N | % |
| U.S. | 26,475 | 69.2 | English | 20,965 | | 58.1 | |
| Foreign Countries | 11,782 | 30.8 | Spanish | 11,386 | | 31.6 | |
| Non-Citizen | 7,149 | 18.7 | (Other) non-English | 3,731 | | 10.3 | |
| Education (25+) | Total | Male | Female | | | | |
| Less than High School | 4,735 | 2,729 | 2,006 | | | | |
| High School/GED | 5,338 | 2,958 | 2,380 | | | | |
| Some College/Associate Degree | 5,212 | 2,671 | 2,541 | | | | |
| Bachelor's Degree or Higher | 11,763 | 5,474 | 6,289 | | | | |
| Family Structure | Total | White | Black | Hispanic ¹ | | | |
| Total Family Households | 8,961 | 5,594 | 758 | 2,898 | | | |
| Families with Own Children < 18 | 4,328 | -- | -- | -- | | | |
| Single Mother Families with Own Children <18 | 809 | -- | -- | -- | | | |
| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ | |
| Unemployment Rate | 5.3 | 7.0 | 3.4 | 4.9 | 6.0 | 5.2 | |
| Median Household Income (\$) | 82,645 | -- | -- | 106,756 | 72,407 | 60,314 | |
| Poverty Rate (%) | 8.9 | 7.3 | 10.4 | 7.1 | 6.7 | 14.5 | |
| Commuters | N | % ² | | | | | |
| Commuters Using Alternative Mode of Transportation ² | 8,167 | 43.5 | | | | | |

¹ Hispanic may be of any race.² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

OSSINING TOWN

| BIRTHS (2016) | | | DEATHS (2016) | | |
|--|----------|----------|---|--------------|-------------------------|
| Total Births | 409 | | Birthweight¹ | N | % |
| Birth Rate (per 1,000) | 10.7 | | Low Birthweight | 36 | 8.8 |
| Average Maternal Age | 31.6 | | | | |
| Mother's Race/Ethnicity¹ | N | % | Total | Male | Female |
| White | 181 | 44.3 | Total Deaths | 268 | 130 |
| Black | 42 | 10.3 | Death Rate (per 100,000) | 737.9 | 683.1 |
| Other | 186 | 45.5 | | | 138 |
| Hispanic ² | 210 | 51.3 | | | 719.9 |
| | | | Infant Mortality Rate (per 1,000 live birth) | | 7.3 |
| Mother's Education¹ | N | % | Top Five Causes of Death | N | % |
| Less than High School | 92 | 22.5 | 1 Circulatory System Diseases | 86 | 32.1 |
| High School or GED | 67 | 16.4 | 2 Neoplasms (any) | 65 | 24.3 |
| Some College (no degree) | 82 | 20.0 | 3 Respiratory System Diseases | 28 | 10.4 |
| Bachelor's Degree or above | 168 | 41.1 | 4 External Causes | 18 | 6.7 |
| | | | 5 Infectious Diseases | 17 | 6.3 |
| Mother's Country of Origin¹ | N | % | Average Age at Death | Total | Male |
| Foreign | 225 | 55.0 | Total | 77 | 75 |
| | | | White | 79 | 77 |
| Mother's Age¹ | N | % | Black | 66 | 62 |
| Teenage Mothers | 8 | 2.0 | Other | 73 | 66 |
| | | | Hispanic ² | 65 | 60 |
| Prenatal Care¹ | N | % | | | |
| Late or No Prenatal Care | 70 | 17.1 | | | |
| Financial Coverage at Birth¹ | N | % | COMMUNICABLE DISEASES (2018) | | |
| MEDICAID, Child Health Plus | 165 | 41.3 | Top Five Reported Diseases | N | Rate³ |
| Private or Other Insurance | 235 | 58.8 | 1 Chlamydia | 110 | 287.5 |
| Self Pay | 0 | 0.0 | 2 Hepatitis C Chronic | 29 | 75.8 |
| | | | 3 Campylobacteriosis | 19 | 49.7 |
| | | | 4 Babesiosis | 14 | 36.6 |
| | | | 5 Gonorrhea, Uncomplicated | 12 | 31.4 |

¹ Excluding unknown or not stated.

² Hispanics may be of any race.

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | Total | Male | Female | White | Black | Hispanic⁴ |
|-----------------------|--------------|-------------|---------------|--------------|--------------|-----------------------------|
| Chlamydia | 110 | 49 | 61 | 11 | 14 | 1 |
| Gonorrhea | 12 | 7 | 5 | 2 | 3 | 1 |
| Syphilis (all stages) | 6 | 6 | 0 | 1 | 1 | 3 |

REGION PROFILE

OSSINING TOWN

| EMERGENCY ROOM VISITS (2016) ¹ | | | HOSPITALIZATIONS (2016) ¹ | | |
|---|----------|-------------------|--|----------|-------------------|
| | N | Rate (per 10,000) | | N | Rate (per 10,000) |
| Total | 13,698 | 3,591.0 | Total | 4,164 | 1,091.6 |
| Male | 6,354 | 3,336.3 | Male | 1,861 | 977.2 |
| Female | 7,344 | 3,845.0 | Female | 2,303 | 1,205.8 |
| White | 7,479 | 3,046.1 | White | 2,554 | 1,040.2 |
| Black | 2,020 | 5,151.7 | Black | 490 | 1,249.7 |
| Other | 3,971 | 4,302.3 | Other | 1,059 | 1,147.3 |
| Hispanic ² | 3,713 | 3,072.1 | Hispanic ² | 793 | 656.1 |
| Under 5 | 1,242 | 5,758.0 | Under 5 | 540 | 2,503.5 |
| 5-9 | 708 | 2,971.0 | 5-9 | 53 | 222.4 |
| 10-14 | 664 | 2,553.8 | 10-14 | 56 | 215.4 |
| 15-17 | 416 | 3,001.4 | 15-17 | 43 | 310.2 |
| 18-24 | 1,091 | 3,987.6 | 18-24 | 544 | 1,988.3 |
| 25-44 | 3,274 | 3,097.4 | 25-44 | 515 | 487.2 |
| 45-64 | 2,987 | 2,727.4 | 45-64 | 690 | 630.0 |
| 65-74 | 1,169 | 4,366.8 | 65-74 | 566 | 2,114.3 |
| 75+ | 2,147 | 7,999.3 | 75+ | 1,157 | 4,310.7 |
| Top Causes of ER Visits | N | % | Top Causes of Hospitalization³ | N | % |
| 1 Injuries | 2,993 | 21.8 | 1 Circulatory System Diseases | 452 | 10.9 |
| 2 Infectious And Parasitic Disease | 752 | 5.5 | 2 Digestive System Diseases | 385 | 9.2 |
| 3 Acute Respiratory Infections | 550 | 4.0 | 3 Infectious and Parasitic Disease | 354 | 8.5 |
| 4 Abdominal Pain | 456 | 3.3 | 4 Other ^A | 317 | 7.6 |
| 5 Mental Disorders | 437 | 3.2 | 5 Respiratory System Diseases | 282 | 6.8 |
| | | | ^A Musculoskeletal System & Connective Tissue Diseases | | |
| Top Receiving Hospitals | N | % | Top Receiving Hospitals | N | % |
| 1 Phelps Memorial Hospital | 8,349 | 61.0 | 1 Phelps Memorial Hospital | 1,871 | 44.9 |
| 2 Westchester Medical Center | 2,740 | 20.0 | 2 Westchester Medical Center | 872 | 20.9 |
| 3 Northern Westchester Hospital | 704 | 5.1 | 3 Northern Westchester Hospital | 397 | 9.5 |
| Insurance Type | N | % | Insurance Type | N | % |
| Private | 4,722 | 34.5 | Private | 1,403 | 33.7 |
| Medicare | 3,434 | 25.1 | Medicare | 1,693 | 40.7 |
| Medicaid | 3,815 | 27.9 | Medicaid | 867 | 20.8 |
| Other | 731 | 5.3 | Other | 139 | 3.3 |
| Self-Pay | 996 | 7.3 | Self-Pay | 62 | 1.5 |

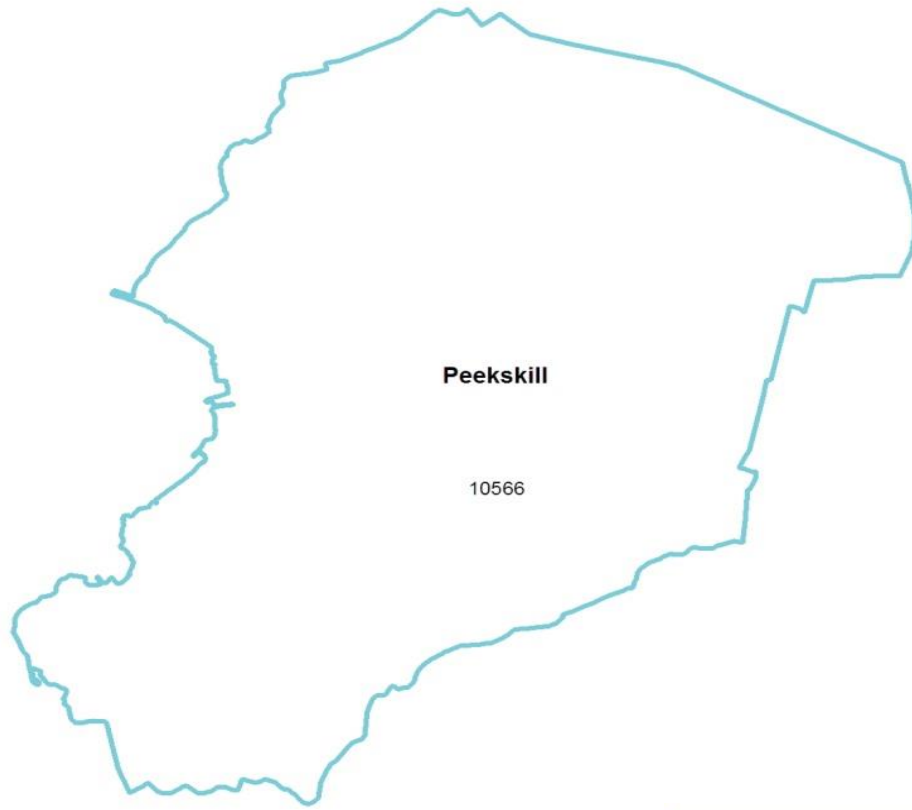
¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:

10510 (70%) 10545 10562 (95%), representing 98.5% of the region population according to the 2010 Census. according to 2012-2016 ACS.

REGION PROFILE

PEEKSKILL CITY



Region Area: 4.6 sq miles

Population: 24,111

ZIP Codes Serving the Region

10566

* Also serve other regions.

Municipalities Included in Region

Peekskill (C)

REGION PROFILE

PEEKSKILL CITY

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | |
|------------------------------|--------|-------|-----------------------|--------|----------------|--|
| Sex | N | % | | N | % ¹ | |
| Male | 11,756 | 48.8 | White | 10,086 | 41.8 | |
| Female | 12,355 | 51.2 | Black | 5,148 | 21.4 | |
| Total | 24,111 | 100.0 | Other | 8,877 | 36.8 | |
| | | | Hispanic ¹ | 9,523 | 39.5 | |
| | | | Non-Hispanic | 14,588 | 60.5 | |

| Age | Total | Male | Female | White | Black | Hispanic ¹ |
|-------|-------|-------|--------|-------|-------|-----------------------|
| 0-4 | 1,636 | 745 | 891 | 551 | 218 | 1,127 |
| 5-9 | 1,832 | 1,100 | 732 | 595 | 441 | 830 |
| 10-14 | 1,311 | 486 | 825 | 363 | 271 | 623 |
| 15-17 | 680 | 413 | 267 | 137 | 252 | 339 |
| 18-24 | 1,796 | 1,099 | 697 | 455 | 418 | 993 |
| 25-44 | 6,734 | 3,403 | 3,331 | 2,670 | 1,213 | 3,095 |
| 45-64 | 6,339 | 3,120 | 3,219 | 2,766 | 1,698 | 1,862 |
| 65-74 | 2,259 | 906 | 1,353 | 1,265 | 487 | 411 |
| 75+ | 1,524 | 484 | 1,040 | 1,284 | 150 | 243 |

| Country of Origin | N | % | Language Spoken at Home (5+) | N | % |
|-------------------|--------|------|------------------------------|--------|------|
| U.S. | 17,541 | 72.8 | English | 14,186 | 63.1 |
| Foreign Countries | 6,570 | 27.2 | Spanish | 6,768 | 30.1 |
| Non-Citizen | 4,458 | 18.5 | (Other) non-English | 1,521 | 6.8 |

| Education (25+) | Total | Male | Female |
|-------------------------------|-------|-------|--------|
| Less than High School | 3,645 | 1,777 | 1,868 |
| High School/GED | 5,017 | 2,622 | 2,395 |
| Some College/Associate Degree | 3,624 | 1,605 | 2,019 |
| Bachelor's Degree or Higher | 4,570 | 1,909 | 2,661 |

| Family Structure | Total | White | Black | Hispanic ¹ |
|--|-------|-------|-------|-----------------------|
| Total Family Households | 5,694 | 2,809 | 1,035 | 2,033 |
| Families with Own Children < 18 | 2,673 | -- | -- | -- |
| Single Mother Families with Own Children <18 | 772 | -- | -- | -- |

| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ |
|------------------------------|--------|------|--------|--------|--------|-----------------------|
| Unemployment Rate | 6.8 | 6.1 | 7.6 | 3.5 | 7.6 | 6.8 |
| Median Household Income (\$) | 54,839 | -- | -- | 73,435 | 51,341 | 45,710 |
| Poverty Rate (%) | 13.0 | 11.4 | 14.5 | 9.5 | 12.2 | 18.3 |

| Commuters | N | % |
|---|-------|------|
| Commuters Using Alternative Mode of Transportation ² | 4,997 | 42.8 |

¹ Hispanic may be of any race.² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

PEEKSKILL CITY

| BIRTHS (2016) | | | DEATHS (2016) | | |
|--|----------|----------|---|--------------|-------------------------|
| Total Births | 328 | | Birthweight¹ | N | % |
| Birth Rate (per 1,000) | 13.7 | | Low Birthweight | 23 | 7.0 |
| Average Maternal Age | 30.1 | | | | |
| Mother's Race/Ethnicity¹ | N | % | Total Deaths | Total | Male |
| White | 93 | 28.4 | Death Rate (per 100,000) | 192 | 91 |
| Black | 56 | 17.1 | | 800.8 | 756.5 |
| Other | 179 | 54.6 | | | 101 |
| Hispanic ² | 182 | 55.5 | | | 845.3 |
| | | | Infant Mortality Rate (per 1,000 live birth) | | 0.0 |
| Mother's Education¹ | N | % | Top Five Causes of Death | N | % |
| Less than High School | 94 | 29.0 | 1 Circulatory System Diseases | 76 | 39.6 |
| High School or GED | 78 | 24.1 | 2 Neoplasms (any) | 42 | 21.9 |
| Some College (no degree) | 65 | 20.1 | 3 Respiratory System Diseases | 26 | 13.5 |
| Bachelor's Degree or above | 87 | 26.9 | 4 External Causes | 12 | 6.3 |
| | | | 5 Nervous System Diseases | 6 | 3.1 |
| Mother's Country of Origin¹ | N | % | Average Age at Death | Total | Male |
| Foreign | 164 | 50.0 | Total | 79 | 77 |
| | | | White | 81 | 78 |
| Mother's Age¹ | N | % | Black | 70 | 72 |
| Teenage Mothers | 9 | 2.7 | Other | 71 | 71 |
| | | | Hispanic ² | 75 | 67 |
| Prenatal Care¹ | N | % | | | |
| Late or No Prenatal Care | 93 | 28.4 | | | |
| Financial Coverage at Birth¹ | N | % | COMMUNICABLE DISEASES (2018) | | |
| MEDICAID, Child Health Plus | 190 | 58.1 | Top Five Reported Diseases | N | Rate³ |
| Private or Other Insurance | 136 | 41.6 | 1 Chlamydia | 124 | 514.3 |
| Self Pay | 1 | 0.3 | 2 Gonorrhea, Uncomplicated | 41 | 170.0 |
| | | | 3 Hepatitis C Chronic | 18 | 74.7 |
| | | | 4 Campylobacteriosis | 9 | 37.3 |
| | | | 5 Lyme Disease | 7 | 29.0 |

¹ Excluding unknown or not stated.

² Hispanics may be of any race.

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | Total | Male | Female | White | Black | Hispanic ⁴ |
|-----------------------|-------|------|--------|-------|-------|-----------------------|
| Chlamydia | 124 | 45 | 79 | 12 | 15 | 3 |
| Gonorrhea | 41 | 25 | 16 | 8 | 12 | 7 |
| Syphilis (all stages) | 9 | 8 | 1 | 1 | 0 | 4 |

REGION PROFILE

PEEKSKILL CITY

EMERGENCY ROOM VISITS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 15,280 | 6,372.8 |
| Male | 6,727 | 5,592.3 |
| Female | 8,553 | 7,158.5 |
| White | 4,950 | 4,575.3 |
| Black | 4,096 | 7,409.6 |
| Other | 4,834 | 6,694.4 |
| Hispanic ² | 4,037 | 4,543.6 |

HOSPITALIZATIONS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 3,294 | 1,373.8 |
| Male | 1,371 | 1,139.7 |
| Female | 1,923 | 1,609.5 |
| White | 1,512 | 1,397.5 |
| Black | 813 | 1,470.7 |
| Other | 994 | 1,376.5 |
| Hispanic ² | 686 | 772.1 |

| | | |
|---------|-------|---------|
| Under 5 | 1,629 | 9,932.9 |
| 5-9 | 863 | 5,017.4 |
| 10-14 | 698 | 6,139.0 |
| 15-17 | 406 | 5,420.6 |
| 18-24 | 1,527 | 7,654.1 |
| 25-44 | 4,140 | 5,878.2 |
| 45-64 | 3,506 | 5,667.6 |
| 65-74 | 1,137 | 5,358.2 |
| 75+ | 1,374 | 9,920.6 |

| | | |
|---------|-----|---------|
| Under 5 | 401 | 2,445.1 |
| 5-9 | 28 | 162.8 |
| 10-14 | 32 | 281.4 |
| 15-17 | 42 | 560.7 |
| 18-24 | 541 | 2,711.8 |
| 25-44 | 439 | 623.3 |
| 45-64 | 664 | 1,073.4 |
| 65-74 | 415 | 1,955.7 |
| 75+ | 732 | 5,285.2 |

| Top Causes of ER Visits | <u>N</u> | <u>%</u> |
|------------------------------------|----------|----------|
| 1 Injuries | 2,803 | 18.3 |
| 2 Acute Respiratory Infections | 945 | 6.2 |
| 3 Abdominal Pain | 702 | 4.6 |
| 4 Infectious and Parasitic Disease | 568 | 3.7 |
| 5 Back, Neck, Or Spine Disorders | 563 | 3.7 |

| Top Causes of Hospitalization³ | <u>N</u> | <u>%</u> |
|--|----------|----------|
| 1 Circulatory System Diseases | 418 | 12.7 |
| 2 Digestive System Diseases | 283 | 8.6 |
| 3 Respiratory System Diseases | 264 | 8.0 |
| 4 Mental & Behavioral Disorders | 248 | 7.5 |
| 5 Infectious and Parasitic Disease | 234 | 7.1 |

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|---------------------------------|----------|----------|
| 1 NY Presbyterian Hudson Valley | 12,466 | 81.6 |
| 2 Westchester Medical Center | 1,229 | 8.0 |
| 3 Phelps Memorial Hospital | 586 | 3.8 |

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|---------------------------------|----------|----------|
| 1 NY Presbyterian Hudson Valley | 2,049 | 62.2 |
| 2 Westchester Medical Center | 500 | 15.2 |
| 3 Phelps Memorial Hospital | 173 | 5.3 |

| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 3,868 | 25.3 |
| Medicare | 3,161 | 20.7 |
| Medicaid | 6,147 | 40.2 |
| Other | 439 | 2.9 |
| Self-Pay | 1,665 | 10.9 |

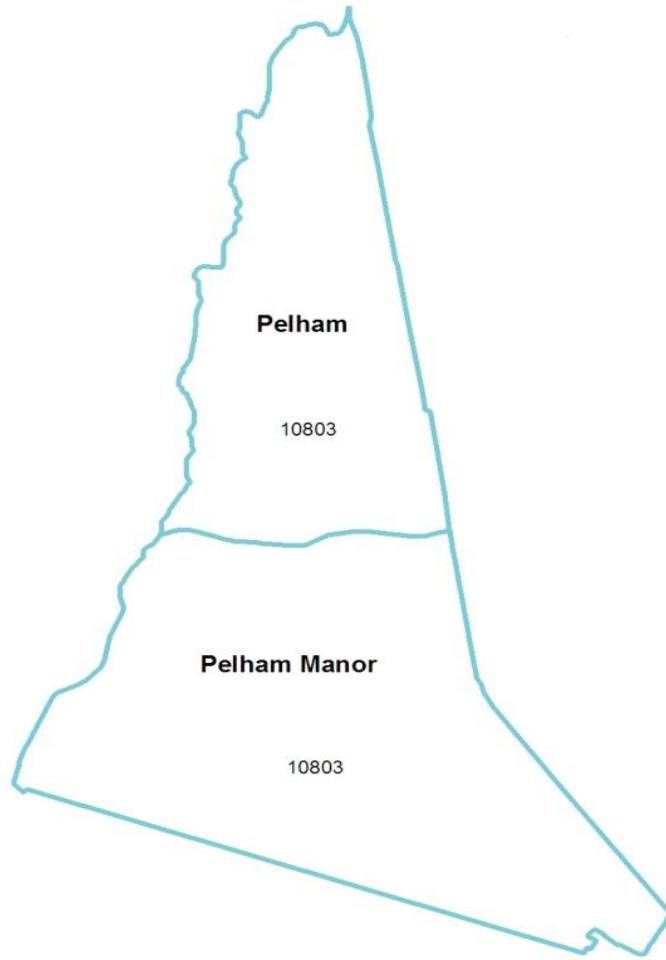
| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 907 | 27.5 |
| Medicare | 1,297 | 39.4 |
| Medicaid | 952 | 28.9 |
| Other | 50 | 1.5 |
| Self-Pay | 88 | 2.7 |

¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:
10566, representing 100.0% of the region population according to the 2012-2016 ACS.

REGION PROFILE

PELHAM TOWN



 Municipalities



Region Area: 2.1 sq miles

Population: 12,650

ZIP Codes Serving the Region

10803*

* Also serve other regions.

Municipalities Included in Region

Pelham (V)
Pelham Manor (V)

REGION PROFILE

PELHAM TOWN

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | |
|------------------------------|--------|-------|-----------------------|--------|----------------|--|
| Sex | N | % | | N | % ¹ | |
| Male | 6,278 | 49.6 | White | 9,973 | 78.8 | |
| Female | 6,372 | 50.4 | Black | 1,005 | 7.9 | |
| Total | 12,650 | 100.0 | Other | 1,672 | 13.2 | |
| | | | Hispanic ¹ | 1,458 | 11.5 | |
| | | | Non-Hispanic | 11,192 | 88.5 | |

| Age | Total | Male | Female | White | Black | Hispanic ¹ |
|-------|-------|-------|--------|-------|-------|-----------------------|
| 0-4 | 749 | 469 | 280 | 559 | 54 | 95 |
| 5-9 | 918 | 641 | 277 | 664 | 109 | 126 |
| 10-14 | 1,238 | 544 | 694 | 943 | 110 | 209 |
| 15-17 | 692 | 362 | 330 | 528 | 44 | 65 |
| 18-24 | 1,011 | 396 | 615 | 624 | 156 | 200 |
| 25-44 | 2,723 | 1,266 | 1,457 | 2,238 | 197 | 285 |
| 45-64 | 3,580 | 1,776 | 1,804 | 2,916 | 267 | 360 |
| 65-74 | 899 | 474 | 425 | 733 | 43 | 92 |
| 75+ | 840 | 350 | 490 | 768 | 25 | 26 |

| Country of Origin | N | % | Language Spoken at Home (5+) | N | % |
|-------------------|--------|------|------------------------------|-------|------|
| U.S. | 10,723 | 84.8 | English | 9,674 | 81.3 |
| Foreign Countries | 1,927 | 15.2 | Spanish | 839 | 7.0 |
| Non-Citizen | 705 | 5.6 | (Other) non-English | 1,388 | 11.7 |

| Education (25+) | Total | Male | Female |
|-------------------------------|-------|-------|--------|
| Less than High School | 422 | 227 | 195 |
| High School/GED | 1,447 | 762 | 685 |
| Some College/Associate Degree | 1,085 | 411 | 674 |
| Bachelor's Degree or Higher | 5,088 | 2,466 | 2,622 |

| Family Structure | Total | White | Black | Hispanic ¹ |
|--|-------|-------|-------|-----------------------|
| Total Family Households | 3,275 | 2,685 | 225 | 331 |
| Families with Own Children < 18 | 1,735 | -- | -- | -- |
| Single Mother Families with Own Children <18 | 269 | -- | -- | -- |

| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ |
|------------------------------|---------|------|--------|---------|--------|-----------------------|
| Unemployment Rate | 5.3 | 3.9 | 6.8 | 3.7 | 17.0 | 3.2 |
| Median Household Income (\$) | 146,833 | -- | -- | 150,556 | 90,357 | 156,667 |
| Poverty Rate (%) | 3.6 | 3.1 | 4.0 | 3.4 | 0.0 | 10.1 |

| Commuters | N | % |
|---|-------|------|
| Commuters Using Alternative Mode of Transportation ² | 2,986 | 49.4 |

¹ Hispanic may be of any race.

² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

PELHAM TOWN

| BIRTHS (2016) | | | Birthweight¹ | | |
|--|----------|----------|---|---------------|-------------------------|
| Total Births | 122 | | Low Birthweight | <u>N</u> 4 | <u>%</u> 3.3 |
| Birth Rate (per 1,000) | 9.7 | | | | |
| Average Maternal Age | 34.5 | | | | |
| Mother's Race/Ethnicity¹ | | | DEATHS (2016) | | |
| | <u>N</u> | <u>%</u> | | <u>Total</u> | <u>Male</u> |
| White | 86 | 70.5 | Total Deaths | 72 | 38 |
| Black | 6 | 4.9 | Death Rate (per 100,000) | 573.2 | 598.6 |
| Other | 30 | 24.6 | | | |
| Hispanic ² | 14 | 11.5 | | | |
| Mother's Education¹ | | | | <u>Female</u> | |
| Less than High School | 2 | 1.6 | Infant Mortality Rate (per 1,000 live birth) | | 0.0 |
| High School or GED | 5 | 4.1 | | | |
| Some College (no degree) | 13 | 10.7 | | | |
| Bachelor's Degree or above | 102 | 83.6 | | | |
| Mother's Country of Origin¹ | | | Top Five Causes of Death | | |
| Foreign | 43 | 35.2 | | <u>N</u> | <u>%</u> |
| | | | 1 Circulatory System Diseases | 25 | 34.7 |
| | | | 2 Neoplasms (any) | 24 | 33.3 |
| | | | 3 Respiratory System Diseases | 5 | 6.9 |
| | | | 4 Digestive System Diseases | 5 | 6.9 |
| | | | 5 Kidney Disease | 3 | 4.2 |
| Mother's Age¹ | | | Average Age at Death | | |
| Teenage Mothers | 1 | 0.8 | | <u>Total</u> | <u>Male</u> |
| | | | Total | 76 | 78 |
| | | | White | 77 | 78 |
| | | | Black | 66 | 76 |
| | | | Other | 68 | -- |
| | | | Hispanic ² | -- | -- |
| Prenatal Care¹ | | | COMMUNICABLE DISEASES (2018) | | |
| Late or No Prenatal Care | 18 | 14.8 | | <u>N</u> | <u>Rate³</u> |
| | | | Top Five Reported Diseases | | |
| | | | 1 Chlamydia | 27 | 213.4 |
| | | | 2 Gonorrhea, Uncomplicated | 7 | 55.3 |
| | | | 3 Giardiasis | 4 | 31.6 |
| | | | 4 Campylobacteriosis | 3 | 23.7 |
| | | | 5 Hepatitis C Chronic | 3 | 23.7 |
| Financial Coverage at Birth¹ | | | | | |
| MEDICAID, Child Health Plus | 9 | 10.5 | | | |
| Private or Other Insurance | 76 | 88.4 | | | |
| Self Pay | 1 | 1.2 | | | |

¹ Excluding unknown or not stated.

² Hispanics may be of any race.

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | <u>Total</u> | <u>Male</u> | <u>Female</u> | <u>White</u> | <u>Black</u> | <u>Hispanic⁴</u> |
|-----------------------|--------------|-------------|---------------|--------------|--------------|-----------------------------|
| Chlamydia | 27 | 9 | 18 | 1 | 0 | 1 |
| Gonorrhea | 7 | 4 | 3 | 0 | 2 | 1 |
| Syphilis (all stages) | 1 | 1 | 0 | 1 | 0 | 0 |

REGION PROFILE

PELHAM TOWN

EMERGENCY ROOM VISITS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 2,568 | 2,044.6 |
| Male | 1,215 | 1,914.0 |
| Female | 1,353 | 2,178.0 |
| White | 1,886 | 1,907.2 |
| Black | 341 | 3,639.3 |
| Other | 393 | 2,530.6 |
| Hispanic ² | 342 | 3,100.6 |

HOSPITALIZATIONS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 877 | 698.2 |
| Male | 435 | 685.3 |
| Female | 442 | 711.5 |
| White | 772 | 780.7 |
| Black | 85 | 907.2 |
| Other | 185 | 1,191.2 |
| Hispanic ² | 56 | 507.7 |

| | | |
|---------|-----|---------|
| Under 5 | 172 | 2,308.7 |
| 5-9 | 139 | 1,441.9 |
| 10-14 | 133 | 1,155.5 |
| 15-17 | 89 | 1,234.4 |
| 18-24 | 252 | 2,863.6 |
| 25-44 | 493 | 1,743.9 |
| 45-64 | 673 | 1,891.0 |
| 65-74 | 245 | 2,692.3 |
| 75+ | 372 | 4,632.6 |

| | | |
|---------|-----|---------|
| Under 5 | 111 | 1,489.9 |
| 5-9 | 10 | 103.7 |
| 10-14 | 13 | 112.9 |
| 15-17 | 11 | 152.6 |
| 18-24 | 99 | 1,125.0 |
| 25-44 | 113 | 399.7 |
| 45-64 | 161 | 452.4 |
| 65-74 | 131 | 1,439.6 |
| 75+ | 228 | 2,839.4 |

| Top Causes of ER Visits | <u>N</u> | <u>%</u> |
|------------------------------------|----------|----------|
| 1 Injuries | 648 | 25.2 |
| 2 Acute Respiratory Infections | 111 | 4.3 |
| 3 Infectious and Parasitic Disease | 109 | 4.2 |
| 4 Mental Disorders | 83 | 3.2 |
| 5 Abdominal Pain | 62 | 2.4 |

| Top Causes of Hospitalization³ | <u>N</u> | <u>%</u> |
|--|----------|----------|
| 1 Circulatory System Diseases | 111 | 12.7 |
| 2 Digestive System Diseases | 77 | 8.8 |
| 3 Neoplasms | 64 | 7.3 |
| 4 Other ^A | 62 | 7.1 |
| 5 Respiratory System | 56 | 6.4 |

^A Musculoskeletal System & Connective Tissue Diseases

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|--------------------------------|----------|----------|
| 1 Montefiore New Rochelle | 1,035 | 40.3 |
| 2 NY Presbyterian Lawrence | 577 | 22.5 |
| 3 White Plains Hospital Center | 203 | 7.9 |

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|--------------------------------|----------|----------|
| 1 Montefiore New Rochelle | 165 | 18.8 |
| 2 NY Presbyterian Lawrence | 134 | 15.3 |
| 3 White Plains Hospital Center | 96 | 10.9 |

| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 1,663 | 64.8 |
| Medicare | 510 | 19.9 |
| Medicaid | 149 | 5.8 |
| Other | 170 | 6.6 |
| Self-Pay | 76 | 3.0 |

| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 545 | 62.1 |
| Medicare | 289 | 33.0 |
| Medicaid | 35 | 4.0 |
| Other | 3 | 0.3 |
| Self-Pay | 5 | 0.6 |

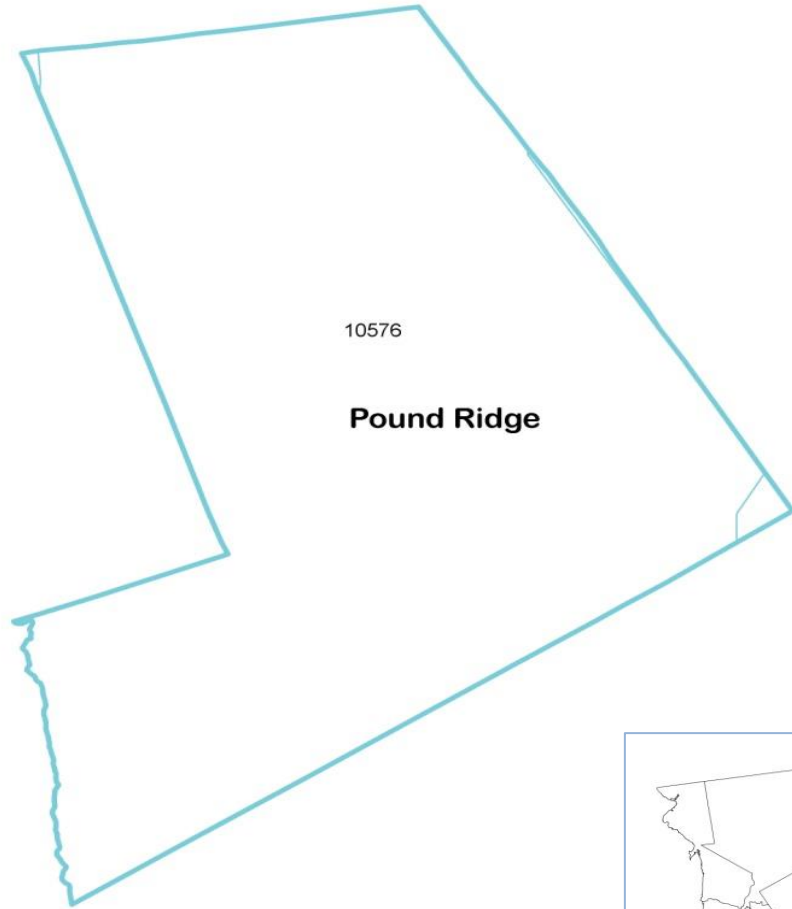
¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:

10803, representing 100.0% of the region population according to 2012-2016 ACS.

REGION PROFILE

POUND RIDGE TOWN



Region Area: 23.2 sq miles

Population: 5,230

ZIP Codes Serving the Region

10576*

* Also serve other regions.

Municipalities Included in Region

Pound Ridge (T)

REGION PROFILE

POUND RIDGE TOWN

| DEMOGRAPHICS (2013-2017 ACS) | | | | | | |
|---|--------------|--------------|---|-----------------------------|--------------|-----------------------------|
| Sex | N | % | Race/Ethnicity | | | |
| Male | 2,382 | 45.5 | White | 4,874 | 93.2 | |
| Female | 2,848 | 54.5 | Black | 78 | 1.5 | |
| Total | 5,230 | 100.0 | Other | 278 | 5.3 | |
| | | | Hispanic ¹ | 106 | 2.0 | |
| | | | Non-Hispanic | 5,124 | 98.0 | |
| Age | Total | Male | Female | White | Black | Hispanic¹ |
| 0-4 | 118 | 52 | 66 | 78 | 0 | 0 |
| 5-9 | 306 | 139 | 167 | 250 | 0 | 0 |
| 10-14 | 372 | 196 | 176 | 354 | 11 | 9 |
| 15-17 | 285 | 107 | 178 | 273 | 12 | 0 |
| 18-24 | 338 | 114 | 224 | 338 | 0 | 15 |
| 25-44 | 580 | 272 | 308 | 515 | 12 | 10 |
| 45-64 | 2,054 | 1,000 | 1,054 | 1,937 | 10 | 72 |
| 65-74 | 817 | 369 | 448 | 780 | 22 | 0 |
| 75+ | 360 | 133 | 227 | 349 | 11 | 0 |
| Country of Origin | N | % | Language Spoken at Home (5+) | | | |
| U.S. | 4,747 | 90.8 | English | 4,637 | 90.7 | |
| Foreign Countries | 483 | 9.2 | Spanish | 49 | 1.0 | |
| Non-Citizen | 138 | 2.6 | (Other) non-English | 426 | 8.3 | |
| Education (25+) | Total | Male | Female | | | |
| Less than High School | 27 | 15 | 12 | | | |
| High School/GED | 339 | 108 | 231 | | | |
| Some College/Associate Degree | 566 | 247 | 319 | | | |
| Bachelor's Degree or Higher | 2,879 | 1,404 | 1,475 | | | |
| Family Structure | Total | White | Black | Hispanic¹ | | |
| Total Family Households | 1,618 | 1,513 | 20 | 40 | | |
| Families with Own Children < 18 | 588 | -- | -- | -- | | |
| Single Mother Families with Own Children <18 | 57 | -- | -- | -- | | |
| Employment and Income | Total | Male | Female | White | Black | Hispanic¹ |
| Unemployment Rate | 2.7 | 1.4 | 4.3 | 2.9 | 0.0 | 0.0 |
| Median Household Income (\$) | 198,500 | -- | -- | 200,119 | -- | >250K |
| Poverty Rate (%) | 0.7 | 1.0 | 0.4 | 0.8 | 0.0 | 0.0 |
| Commuters | N | % | | | | |
| Commuters Using Alternative Mode of Transportation ² | 1,028 | 41.0 | | | | |
| | | | ¹ Hispanic may be of any race. | | | |
| | | | ² Including carpooling, public transportation, bicycling, walking, or telecommuting. | | | |

REGION PROFILE

POUND RIDGE TOWN

| BIRTHS (2016) | | | Birthweight¹ | | |
|--|---------------|------------------|---|---------------|-------------------------|
| Total Births | 26 | | Low Birthweight | <u>N</u> 0 | <u>%</u> 0.0 |
| Birth Rate (per 1,000) | 5.0 | | | | |
| Average Maternal Age | 34.7 | | | | |
| Mother's Race/Ethnicity¹ | | | DEATHS (2016) | | |
| | <u>N</u> | <u>%</u> | | <u>Total</u> | <u>Male</u> |
| White | 21 | 80.8 | Total Deaths | 14 | 8 |
| Black | 1 | 3.8 | Death Rate (per 100,000) | 268.5 | 346.6 |
| Other | 4 | 15.4 | | | 206.5 |
| Hispanic ² | 2 | 7.7 | | | |
| Mother's Education¹ | | | Infant Mortality Rate (per 1,000 live birth) | | |
| | <u>N</u> | <u>%</u> | | | 0.0 |
| Less than High School | 0 | 0.0 | | | |
| High School or GED | 2 | 7.7 | Top Five Causes of Death | <u>N</u> | <u>%</u> |
| Some College (no degree) | 1 | 3.8 | 1 Neoplasms (any) | 4 | 28.6 |
| Bachelor's Degree or above | 23 | 88.5 | 2 Circulatory System Diseases | 3 | 21.4 |
| | | | 3 Respiratory System Diseases | 2 | 14.3 |
| | | | 4 External Causes | 1 | 7.1 |
| | | | 5 Nervous System Diseases | 1 | 7.1 |
| Mother's Country of Origin¹ | | | | | |
| Foreign | <u>N</u> 6 | <u>%</u> 23.1 | Average Age at Death | <u>Total</u> | <u>Male</u> |
| | | | Total | 76 | 72 |
| | | | White | 76 | 72 |
| | | | Black | -- | -- |
| | | | Other | -- | -- |
| | | | Hispanic ² | -- | -- |
| Mother's Age¹ | | | | | |
| Teenage Mothers | <u>N</u> 1 | <u>%</u> 3.8 | | | |
| Prenatal Care¹ | | | | | |
| Late or No Prenatal Care | <u>N</u> 4 | <u>%</u> 15.4 | | | |
| Financial Coverage at Birth¹ | | | | | |
| MEDICAID, Child Health Plus | <u>N</u> 4 | <u>%</u> 22.2 | Top Five Reported Diseases | <u>N</u> | <u>Rate³</u> |
| Private or Other Insurance | 14 | 77.8 | 1 Chlamydia | 10 | 191.2 |
| Self Pay | 0 | 0.0 | 2 Babesiosis | 4 | 76.5 |
| | | | 3 Anaplasmosis | 3 | 57.4 |
| | | | 4 Campylobacteriosis | 3 | 57.4 |
| | | | 5 Hepatitis B Chronic | 2 | 38.2 |

¹ Excluding unknown or not stated.

² Hispanics may be of any race.

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2016)

| | <u>Total</u> | <u>Male</u> | <u>Female</u> | <u>White</u> | <u>Black</u> | <u>Hispanic⁴</u> |
|-----------------------|--------------|-------------|---------------|--------------|--------------|-----------------------------|
| Chlamydia | 10 | 2 | 8 | 0 | 0 | 0 |
| Gonorrhea | 0 | 0 | 0 | 0 | 0 | 0 |
| Syphilis (all stages) | 1 | 1 | 0 | 0 | 0 | 0 |

REGION PROFILE

POUND RIDGE TOWN

EMERGENCY ROOM VISITS (2016)¹

| | N | Rate (per 10,000) |
|-----------------------|-----|-------------------|
| Total | 880 | 1,687.8 |
| Male | 433 | 1,876.1 |
| Female | 447 | 1,538.2 |
| White | 929 | 1,987.2 |
| Black | 23 | 2,948.7 |
| Other | 101 | 2,885.7 |
| Hispanic ² | 46 | 1,479.1 |

HOSPITALIZATIONS (2016)¹

| | N | Rate (per 10,000) |
|-----------------------|-----|-------------------|
| Total | 337 | 646.3 |
| Male | 184 | 797.2 |
| Female | 153 | 526.5 |
| White | 301 | 643.9 |
| Black | 10 | 1,282.1 |
| Other | 43 | 1,228.6 |
| Hispanic ² | 10 | 321.5 |

| | | |
|---------|-----|---------|
| Under 5 | 30 | 1,333.3 |
| 5-9 | 25 | 822.4 |
| 10-14 | 58 | 1,446.4 |
| 15-17 | 45 | 1,500.0 |
| 18-24 | 73 | 2,552.4 |
| 25-44 | 117 | 1,700.6 |
| 45-64 | 252 | 1,289.0 |
| 65-74 | 81 | 1,114.2 |
| 75+ | 199 | 6,067.1 |

| | | |
|---------|-----|---------|
| Under 5 | 21 | 933.3 |
| 5-9 | 3 | 98.7 |
| 10-14 | 5 | 124.7 |
| 15-17 | 7 | 233.3 |
| 18-24 | 29 | 1,014.0 |
| 25-44 | 25 | 363.4 |
| 45-64 | 72 | 368.3 |
| 65-74 | 38 | 522.7 |
| 75+ | 137 | 4,176.8 |

| Top Causes of ER Visits | N | % |
|------------------------------------|-----|------|
| 1 Injuries | 247 | 28.1 |
| 2 Mental Disorders | 46 | 5.2 |
| 3 Infectious And Parasitic Disease | 32 | 3.6 |
| 4 Abdominal Pain | 32 | 3.6 |
| 5 Back, Neck, Or Spine Disorders | 27 | 3.1 |

| Top Causes of Hospitalization ³ | N | % |
|--|----|------|
| 1 Circulatory System Diseases | 55 | 16.3 |
| 2 Other ^A | 44 | 13.1 |
| 3 Digestive System Diseases | 31 | 9.2 |
| 4 Mental & Behavioral Diseases | 30 | 8.9 |
| 5 Infectious and Parasitic Disease | 22 | 6.5 |

^A Musculoskeletal System & Connective Tissue Diseases

| Top Receiving Hospitals | N | % |
|---------------------------------|-----|------|
| 1 Northern Westchester Hospital | 669 | 76.0 |
| 2 Westchester Medical Center | 44 | 5.0 |
| 3 White Plains Hospital Center | 21 | 2.4 |

| Top Receiving Hospitals | N | % |
|---------------------------------|-----|------|
| 1 Northern Westchester Hospital | 172 | 51.0 |
| 2 Westchester Medical Center | 30 | 8.9 |
| 3 Mount Sinai Hospital | 19 | 5.6 |

| Insurance Type | N | % |
|----------------|-----|------|
| Private | 522 | 59.3 |
| Medicare | 262 | 29.8 |
| Medicaid | 58 | 6.6 |
| Other | 14 | 1.6 |
| Self-Pay | 24 | 2.7 |

| Insurance Type | N | % |
|----------------|-----|------|
| Private | 156 | 46.3 |
| Medicare | 163 | 48.4 |
| Medicaid | 16 | 4.7 |
| Other | 1 | 0.3 |
| Self-Pay | 1 | 0.3 |

¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:

10576, representing 93.6% of the region population according to the 2012-2016 ACS.

REGION PROFILE

RYE CITY



Region Area: 6.1 sq miles

Population: 16,004

ZIP Codes Serving the Region

10580*

* Also serve other regions.

Municipalities Included in Region

Rye (C)

REGION PROFILE

RYE CITY

| DEMOGRAPHICS (2013-2017 ACS) | | | | Race/Ethnicity | | |
|------------------------------|--------|-------|-----------------------|----------------|----------------|--|
| Sex | N | % | | N | % ¹ | |
| Male | 7,770 | 48.6 | White | 14,399 | 90.0 | |
| Female | 8,234 | 51.4 | Black | 145 | 0.9 | |
| Total | 16,004 | 100.0 | Other | 1,460 | 9.1 | |
| | | | Hispanic ¹ | 977 | 6.1 | |
| | | | Non-Hispanic | 15,027 | 93.9 | |

| Age | Total | Male | Female | White | Black | Hispanic ¹ |
|-------|-------|-------|--------|-------|-------|-----------------------|
| 0-4 | 925 | 458 | 467 | 738 | 14 | 54 |
| 5-9 | 1,334 | 761 | 573 | 1,200 | 0 | 26 |
| 10-14 | 1,771 | 943 | 828 | 1,626 | 0 | 51 |
| 15-17 | 801 | 319 | 482 | 694 | 0 | 92 |
| 18-24 | 1,001 | 554 | 447 | 871 | 0 | 69 |
| 25-44 | 2,724 | 1,197 | 1,527 | 2,330 | 79 | 172 |
| 45-64 | 4,977 | 2,528 | 2,449 | 4,613 | 30 | 393 |
| 65-74 | 1,009 | 491 | 518 | 976 | 0 | 65 |
| 75+ | 1,462 | 519 | 943 | 1,351 | 22 | 55 |

| Country of Origin | N | % | Language Spoken at Home (5+) | N | % |
|-------------------|--------|------|------------------------------|--------|------|
| U.S. | 13,416 | 83.8 | English | 12,318 | 81.7 |
| Foreign Countries | 2,588 | 16.2 | Spanish | 829 | 5.5 |
| Non-Citizen | 1,311 | 8.2 | (Other) non-English | 1,932 | 12.8 |

| Education (25+) | Total | Male | Female |
|-------------------------------|-------|-------|--------|
| Less than High School | 422 | 175 | 247 |
| High School/GED | 941 | 425 | 516 |
| Some College/Associate Degree | 1,330 | 457 | 873 |
| Bachelor's Degree or Higher | 7,479 | 3,678 | 3,801 |

| Family Structure | Total | White | Black | Hispanic ¹ |
|--|-------|-------|-------|-----------------------|
| Total Family Households | 4,108 | 3,807 | 13 | 206 |
| Families with Own Children < 18 | 2,211 | -- | -- | -- |
| Single Mother Families with Own Children <18 | 106 | -- | -- | -- |

| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ |
|------------------------------|---------|------|--------|---------|--------|-----------------------|
| Unemployment Rate | 3.6 | 3.8 | 3.3 | 3.7 | 0.0 | 5.0 |
| Median Household Income (\$) | 172,422 | -- | -- | 183,220 | 41,719 | 91,106 |
| Poverty Rate (%) | 3.2 | 1.8 | 4.5 | 2.9 | 11.7 | 5.2 |

| Commuters | N | % |
|---|-------|------|
| Commuters Using Alternative Mode of Transportation ² | 3,379 | 50.8 |

¹ Hispanic may be of any race.

² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

RYE CITY

| BIRTHS (2016) | | | DEATHS (2016) | | |
|--|----------|----------|---|--------------|-------------------------|
| Total Births | 107 | | Birthweight¹ | N | % |
| Birth Rate (per 1,000) | 6.7 | | Low Birthweight | 7 | 6.5 |
| Average Maternal Age | 35.0 | | | | |
| Mother's Race/Ethnicity¹ | N | % | Total | Male | Female |
| White | 94 | 87.9 | Total Deaths | 110 | 55 |
| Black | 1 | 0.9 | Death Rate (per 100,000) | 689.7 | 702.1 |
| Other | 12 | 11.2 | | | 55 |
| Hispanic ² | 6 | 5.6 | | | 677.8 |
| Mother's Education¹ | N | % | Infant Mortality Rate (per 1,000 live birth) | | 0.0 |
| Less than High School | 1 | 0.9 | | | |
| High School or GED | 3 | 2.8 | Top Five Causes of Death | N | % |
| Some College (no degree) | 4 | 3.7 | 1 Circulatory System Diseases | 43 | 39.1 |
| Bachelor's Degree or above | 99 | 92.5 | 2 Neoplasms (any) | 21 | 19.1 |
| Mother's Country of Origin¹ | N | % | 3 Nervous System Diseases | 10 | 9.1 |
| Foreign | 21 | 19.6 | 4 Respiratory System Diseases | 6 | 5.5 |
| Mother's Age¹ | N | % | 5 External Causes | 5 | 4.5 |
| Teenage Mothers | 0 | 0.0 | Average Age at Death | Total | Male |
| Prenatal Care¹ | N | % | Total | 84 | 79 |
| Late or No Prenatal Care | 11 | 10.3 | White | 84 | 79 |
| Financial Coverage at Birth¹ | N | % | Black | 82 | 82 |
| MEDICAID, Child Health Plus | 3 | 9.4 | Other | 97 | -- |
| Private or Other Insurance | 29 | 90.6 | Hispanic ² | 70 | 70 |
| Self Pay | 0 | 0.0 | | | -- |
| COMMUNICABLE DISEASES (2018) | | | Top Five Reported Diseases | N | Rate³ |
| | | | 1 Chlamydia | 26 | 162.5 |
| | | | 2 Hepatitis C Chronic | 7 | 43.7 |
| | | | 3 Campylobacteriosis | 4 | 25.0 |
| | | | 4 Anaplasmosis | 4 | 25.0 |
| | | | 5 E. Coli Shiga | 4 | 25.0 |

¹ Excluding unknown or not stated.

² Hispanics may be of any race.

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | Total | Male | Female | White | Black | Hispanic ⁴ |
|-----------------------|-------|------|--------|-------|-------|-----------------------|
| Chlamydia | 26 | 12 | 14 | 3 | 0 | 0 |
| Gonorrhea | 1 | 1 | 0 | 0 | 0 | 0 |
| Syphilis (all stages) | 3 | 3 | 0 | 0 | 0 | 1 |

REGION PROFILE

RYE CITY

EMERGENCY ROOM VISITS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 1,075 | 674.0 |
| Male | 504 | 643.3 |
| Female | 571 | 703.6 |
| White | 726 | 512.8 |
| Black | 36 | 2,011.2 |
| Other | 163 | 1,184.6 |
| Hispanic ² | 56 | 503.1 |

HOSPITALIZATIONS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 571 | 358.0 |
| Male | 280 | 357.4 |
| Female | 291 | 358.6 |
| White | 531 | 375.1 |
| Black | 12 | 670.4 |
| Other | 165 | 1,199.1 |
| Hispanic ² | 19 | 170.7 |

| | | |
|---------|-----|---------|
| Under 5 | 60 | 676.4 |
| 5-9 | 55 | 385.4 |
| 10-14 | 63 | 358.6 |
| 15-17 | 51 | 607.1 |
| 18-24 | 117 | 1,273.1 |
| 25-44 | 154 | 545.7 |
| 45-64 | 278 | 573.8 |
| 65-74 | 67 | 623.8 |
| 75+ | 230 | 1,669.1 |

| | | |
|---------|-----|---------|
| Under 5 | 39 | 439.7 |
| 5-9 | 11 | 77.1 |
| 10-14 | 19 | 108.1 |
| 15-17 | 15 | 178.6 |
| 18-24 | 56 | 609.4 |
| 25-44 | 75 | 265.8 |
| 45-64 | 116 | 239.4 |
| 65-74 | 76 | 707.6 |
| 75+ | 164 | 1,190.1 |

| Top Causes of ER Visits | <u>N</u> | <u>%</u> |
|------------------------------------|----------|----------|
| 1 Injuries | 208 | 19.3 |
| 2 Mental Disorders | 53 | 4.9 |
| 3 Infectious and Parasitic Disease | 47 | 4.4 |
| 4 Abdominal Pain | 44 | 4.1 |
| 5 Abuse of Drugs or Alcohol | 28 | 2.6 |

| Top Causes of Hospitalization³ | <u>N</u> | <u>%</u> |
|--|----------|----------|
| 1 Circulatory System Diseases | 78 | 13.7 |
| 2 Other ^A | 67 | 11.7 |
| 3 Mental & Behavioral Disorders | 54 | 9.5 |
| 4 Neoplasms | 51 | 8.9 |
| 5 Respiratory System Diseases | 44 | 7.7 |

^A Musculoskeletal System & Connective Tissue Diseases

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|---------------------------------|----------|----------|
| 1 White Plains Hospital Center | 530 | 49.3 |
| 2 Westchester Medical Center | 161 | 15.0 |
| 3 NY Presbyterian Weill Cornell | 46 | 4.3 |

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|--------------------------------|----------|----------|
| 1 White Plains Hospital Center | 190 | 33.3 |
| 2 Westchester Medical Center | 50 | 8.8 |
| 3 NY Presbyterian Columbia | 40 | 7.0 |

| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 682 | 63.4 |
| Medicare | 287 | 26.7 |
| Medicaid | 52 | 4.8 |
| Other | 29 | 2.7 |
| Self-Pay | 25 | 2.3 |

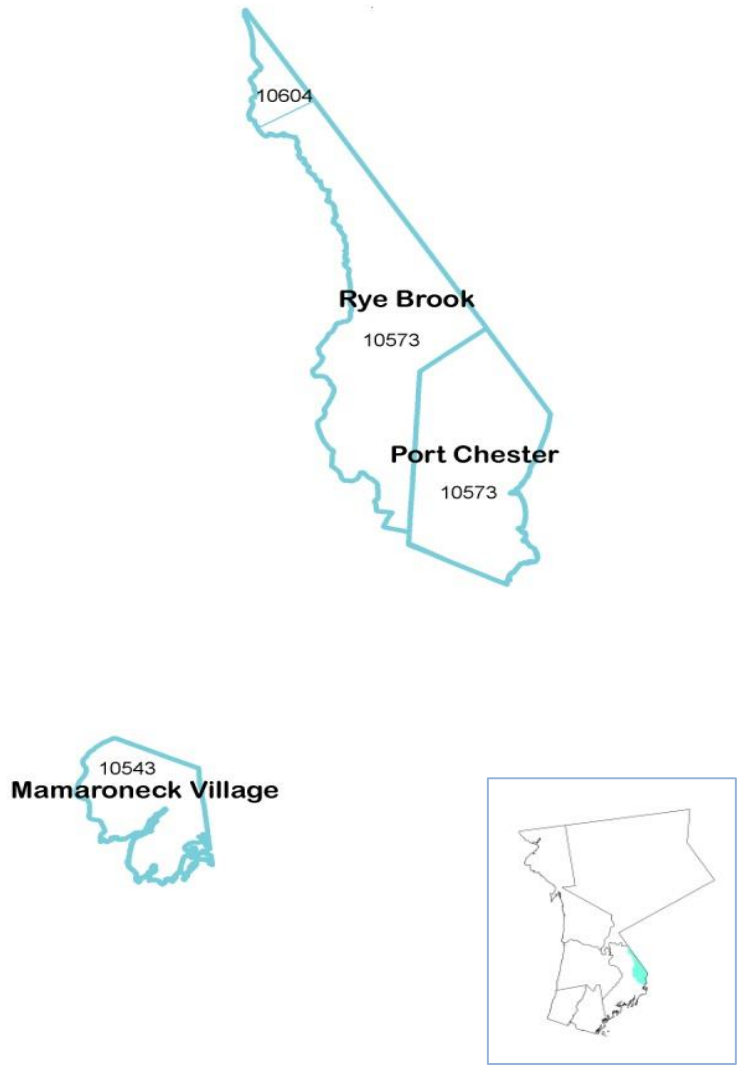
| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 325 | 56.9 |
| Medicare | 210 | 36.8 |
| Medicaid | 27 | 4.7 |
| Other | 8 | 1.4 |
| Self-Pay | 1 | 0.2 |

¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations: 10580 (91%), representing 98.5% of the region population according to the 2012-2016 ACS.

REGION PROFILE

RYE TOWN



Region Area: 6.9 sq miles
Population: 46,978

ZIP Codes Serving the Region

10543* 10538* 10573 10604*

* Also serve other regions.

Municipalities Included in Region

Mamaroneck (V) (Rye part)
Port Chester (V)
Rye Brook (V)

REGION PROFILE

RYE TOWN

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | |
|---|--------|----------------|-----------------------|--|----------------|-----------------------|
| Sex | N | % | | N | % ¹ | |
| Male | 23,704 | 50.5 | White | 30,450 | 64.8 | |
| Female | 23,274 | 49.5 | Black | 2,094 | 4.5 | |
| Total | 46,978 | 100.0 | Other | 14,434 | 30.7 | |
| | | | Hispanic ¹ | 21,669 | 46.1 | |
| | | | Non-Hispanic | 25,309 | 53.9 | |
| Age | Total | Male | Female | White | Black | Hispanic ¹ |
| 0-4 | 2,929 | 1,637 | 1,292 | 1,597 | 105 | 1,792 |
| 5-9 | 3,450 | 1,738 | 1,712 | 2,067 | 211 | 1,747 |
| 10-14 | 3,095 | 1,589 | 1,506 | 1,786 | 162 | 1,698 |
| 15-17 | 2,032 | 925 | 1,107 | 1,295 | 108 | 804 |
| 18-24 | 3,584 | 2,271 | 1,313 | 2,308 | 131 | 2,133 |
| 25-44 | 13,531 | 7,146 | 6,385 | 7,473 | 600 | 8,007 |
| 45-64 | 12,066 | 6,015 | 6,051 | 8,532 | 433 | 4,402 |
| 65-74 | 3,286 | 1,391 | 1,895 | 2,818 | 209 | 528 |
| 75+ | 3,005 | 992 | 2,013 | 2,574 | 135 | 558 |
| Country of Origin | N | % ¹ | | Language Spoken at Home (5+) | N | % ¹ |
| U.S. | 29,516 | 62.8 | | English | 21,200 | 48.1 |
| Foreign Countries | 17,462 | 37.2 | | Spanish | 18,328 | 41.6 |
| Non-Citizen | 11,622 | 24.7 | | (Other) non-English | 4,521 | 10.3 |
| Education (25+) | Total | Male | Female | | | |
| Less than High School | 7,016 | 3,955 | 3,061 | | | |
| High School/GED | 7,364 | 3,625 | 3,739 | | | |
| Some College/Associate Degree | 5,747 | 2,493 | 3,254 | | | |
| Bachelor's Degree or Higher | 11,761 | 5,471 | 6,290 | | | |
| Family Structure | Total | White | Black | Hispanic ¹ | | |
| Total Family Households | 11,188 | 7,712 | 420 | 4,625 | | |
| Families with Own Children < 18 | 5,719 | -- | -- | -- | | |
| Single Mother Families with Own Children <18 | 1,176 | -- | -- | -- | | |
| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ |
| Unemployment Rate | 6.8 | 6.0 | 7.7 | 5.7 | 18.0 | 6.0 |
| Median Household Income (\$) | 78,245 | -- | -- | 94,158 | 31,928 | 55,800 |
| Poverty Rate (%) | 10.0 | 9.7 | 10.4 | 7.2 | 22.0 | 14.3 |
| Commuters | N | % ¹ | | ¹ Hispanic may be of any race. ² Including carpooling, public transportation, bicycling, walking, or telecommuting. | | |
| Commuters Using Alternative Mode of Transportation ² | 9,220 | 39.4 | | | | |

REGION PROFILE

RYE TOWN

| BIRTHS (2016) | | | Birthweight¹ | | | |
|--|----------|----------|---|----------------|-----------------|---------------|
| Total Births | 538 | | Low Birthweight | <u>N</u> 46 | <u>%</u> 8.6 | |
| Birth Rate (per 1,000) | 11.5 | | DEATHS (2016) | | | |
| Average Maternal Age | 31.2 | | | <u>Total</u> | <u>Male</u> | <u>Female</u> |
| Mother's Race/Ethnicity¹ | <u>N</u> | <u>%</u> | Total Deaths | 314 | 139 | 175 |
| White | 235 | 43.7 | Death Rate (per 100,000) | 682.4 | 601.7 | 743.8 |
| Black | 17 | 3.2 | Infant Mortality Rate (per 1,000 live birth) | | | |
| Other | 286 | 53.2 | 3.7 | | | |
| Hispanic ² | 343 | 63.8 | Top Five Causes of Death | | | |
| Mother's Education¹ | <u>N</u> | <u>%</u> | | <u>N</u> | <u>%</u> | |
| Less than High School | 147 | 27.3 | 1 Circulatory System Diseases | 103 | 32.8 | |
| High School or GED | 98 | 18.2 | 2 Neoplasms (any) | 81 | 25.8 | |
| Some College (no degree) | 81 | 15.1 | 3 Respiratory System Diseases | 32 | 10.2 | |
| Bachelor's Degree or above | 212 | 39.4 | 4 External Causes | 19 | 6.1 | |
| Mother's Country of Origin¹ | <u>N</u> | <u>%</u> | 5 Infectious Diseases | 15 | 4.8 | |
| Foreign | 335 | 62.3 | Average Age at Death | | | |
| Mother's Age¹ | <u>N</u> | <u>%</u> | | <u>Total</u> | <u>Male</u> | <u>Female</u> |
| Teenage Mothers | 27 | 5.0 | Total | 79 | 75 | 82 |
| Prenatal Care¹ | <u>N</u> | <u>%</u> | White | 80 | 75 | 83 |
| Late or No Prenatal Care | 89 | 16.5 | Black | 73 | 71 | 74 |
| Financial Coverage at Birth¹ | <u>N</u> | <u>%</u> | Other | 76 | 68 | 81 |
| MEDICAID, Child Health Plus | 206 | 57.5 | Hispanic ² | 70 | 61 | 83 |
| Private or Other Insurance | 152 | 42.5 | COMMUNICABLE DISEASES (2018) | | | |
| Self Pay | 0 | 0.0 | Top Five Reported Diseases | <u>N</u> | <u>Rate</u> | |
| ¹ Excluding unknown or not stated. | | | 1 Chlamydia | 145 | 308.7 | |
| ² Hispanics may be of any race. | | | 2 Gonorrhea, Uncomplicated | 34 | 72.4 | |
| | | | 3 Hepatitis C Chronic | 20 | 42.6 | |
| | | | 4 Campylobacteriosis | 18 | 38.3 | |
| | | | 5 Salmonellosis | 7 | 14.9 | |

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | <u>Total</u> | <u>Male</u> | <u>Female</u> | <u>White</u> | <u>Black</u> | <u>Hispanic⁴</u> |
|-----------------------|--------------|-------------|---------------|--------------|--------------|-----------------------------|
| Chlamydia | 145 | 49 | 96 | 25 | 2 | 11 |
| Gonorrhea | 34 | 24 | 10 | 10 | 1 | 7 |
| Syphilis (all stages) | 7 | 3 | 4 | 4 | 0 | 3 |

REGION PROFILE

RYE TOWN

EMERGENCY ROOM VISITS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 5,831 | 1,249.3 |
| Male | 2,757 | 1,192.1 |
| Female | 3,072 | 1,304.5 |
| White | 2,733 | 1,013.9 |
| Black | 587 | 1,870.0 |
| Other | 2,174 | 1,375.8 |
| Hispanic ² | 2,316 | 1,227.9 |

HOSPITALIZATIONS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 2,675 | 573.1 |
| Male | 1,194 | 516.3 |
| Female | 1,481 | 628.9 |
| White | 1,541 | 571.7 |
| Black | 215 | 684.9 |
| Other | 1,099 | 695.5 |
| Hispanic ² | 946 | 501.6 |

| | | |
|---------|-------|---------|
| Under 5 | 540 | 1,924.4 |
| 5-9 | 216 | 675.0 |
| 10-14 | 206 | 661.3 |
| 15-17 | 180 | 945.9 |
| 18-24 | 539 | 1,436.2 |
| 25-44 | 1,748 | 1,316.4 |
| 45-64 | 1,350 | 1,089.1 |
| 65-74 | 441 | 1,378.6 |
| 75+ | 611 | 2,019.2 |

| | | |
|---------|-----|---------|
| Under 5 | 438 | 1,560.9 |
| 5-9 | 31 | 96.9 |
| 10-14 | 40 | 128.4 |
| 15-17 | 40 | 210.2 |
| 18-24 | 527 | 1,404.2 |
| 25-44 | 387 | 291.4 |
| 45-64 | 439 | 354.2 |
| 65-74 | 309 | 965.9 |
| 75+ | 464 | 1,533.4 |

| Top Causes of ER Visits | <u>N</u> | <u>%</u> |
|------------------------------------|----------|----------|
| 1 Injuries | 956 | 16.4 |
| 2 Mental Disorders | 346 | 5.9 |
| 3 Infectious And Parasitic Disease | 268 | 4.6 |
| 4 Abdominal Pain | 265 | 4.5 |
| 5 Back, Neck, Or Spine Disorders | 194 | 3.3 |

| Top Causes of Hospitalization³ | <u>N</u> | <u>%</u> |
|--|----------|----------|
| 1 Mental & Behavioral Disorders | 313 | 11.7 |
| 2 Circulatory System Diseases | 294 | 11.0 |
| 3 Digestive System Diseases | 182 | 6.8 |
| 4 Neoplasms | 159 | 5.9 |
| 5 Other ^A | 154 | 5.8 |

^A Musculoskeletal System & Connective Tissue Diseases

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|--------------------------------|----------|----------|
| 1 White Plains Hospital Center | 2,773 | 47.6 |
| 2 Westchester Medical Center | 1,281 | 22.0 |
| 3 Montefiore New Rochelle | 584 | 10.0 |

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|--------------------------------|----------|----------|
| 1 White Plains Hospital Center | 858 | 32.1 |
| 2 Westchester Medical Center | 519 | 19.4 |
| 3 Phelps Memorial Hospital | 334 | 12.5 |

| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 2,784 | 47.7 |
| Medicare | 1,107 | 19.0 |
| Medicaid | 1,339 | 23.0 |
| Other | 282 | 4.8 |
| Self-Pay | 319 | 5.5 |

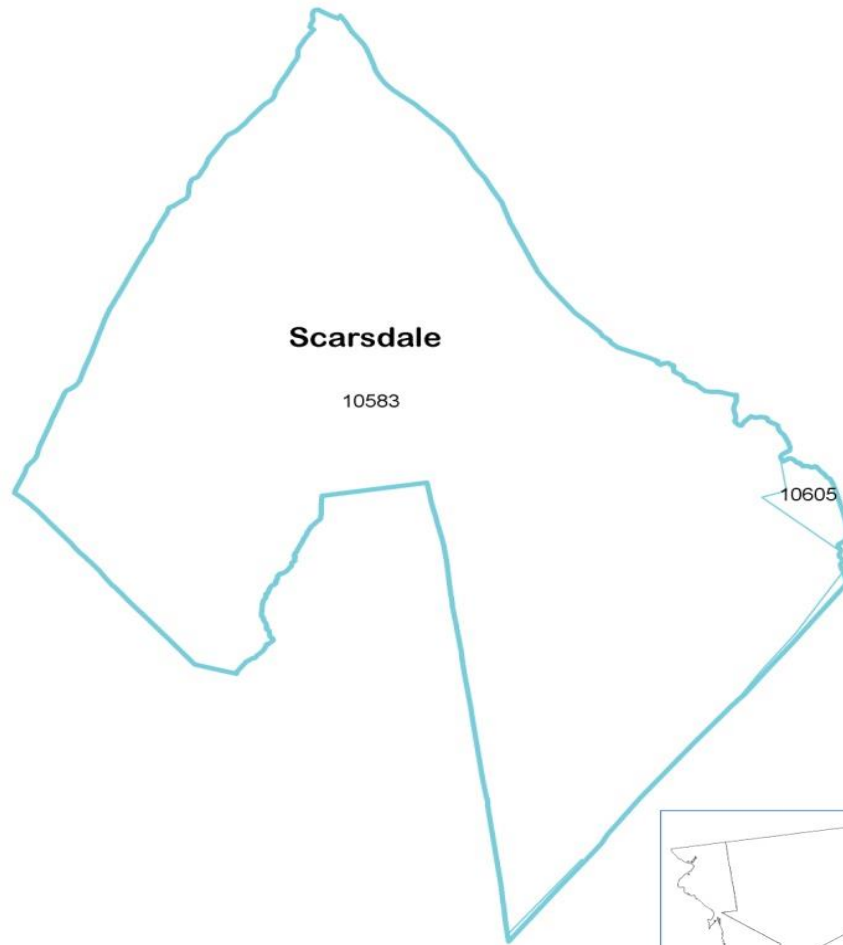
| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 1,039 | 38.8 |
| Medicare | 789 | 29.5 |
| Medicaid | 778 | 29.1 |
| Other | 31 | 1.2 |
| Self-Pay | 38 | 1.4 |

¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:
10543 (37%) 10573, representing 99.8% of the region population according to the 2012-2016 ACS.

REGION PROFILE

SCARSDALE TOWN/VILLAGE



Region Area: 6.7 sq miles

Population: 17,856

ZIP Codes Serving the Region

10583* 10605*

* Also serve other regions.

Municipalities Included in Region

Scarsdale (T/V)

REGION PROFILE

SCARSDALE TOWN/VILLAGE

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | |
|------------------------------|--------|-------|-----------------------|--------|----------------|--|
| Sex | N | % | | N | % ¹ | |
| Male | 8,444 | 47.3 | White | 14,354 | 80.4 | |
| Female | 9,412 | 52.7 | Black | 161 | 0.9 | |
| Total | 17,856 | 100.0 | Other | 3,341 | 18.7 | |
| | | | Hispanic ¹ | 794 | 4.4 | |
| | | | Non-Hispanic | 17,062 | 95.6 | |

| Age | Total | Male | Female | White | Black | Hispanic ¹ |
|-------|-------|-------|--------|-------|-------|-----------------------|
| 0-4 | 936 | 381 | 555 | 773 | 7 | 28 |
| 5-9 | 1,833 | 829 | 1,004 | 1,391 | 0 | 47 |
| 10-14 | 1,687 | 886 | 801 | 1,335 | 32 | 57 |
| 15-17 | 1,167 | 528 | 639 | 905 | 0 | 114 |
| 18-24 | 951 | 477 | 474 | 767 | 12 | 111 |
| 25-44 | 2,901 | 1,299 | 1,602 | 2,091 | 16 | 103 |
| 45-64 | 5,784 | 2,877 | 2,907 | 4,957 | 71 | 276 |
| 65-74 | 1,445 | 707 | 738 | 1,170 | 10 | 29 |
| 75+ | 1,152 | 460 | 692 | 965 | 13 | 29 |

| Country of Origin | N | % | Language Spoken at Home (5+) | N | % |
|-------------------|--------|------|------------------------------|--------|------|
| U.S. | 13,778 | 77.2 | English | 12,828 | 75.8 |
| Foreign Countries | 4,078 | 22.8 | Spanish | 597 | 3.5 |
| Non-Citizen | 1,855 | 10.4 | (Other) non-English | 3,495 | 20.7 |

| Education (25+) | Total | Male | Female |
|-------------------------------|--------|-------|--------|
| Less than High School | 175 | 77 | 98 |
| High School/GED | 413 | 112 | 301 |
| Some College/Associate Degree | 657 | 231 | 426 |
| Bachelor's Degree or Higher | 10,037 | 4,923 | 5,114 |

| Family Structure | Total | White | Black | Hispanic ¹ |
|--|-------|-------|-------|-----------------------|
| Total Family Households | 4,921 | 4,114 | 40 | 209 |
| Families with Own Children < 18 | 2,798 | -- | -- | -- |
| Single Mother Families with Own Children <18 | 108 | -- | -- | -- |

| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ |
|------------------------------|----------|------|--------|----------|--------|-----------------------|
| Unemployment Rate | 3.2 | 2.6 | 4.0 | 3.2 | 0.0 | 1.9 |
| Median Household Income (\$) | >250,000 | -- | -- | >250,000 | 64,167 | 178,162 |
| Poverty Rate (%) | 2.5 | 2.0 | 2.9 | 1.7 | 31.7 | 7.3 |

| Commuters | N | % |
|---|-------|------|
| Commuters Using Alternative Mode of Transportation ² | 4,567 | 58.2 |

¹ Hispanic may be of any race.² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

SCARSDALE TOWN/VILLAGE

BIRTHS (2016)

| | |
|-------------------------------|------|
| Total Births | 92 |
| Birth Rate (per 1,000) | 5.2 |
| Average Maternal Age | 35.5 |

| Mother's Race/Ethnicity¹ | N | % |
|--|----------|----------|
| White | 70 | 76.1 |
| Black | 0 | 0.0 |
| Other | 22 | 23.9 |
| <i>Hispanic²</i> | 6 | 6.5 |

| Mother's Education¹ | N | % |
|---------------------------------------|----------|----------|
| Less than High School | 0 | 0.0 |
| High School or GED | 0 | 0.0 |
| Some College (no degree) | 3 | 3.3 |
| Bachelor's Degree or above | 89 | 96.7 |

| Mother's Country of Origin¹ | N | % |
|---|----------|----------|
| Foreign | 30 | 32.6 |

| Mother's Age¹ | N | % |
|---------------------------------|----------|----------|
| Teenage Mothers | 0 | 0.0 |

| Prenatal Care¹ | N | % |
|----------------------------------|----------|----------|
| Late or No Prenatal Care | 11 | 12.0 |

| Financial Coverage at Birth¹ | N | % |
|--|----------|----------|
| MEDICAID, Child Health Plus | 2 | 2.7 |
| Private or Other Insurance | 73 | 97.3 |
| Self Pay | 0 | 0.0 |

¹ Excluding unknown or not stated.

² Hispanics may be of any race.

| Birthweight¹ | N | % |
|--------------------------------|----------|----------|
| Low Birthweight | 8 | 8.7 |

DEATHS (2016)

| | Total | Male | Female |
|---------------------------------|--------------|-------------|---------------|
| Total Deaths | 73 | 28 | 45 |
| Death Rate (per 100,000) | 412.8 | 332.7 | 485.5 |

| | |
|---|-----|
| Infant Mortality Rate (per 1,000 live birth) | 0.0 |
|---|-----|

| Top Five Causes of Death | N | % |
|---------------------------------|----------|----------|
| 1 Circulatory System Diseases | 27 | 37.0 |
| 2 Neoplasms (any) | 19 | 26.0 |
| 3 External Causes | 5 | 6.8 |
| 4 Nervous System Diseases | 4 | 5.5 |
| 5 Infectious Diseases | 3 | 4.1 |

| Average Age at Death | Total | Male | Female |
|-----------------------------|--------------|-------------|---------------|
| Total | 83 | 77 | 86 |
| White | 82 | 77 | 86 |
| Black | 87 | 87 | 86 |
| Other | 90 | 75 | 104 |
| <i>Hispanic²</i> | 92 | 92 | -- |

COMMUNICABLE DISEASES (2018)

| Top Five Reported Diseases | N | Rate³ |
|-----------------------------------|----------|-------------------------|
| 1 Chlamydia | 29 | 162.4 |
| 2 Hepatitis B Chronic | 17 | 95.2 |
| 3 Hepatitis C Chronic | 17 | 95.2 |
| 4 Campylobacteriosis | 7 | 39.2 |
| 5 E. Coli Shiga | 4 | 22.4 |

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | Total | Male | Female | White | Black | Hispanic⁴ |
|-----------------------|--------------|-------------|---------------|--------------|--------------|-----------------------------|
| Chlamydia | 29 | 9 | 20 | 1 | 0 | 0 |
| Gonorrhea | 1 | 0 | 1 | 0 | 0 | 0 |
| Syphilis (all stages) | 0 | 0 | 0 | 0 | 0 | 0 |

REGION PROFILE

SCARSDALE TOWN/VILLAGE

EMERGENCY ROOM VISITS (2016)¹

| | N | Rate (per 10,000) |
|-----------------------|-------|-------------------|
| Total | 2,853 | 1,613.3 |
| Male | 1,398 | 1,661.1 |
| Female | 1,455 | 1,569.9 |
| White | 2,663 | 1,890.4 |
| Black | 140 | 5,982.9 |
| Other | 572 | 1,964.3 |
| Hispanic ² | 162 | 2,198.1 |

HOSPITALIZATIONS (2016)¹

| | N | Rate (per 10,000) |
|-----------------------|-------|-------------------|
| Total | 1,215 | 687.1 |
| Male | 565 | 671.3 |
| Female | 650 | 701.3 |
| White | 1,201 | 852.6 |
| Black | 55 | 2,350.4 |
| Other | 295 | 1,013.0 |
| Hispanic ² | 44 | 597.0 |

| | | |
|---------|-----|---------|
| Under 5 | 156 | 1,673.8 |
| 5-9 | 136 | 730.4 |
| 10-14 | 162 | 1,001.2 |
| 15-17 | 120 | 987.7 |
| 18-24 | 217 | 2,363.8 |
| 25-44 | 470 | 1,620.1 |
| 45-64 | 650 | 1,150.4 |
| 65-74 | 303 | 2,086.8 |
| 75+ | 639 | 5,625.0 |

| | | |
|---------|-----|---------|
| Under 5 | 118 | 1,266.1 |
| 5-9 | 13 | 69.8 |
| 10-14 | 18 | 111.2 |
| 15-17 | 18 | 148.1 |
| 18-24 | 116 | 1,263.6 |
| 25-44 | 148 | 510.2 |
| 45-64 | 176 | 311.5 |
| 65-74 | 183 | 1,260.3 |
| 75+ | 425 | 3,741.2 |

| Top Causes of ER Visits | N | % |
|------------------------------------|-----|------|
| 1 Injuries | 668 | 23.4 |
| 2 Infectious And Parasitic Disease | 129 | 4.5 |
| 3 Mental Disorders | 125 | 4.4 |
| 4 Abdominal Pain | 112 | 3.9 |
| 5 Acute Respiratory Infections | 62 | 2.2 |

| Top Causes of Hospitalization ³ | N | % |
|--|-----|------|
| 1 Circulatory System Diseases | 162 | 13.3 |
| 2 Digestive System Diseases | 109 | 9.0 |
| 3 Other ⁴ | 96 | 7.9 |
| 4 Infectious and Parasitic Disease | 89 | 7.3 |
| 5 Mental & Behavioral Disorders | 85 | 7.0 |

⁴ Musculoskeletal System & Connective Tissue Diseases

| Top Receiving Hospitals | N | % |
|--------------------------------|-------|------|
| 1 White Plains Hospital Center | 1,509 | 52.9 |
| 2 NY Presbyterian Lawrence | 373 | 13.1 |
| 3 Westchester Medical Center | 228 | 8.0 |

| Top Receiving Hospitals | N | % |
|------------------------------------|-----|------|
| 1 White Plains Hospital Center | 482 | 39.7 |
| 2 NY Presbyterian Lawrence Hospit: | 132 | 10.9 |
| 3 Westchester Medical Center | 67 | 5.5 |

| Insurance Type | N | % |
|----------------|-------|------|
| Private | 1,794 | 62.9 |
| Medicare | 866 | 30.4 |
| Medicaid | 79 | 2.8 |
| Other | 61 | 2.1 |
| Self-Pay | 53 | 1.9 |

| Insurance Type | N | % |
|----------------|-----|------|
| Private | 639 | 52.6 |
| Medicare | 530 | 43.6 |
| Medicaid | 26 | 2.1 |
| Other | 14 | 1.2 |
| Self-Pay | 6 | 0.5 |

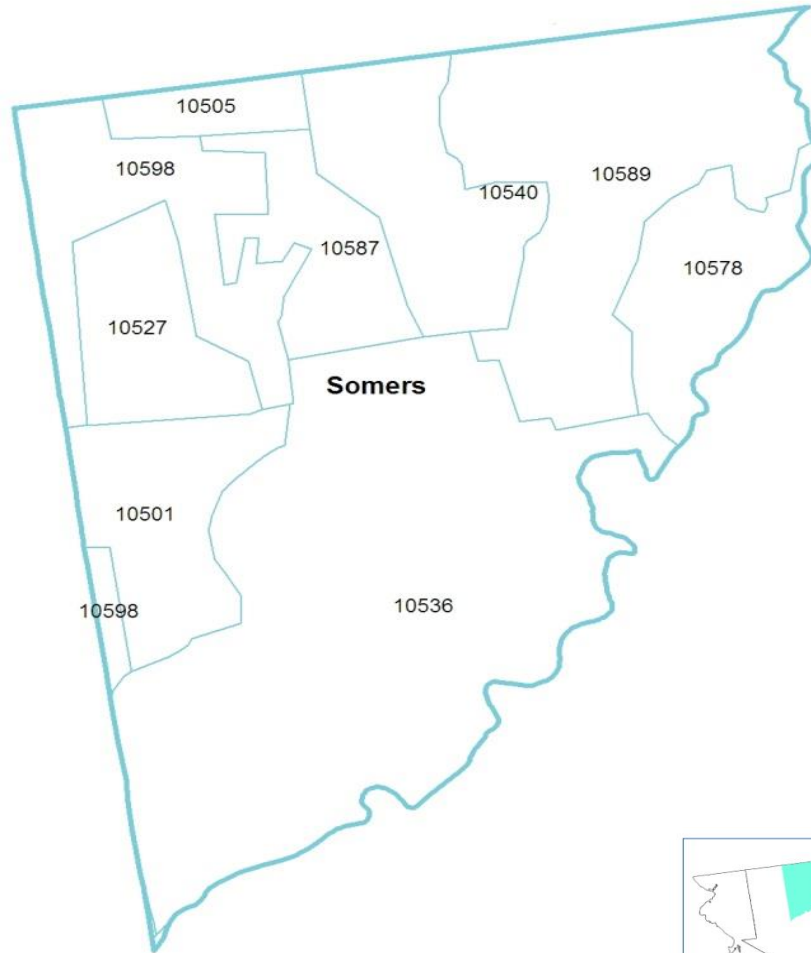
¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:

10583 (44%), representing 99.7% of the region population according to the 2012-2016 ACS.

REGION PROFILE

SOMERS TOWN



Region Area: 32.1 sq miles

Population: 21,448

ZIP Codes Serving the Region

10501 10505* 10527 10536* 10540* 10578*
10587 10589 10598*

* Also serve other regions.

Municipalities Included in Region

Somers (T)

REGION PROFILE

SOMERS TOWN

| DEMOGRAPHICS (2013-2017 ACS) | | | | | | |
|---|--------------|--------------|---|-----------------------------|--------------|-----------------------------|
| Sex | N | % | Race/Ethnicity | | | |
| Male | 10,327 | 48.1 | White | 19,739 | 92.0 | |
| Female | 11,121 | 51.9 | Black | 262 | 1.2 | |
| Total | 21,448 | 100.0 | Other | 1,447 | 6.7 | |
| | | | Hispanic ¹ | 1,723 | 8.0 | |
| | | | Non-Hispanic | 19,725 | 92.0 | |
| Age | Total | Male | Female | White | Black | Hispanic¹ |
| 0-4 | 641 | 314 | 327 | 597 | 0 | 114 |
| 5-9 | 1,331 | 622 | 709 | 1,230 | 0 | 221 |
| 10-14 | 1,581 | 953 | 628 | 1,413 | 41 | 137 |
| 15-17 | 1,176 | 608 | 568 | 974 | 83 | 104 |
| 18-24 | 1,298 | 761 | 537 | 1,163 | 3 | 204 |
| 25-44 | 3,501 | 1,552 | 1,949 | 3,143 | 30 | 293 |
| 45-64 | 6,444 | 3,153 | 3,291 | 5,998 | 37 | 444 |
| 65-74 | 2,566 | 1,157 | 1,409 | 2,399 | 43 | 93 |
| 75+ | 2,910 | 1,207 | 1,703 | 2,822 | 25 | 113 |
| Country of Origin | N | % | Language Spoken at Home (5+) | | | |
| U.S. | 19,044 | 88.8 | English | 18,261 | 87.8 | |
| Foreign Countries | 2,404 | 11.2 | Spanish | 676 | 3.2 | |
| Non-Citizen | 607 | 2.8 | (Other) non-English | 1,870 | 9.0 | |
| Education (25+) | Total | Male | Female | | | |
| Less than High School | 638 | 307 | 331 | | | |
| High School/GED | 2,641 | 1,110 | 1,531 | | | |
| Some College/Associate Degree | 3,643 | 1,606 | 2,037 | | | |
| Bachelor's Degree or Higher | 8,499 | 4,046 | 4,453 | | | |
| Family Structure | Total | White | Black | Hispanic¹ | | |
| Total Family Households | 5,929 | 5,546 | 37 | 424 | | |
| Families with Own Children < 18 | 2,333 | -- | -- | -- | | |
| Single Mother Families with Own Children <18 | 213 | -- | -- | -- | | |
| Employment and Income | Total | Male | Female | White | Black | Hispanic¹ |
| Unemployment Rate | 4.2 | 4.2 | 4.2 | 4.2 | 0.0 | 10.8 |
| Median Household Income (\$) | 118,098 | -- | -- | 118,299 | 141,071 | 102,727 |
| Poverty Rate (%) | 2.3 | 1.9 | 2.7 | 2.1 | 7.4 | 3.8 |
| Commuters | N | % | | | | |
| Commuters Using Alternative Mode of Transportation ² | 1,980 | 20.4 | | | | |
| | | | ¹ Hispanic may be of any race. | | | |
| | | | ² Including carpooling, public transportation, bicycling, walking, or telecommuting. | | | |

REGION PROFILE

SOMERS TOWN

| BIRTHS (2016) | | | Birthweight¹ | | | |
|--|----------|----------|---|--------------|-------------------------|---------------|
| Total Births | 115 | | Low Birthweight | N 6 | % 5.2 | |
| Birth Rate (per 1,000) | 5.4 | | | | | |
| Average Maternal Age | 33.3 | | | | | |
| | | | DEATHS (2016) | | | |
| | | | Total | Male | Female | |
| Mother's Race/Ethnicity¹ | N | % | Total Deaths | 206 | 96 | 110 |
| White | 103 | 89.6 | Death Rate (per 100,000) | 974.9 | 949.9 | 997.8 |
| Black | 4 | 3.5 | | | | |
| Other | 8 | 7.0 | | | | |
| Hispanic ² | 10 | 8.7 | | | | |
| | | | Infant Mortality Rate (per 1,000 live birth) | | 0.0 | |
| | | | Top Five Causes of Death | | | |
| | | | | N | % | |
| Mother's Education¹ | N | % | 1 Circulatory System Diseases | 84 | 40.8 | |
| Less than High School | 3 | 2.6 | 2 Neoplasms (any) | 39 | 18.9 | |
| High School or GED | 6 | 5.2 | 3 Respiratory System Diseases | 24 | 11.7 | |
| Some College (no degree) | 11 | 9.6 | 4 Nervous System Diseases | 15 | 7.3 | |
| Bachelor's Degree or above | 95 | 82.6 | 5 External Causes | 13 | 6.3 | |
| | | | Average Age at Death | | | |
| | | | | Total | Male | Female |
| Mother's Country of Origin¹ | N | % | Total | 81 | 79 | 83 |
| Foreign | 14 | 12.2 | White | 81 | 79 | 83 |
| | | | Black | 93 | 93 | -- |
| Mother's Age¹ | N | % | Other | 79 | 79 | -- |
| Teenage Mothers | 2 | 1.7 | Hispanic ² | -- | -- | -- |
| | | | COMMUNICABLE DISEASES (2018) | | | |
| Prenatal Care¹ | N | % | | | | |
| Late or No Prenatal Care | 9 | 7.8 | | | | |
| | | | Top Five Reported Diseases | | | |
| | | | | N | Rate³ | |
| Financial Coverage at Birth¹ | N | % | 1 Chlamydia | 44 | 205.1 | |
| MEDICAID, Child Health Plus | 11 | 11.1 | 2 Lyme Disease | 10 | 46.6 | |
| Private or Other Insurance | 88 | 88.9 | 3 Babesiosis | 7 | 32.6 | |
| Self Pay | 0 | 0.0 | 4 Hepatitis C Chronic | 6 | 28.0 | |
| | | | 5 Anaplasmosis | 4 | 18.6 | |

¹ Excluding unknown or not stated.

² Hispanics may be of any race.

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | Total | Male | Female | White | Black | Hispanic⁴ |
|-----------------------|--------------|-------------|---------------|--------------|--------------|-----------------------------|
| Chlamydia | 44 | 31 | 13 | 0 | 3 | 0 |
| Gonorrhea | 4 | 3 | 1 | 1 | 0 | 0 |
| Syphilis (all stages) | 1 | 1 | 0 | 0 | 0 | 0 |

REGION PROFILE

SOMERS TOWN

EMERGENCY ROOM VISITS (2016)¹

| | N | Rate (per 10,000) |
|-----------------------|-------|-------------------|
| Total | 5,671 | 2,683.9 |
| Male | 2,736 | 2,707.3 |
| Female | 2,935 | 2,662.4 |
| White | 4,234 | 2,240.0 |
| Black | 159 | 5,445.2 |
| Other | 1,598 | 12,662.4 |
| Hispanic ² | 222 | 2,932.6 |

HOSPITALIZATIONS (2016)¹

| | N | Rate (per 10,000) |
|-----------------------|-------|-------------------|
| Total | 2,397 | 1,134.4 |
| Male | 1,055 | 1,043.9 |
| Female | 1,342 | 1,217.3 |
| White | 1,940 | 1,026.3 |
| Black | 47 | 1,609.6 |
| Other | 536 | 4,247.2 |
| Hispanic ² | 67 | 885.1 |

| | | |
|---------|-------|---------|
| Under 5 | 212 | 2,924.1 |
| 5-9 | 137 | 937.7 |
| 10-14 | 235 | 1,423.4 |
| 15-17 | 220 | 2,107.3 |
| 18-24 | 360 | 3,146.9 |
| 25-44 | 726 | 1,991.8 |
| 45-64 | 1,188 | 1,901.1 |
| 65-74 | 647 | 2,864.1 |
| 75+ | 1,946 | 6,592.1 |

| | | |
|---------|-------|---------|
| Under 5 | 145 | 2,000.0 |
| 5-9 | 5 | 34.2 |
| 10-14 | 13 | 78.7 |
| 15-17 | 15 | 143.7 |
| 18-24 | 150 | 1,311.2 |
| 25-44 | 146 | 400.5 |
| 45-64 | 365 | 584.1 |
| 65-74 | 399 | 1,766.3 |
| 75+ | 1,159 | 3,926.2 |

| Top Causes of ER Visits | N | % |
|------------------------------------|-------|------|
| 1 Injuries | 1,308 | 23.1 |
| 2 Infectious And Parasitic Disease | 259 | 4.6 |
| 3 Abdominal Pain | 176 | 3.1 |
| 4 Mental Disorders | 151 | 2.7 |
| 5 Back, Neck, Or Spine Disorders | 144 | 2.5 |

| Top Causes of Hospitalization ³ | N | % |
|--|-----|------|
| 1 Circulatory System Diseases | 448 | 18.7 |
| 2 Other ^A | 224 | 9.3 |
| 3 Digestive System Diseases | 222 | 9.3 |
| 4 Infectious And Parasitic Disease | 212 | 8.8 |
| 5 Respiratory System Diseases | 211 | 8.8 |

^A Musculoskeletal System & Connective Tissue Diseases

| Top Receiving Hospitals | N | % |
|---------------------------------|-------|------|
| 1 Northern Westchester Hospital | 2,800 | 49.4 |
| 2 Putnam Hospital Center | 1,259 | 22.2 |
| 3 NY Presbyterian Hudson Valley | 644 | 11.4 |

| Top Receiving Hospitals | N | % |
|---------------------------------|-------|------|
| 1 Northern Westchester Hospital | 1,174 | 49.0 |
| 2 Putnam Hospital Center | 397 | 16.6 |
| 3 Westchester Medical Center | 212 | 8.8 |

| Insurance Type | N | % |
|----------------|-------|------|
| Private | 2,245 | 39.6 |
| Medicare | 2,629 | 46.4 |
| Medicaid | 497 | 8.8 |
| Other | 154 | 2.7 |
| Self-Pay | 146 | 2.6 |

| Insurance Type | N | % |
|----------------|-------|------|
| Private | 725 | 30.2 |
| Medicare | 1,528 | 63.7 |
| Medicaid | 116 | 4.8 |
| Other | 20 | 0.8 |
| Self-Pay | 8 | 0.3 |

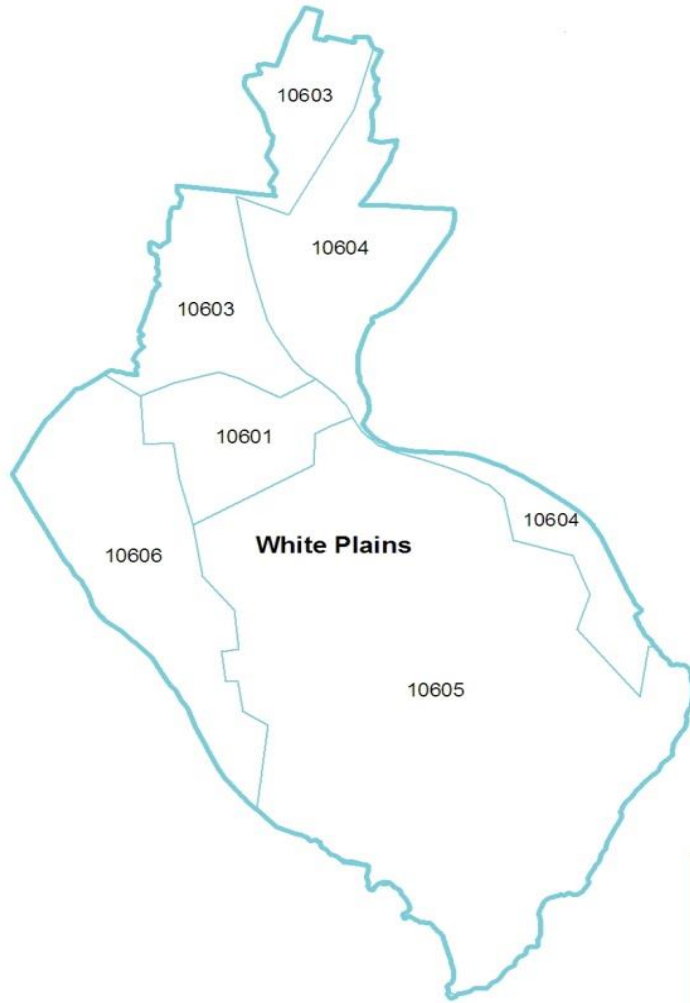
¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:

10501 10505 10527 10536 (50%) 10578 (90%) 10589 10598 (9%), representing 99.4% of the region population according to the 2012-2016 ACS.

REGION PROFILE

WHITE PLAINS CITY



Region Area: 9.9 sq miles

Population: 58,404

ZIP Codes Serving the Region

10601 10602** 10603* 10604* 10605 10606

* Also serve other regions. ** PO Box

Municipalities Included in Region

White Plains (C)

REGION PROFILE

WHITE PLAINS CITY

| DEMOGRAPHICS (2013-2017 ACS) | | | | | | |
|---|--------------|--------------|-------------------------------------|-----------------------------|--------------|-----------------------------|
| Sex | N | % | Race/Ethnicity | N | % | |
| Male | 28,026 | 48.0 | White | 34,870 | 59.7 | |
| Female | 30,378 | 52.0 | Black | 7,324 | 12.5 | |
| Total | 58,404 | 100.0 | Other | 16,210 | 27.8 | |
| | | | Hispanic ¹ | 19,411 | 33.2 | |
| | | | Non-Hispanic | 38,993 | 66.8 | |
| Age | Total | Male | Female | White | Black | Hispanic¹ |
| 0-4 | 3,478 | 1,705 | 1,773 | 1,622 | 454 | 1,392 |
| 5-9 | 3,236 | 1,852 | 1,384 | 1,717 | 312 | 1,615 |
| 10-14 | 3,198 | 1,666 | 1,532 | 1,601 | 410 | 1,456 |
| 15-17 | 1,958 | 887 | 1,071 | 935 | 290 | 893 |
| 18-24 | 5,032 | 2,482 | 2,550 | 2,407 | 900 | 2,168 |
| 25-44 | 17,233 | 8,722 | 8,511 | 9,528 | 1,455 | 6,600 |
| 45-64 | 15,134 | 7,205 | 7,929 | 10,143 | 2,159 | 4,273 |
| 65-74 | 4,328 | 1,745 | 2,583 | 3,269 | 520 | 631 |
| 75+ | 4,807 | 1,762 | 3,045 | 3,648 | 824 | 383 |
| Country of Origin | N | % | Language Spoken at Home (5+) | N | % | |
| U.S. | 40,396 | 69.2 | English | 31,098 | 56.6 | |
| Foreign Countries | 18,008 | 30.8 | Spanish | 16,664 | 30.3 | |
| Non-Citizen | 10,893 | 18.7 | (Other) non-English | 7,164 | 13.0 | |
| Education (25+) | Total | Male | Female | | | |
| Less than High School | 5,566 | 2,671 | 2,895 | | | |
| High School/GED | 6,994 | 3,324 | 3,670 | | | |
| Some College/Associate Degree | 8,053 | 3,845 | 4,208 | | | |
| Bachelor's Degree or Higher | 20,889 | 9,594 | 11,295 | | | |
| Family Structure | Total | White | Black | Hispanic¹ | | |
| Total Family Households | 13,337 | 8,474 | 1,534 | 3,929 | | |
| Families with Own Children < 18 | 5,669 | -- | -- | -- | | |
| Single Mother Families with Own Children <18 | 1,088 | -- | -- | -- | | |
| Employment and Income | Total | Male | Female | White | Black | Hispanic¹ |
| Unemployment Rate | 7.0 | 6.4 | 7.7 | 5.2 | 12.9 | 9.0 |
| Median Household Income (\$) | 87,550 | -- | -- | 98,239 | 52,615 | 60,396 |
| Poverty Rate (%) | 11.9 | 10.8 | 12.9 | 8.4 | 25.0 | 16.3 |
| Commuters | N | % | | | | |
| Commuters Using Alternative Mode of Transportation ² | 12,096 | 40.1 | | | | |

¹ Hispanic may be of any race.

² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

WHITE PLAINS CITY

| BIRTHS (2016) | | | DEATHS (2016) | | |
|--|----------|----------|---|--------------|-------------------------|
| Total Births | 667 | | Birthweight¹ | N | % |
| Birth Rate (per 1,000) | 11.5 | | Low Birthweight | 51 | 7.6 |
| Average Maternal Age | 31.6 | | | | |
| Mother's Race/Ethnicity¹ | N | % | Total | Male | Female |
| White | 317 | 47.5 | Total Deaths | 427 | 198 |
| Black | 77 | 11.5 | Death Rate (per 100,000) | 737.2 | 710.8 |
| Other | 273 | 40.9 | | | 229 |
| Hispanic ² | 242 | 36.3 | | | 761.6 |
| Mother's Education¹ | N | % | Infant Mortality Rate (per 1,000 live birth) | 9.0 | |
| Less than High School | 82 | 12.3 | | | |
| High School or GED | 91 | 13.7 | Top Five Causes of Death | N | % |
| Some College (no degree) | 120 | 18.0 | 1 Circulatory System Diseases | 148 | 34.7 |
| Bachelor's Degree or above | 373 | 56.0 | 2 Neoplasms (any) | 86 | 20.1 |
| Mother's Country of Origin¹ | N | % | 3 Nervous System Diseases | 32 | 7.5 |
| Foreign | 326 | 48.9 | 4 Respiratory System Diseases | 29 | 6.8 |
| Mother's Age¹ | N | % | 5 Digestive System Diseases | 24 | 5.6 |
| Teenage Mothers | 26 | 3.9 | Average Age at Death | Total | Male |
| Prenatal Care¹ | N | % | Total | 78 | 75 |
| Late or No Prenatal Care | 105 | 15.7 | White | 79 | 76 |
| Financial Coverage at Birth¹ | N | % | Black | 75 | 69 |
| MEDICAID, Child Health Plus | 171 | 29.2 | Other | 66 | 66 |
| Private or Other Insurance | 412 | 70.3 | Hispanic ² | 69 | 69 |
| Self Pay | 3 | 0.5 | | | |
| <i>¹ Excluding unknown or not stated.</i> | | | COMMUNICABLE DISEASES (2018) | | |
| <i>² Hispanics may be of any race.</i> | | | Top Five Reported Diseases | N | Rate³ |
| | | | 1 Chlamydia | 244 | 417.8 |
| | | | 2 Hepatitis C Chronic | 55 | 94.2 |
| | | | 3 Gonorrhea, Uncomplicated | 34 | 58.2 |
| | | | 4 Hepatitis B Chronic | 19 | 32.5 |
| | | | 5 Campylobacteriosis | 14 | 24.0 |

| MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018) | | | | | | |
|--|--------------|-------------|---------------|--------------|--------------|-----------------------------|
| | Total | Male | Female | White | Black | Hispanic⁴ |
| Chlamydia | 244 | 88 | 156 | 15 | 21 | 35 |
| Gonorrhea | 34 | 26 | 8 | 5 | 10 | 5 |
| Syphilis (all stages) | 16 | 15 | 1 | 5 | 0 | 2 |

REGION PROFILE

WHITE PLAINS CITY

EMERGENCY ROOM VISITS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 20,139 | 3,476.7 |
| Male | 9,328 | 3,348.8 |
| Female | 10,991 | 3,655.1 |
| White | 8,489 | 2,316.5 |
| Black | 5,539 | 7,682.4 |
| Other | 7,157 | 5,542.9 |
| Hispanic ² | 6,291 | 3,574.8 |

HOSPITALIZATIONS (2016)¹

| | <u>N</u> | <u>Rate (per 10,000)</u> |
|-----------------------|----------|--------------------------|
| Total | 6,514 | 1,124.6 |
| Male | 2,847 | 1,022.1 |
| Female | 3,667 | 1,219.5 |
| White | 3,725 | 1,016.5 |
| Black | 1,422 | 1,972.3 |
| Other | 1,915 | 1,483.1 |
| Hispanic ² | 1,371 | 779.1 |

| | | |
|---------|-------|---------|
| Under 5 | 1,602 | 4,612.7 |
| 5-9 | 943 | 2,927.7 |
| 10-14 | 827 | 2,401.3 |
| 15-17 | 556 | 2,955.9 |
| 18-24 | 1,757 | 3,606.3 |
| 25-44 | 5,248 | 2,990.0 |
| 45-64 | 4,877 | 3,318.4 |
| 65-74 | 1,765 | 4,295.4 |
| 75+ | 2,744 | 5,868.3 |

| | | |
|---------|-------|---------|
| Under 5 | 745 | 2,145.1 |
| 5-9 | 84 | 260.8 |
| 10-14 | 86 | 249.7 |
| 15-17 | 71 | 377.5 |
| 18-24 | 924 | 1,896.6 |
| 25-44 | 886 | 504.8 |
| 45-64 | 1,196 | 813.8 |
| 65-74 | 850 | 2,068.6 |
| 75+ | 1,672 | 3,575.7 |

| Top Causes of ER Visits | <u>N</u> | <u>%</u> |
|------------------------------------|----------|----------|
| 1 Injuries | 3,414 | 17.0 |
| 2 Mental Disorders | 1,011 | 5.0 |
| 3 Infectious And Parasitic Disease | 947 | 4.7 |
| 4 Abdominal Pain | 893 | 4.4 |
| 5 Acute Respiratory Infections | 783 | 3.9 |

| Top Causes of Hospitalization³ | <u>N</u> | <u>%</u> |
|--|----------|----------|
| 1 Mental & Behavioral Disorders | 734 | 11.3 |
| 2 Circulatory System Diseases | 728 | 11.2 |
| 3 Digestive System Diseases | 578 | 8.9 |
| 4 Respiratory System Diseases | 483 | 7.4 |
| 5 Infectious And Parasitic Disease | 456 | 7.0 |

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|--------------------------------|----------|----------|
| 1 White Plains Hospital Center | 15,494 | 76.9 |
| 2 Westchester Medical Center | 2,105 | 10.5 |
| 3 St Vincents Westchester | 260 | 1.3 |

| Top Receiving Hospitals | <u>N</u> | <u>%</u> |
|--------------------------------|----------|----------|
| 1 White Plains Hospital Center | 3,896 | 59.8 |
| 2 Westchester Medical Center | 673 | 10.3 |
| 3 St Vincents Westchester | 297 | 4.6 |

| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 11,037 | 54.8 |
| Medicare | 5,009 | 24.9 |
| Medicaid | 2,375 | 11.8 |
| Other | 572 | 2.8 |
| Self-Pay | 1,326 | 6.6 |

| Insurance Type | <u>N</u> | <u>%</u> |
|-----------------------|----------|----------|
| Private | 3,169 | 48.6 |
| Medicare | 2,533 | 38.9 |
| Medicaid | 645 | 9.9 |
| Other | 88 | 1.4 |
| Self-Pay | 79 | 1.2 |

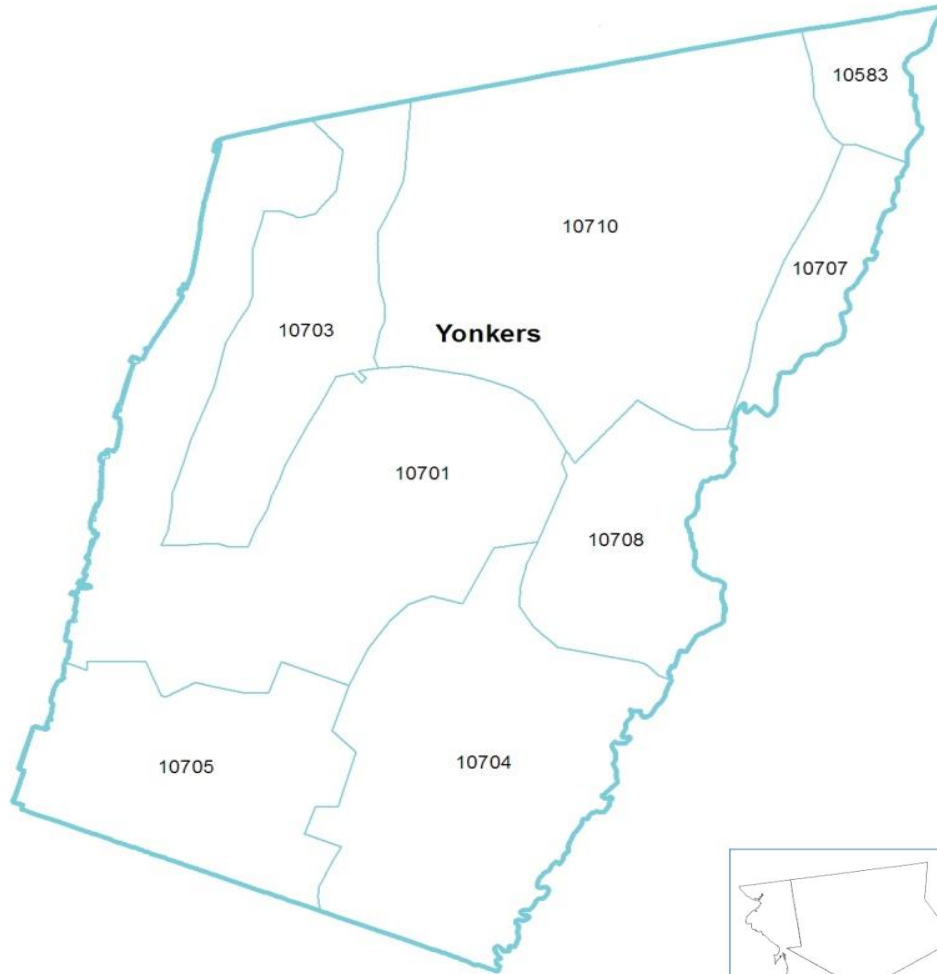
¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:

10601 10603 (38%) 10604 (37%) 10605 10606, over representing the region population by 0.2% according to the 2012-2016 ACS.

REGION PROFILE

YONKERS CITY



Region Area: 18.4 sq miles

Population: 200,999

ZIP Codes Serving the Region

10583* 10701 10702** 10703 10704 10705
10707* 10708* 10710

* Also serve other regions. ** PO Box

Municipalities Included in Region

Yonkers (C)

REGION PROFILE

YONKERS CITY

| DEMOGRAPHICS (2013-2017 ACS) | | | Race/Ethnicity | | | | |
|---|---------|----------------|------------------------------|-----------------------|----------------|-----------------------|------|
| Sex | N | % | | N | % ¹ | | |
| Male | 94,936 | 47.2 | White | 113,087 | 56.3 | | |
| Female | 106,063 | 52.8 | Black | 35,737 | 17.8 | | |
| Total | 200,999 | 100.0 | Other | 52,175 | 26.0 | | |
| | | | Hispanic* | 72,945 | 36.3 | | |
| | | | Non-Hispanic | 128,054 | 63.7 | | |
| Age | Total | Male | Female | White | Black | Hispanic ¹ | |
| 0-4 | 12,488 | 6,442 | 6,046 | 5,705 | 2,551 | 6,041 | |
| 5-9 | 11,689 | 5,767 | 5,922 | 5,624 | 1,987 | 5,595 | |
| 10-14 | 11,893 | 5,669 | 6,224 | 6,100 | 2,249 | 5,877 | |
| 15-17 | 7,459 | 3,727 | 3,732 | 3,289 | 1,886 | 3,543 | |
| 18-24 | 19,089 | 9,278 | 9,811 | 9,576 | 3,538 | 7,899 | |
| 25-44 | 54,304 | 26,255 | 28,049 | 27,655 | 10,409 | 22,537 | |
| 45-64 | 51,149 | 24,192 | 26,957 | 30,691 | 9,169 | 15,547 | |
| 65-74 | 18,244 | 8,173 | 10,071 | 12,677 | 2,430 | 3,809 | |
| 75+ | 14,684 | 5,433 | 9,251 | 11,770 | 1,518 | 2,097 | |
| Country of Origin | N | % | Language Spoken at Home (5+) | | | N | % |
| U.S. | 139,505 | 69.4 | English | 100,106 | | | 53.1 |
| Foreign Countries | 61,494 | 30.6 | Spanish | 57,434 | | | 30.5 |
| Non-Citizen | 26,179 | 13.0 | (Other) non-English | 30,971 | | | 16.4 |
| Education (25+) | Total | Male | Female | | | | |
| Less than High School | 24,157 | 12,025 | 12,132 | | | | |
| High School/GED | 35,039 | 17,040 | 17,999 | | | | |
| Some College/Associate Degree | 34,006 | 15,598 | 18,408 | | | | |
| Bachelor's Degree or Higher | 45,179 | 19,390 | 25,789 | | | | |
| Family Structure | Total | White | Black | Hispanic ¹ | | | |
| Total Family Households | 47,589 | 27,441 | 8,318 | 16,721 | | | |
| Families with Own Children < 18 | 20,870 | -- | -- | -- | | | |
| Single Mother Families with Own Children <18 | 6,106 | -- | -- | -- | | | |
| Employment and Income | Total | Male | Female | White | Black | Hispanic ¹ | |
| Unemployment Rate | 8.0 | 8.3 | 7.7 | 7.1 | 10.7 | 8.5 | |
| Median Household Income (\$) | 62,399 | -- | -- | 68,794 | 50,232 | 49,680 | |
| Poverty Rate (%) | 16.4 | 15.3 | 17.4 | 13.1 | 23.2 | 23.0 | |
| Commuters | N | % ² | | | | | |
| Commuters Using Alternative Mode of Transportation ² | 41,494 | 45.0 | | | | | |

¹ Hispanic may be of any race.² Including carpooling, public transportation, bicycling, walking, or telecommuting.

REGION PROFILE

YONKERS CITY

| BIRTHS (2016) | | | DEATHS (2016) | | |
|--|----------|----------|---|--------------|-------------------------|
| Total Births | 2583 | | Birthweight¹ | N | % |
| Birth Rate (per 1,000) | 12.9 | | Low Birthweight | 251 | 9.7 |
| Average Maternal Age | 30.1 | | | | |
| Mother's Race/Ethnicity¹ | N | % | Total Deaths | Total | Male |
| White | 1454 | 56.3 | Death Rate (per 100,000) | 1563 | 750 |
| Black | 554 | 21.5 | | 782.6 | 796.8 |
| Other | 574 | 22.2 | | | 813 |
| Hispanic ² | 1196 | 46.3 | | | 769.9 |
| Mother's Education¹ | N | % | Infant Mortality Rate (per 1,000 live birth) | | 4.3 |
| Less than High School | 451 | 17.5 | | | |
| High School or GED | 492 | 19.1 | Top Five Causes of Death | N | % |
| Some College (no degree) | 690 | 26.7 | 1 Circulatory System Diseases | 564 | 36.1 |
| Bachelor's Degree or above | 948 | 36.7 | 2 Neoplasms (any) | 408 | 26.1 |
| Mother's Country of Origin¹ | N | % | 3 Respiratory System Diseases | 138 | 8.8 |
| Foreign | 1172 | 45.4 | 4 External Causes | 89 | 5.7 |
| Mother's Age¹ | N | % | 5 Diabetes | 70 | 4.5 |
| Teenage Mothers | 101 | 3.9 | Average Age at Death | Total | Male |
| Prenatal Care¹ | N | % | Total | 75 | 71 |
| Late or No Prenatal Care | 618 | 23.9 | White | 78 | 74 |
| Financial Coverage at Birth¹ | N | % | Black | 66 | 63 |
| MEDICAID, Child Health Plus | 1371 | 58.2 | Other | 67 | 60 |
| Private or Other Insurance | 974 | 41.3 | Hispanic ² | 68 | 63 |
| Self Pay | 11 | 0.5 | | | 74 |
| | | | COMMUNICABLE DISEASES (2018) | | |
| | | | Top Five Reported Diseases | N | Rate³ |
| | | | 1 Chlamydia | 1,105 | 549.8 |
| | | | 2 Gonorrhea, Uncomplicated | 213 | 106.0 |
| | | | 3 Hepatitis C Chronic | 199 | 99.0 |
| | | | 4 Syphilis, All Stages | 77 | 38.3 |
| | | | 5 Hepatitis B Chronic | 76 | 37.8 |

¹ Excluding unknown or not stated.

² Hispanics may be of any race.

MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018)

| | Total | Male | Female | White | Black | Hispanic ⁴ |
|-----------------------|-------|------|--------|-------|-------|-----------------------|
| Chlamydia | 1105 | 388 | 717 | 29 | 77 | 55 |
| Gonorrhea | 213 | 133 | 80 | 20 | 63 | 35 |
| Syphilis (all stages) | 77 | 59 | 18 | 22 | 14 | 26 |

REGION PROFILE

YONKERS CITY

EMERGENCY ROOM VISITS (2016)¹

| | N | Rate (per 10,000) |
|-----------------------|---------|-------------------|
| Total | 108,975 | 54,562.5 |
| Male | 49,353 | 52,435.7 |
| Female | 59,620 | 56,456.2 |
| White | 33,717 | 30,833.7 |
| Black | 26,077 | 69,999.7 |
| Other | 43,390 | 87,032.4 |
| Hispanic ² | 31,635 | 47,073.1 |

HOSPITALIZATIONS (2016)¹

| | N | Rate (per 10,000) |
|-----------------------|--------|-------------------|
| Total | 27,227 | 13,632.2 |
| Male | 11,924 | 12,668.8 |
| Female | 15,302 | 14,490.0 |
| White | 14,450 | 13,214.3 |
| Black | 5,836 | 15,665.9 |
| Other | 10,084 | 20,226.7 |
| Hispanic ² | 6,915 | 10,289.6 |

| | | |
|---------|--------|----------|
| Under 5 | 9,854 | 78,706.1 |
| 5-9 | 5,979 | 51,028.4 |
| 10-14 | 4,325 | 37,162.7 |
| 15-17 | 3,266 | 42,399.1 |
| 18-24 | 11,011 | 56,757.7 |
| 25-44 | 31,267 | 58,183.1 |
| 45-64 | 25,470 | 49,735.4 |
| 65-74 | 7,514 | 43,318.3 |
| 75+ | 10,289 | 71,199.2 |

| | | |
|---------|-------|----------|
| Under 5 | 3,124 | 24,952.1 |
| 5-9 | 334 | 2,850.6 |
| 10-14 | 337 | 2,895.7 |
| 15-17 | 271 | 3,518.1 |
| 18-24 | 4,287 | 22,097.9 |
| 25-44 | 3,805 | 7,080.5 |
| 45-64 | 5,434 | 10,611.0 |
| 65-74 | 3,576 | 20,615.7 |
| 75+ | 6,059 | 41,927.9 |

| Top Causes of ER Visits | N | % |
|------------------------------------|--------|------|
| 1 Injuries | 18,285 | 16.8 |
| 2 Acute Respiratory Infections | 6,789 | 6.2 |
| 3 Infectious And Parasitic Disease | 5,043 | 4.6 |
| 4 Mental Disorders | 4,054 | 3.7 |
| 5 Back, Neck, Or Spine Disorders | 3,390 | 3.1 |

| Top Causes of Hospitalization ³ | N | % |
|--|-------|------|
| 1 Circulatory System Diseases | 3,576 | 13.1 |
| 2 Mental & Behavioral Disorders | 2,631 | 9.7 |
| 3 Digestive System Diseases | 2,321 | 8.5 |
| 4 Respiratory System Diseases | 2,098 | 7.7 |
| 5 Infectious And Parasitic Disease | 1,638 | 6.0 |

| Top Receiving Hospitals | N | % |
|-----------------------------------|--------|------|
| 1 SJRH St Johns Division | 35,267 | 32.4 |
| 2 Saint Joseph's Hospital Yonkers | 29,664 | 27.2 |
| 3 NY Presbyterian Lawrence | 14,349 | 13.2 |

| Top Receiving Hospitals | N | % |
|-----------------------------------|-------|------|
| 1 SJRH - St. John's Division | 7,586 | 27.9 |
| 2 NY Presbyterian Lawrence | 3,877 | 14.2 |
| 3 Saint Joseph's Hospital Yonkers | 2,974 | 10.9 |

| Insurance Type | N | % |
|----------------|--------|------|
| Private | 50,200 | 46.1 |
| Medicare | 18,938 | 17.4 |
| Medicaid | 26,026 | 23.9 |
| Other | 7,122 | 6.5 |
| Self-Pay | 6,689 | 6.1 |

| Insurance Type | N | % |
|----------------|--------|------|
| Private | 12,919 | 47.4 |
| Medicare | 9,511 | 34.9 |
| Medicaid | 4,036 | 14.8 |
| Other | 384 | 1.4 |
| Self-Pay | 377 | 1.4 |

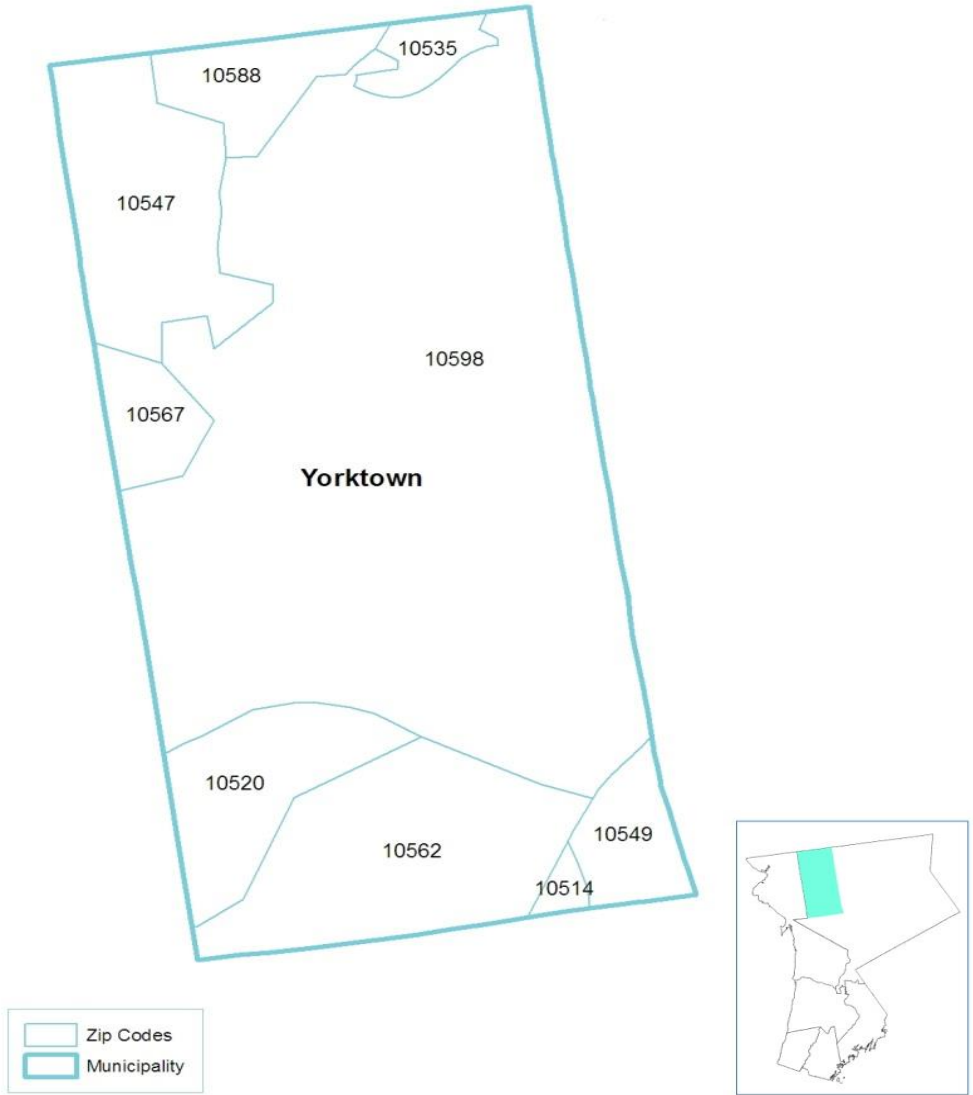
¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:

10583 (20%) 10701 10703 10704 10705 10707 (33%) 10708 (50%) 10710, over representing the region population by 1.8% according to 2012-2016 ACS.

REGION PROFILE

YORKTOWN TOWN



Region Area: 39.5 sq miles
 Population: 36,900

ZIP Codes Serving the Region

10514* 10520* 10535 10547* 10549 10562*
 10567* 10588 10598*

* Also serve other regions.

Municipalities Included in Region

Yorktown (T)

REGION PROFILE

YORKTOWN TOWN

| DEMOGRAPHICS (2013-2017 ACS) | | | | | | |
|---|--------------|--------------|---|-----------------------------|--------------|-----------------------------|
| Sex | N | % | Race/Ethnicity | | | |
| Male | 18,080 | 49.0 | White | 30,973 | 83.9 | |
| Female | 18,820 | 51.0 | Black | 1,585 | 4.3 | |
| Total | 36,900 | 100.0 | Other | 4,342 | 11.8 | |
| | | | Hispanic ¹ | 5,535 | 15.0 | |
| | | | Non-Hispanic | 31,365 | 85.0 | |
| Age | Total | Male | Female | White | Black | Hispanic¹ |
| 0-4 | 1,761 | 1,089 | 672 | 1,407 | 51 | 463 |
| 5-9 | 1,917 | 956 | 961 | 1,529 | 118 | 365 |
| 10-14 | 2,653 | 1,627 | 1,026 | 2,126 | 188 | 517 |
| 15-17 | 1,769 | 964 | 805 | 1,226 | 116 | 403 |
| 18-24 | 2,768 | 1,398 | 1,370 | 2,353 | 155 | 478 |
| 25-44 | 7,280 | 3,459 | 3,821 | 5,990 | 315 | 1,295 |
| 45-64 | 11,977 | 5,724 | 6,253 | 10,091 | 489 | 1,432 |
| 65-74 | 3,427 | 1,657 | 1,770 | 3,153 | 69 | 308 |
| 75+ | 3,348 | 1,206 | 2,142 | 3,098 | 84 | 274 |
| Country of Origin | N | % | Language Spoken at Home (5+) | | | |
| U.S. | 31,387 | 85.1 | English | 28,356 | 80.7 | |
| Foreign Countries | 5,513 | 14.9 | Spanish | 3,100 | 8.8 | |
| Non-Citizen | 2,120 | 5.7 | (Other) non-English | 3,683 | 10.5 | |
| Education (25+) | Total | Male | Female | | | |
| Less than High School | 1,521 | 640 | 881 | | | |
| High School/GED | 5,538 | 2,501 | 3,037 | | | |
| Some College/Associate Degree | 6,077 | 3,010 | 3,067 | | | |
| Bachelor's Degree or Higher | 12,896 | 5,895 | 7,001 | | | |
| Family Structure | Total | White | Black | Hispanic¹ | | |
| Total Family Households | 9,588 | 8,251 | 391 | 1,153 | | |
| Families with Own Children < 18 | 4,097 | -- | -- | -- | | |
| Single Mother Families with Own Children <18 | 536 | -- | -- | -- | | |
| Employment and Income | Total | Male | Female | White | Black | Hispanic¹ |
| Unemployment Rate | 4.4 | 5.8 | 2.8 | 4.3 | 5.7 | 8.7 |
| Median Household Income (\$) | 115,732 | -- | -- | 113,112 | 129,712 | 125,227 |
| Poverty Rate (%) | 3.3 | 2.3 | 4.2 | 3.0 | 1.7 | 5.9 |
| Commuters | N | % | | | | |
| Commuters Using Alternative Mode of Transportation ² | 3,749 | 20.5 | | | | |
| | | | ¹ Hispanic may be of any race. | | | |
| | | | ² Including carpooling, public transportation, bicycling, walking, or telecommuting. | | | |

REGION PROFILE

YORKTOWN TOWN

| BIRTHS (2016) | | | DEATHS (2016) | | |
|---|----------|----------|---|--------------|-------------------------|
| Total Births | 294 | | Birthweight¹ | N | % |
| Birth Rate (per 1,000) | 8.0 | | Low Birthweight | 15 | 5.1 |
| Average Maternal Age | 32.9 | | | | |
| Mother's Race/Ethnicity¹ | N | % | Total | Male | Female |
| White | 222 | 75.5 | Total Deaths | 291 | 131 |
| Black | 12 | 4.1 | Death Rate (per 100,000) | 790.5 | 733.6 |
| Other | 60 | 20.4 | | | 160 |
| Hispanic ² | 59 | 20.1 | | | 844.2 |
| Mother's Education¹ | N | % | Infant Mortality Rate (per 1,000 live birth) | | 0.0 |
| Less than High School | 7 | 2.4 | Top Five Causes of Death | N | % |
| High School or GED | 23 | 7.8 | 1 Circulatory System Diseases | 97 | 33.3 |
| Some College (no degree) | 58 | 19.8 | 2 Neoplasms | 83 | 28.5 |
| Bachelor's Degree or above | 205 | 70.0 | 3 Respiratory System Diseases | 33 | 11.3 |
| Mother's Country of Origin¹ | N | % | 4 Nervous System Diseases | 14 | 4.8 |
| Foreign | 66 | 22.4 | 5 External Causes | 12 | 4.1 |
| Mother's Age¹ | N | % | Average Age at Death | Total | Male |
| Teenage Mothers | 3 | 1.0 | Total | 80 | 75 |
| Prenatal Care¹ | N | % | White | 80 | 76 |
| Late or No Prenatal Care | 38 | 12.9 | Black | 65 | 70 |
| Financial Coverage at Birth¹ | N | % | Other | 73 | 70 |
| MEDICAID, Child Health Plus | 41 | 15.3 | Hispanic ² | 75 | 78 |
| Private or Other Insurance | 226 | 84.3 | COMMUNICABLE DISEASES (2018) | | |
| Self Pay | 1 | 0.4 | Top Five Reported Diseases | N | Rate³ |
| <i>¹Excluding unknown or not stated.</i> | | | 1 Chlamydia | 61 | 165.3 |
| <i>²Hispanics may be of any race.</i> | | | 2 Hepatitis C Chronic | 22 | 59.6 |
| | | | 3 Campylobacteriosis | 15 | 40.7 |
| | | | 4 Babesiosis | 13 | 35.2 |
| | | | 5 Lyme Disease | 13 | 35.2 |

| MAJOR REPORTABLE SEXUALLY TRANSMITTED DISEASES (2018) | | | | | | |
|--|--------------|-------------|---------------|--------------|--------------|-----------------------------|
| | Total | Male | Female | White | Black | Hispanic⁴ |
| Chlamydia | 61 | 24 | 37 | 5 | 2 | 1 |
| Gonorrhea | 10 | 6 | 4 | 3 | 2 | 2 |
| Syphilis (all stages) | 5 | 5 | 0 | 3 | 0 | 0 |

REGION PROFILE

YORKTOWN TOWN

EMERGENCY ROOM VISITS (2016)¹

| | N | Rate (per 10,000) |
|-----------------------|--------|-------------------|
| Total | 10,810 | 2,936.7 |
| Male | 5,080 | 2,844.7 |
| Female | 5,729 | 3,022.9 |
| White | 8,448 | 2,611.8 |
| Black | 671 | 6,476.8 |
| Other | 2,090 | 7,488.4 |
| Hispanic ² | 922 | 2,680.2 |

HOSPITALIZATIONS (2016)¹

| | N | Rate (per 10,000) |
|-----------------------|-------|-------------------|
| Total | 3,753 | 1,019.6 |
| Male | 1,711 | 958.1 |
| Female | 2,042 | 1,077.5 |
| White | 2,976 | 920.1 |
| Black | 165 | 1,592.7 |
| Other | 699 | 2,504.5 |
| Hispanic ² | 188 | 546.5 |

| | | |
|---------|-------|---------|
| Under 5 | 595 | 3,679.7 |
| 5-9 | 361 | 1,724.0 |
| 10-14 | 439 | 1,558.4 |
| 15-17 | 345 | 1,887.3 |
| 18-24 | 828 | 2,771.1 |
| 25-44 | 2,076 | 2,971.2 |
| 45-64 | 2,941 | 2,468.9 |
| 65-74 | 1,184 | 3,377.1 |
| 75+ | 2,041 | 6,667.8 |

| | | |
|---------|-------|---------|
| Under 5 | 338 | 2,090.3 |
| 5-9 | 19 | 90.7 |
| 10-14 | 23 | 81.6 |
| 15-17 | 16 | 87.5 |
| 18-24 | 397 | 1,328.6 |
| 25-44 | 400 | 572.5 |
| 45-64 | 734 | 616.2 |
| 65-74 | 674 | 1,922.4 |
| 75+ | 1,152 | 3,763.5 |

| Top Causes of ER Visits | N | % |
|------------------------------------|-------|------|
| 1 Injuries | 2,367 | 21.9 |
| 2 Abdominal Pain | 461 | 4.3 |
| 3 Infectious And Parasitic Disease | 415 | 3.8 |
| 4 Mental Disorders | 363 | 3.4 |
| 5 Back, Neck, Or Spine Disorders | 347 | 3.2 |

| Top Causes of Hospitalization ³ | N | % |
|--|-----|------|
| 1 Circulatory System Diseases | 571 | 15.2 |
| 2 Digestive System Diseases | 347 | 9.2 |
| 3 Other ⁴ | 313 | 8.3 |
| 4 Infectious And Parasitic Disease | 290 | 7.7 |
| 5 Respiratory System Diseases | 252 | 6.7 |

⁴ Musculoskeletal System & Connective Tissue Diseases

| Top Receiving Hospitals | N | % |
|---------------------------------|-------|------|
| 1 NY Presbyterian Hudson Valley | 6,142 | 56.8 |
| 2 Northern Westchester Hospital | 1,952 | 18.1 |
| 3 Westchester Medical Center | 855 | 7.9 |

| Top Receiving Hospitals | N | % |
|---------------------------------|-------|------|
| 1 NY Presbyterian Hudson Valley | 1,443 | 38.4 |
| 2 Northern Westchester Hospital | 901 | 24.0 |
| 3 Westchester Medical Center | 390 | 10.4 |

| Insurance Type | N | % |
|----------------|-------|------|
| Private | 4,990 | 46.2 |
| Medicare | 3,509 | 32.5 |
| Medicaid | 1,556 | 14.4 |
| Other | 277 | 2.6 |
| Self-Pay | 478 | 4.4 |

| Insurance Type | N | % |
|----------------|-------|------|
| Private | 1,492 | 39.8 |
| Medicare | 1,858 | 49.5 |
| Medicaid | 324 | 8.6 |
| Other | 44 | 1.2 |
| Self-Pay | 35 | 0.9 |

¹ Race/Ethnicity data is from 2012 Sparcs, due to reporting errors and inconsistencies among hospitals during 2013-2016. ² Hispanic may be of any race. ³ Excludes obstetrics & newborns.

Zip codes included in the region for tabulations of Emergency Room Visits and Hospitalizations:

10520 (15%) 10535 10547 (2/3) 10588 10598 (91%) , over representing the region population by 1.0% according to the 2012-2016 ACS.

**APPENDIX:
HEALTH SUMMIT SUMMARY REPORT
BY PREMIER**

OVERVIEW

Representing the Westchester County Health Planning Coalition, Westchester County Department of Health took the lead in writing a Request For Proposal (RFP) to solicit an organization or educational institution to facilitate a Community Health Summit in Westchester. Three hospital networks, Montefiore, New York Presbyterian, and Northwell, provided the funding for the awarded agency, Premier. The Westchester County provided the space for the event.

The half-day Health Summit, hosted by WCDH and the local hospitals for community, government, and health and social service providers, was held in White Plains, a central location in the County, on April 5th, 2019. About eighty stakeholders from local agencies and organizations participated. Four of the five priority areas of the New York State Prevention Agenda were discussed based on the preliminary findings of the CHA Survey:

1. Prevent Chronic Diseases
2. Promote a Healthy and Safe Environment
3. Promote Healthy Women, Infants and Children
4. Promote Well-being and Prevent Mental and Substance Use Disorders

The stakeholders reviewed the focus areas within each of the four priority areas, brainstormed the strengths and resources in each area, identified opportunities and gaps, and suggested action items and solutions. A summary report of the Summit was presented by Premier.

May 31, 2019

Westchester County Department of Health

Attn: Renee Recchia
10 County Center Road, 2nd floor
White Plains, NY 10607
rro3@westchestergov.com

RE: Final Presentation Westchester County Health Summit 2019

Westchester County Department & Hospital Executives,

Thank you for the opportunity to partner with your teams to complete the 2019 Westchester County Health Summit. The engagement was a great opportunity for our team to engage your community in order to memorialize their voice to address unmet healthcare and non-healthcare needs. I hope the finalized document is a comprehensive report that allows you the ability to develop strategies and/or meet expectations of the community health needs assessment(s) for your area.

Your ongoing engagement and feedback provided valuable opportunities for our team to revise our plans for the event as well as revise the structure and language for the final report. We are grateful for each hospital representative and county department representative's time to discuss draft documents which allowed the final document to reflect a collaborative product that each organization can use as they see fit.

Again, thank you for the opportunity. I look forward to seeing the great strategies that are to come to benefit the patrons of Westchester County. I can be reached via phone or email if you have any additional needs.

Sincerely,

Amanda Simmons

Principal Performance Partner
Amanda_Simmons@Premierinc.com
(713) 859-9683 Cell





Westchester County 2019 Health Summit Report

APRIL 5, 2019



TABLE OF CONTENTS

| | |
|--|----|
| Executive Summary..... | 3 |
| Introduction..... | 7 |
| Community Health Summit Planners, Participants and Purpose | |
| Overview of Westchester County | |
| New York State Department of Health’s Prevention Agenda (NYSPA) | |
| Methodology | 10 |
| Topic Areas of Identified Community Need | |
| Registration | |
| Facilitation | |
| Event Activities | |
| Conclusions by Priority Area..... | 13 |
| Prevent Chronic Diseases | |
| Promote a Healthy and Safe Environment | |
| Promote Healthy Women, Infants and Children | |
| Promote Well-being and Prevent Mental and Substance Use Disorder | |
| Appendix | 26 |
| NYSPA Priority Areas, Focus Areas and Goals | |
| Event Invite | |
| Event Agenda | |
| Facilitated Breakout Session Notes | |

EXECUTIVE SUMMARY

The Westchester County Health Planning Coalition collaboratively hosted a Community Health Summit on April 5, 2019 in White Plains, NY. The purpose of this meeting was to elicit feedback from the local community, government and health and social service providers related to their perspective on the health and social needs of their clients with the goal of advancing the New York State Department of Health's 2019-2024 Prevention Agenda (NYSPA) to:

1. Improve the health of New Yorkers in five priority areas; and
2. Reduce health disparities for racial, ethnic, disability and low socioeconomic groups, as well as other populations who experience them.

Over 70 attendees across health and community based organizations participated in the Premier facilitated breakout sessions and a Gallery Walk intended to promote conversation focused upon four of the New York State Department of Health's 2019-2024 Prevention Agenda (NYSPA):

1. Prevent Chronic Diseases - chronic disease continues to be a major burden including heart diseases, cancers, diabetes, and asthma
2. Promote a Healthy and Safe Environment - in the past several years, water quality has become a major issue that warrants attention and broader environmental factors impact health
3. Promote Healthy Women, Infants and Children – there continue to be disparities related to infant mortality, preterm birth, and maternal mortality
4. Promote Well-being and Prevent Mental and Substance Use Disorder - opioid overdose has become a major issue, over the past few years

While familiarity with the topics varied between individuals, all were engaged and focused upon identifying concerns and proposing actionable solutions.

Although the facilitated breakout sessions were convened around four very different Priority Areas, common themes emerged across these discussions:

There are many strengths & resources existing in the community.

- Schools and many other non-traditional organizations in the County provide important settings for the delivery of resources for education, training and other needed assistance
- Healthcare organizations across the County were identified as expert resources and critical to coordinate and collaborate with to meet essential needs
- Health providers and Community Based Organizations are skilled at fostering connections, building coalitions, developing networks and collaboration (e.g. this Community Health Summit)
- There is a solid foundation from which to integrate existing and launch new programs

Identification of barriers and gaps is the first step to improvement.

- Begin education and training for healthy behaviors as young as possible (target children and adolescents)
- Observed inconsistent and fragmented education across the community
- Develop culturally specific guidance and messaging (e.g. healthy eating) that is essential for effective communication
- Create safe environments for persons seeking help (undocumented, family violence, mental health disorder stigmas, etc.)
- Understand and align current programs as a first step before building new programs
- Inventory the community's current programs/assets and publish a resource directory in a centralized location that is easily accessible to residents (website, a dedicated phone line, etc.)
- Lack of funding (solo efforts are more challenging to start and to resource thus requiring partnership and collaboration)

There are action items which could benefit all four Priority Areas.

- Utilize social media for education, increased awareness and communication
- Improve transitions and coordination across entire continuum of health providers and community based organizations
- Embrace a person-centric language that is universal to all to increase awareness and reduce stigma, for all too common health needs (mental health, substance use disorders, reproductive health, domestic violence, etc.)
- Include in the care planning process all categories of provider, family and caregiver
- Focus efforts on the basic needs, before trying to address other needs

Social Determinants of Health must be considered when developing strategies.

- Jobs are needed and employers should promote health, offer childcare, and more
- Economic status inequality exists
- Affordable, healthy food is needed and there is a lack of green/farmers markets
- Public transportation is limited across the Westchester County
- There is a need in the community for affordable housing (both permanent and transitional purposes)
- Air quality is inconsistent, and pollutants are carried by the wind from Ohio
- Water quality is threatened due to improper disposal of pharmaceuticals
- Undocumented status frequently restricts outreach to resources due to fear
- Safe places are needed for all to walk, play, exercise and socially engage
- Disparities range across race, gender and age
- Language barriers exist

The session for each prevention agenda topic allowed clinical and non-clinical providers to offer an engaged depiction of the needs of the community and included:

NYSPA #1: Prevent Chronic Diseases

- Chronic diseases were acknowledged as primarily cancer, cardiovascular disease and diabetes.
- Education begins at school to create healthy choices and habits and is critical throughout the age spectrum to promote healthy lifestyle behaviors.
- Economic and “safety” disparities remain throughout the county.
- There are adequate and appropriate resources across the county, but coordination is lacking.

ACTION: Support and leverage existing community resources across homes, schools, churches, CBOs, etc. to address chronic diseases.

NYSPA #2: Promote a Healthy and Safe Environment

- There is an increased recognition that health improvement requires broader approaches addressing social, economic and environmental factors.
- An environment of trust and culturally safe communication must exist between the community and its residents to affect change.
- Ease of access will continue to impact choice and utilization.
- There is need to change the financial incentive structure of public assistance to pay for healthy food options.
- Work is needed with local organizations to increase access to healthier food options.

ACTION: Address currently fragmented and inconsistent education and communication.

NYSPA #3: Promote Healthy Women, Infants and Children

- The health of women, infants, children and families is fundamental to overall community health.
- There is an abundance of existing resources, but there is a lack of coordination for a communal and publicly accessible platform.

ACTION: Design community awareness campaigns and messaging focused upon prenatal and infant care.

ACTION: Health systems need a holistic care approach that eliminates silos across the continuum.

NYSPA #4: Promote Well-being & Prevent Mental and Substance Use Disorders

- Mental health and substance use disorder was a more popular topic than promoting well-being.
- Inclusivity is needed for extending care planning to family and caregivers and promoting a multidisciplinary approach in treatment.
- There are geographical and affordability barriers to access of mental health care.

ACTION: Break down silos and collaborate through forums such as the 2019 Health Summit.

The results of this report will be used by the Westchester County Health Planning Coalition to help drive this engaged group of community advocates' strategic plan for community health and wellness improvement via a three year community service plan.

The sections that follow include an overview of the event planners, participants and methodology as well as detailed findings for each NYSPA topic area.

INTRODUCTION

Community Health Summit Planners, Purpose and Participants

The Westchester County Department of Health (WCDOH) and the sixteen local Westchester County Hospitals, known as the Westchester County Health Planning Coalition (WCHPC), collaboratively hosted a Community Health Summit (the “Summit”) on April 5, 2019 in White Plains, NY. The WCHPC was formed in response to the New York State Department of Health’s (NYSDOH) appeal that each county’s local health department, hospitals/hospital systems and other community partners collectively work together to identify and address local health priorities associated with the New York State Prevention Agenda (NYSPA). Their ultimate goal is advancing the health and wellness of Westchester County residents.

The purpose of the Summit was to convene local community, government and health and social service providers with the objective of discussing community health and social needs related to the NYSPA. This report will be integrated into a Community Health Needs Assessment (CHNA) that is required by the NYSDOH and is an element in the Community Health Improvement Plan (CHIP), which all local health departments must develop.






This report provides a summary of opinions shared by attendees at the Summit. These opinions are not intended to represent the community hospitals nor the WCDOH.

The following organizations participated in this event:

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|-------------------------------------|--|
| African American Men of Westchester | Leukemia Lymphoma Society |
| American Heart Association | Lexington Center for Recovery |
| American Lung Association | Lifting Up Westchester |
| ANDRUS | Lower Hudson Valley Perinatal Network |
| Arms Acres & Conifer Park | Montefiore Mount Vernon & New Rochelle Hospitals |
| Blind Brook Community Coalition | Mount Vernon Neighborhood Health Center |
| Blythedale Children’s Hospital | Neighbors Link |
| Brannan Solutions Group | Northwell Phelps & Northern Westchester Hospitals |
| Burke Rehabilitation Center | NYC Poison Control Center |
| Caritas of Port Chester, Inc. | New York Medical College |
| Child Care council of Westchester | New York Presbyterian Hudson Valley & Lawrence Hospitals |
| Family Ties of Westchester | Open Door Family Medical Center |
| Feeding Westchester | Peekskill Youth Bureau |
| Hudson River Health Care | Rivertowns Pediatrics PC |
| Independent Living, Inc. | Rye YMCA |
| Inter-Care, Ltd | |
| John A. Coleman School | |

New York State Department of Health’s Prevention Agenda (NYSPA)

The NYSPA is the blueprint for state and local action to 1) improve the health of New Yorkers in five priority areas; and 2) reduce health disparities for racial, ethnic, disability and low socioeconomic groups, as well as other populations who experience them. The prevention agenda was utilized as the event framework for discussions during the Summit.

|  PREVENT CHRONIC DISEASE |  PROMOTE A HEALTHY AND SAFE ENVIRONMENT |  HEALTHY WOMEN, INFANTS AND CHILDREN |  PROMOTE WELL-BEING AND PREVENT MENTAL AND SUBSTANCE USE DISORDER |  PREVENT COMMUNICABLE DISEASE |
|---|--|--|---|---|
| <ul style="list-style-type: none"> • Healthy eating and food security • Physical activity • Tobacco prevention • Preventive care and management | <ul style="list-style-type: none"> • Injuries, violence and occupational health • Outdoor air quality • Build and indoor environment • Water quality • Food and consumer products | <ul style="list-style-type: none"> • Maternal & women’s health • Perinatal & infant health • Child & adolescent health • Cross cutting healthy women, infants & children | <ul style="list-style-type: none"> • Promote well-being • Prevent mental and substance use disorders | <ul style="list-style-type: none"> • Vaccine-preventable diseases • Human immunodeficiency virus (HIV) • Sexually transmitted infections (STIs) • Hepatitis C virus • Antibiotic resistance and healthcare associated infections |

Source: New York State Department of Health

Please refer to Appendix A for the full list of NYSPA Priority Areas, Focus Areas and Goals.

For additional information on the NYSPA please visit the NYS Department of Health website and/or https://www.health.ny.gov/prevention/prevention_agenda/2019-2024.

Methodology

Topic Areas of Identified Community Need

The Westchester County Department of Health administered a 2019 Community Health Survey between January 29, 2019 and March 31, 2019, in English and Spanish, asking County residents 18 and older to assess their own health as well as the health of their community. This anonymous online and paper survey sought to identify the top priority health issues for Westchester residents and their community, the most needed services and the largest obstacles that prevent access to care.

Final responses numbered over 3,500 but based upon the preliminary results of the survey the four Priority Areas listed below were selected for discussion at the Westchester County 2019 Health Summit.

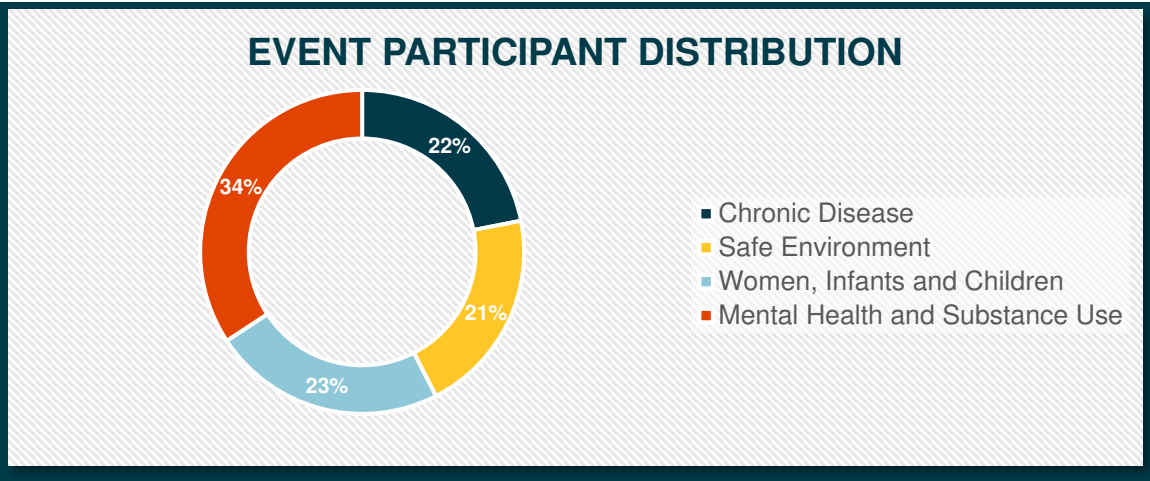
1. Prevent Chronic Diseases
2. Promote a Healthy and Safe Environment
3. Promote Healthy Women, Infants and Children
4. Promote Well-being and Prevent Mental and Substance Use Disorder

The fifth NYSPA Priority Area - Prevent Communicable Diseases – was not a focus of discussion for this specific meeting.

Registration

Electronic invitations were widely distributed by all Westchester County Health Planning Coalition members (the Westchester County Department of Health and the local Westchester County Hospitals). Please refer to Appendix B for the event invitation.

So that there would be a balanced number of attendees in each discussion group, members were asked to pre-register and to self-report their preference in rank-order among the four NYSPA Priority Areas. There were 81 final pre-registrants and approximately 67 sign-ins the day of the event – April 5, 2019. The self-assigned distribution by prevention agenda priority follows.



Source: Westchester County Department of Health

Facilitation

Premier, Inc. was engaged to facilitate the breakout sessions and Gallery Walk at the direction of event planners representative of the Westchester County Department of Health, Montefiore Health System, New York Presbyterian Healthcare System and Northwell, Inc. Premier partnered with the event planners to design the strategy for the meeting inclusive of breakout sessions and a Gallery Walk. Breakout sessions were recommended in order to obtain open conversation & feedback and allow an opportunity for each participant to speak in smaller convened groups. A Gallery Walk was included to ensure that all participants could be involved in the discussions for all the Priority Areas and offer additive input into the process.

Premier is a provider-driven healthcare performance improvement company uniting an alliance of approximately 4,000 U.S. hospitals and more than 165,000 other provider organizations. Premier operates a nationally recognized healthcare consulting organization, co-innovating solutions with its members to reduce costs, improve quality and produce better patient outcomes. Premier's mission is simple: To improve the health of communities.

Event Activities

Attendees were assigned to a single breakout session corresponding to one of the four NYSPA Priority Areas based upon their pre-registered self-selected preference. Four facilitators from Premier were engaged to lead each of the four one-hour breakout sessions, using the below questions to guide discussions.

1. Describe the 3-5 year goal for health improvement, for this priority area.
2. What are the top issues and barriers to achieving this goal?
3. Are there specific populations impacted more than others?
4. What initiatives/interventions are needed to address the issues and barriers?
5. What community resources are available to support this goal?

Social determinants of health and health inequalities were incorporated into all discussions at the request of Westchester County Health Department leaders.

The four breakout sessions were conducted in English only, and were not recorded so that participants would not feel either inhibited or intimidated in discussion. Notes memorializing conversations were captured on flip charts within each breakout session.

After a short break, attendees were asked to participate in a “Gallery Walk” exercise. Attendees rotated through each of the other three breakout rooms in succession. The facilitator in each room gave an initial summary of the baseline group’s discussions. Participants were then asked to provide additional input and perspectives to the topics and questions previously recorded, building upon the discussions that had already taken place. The objective of the Gallery Walk was to create generative discussions around the topics with reinforcing as well as additive input. Conversations were added to the flip charts. Gallery Walks occurred in 20-minute discussions, totaling 60 minutes. By the time the gallery walk was completed, each attendee had the opportunity to engage in dialogs for all four NYSPA Priority Areas across one 60-minute breakout session and three 20-minute Gallery Walk rotations.

Please refer to Appendix C for the event agenda.

CONCLUSIONS BY PRIORITY AREA

In the pages that follow are the takeaways, key ideas and essential elements of the combined discussions held within each of the four breakout sessions and from the additional feedback provided by all attendees of other sessions during the Gallery Walk activity. These reflect the concepts and action items which received the most discussion and where there was greater consensus around specific subjects and ideas expressed. Please refer to Appendix D for the complete notes collected within each of these four areas.

The graphic below includes the top 24 words most frequently used during the Summit.



PRIORITY AREA 1: PREVENT CHRONIC DISEASES

- Focus Area 1: Healthy Eating and Food Security
- Focus Area 2: Physical Activity
- Focus Area 3: Tobacco Prevention
- Focus Area 4: Preventive Care and Management

The “Prevent Chronic Disease” breakout group referred to the sub-goals identified for each of the four Focus Areas in this Priority Area (as outlined in the Introduction above) as specified in the New York State Prevention Agenda 2019 – 2024. These are considered the three-to-five-year goals for the Priority Area.

Focus Areas 1 and 2 in this Priority Area have the same Overarching Goal: **“Reduce obesity and the risk of chronic illness”**.

Chronic diseases were acknowledged as primarily cancer, cardiovascular disease and diabetes. The group discussed a study reported by USA Today in the April 4, 2019 edition entitled “Global Burden of Disease Analysis” published in The Lancet. The peer reviewed study suggests that one in five deaths worldwide (approximately 11 million) are linked to unhealthy eating habits. This study affirms what many have thought for several years – that “poor diet is responsible for more deaths than any other risk factor in the world” according to the study’s author, Dr. Christopher Murray of the University of Washington. The deaths included about 10 million from cardiovascular disease, 913,000 from cancer and almost 339,000 from Type 2 diabetes. The study was funded by the Bill and Melinda Gates Foundation.

Discussion commenced by asking each participant to identify the most important issues that should be top priorities for achieving the stated goals. These ideas were shared and reinforced by other group members, and this continued throughout the session for each of the question areas discussed. Overall conclusions are stated as follows:

Conclusion – Home focused educational efforts with support initiatives from schools and other entities are crucial for improvement. A clear conclusion from discussions among all participants engaging in the discussion in this session is that home and school focused efforts to create healthy behaviors, choices and habits among children beginning at early ages are at the base of creating a generation of health-aware children. Education and developing good habits at a very early age is acknowledged as essential regarding healthy food choices, increased physical activity and

“Schools are the best resource outside of the home for providing youths with access to healthy, balanced, “attractive” meals and snacks...”

-Retreat Participant

personal care priorities. Education for people of all ages is important (especially parents of youth), and a balanced effort among all community resources is essential to create consistent messaging and provide behavior-reinforcing support that will result in improved life conditions, well-being and personal satisfaction.

Conclusion – Align conflicting economic incentives. Economic realities and implications were acknowledged as paramount to address in the quest to prevent chronic diseases in the County. This includes economic and behavioral aspects of shopping, including advertising and “quick fixes” associated with convenience stores, fast food availability and ease of access and lack of healthy food options generally, and specifically in colder weather seasons. Product placement on store shelves and at check-out of unhealthy food items puts young consumers in conflict with immediate gratification versus realizing long-term benefits of avoiding obesity, chronic diseases (e.g., diabetes, heart disease, stroke) and poor nutrition.

Conclusion – Encourage healthy lifestyle choices through constant awareness of basic indicators. Another takeaway and key action item identified and endorsed wholeheartedly by participants was to initiate a campaign that encourages everyone (especially men) to know their “golden three numbers.” That is, every male over age 21 knows their cholesterol level, blood pressure numbers, and blood sugar levels, updated every year. Awareness of these three numbers as “entry level” measures of health status would be a non-threatening way of consistently monitoring basic health indicators that will influence decisions over time that can preserve and enhance health, wellness and personal life satisfaction.

Conclusion – Safety is paramount for community well-being. The community needs “safe” groups, spaces and places for children, adults, women and others that are safe havens for activity, refuge and recovery. These exist in some areas; however, there is a need to expand and promote these resources more broadly throughout the County. (Note: The safe spaces concept should extend to undocumented individuals as well.)

Conclusion – Maximize existing resources through coordinated efforts. Participants agreed that adequate and appropriate resources exist across the County to address the four focus areas of concern. What is lacking is coordination across all entities concerned with prevention, health maintenance, wellness, disease detection, diagnosis and treatment (outpatient, inpatient, post-acute and home care). This includes CBOs (Community Benefit Organizations), who were acknowledged as essential resources already in place throughout the County and should be more proactively and assertively included and engaged as cooperative partners in addressing access issues related to nutrition, food choices, diet, education, physical activity and other capabilities and resources. It was recommended that in preventive care efforts that the “Stanford Chronic Disease Program” should be used as a model for chronic disease related behavior change (specifically targets diabetes prevention). This is an evidence-based program, and Medicare payment should be explored for SCDP participation.

Conclusion – Tobacco prevention and elimination will be difficult and require consistent education and awareness efforts. Youth are being targeted and enticed by advertising, easy

access, a “cool” factor among peers and examples of adults. Electronic cigarettes, electronic vaping, juuls, flavored products and other gateway means of attraction and addiction are pervasive. These elements will require consistent education and awareness-building efforts to combat.

Top Action(s) Discussed

Participants in each of the four sessions (baseline group and Gallery Walk groups) from all the various organizations represented strongly emphasized the need to support and leverage existing community resources as a top priority and seek collaboration in support of education efforts in homes, schools, churches, CBOs and other appropriate settings:

*“It’s never too early to educate individuals regarding good health behaviors and choices.”
-Retreat Participant*

*“We often start too late in teaching children good health and wellness behaviors.”
-Retreat Participant*

- Schools and many other non-traditional healthcare organizations in the County provide important settings for the delivery of resources for education, training and other needed assistance. School efforts should be more uniform, coordinated and supported.
 - More effective collaboration is needed among schools, public health entities, hospitals, and other health and wellness organizations across the continuum of health/wellness interests and should be proactively pursued and supported.
 - Local companies and employers should be engaged (and actively reached out to) to identify and cooperatively support solutions in balanced, unified efforts; they need to be reinforced that it is in their interests to be involved in these efforts.
- Ensure that education curriculums reinforce short- and long-term benefits and value of healthy decisions (around nutrition, obesity prevention, tobacco use, etc.)
 - Teaching good financial skills (debt prevention and resource management) must be integrated with teaching health and wellness behaviors
 - Use social media much more effectively and intensively to meet children “at their interest level”
 - Address issues that impact healthy food and physical activity such as education, home, schools, transportation, finances, access to healthy food, safety and structural realities



PRIORITY AREA 2: PROMOTE A HEALTHY AND SAFE ENVIRONMENT

- Focus Area 1: Injuries, Violence, and Occupational Health
- Focus Area 2: Outdoor Air Quality
- Focus Area 3: Built and Indoor Environments
- Focus Area 4: Water Quality
- Focus Area 5: Food and Consumer Products

Efforts to improve health traditionally focus on the health care system as the key driver of health and health outcomes. However, there has been increased recognition that improving health and achieving health equity requires broader approaches that address social, economic and environmental factors that influence health. Although Westchester County is perceived to be one of the wealthiest counties in the United States, a portion of this community's residents still struggle with having their basic needs met on a daily basis. Approximately 10 percent of the County's residents live below the federal poverty level, and there are affordable housing units in every municipality except two.⁴ To this end, retreat participants recognized the importance of strengthening relationships across local organizations with the objective of collaboratively addressing the five focus areas to minimize inequities across the County.

Conclusion – Culture will continue to influence the process, and communication and education must be delivered in a way that is understandable and meaningful to our diverse communities. Culture will continue to be a large influence on health, and the degree to which individuals seek assistance for services and/or issues related to their health and wellness. Residents hesitate to use available services due to their citizenship status, lack of trust and/or fear of eviction due to multi-family dwelling. While opportunities exist to leverage programs that are already in place, it is important to note that a culturally sensitive education and communication plan will be needed to establish a relationship of trust with these residents; a balanced effort among all community resources is essential to creating consistent messaging and providing behavior-reinforcing support that will result in improved life conditions. Further, the populations served rely upon a variety of different languages and communication channels. For example, elderly patients rely upon information received from their physician's office, radio or television, while younger populations rely upon social media platforms. Examples of challenges faced by the community, as well as programs that are already in place to address these challenges, are provided below.

⁴ Westchester County Department of Planning

- According to the Office of the Surgeon General, the leading *preventable* causes of death, disease and disability are asthma, lead poisoning, deaths in house fires, falls on stairs and from windows, burns and scald injuries and drowning in bathtubs and pools. Further, indoor radon is the second-leading cause of lung cancer in the United States. The Surgeon General has taken a proactive role in helping Americans protect themselves from health hazards in their homes, where we spend 85 percent to 95 percent of our time – especially in communities that lack ample and accessible green space.⁵ Specific to Westchester County, programs are in place in portions of the County (e.g., Healthy Neighborhoods Program in Yonkers) that focus on improving home safety. However, the success of these programs is often tempered due to cultural barriers, as many residents forego assistance in fear of deportation or eviction.
- Frail and elderly individuals are at-risk for a variety of challenges, including health conditions related to poor air quality, fall-related injuries and poor air quality, and addressing these issues was identified as high importance among retreat attendees. Opportunities exist to collaborate with the community’s healthcare organizations to:
 - Assure that the appropriate communication vehicles are utilized to alert these populations when an issue arises (e.g., alerts from physician office related to poor air quality).
 - Utilize screening tools to accurately identify individuals that are at-risk for a fall-related injury (e.g., Does the screening tool ask the question, “Have you ever fallen before?”).
 - Develop a coordinated approach for home assessments that provides education to families and caregivers and involves them in an effective manner to mitigate the risk of falls. Best practices should be leveraged from existing programs, including the Stepping On Program, Matters of Balance Program, among others.
- Dietary habits and choices develop early, with culture and society playing a critical role in shaping a person’s diet.
 - Research suggests that children learn eating behaviors by observing the eating habits of others, and opportunities exist to provide healthy eating education in elementary schools through consistent, coordinated programs.
 - Further, there is great need to develop a coordinated, culturally sensitive healthy eating education program to emphasize health and wellness, and address the high prevalence of obesity and chronic diseases (e.g., diabetes, high blood pressure, cholesterol) across

“The Healthy Neighborhoods Program in Yonkers has so much potential. But a lot of residents won’t answer the door when they show up for a free inspection of their home. They are afraid they will get deported or evicted because there are generations living together in such small apartments.”

-Retreat Participant

⁵ Office of the Surgeon General. Healthy Homes Reports and Publications. Accessed on May 14, 2019. <https://www.hhs.gov/surgeongeneral/reports-and-publications/healthy-homes/index.html>

minority populations (e.g., Latinos). This program should include education on: 1) the importance of breastfeeding to impact newborn health and wellness; 2) nutritional value and benefits of food, inclusive of an inventory of food items that would serve as healthier alternatives to traditional food staples (e.g., white rice, tortillas) that these residents are accustomed to.

Conclusion – Access will continue to impact choice and utilization. Portions of Westchester County are challenged with limited green space, outdoor walkways, and public transportation and poor air and water quality. Consequently, residents often select options that are easier to access, such as selecting fast food located within a few blocks versus taking multiple bus transfers to a grocery store, or disposing of medications at home versus at designated drop boxes.

- Access to healthy food options for frail and/or vulnerable populations was noted as a critical need by retreat participants. There is a need to leverage existing programs that are currently offered on a limited basis (e.g., Meals on Wheels for senior citizens), and expand these offerings more broadly to vulnerable populations throughout the County.

“Some of my patients have to take multiple bus transfers to get to a grocery store. With small children and a baby, it is just so hard for them to get fresh food.”

-Retreat Participant

- Water quality is directly linked to the appropriate disposal of prescription medications. Designated drop boxes are available at the Health Department, as well as local police stations, hospitals, and pharmacies. However, these locations are not always easily accessible by residents, particularly by those who rely on public transportation. Further, some residents are not comfortable going to police stations due to their immigration status, criminal history or other related factors. There is a need to collaborate with local healthcare organizations to provide patients with education regarding the appropriate disposal of medication (e.g., include as part of discharge instructions from hospital), and the importance of adhering to this process.

Conclusion – Financial incentives must be aligned to promote healthy behaviors. Retreat participants acknowledged that financial incentives directly influence healthy behaviors. Portions of the County are designated as food swamps or food deserts with little access to

“I used to work across the street from a women’s shelter. Every day, I would see kids go to the deli next door to get breakfast. And they would come out with chips and soda, because their SNAP cards would not pay for healthier options like egg whites or fresh fruit.”

-Retreat Participant

farmers markets, thereby resulting in limited access to healthy food options. This challenge, combined with the fact that public assistance programs (e.g., food stamps) will provide financial reimbursement for processed, unhealthy food options and not fresh, healthy foods, results in poor eating habits that directly impact the health and wellness of the County’s residents. The Health Department had previously received a grant to partner with selected convenience stores on an initiative that would

promote healthier food options (e.g., convenient placement and visible pricing for healthier food options), and retreat participants indicated that this program was met with success. There is a need to deploy a multi-factorial approach that involves: 1) changing the financial incentive structure so that public assistance pays for healthy food options; and 2) working with local organizations to increase access to healthier food options.

Conclusion – An environment of trust must exist between the community and its residents to affect change. In addition to experiencing health inequities, lower income populations are often at a greater risk for work-related injuries and domestic violence. These populations often have lower levels of education and therefore work in manual labor positions. Often these individuals forego care when experiencing a work-related injury due to the potential loss of income associated with missed days of work. Further, these residents forego care completely due to fear associated with a domestic violence incident or their immigration status. Retreat participants noted a need to collaborate with community health organizations to:

- Develop a coordinated occupational health program that is designed to treat these populations and avoid prolonged workplace-related injuries
- Create a culture of trust and safe environments for these individuals to seek care

Top Action(s) Discussed

Participants across the numerous organizations represented identified the need to address education and communication which is currently fragmented and inconsistent.

- With education being fragmented and inconsistent across the county, participants suggested partnering with local healthcare providers to assure that a consistent system is in place to alert vulnerable populations when air quality is poor. Additionally, in response to inconsistent nutrition education across school sites participants promote beginning education earlier with young students and expanding awareness and education through collaboration with local organizations (e.g., local coalitions, town halls) and via social media.
- Tailoring education to specific population cohorts was also discussed. For example, including ethnic-specific healthy food options as part of education, as well as guidance on healthy food preparation is a must.
- Participants also recognized that there are programs already in place that have a demonstrated impact on healthy food choices. These programs should be expanded (e.g. Meals on Wheels for seniors and local initiative to stock vending machines with healthier food options).



**PRIORITY AREA 3:
PROMOTE HEALTHY WOMEN, INFANTS AND CHILDREN**

- Focus Area 1: Maternal & Women’s Health
- Focus Area 2: Perinatal & Infant Health
- Focus Area 3: Child & Adolescent Health
- Focus Area 4: Cross Cutting Healthy Women, Infants, & Children

Participants in this facilitated discussion session strongly emphasized that the health of women, infants, children, and their families is fundamental to overall community health. This priority area

*“There needs to be stronger community campaigns and messaging on prenatal care.”
-Retreat Participant*

*“Encourage addressing early entry into pre-natal care.”
-Retreat Participant*

also aligns directly with the Maternal and Child Health Services Block Grant (Title V) Program, whose mission is to improve the health and well-being of the nation’s mothers, infants, children and youth, including children and youth with special care needs, and their families. Addressing the significant needs of New York State’s families requires strong partnerships and collaboration on the state and community level. The need to support and leverage existing community resources and collaboration with community based organizations is a top priority to improve the well-being of mothers, infants and children.

Conclusion – Education and awareness should have a broad audience and focus. Participants identified community campaigns and messaging focused on prenatal care and the various infant factors to be a necessary key action item. Not only educating and increasing awareness to the maternal community but also encouraging men to know their role in and embrace public health efforts to promote the health of women, infants, and children over the life course.

Disparities exist that could benefit from education and awareness. Between 2011-2013, the percentage of live births with low birthweight were higher among Non-Hispanic African American mothers, 12.7%, and Non-Hispanic Asian mothers, 8.8% than Non-Hispanic White mothers, 6.8%. Hispanic mothers reported the lowest percentage at 6.7%. During this same time, Non-Hispanic African American mothers also had premature births at a higher percentage, 15.7%, than other mothers – Hispanic, 11.1%, Non-Hispanic White, 10.6% and Non-Hispanic Asian, 10.6%.⁶

Conclusion – Aggregate and collate existing resources through coordinated effort. Participants agreed that the Westchester community has an abundance of resources that exist

⁶ 2019-2024 NYS Prevention Agenda and Westchester County Community Health Assessment

across the County to address their areas of concern. However, the information sources are scattered and there needs to be one source of truth or directory that integrates all existing resources that is easily accessible to the public so that individuals are aware of what is available to them and what they are eligible for. There needs to be a coordinated effort to develop a single platform to house all resources available for the community.

Top Action(s) Discussed

Discussions touched upon each of the four Prevention Agenda focus areas for promoting healthy women, infants and children, but less individually and more often as a collective concern. However, participants identified that while there are notable community collaborations there are still disparities and room to improve processes community wide.

- Participants agreed that it was necessary to provide consistent education to increase awareness among multiple factors that impact health. Specific to the Priority Area, cultural barriers and related disparities for low birthweight, breastfeeding and safe sleep practices should be addressed.
- The attendees discussed how the health system needs a more holistic care approach that eliminate care silos. Specifically, the community needs better systemness, connections, care coordination, handoffs and transition among different care providers and institutions.

“We need to offer and recommend that young mothers have access to caregiver support groups, parenting classes within the community centers...i.e. Mommy and Me groups.”

-Retreat Participant



PRIORITY AREA 4: PROMOTE WELL-BEING AND PREVENT MENTAL AND SUBSTANCE USE DISORDER

- Focus Area 1: Promote Well Being
- Focus Area 2: Prevent Mental & Substance Use Disorder

“The community is skilled at fostering connections, building coalitions, developing networks and collaboration.”

-Retreat Participant

Mental health and substance use disorder was a popular topic amongst the session participants. While doing introductions, it was evident those in attendance were very engaged, representing a wide variety of community organizations and areas of expertise. The number one opportunity from the group discussion was the importance of beginning

to break down silos and connect the dot across existing community programs through forums such as the 2019 Health Summit. There was agreement that these are important topics to discuss “and mental health affects all populations in Westchester County”, but also recognition that the wider community perceives an associated stigma to mental health and substance use disorder that serves as a challenge to improve.

Conclusion – Be patient-centered and include caregivers in the care planning / treatment process.

Often the care planning process only includes the patient and does not include the role of the caregiver for the patient seeing treatment. Understanding the capacity of the caregiver is essential in building a treatment plan that is realistic and sustainable. Increasing awareness, developing ‘no-stigma’ messaging and providing consistent education about prevention are required when developing a care plan. In addition, focusing on meeting the basic needs for the patients, families and caregivers should be prioritized, before identifying treatment plans that are otherwise not possible. All providers who are part of the care team should be included in the conversation and endorse the care/treatment plan.

“It’s important to use a language that is patient-centered and universal to all.”

-Retreat Participant

Conclusion – Treating co-occurring disorders is complex and requires a multidisciplinary approach to promote optimal outcomes.

Mental health can sometimes fall to the back-burner due to other social determinate barriers. Early detection, prevention and treatment are key areas of focus when identifying and treating mental health and substance use disorder. Long-term treatment with a focus on sustainability, not just meeting the immediate need, is a much-needed paradigm shift for healthcare providers. One participant discussed the importance of

“Identify trauma and build resilience”

-Retreat Participant

treating all substances together, not replacing one substance for another, which sparked a series of additional conversations with the other stakeholders.

Promoting community support and social acceptance increases well-being. Stigma and prejudice may be reduced by multi-faceted interventions that include education, media campaigns, personal contacts, peer services, protest and advocacy and policy and legislative changes.⁷

Conclusion – Despite an array of community resources available, access to affordable mental health care remains a barrier. In some areas of the community there are affordable mental health providers that do not require insurance but are not readily accessible. In other areas of the community, there is limited or no access to mental healthcare, some of which are very costly. Some organizations have qualified field personnel, which could be leveraged, but additional resources are needed to scale the services. Better integration of mental health services into primary care offices is an area that could be leveraged to increase the availability of mental health services. There are multiple community partners that form a solid foundation from which to integrate existing and launch new programs.

“We must embrace multiple pathways to recovery.”
-Retreat Participant

Adverse Childhood Experiences and many mental, emotional, behavioral (MEB) disorders, such as substance abuse and depression, have lifelong effects that include high psychosocial and economic costs for people, their families, schools and communities. The financial costs nationally in terms of treatment services and lost productivity are estimated at \$467 billion in 2012, and \$442 billion for misuse of prescription drugs, illicit drugs and alcohol.⁸

Top Action(s) Discussed

Discussions around this Priority Area were broad, but focused around the idea of inclusivity.

- The participants agreed that mental health affects all populations in Westchester County and that a ‘no-stigma’ education for the community at large is needed. The stigma of mental or substance abuse disorders continues to be a barrier to seeking care and promoting and encouraging early detection, intervention, prevention and treatment is necessary.
- An inventory of existing community assets should be created and made widely available and services should be integrated across organizations. Partners for health improvement collaboration must include schools, faith-based organizations and civic organizations.

⁷ Contributing Causes of Health Challenges and 2019-2024 NYS Prevention Agenda

⁸ 2019-2024 NYS Prevention Agenda

https://www.health.ny.gov/prevention/prevention_agenda/2019-2024/docs/ship/nys_pa.pdf

- Clinicians themselves must be engaged and partnerships with primary care providers should be strengthened. Expand family members and other caregivers in patient care plans and treatment plans. Healthcare organizations have a role in making improvements too. Participants highlighted the need to provide medication reconciliation 72-hours post ED discharge, promote early intervention while patient is admitted and improve transitional homes and finding appropriate housing post-hospitalization.

Appendix A: New York State Prevention Agenda Priorities, Focus Areas and Goals

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| PRIORITY AREA: PREVENT CHRONIC DISEASES |
| Focus Area 1: Healthy Eating and Food Security |
| Overarching Goal: Reduce obesity and the risk of chronic diseases |
| Goal 1.1: Increase access to healthy and affordable foods and beverages |
| Goal 1.2: Increase skills and knowledge to support healthy food and beverage choices |
| Goal 1.3: Increase food security |
| Focus Area 2: Physical Activity |
| Overarching Goal: Reduce obesity and the risk of chronic diseases |
| Goal 2.1: Improve community environments that support active transportation and recreational physical activity for people of all ages and abilities |
| Goal 2.2: Promote school, child care, and worksite environments that support physical activity for people of all ages and abilities |
| Goal 2.3: Increase access, for people of all ages and abilities, to safe indoor and/or outdoor places for physical activity |
| Focus Area 3: Tobacco Prevention |
| Goal 3.1: Prevent initiation of tobacco use, including combustible tobacco and electronic vaping products (electronic cigarettes and similar devices) by youth and young adults |
| Goal 3.2: Promote tobacco use cessation, especially among populations disproportionately affected by tobacco use including: low SES; frequent mental distress/substance use disorder; LGBT; and disability |
| Goal 3.3: Eliminate exposure to secondhand smoke and exposure to secondhand aerosol/emissions from electronic vapor products |
| Focus Area 4: Preventive Care and Management |
| Goal 4.1: Increase cancer screening rates for breast, cervical, and colorectal cancer |
| Goal 4.2: Increase early detection of cardiovascular disease, diabetes, prediabetes and obesity |
| Goal 4.3: Promote the use of evidence-based care to manage chronic diseases |
| Goal 4.4: Improve self-management skills for individuals with chronic conditions |
| PRIORITY AREA: PROMOTE A HEALTHY AND SAFE ENVIRONMENT |
| Focus Area 1: Injuries, Violence and Occupational Health |
| Goal 1.1: Reduce falls among vulnerable populations |
| Goal 1.2: Reduce violence by targeting prevention programs particularly to highest risk populations |
| Goal 1.3: Reduce occupational injuries and illness |
| Goal 1.4: Reduce traffic related injuries for pedestrians and bicyclists |
| Focus Area 2: Outdoor Air Quality |
| Goal 2.1: Reduce exposure to outdoor air pollutants |
| Focus Area 3: Built and Indoor Environments |
| Goal 3.1: Improve design and maintenance of the built environment to promote healthy lifestyles, sustainability, and adaptation to climate change |
| Goal 3.2: Promote healthy home and school environments |
| Focus Area 4: Water Quality |
| Goal 4.1: Protect water sources and ensure quality drinking water |

Goal 4.2: Protect vulnerable waterbodies to reduce potential public health risks associated with exposure to recreational water

Focus Area 5: Food and Consumer Products

Goal 5.1: Raise awareness of the potential presence of chemical contaminants and promote strategies to reduce exposure

Goal 5.2: Improve food safety management

PRIORITY AREA: PROMOTE HEALTHY WOMEN, INFANTS AND CHILDREN

Focus Area 1: Maternal & Women’s Health

Goal 1.1: Increase use of primary and preventive health care services by women of all ages, with a focus on women of reproductive age

Goal 1.2: Reduce maternal mortality and morbidity

Focus Area 2: Perinatal & Infant Health

Goal 2.1: Reduce infant mortality and morbidity

Goal 2.2: Increase breastfeeding

Focus Area 3: Child & Adolescent Health

Goal 3.1: Support and enhance children and adolescents’ social-emotional development and relationships

Goal 3.2: Increase supports for children and youth with special health care needs

Goal 3.3: Reduce dental caries among children

Focus Area 4: Cross Cutting Healthy Women, Infants, & Children

Goal 4.1: Reduce racial, ethnic, economic, and geographic disparities in maternal and child health outcomes and promote health equity for maternal and child health populations

PRIORITY AREA: PROMOTE WELL- BEING AND PREVENT MENTAL AND SUBSTANCE USE DISORDERS

Focus Area 1: Promote Well-Being

Goal 1.1: Strengthen opportunities to build well-being and resilience across the lifespan

Goal 1.2: Facilitate supportive environments that promote respect and dignity for people of all ages

Focus Area 2: Prevent Mental and Substance Use Disorders

Goal 2.1: Prevent underage drinking and excessive alcohol consumption by adults

Goal 2.2: Prevent opioid and other substance misuse and deaths

Goal 2.3: Prevent and address adverse childhood experiences (ACEs)

Goal 2.4: Reduce the prevalence of major depressive disorders

Goal 2.5: Prevent suicides

Goal 2.6: Reduce the mortality gap between those living with serious mental illness and the general population

PRIORITY AREA: PREVENT COMMUNICABLE DISEASES

Focus Area 1: Vaccine-Preventable Diseases

Goal 1.1: Improve vaccination rates

Goal 1.2: Reduce vaccination coverage disparities

Focus Area 2: Human Immunodeficiency Virus (HIV)

Goal 2.1: Decrease HIV morbidity (new HIV diagnoses)

Goal 2.2: Increase viral suppression

Focus Area 3: Sexually Transmitted Infections (STIs)

Goal 3.1: Reduce the annual rate of growth for STIs

Focus Area 4: Hepatitis C Virus (HCV)

Goal 4.1: Increase the number of persons treated for HCV

Goal 4.2: Reduce the number of new HCV cases among people who inject drugs

Focus Area 5: Antibiotic Resistance and Healthcare-Associated Infections

Goal 5.1: Improve infection control in healthcare facilities

Goal 5.2: Reduce infections caused by multidrug resistant organisms and *C. difficile*

Goal 5.3: Reduce inappropriate antibiotic use

Source: New York State Department of Health

Appendix B: Westchester County 2019 Health Summit Invite

Come Join Us

Help shape Westchester's three year
health priorities and goals

2019 Health Summit

April 5, 2019

*Westchester County Center
White Plains, N.Y.*

8:30 a.m. to 1:00 p.m.

Advanced registration required

<https://tinyurl.com/WestchesterHealthSummit>

The bottom of the invite features a row of logos for partner organizations. From left to right, they are: Northern Westchester Hospital (Northwell Health), NewYork-Presbyterian, Montefiore DOING MORE, Phelps Hospital (Northwell Health), BURKE Rehabilitation Hospital, Saint Joseph's Medical Center, White Plains Hospital (WP), ST. JOHN'S RIVERSIDE HOSPITAL, Blythedale Children's Hospital, and Westchester.gov.com.

Appendix C: Westchester County 2019 Health Summit Agenda

Westchester County 2019 Health Summit

Location: Westchester County Center, White Plains

Date: April 5, 2019

Time: 9:00 am - 1:00 pm

Agenda Items

| | | |
|---------------------|--|---|
| 8:30 am - 9:00 am | Registration & Continental Breakfast | |
| 9:00 am - 9:15 am | Welcome, Introductions & Objectives | Sherlita Amler, MD Westchester Health Commissioner |
| 9:15 am - 9:55 am | State of the County: Accomplishments, Data, Outcomes & Expectations of Summit | Renee Recchia WCDH, Acting Deputy Commissioner for Administration |
| 9:55 am - 10:00 am | Outline Breakout Process & Gallery Walk Process | Premier |
| 10:00 am - 10:10 am | County Executive Remarks | George Latimer Westchester County Executive |
| 10:15 am - 11:15 am | Concurrent Breakout Sessions: Prevent Mental & Substance Use Disorders Promote a Healthy & Safe Environment Prevent Chronic Diseases Promote Healthy Women, Infants & Children | Room C Room E Room F Room G |
| 11:15 am - 11:25 am | Break | |
| 11:25 am - 12:30 pm | Gallery Walk | Premier |
| 12:30 pm - 1:00 pm | Recap Overall Findings & Outline Next Steps | Premier & WCDH |
| 1:00 pm | Adjourn | |



Appendix D: Facilitated Breakout Session Notes

Priority Area 1: Prevent Chronic Diseases

Focus Area 1: Healthy Eating and Food Security

Focus Area 2: Physical Activity

Focus Area 3: Tobacco Prevention

Focus Area 4: Preventive Care and Management

STRENGTHS & RESOURCES

- Schools are the best resource outside of the home for providing youth's access to healthy, balanced, "attractive" meals and snacks that incentivize and support healthy food choices and alternatives
 - Menu varieties built around healthy options
 - Ensure that children receive education about diet, nutrition, and benefits of making healthy food choices
 - Health literacy and education programs to reinforce healthy behaviors
- Schools have significant existing infrastructure and resources outside of the home for providing preventive education around tobacco use (including combustible tobacco and electronic vaping products)
- CBOs (Community Benefit Organizations) are in place in many locations throughout the County and should be more assertively engaged as cooperative partners in addressing access issues related to nutrition, food choices, diet, education and physical activity
- Several walking clubs are currently available in surrounding communities; we need to find ways to support, promote, and encourage participation in these formal and informal groups to increase the level of physical activity of the community
 - Encourage and support the formation of new groups in neighborhoods and communities
- The community needs "Safe" groups, spaces and places for children, adults, and women are areas that are safe havens for activity, refuge and recovery. These exist in some areas; however there is a need to look to expand and promote these resources more broadly
 - The safety spaces concept should extend to undocumented individuals as well
- Existing comprehensive private and public healthcare infrastructure and resources are available through area hospitals, ambulatory and diagnostic settings, emergency services, clinics, physician services, pre- and post-acute, behavioral health, therapeutic, exercise, wellness and many others across the continuum of care.
 - There is a perceived opportunity to better coordinate resources to provide increased access to coordinated quality healthcare in the community at every level of care need (e.g., prevention, diagnostic, screening, inpatient, outpatient, telehealth, others)

- This perceived need extends to preventive care and management resources and services including screening, testing, care management, and improved self-management skills
- Evidence-based information and practices ensure that decisions made about health promotion, intervention, and care management programs is evidence-based in order to yield optimal outcomes
- Start engaging, at a higher level, the companies and employers in the community to help promote healthy eating, food access, and physical activity among their employees and families
 - Encourage companies to provide incentives to their employees and families to engage in more health oriented and promoting activities
 - Incentivize companies to become more involved in promoting healthy lifestyles and choices for their employees as well as in the broader community as responsible corporate citizens

OPPORTUNITIES & GAPS

- There is a need to find better ways to leverage schools in order to:
 - Effectively address ACEs (Adverse Childhood Experiences) - traumatized children
 - Teach better self-care practices
 - Build upon parent and home support activities
 - Teach parents to be more assertive and accountable for providing home-based support around good habits (teach by example)
- There is opportunity to find ways to teach, support, and reinforce “replacement behaviors” as part of change management to develop and maintain healthy lifestyles and practices
 - Learning and adopting new habits
 - Maintaining good behavior
- “We often start too late in teaching children good behaviors.” Take advantage of opportunities to teach youth healthy behaviors from very young ages, as has been successfully done in other areas:
 - Children’s car seat use
 - Seat belt use, all ages
 - DARE program
 - Others
- Examine and address social determinants of health that impact healthy food and exercise choices (education, home, schools, transportation, finances, access to healthy food, safety, structural realities others)
- “We know the “what,” we must discover the best “how” in addressing these issues in coordinated, integrated ways, across all types of interventions, care settings, and resources

ACTION ITEMS / SOLUTIONS

- Ensure that school curriculums reinforce healthy decisions
 - Learn from the DARE program to create tobacco-free children; and to incent and reinforce healthy food choices
- Use social media to meet children “at their interest level”
 - Have “youth speak to youth” for positive and effective peer messaging
- Use the “Stanford Chronic Disease Program” as a model for chronic disease related behavior change (specifically targets diabetes prevention); this is an evidence-based program
 - Explore payment from Medicare related to SCDP participation
- Create campaigns around every adult knowing their important up-to-date basic health screening “measures” (e.g., blood pressure, cholesterol level, blood sugar levels)
- Begin education at a young age regarding health and financial skills (including obesity prevention, debt prevention and resource management)
- Standardize health messages across all schools in the County
- Ensure better and more effective collaboration among schools, public health entities, hospitals, and other health and wellness organizations
- Take measures to ensure healthy and affordable food option access especially in poor areas
- Create positive ways to “activate” people to take responsibility for their own health and choices
- Teach children “cause and effect,” and be honest with them regarding health, diet, fitness, smoking, vaping, and other harmful activities
- Ensure that communities create and maintain safe places to walk, play, exercise, dance, and engage in other health lifestyle activities
 - Help patients advocate for themselves

POTENTIAL BARRIERS

- For profit companies continue to derive revenue from unhealthy products of all types
- There is product placement of unhealthy products that attract attention and promises instant gratification (e.g., unhealthy foods at eye level, near check-out stands, on sale, enticing packaging)
- There is a lack of funding support around initiatives for individual organizations don’t have sufficient funding to solve problems on their own. There needs to be a combined effort of multiple interested parties needed to create critical mass of resources in order to start making a difference
- There is opportunity to help address how to encourage individuals to make healthy lifestyle choices as a priority in their lives
- Undocumented individuals are fearful and often reluctant to step forward to access resources that are available
- There is a lack in green markets and farmers markets throughout the year

Priority Area 2: Promote a Healthy and Safe Environment

Focus Area 1: Injuries, Violence, and Occupational Health

Focus Area 2: Outdoor Air Quality

Focus Area 3: Built and Indoor Environments

Focus Area 4: Water Quality

Focus Area 5: Food and Consumer Products

STRENGTHS & RESOURCES

Focus Area 1: Injuries, Violence, and Occupational Health

- Screening tools should be leveraged to identify potential victims of domestic violence:
 - Ask the question “Do you feel safe at home?”
- There are opportunities to leverage existing resources to reduce the risk of falls across frail and elderly populations in Westchester County
 - Personal emergency response systems
 - Home assessments should include the question “have you ever fallen before?”
- Community-based programs are in place that can be leveraged to address injuries, violence, and occupational health needs:
 - Stepping On Program
 - Matters of Balance Program
 - Safe Kids Program (childhood injury program)
 - Caregiver education and outreach programs

Focus Area 2: Outdoor Air Quality

- Local organizations currently provide education on the following; however, retreat participants noted that education is fragmented and not consistent across the County
 - Detriment of idling cars
 - Use of clean energy
 - Access to public transportation resources
 - Alternative options for transportation (e.g., bicycles) to promote physical activity and health
- Vulnerable populations are alerted by healthcare providers and other local organizations when air quality is poor. However, this communication is also fragmented and inconsistent
- There are American Lung Association programs in place that are dedicated to supporting healthy lungs and clean air within safe boundaries

- Publishes an annual State of the Air report that analyzes data from official air quality monitors to easily compare and understand the air quality in local communities, and what can be done to help improve air quality
- Community-based organizations leverage the American Lung Association's Freedom From Smoking® program to promote smoke-free lives across Westchester County

Focus Area 3: Built and Indoor Environments

- Healthy Neighborhoods Program is designed to reduce housing-related illness and injury. It is funded by a grant from the New York State Department of Health and is offered in currently only offered in Yonkers. The program offers free home safety assessments by health department staff to residents in Yonkers. The goals of the Healthy Neighborhoods Program include:
 - Increase Radon Testing
 - Prevent Indoor Air Pollution/Reduce Asthma Triggers
 - Prevent Lead Poisoning
 - Prevent Home Fire Hazards
 - Decrease Environmental Health Hazards in the Home
- Complete Streets Policy in Yonkers incorporates active transportation into the planning, design and operation of all future City streets projects, whether new construction, reconstruction, rehabilitation or pavement maintenance. This policy is premised upon the fact that active transportation attempts to better integrate physical activity through increased emphasis on walking, bicycling, and public transportation. Active transportation improves public health, reduces traffic congestion, enhances air quality, and supports local economic development
 - Complete streets are streets that are planned, designed, operated, and maintained to enable safe access for all users, and upon which pedestrians, bicyclists, transit users, persons with disabilities, and motorists of all ages and abilities are able to safely move along and across
- Housing Authorities are increasingly focusing on resident safety
- Local organizations are increasingly offering to collect residential HVAC filters and test air quality

Focus Area 4: Water Quality

- Health Department, police stations, hospitals, and pharmacies have disposal sites for prescription drugs in place
- Healthy Neighborhoods Program provides a resource to test water quality; however, limitations exist since this program is exclusively based in Yonkers

Focus Area 5: Food and Consumer Products

- Breastfeeding continues to be the preferred nutrition for newborns/infants
- Meals on Wheels provides healthy meal options to senior residents (limited access)
- Health Department had previously received a grant to partner with selected convenience stores on an initiative that would promote healthier food options. The grant has ended, but some convenience stores have continued this initiative's efforts (e.g., convenient placement of healthier food options)
- An initiative is underway to stock vending machines with healthy food options
- Education on healthy food choices is provided in schools; however, education is inconsistent across all school sites and opportunities exist to begin this education earlier in childhood to enforce healthy behaviors

OPPORTUNITIES & GAPS

Focus Area 1: Injuries, Violence, and Occupational Health

- Injuries, violence, and occupational health needs have a widespread impact on health status, and physical and mental health
 - Individuals engaged in manual labor have high rates of workplace-related injuries
 - Higher rates of domestic violence exist in cities, particularly in lower-income households
 - Falls represent a widespread health concern for frail and elderly populations. Opportunities exist to assure that these individuals have appropriate resources at home to prevent falls

Focus Area 2: Outdoor Air Quality

- What is considered to be high quality air?
- Portions of the community have high concentrations of air pollutants due to:
 - Construction in high development/growth areas
 - Tobacco use continues to be a challenge outdoors
 - Pollutants from Ohio-based factories are carried by the wind, impacting air quality in portions of Westchester County

Focus Area 3: Built and Indoor Environments

- Opportunities exist to expand safe places to walk and play. Many areas lack safe places to walk, bike lanes, and ample green space. This has resulted in both children and adults spending more time indoors
- Residential safety is a widespread concern, specific to:
 - Air quality/cleanliness (e.g., HVAC filter changes, presence of asbestos)
 - Lead poisoning
 - Fire and carbon monoxide safety
 - Rodent infestations

Focus Area 4: Water Quality

- Health status (e.g., breast cancer incidence) is directly linked to water quality. Opportunities exist to improve water quality through appropriate disposal of pharmaceutical drugs

Focus Area 5: Food and Consumer Products

- Access to affordable, healthy food is limited across selected portions of the County
 - Presence of food deserts and food swamps
- Education on healthy eating must be tailored to specific population cohorts (e.g., cookie cutter approach does not apply to all)
 - Include ethnic-specific healthy food options as part of education, as well as guidance on healthy food preparation
 - Education must start during childhood years (e.g., schools, etc.) before poor eating habits are adopted
- There is opportunity to reinforce the importance of breastfeeding for newborns/infants

ACTION ITEMS / SOLUTIONS

Focus Area 1: Injuries, Violence, and Occupational Health

- Leverage community-based programs that are already in place to address injuries, violence, and occupational health needs:
 - Stepping On Program
 - Matters of Balance Program
 - Safe Kids Program (childhood injury program)
 - Caregiver education and outreach programs
- Collaborate with healthcare organizations (e.g., hospitals, others) to:
 - Assure that assessments include the appropriate questions (e.g., Do you feel safe at home? Have you ever fallen before?)
 - Apply evidence-based programs that will reduce the risk of falls, and mitigate workplace injuries

Focus Area 2: Outdoor Air Quality

- Expand outdoor tobacco-free spaces and access to smoking cessation programs
- Collaborate with local organizations to assure that consistent education is provided on the following:
 - Detriment of idling cars
 - Use of clean energy
 - Access to public transportation resources

- Alternative options for transportation (e.g., bicycles) to promote physical activity and health
- Partner with local healthcare providers to assure that a consistent system is in place to alert vulnerable populations when air quality is poor
- Expand awareness and education through:
 - Collaboration with local organizations (e.g., local coalitions, town halls)
 - Social media

Focus Area 3: Built and Indoor Environments

- Explore opportunities to expand Healthy Neighborhoods Program beyond Yonkers to other locations in Westchester County
- Expand awareness and education through:
 - Collaboration with local organizations (e.g., local coalitions, town halls)
 - Social media

Focus Area 4: Water Quality

- Partner with local hospitals to assure that education on appropriate disposal of pharmaceuticals is provided as part of the patient's discharge instructions
- Educate community-based health workers on the importance of appropriate medication disposal so that they can educate patients on this topic. For example, retreat participants suggested that this be included in NARCAN training
- Assess opportunities to expand access to medication disposal sites that are conveniently located for residents:
 - Collaborate with local hospital pharmacies to increase awareness of drop boxes
 - Through mobile solutions (e.g., mobile van with oversight/sponsorship by police)
- Expand awareness and education through:
 - Collaboration with local organizations (e.g., local coalitions, town halls)
 - Social media

Focus Area 5: Food and Consumer Products

- Partner with hospitals and local healthcare organizations to continue providing education that emphasizes the nutritional importance of breastfeeding on newborns/infants
- Expand culture-specific (e.g., Hispanic) education/programs on health eating
 - What does fat free really mean on a labeled product?
- Provide education in schools on healthy eating across Westchester County
- Expand programs already in place that have a demonstrated impact on healthy food choices
 - Continue to work with corner stores to display healthier food options at affordable prices
 - Expand access for seniors to Meals on Wheels

- Expand initiative to stock vending machines with healthier food options
- Expand awareness and education through:
 - Collaboration with local organizations (e.g., local coalitions, town halls)
 - Social media

POTENTIAL BARRIERS

- Undocumented status of individuals is a barrier (people are often reluctant to step forward to access resources out of fear)
- There is a lack of funding around initiatives and individual organizations do not have sufficient funding to solve problems alone.
 - There needs to be a combined effort of multiple interested parties to create critical mass of resources to begin to make a difference
- There is a lack of awareness and education of importance, and the understanding that resources are available to residents to address these issues
- There is limited public transportation is available in pockets across Westchester County
- Existence of multi-family dwelling will temper utilization of community resources that assure safe indoor environments due to fear of eviction and/or rent increases
- Denial and the impact of cultural influences
 - Some ethnic cohorts prefer not to acknowledge challenges and/or seek assistance from public and/or community-based organizations
 - Culture greatly influences diet and food choices
- Pharmaceutical disposal sites must be in secure, monitored locations
 - Complex collection and disposal process make it difficult to expand/add more disposal sites. Access and convenience for residents will be paramount to increase compliance with appropriate disposal
 - Residents may be reluctant to dispose of pharmaceuticals at police stations
 - These secure resources are difficult to access for home-bound patients, or individuals with limited access to transportation
- There is opportunity in frequency of testing (e.g., air, water), and adherence to a regular testing schedule that will assure that quality is within normal ranges
- The presence of uncontrollable external forces (e.g., pollutants carried by wind from Ohio-based factories) continue to be a barrier
- Healthy food is expensive; however, access to affordable and conveniently located healthy food is a challenge
 - Presence of food deserts and food swamps across the County make it difficult to access affordable, healthy food options
- There is product placement of unhealthy products that attracts attention, promises instant gratification (e.g., unhealthy foods at eye level, near check-out stands, on sale, enticing packaging)
- There is a lack of green markets and farmers markets throughout the year, combined with the fact that many foods have pollutants and there is a need for increased access to organic food options

- Existence of profit-making companies that derive revenue from unhealthful products of all types (e.g., branding as family friendly does not necessarily mean that it is healthy)
- Food stamps and Electronic Benefit Transfer (EBT) cards do not always provide funding for healthy food options (e.g., will pay for chips but not egg whites at deli)
- How can we address and help individuals make healthy lifestyle and food choices as a priority in their lives?

Priority Area 3: Promote Healthy Women, Infants and Children

Focus Area 1: Maternal & Women's Health

Focus Area 2: Perinatal & Infant Health

Focus Area 3: Child & Adolescent Health

Focus Area 4: Cross Cutting Healthy Women, Infants, & Children

STRENGTHS & RESOURCES

- There is a collective passion for promoting health women, infants and children in the community
 - Community resiliency
- There are permanent housing options available to single women
 - Collaboration with mental health and other community health partners to provide co-location services.
- There are workshops with community-based organizations to collaborate with providers to address social determinants of health
- The IMPLICIT Pregnancy model of improving prenatal care provides education and promotes regular visits to their health care provider throughout the patient's duration of pregnancy
 - Group prenatal care support for pregnancy care
- There are Mobile Health Centers available with Behavioral Health collaboration
- John A. Coleman School / Elizabeth Seton Pediatric Center is a great resource
 - Approved and funded by NYS Dept. of Health offering early childhood and special education services in center-based and community settings to children from over 40 school districts in Westchester, Putnam and the Bronx.
 - White Plains Campus
 - Yonkers Campus
- Providers and local health agency meet to collaborate regularly
 - Regular meetings with county health department and hospitals
- There are various state programs and coalitions currently available to eligible individuals
 - Health Department Navigator Program
 - Health insurance access
 - Women, Infant and Children (WIC) and coalitions
 - Great resource for people who are eligible, enrolled and are aware about it

- Education and promotion of healthy diet
- Some organizations have a “Sliding fee scale” in place to meet the needs of the uninsured or underinsured
- Some additional community assets are:
 - Integrate free health clinics within the local schools
 - Free distribution of feminine products within the schools
 - Working to address the unfunded mandate

OPPORTUNITIES & GAPS

- There is a gap in meeting basic needs for patients, families and caregivers (Social Determinants of Health)
 - Affordable housing, jobs, food insecurity, transportation
- There are significant patient population among the underinsured and those who lack health insurance
 - Financial literacy
 - Undocumented individuals
- There is opportunity around biases, mis-information, and addressing racism
 - Implicit bias and racial disparities
- There are disparities in behavioral health among children
 - Often extremely difficult to get adolescents placed when inpatient is needed
- There is opportunity around breast cancer screening for African American women due to the higher death rate than Caucasian women
- Increase in the aging population and caring for young children continues to be an issue
 - Young mothers at work or unable to look after their own children
- There is opportunity to address abuse, substance abuse and domestic violence
 - Stigma with regards to the opioid epidemic which is also creating stigma for women in particular
- There are lack of resources and access to specialty physicians, mental health, and primary care (pediatrics)
- There are cultural barriers and disparities such as:
 - Low birthweight
 - Breastfeeding
 - Safe sleep practices
- There is a high mortality rate among African American women
- There is a need for screening and early intervention for all women, maternal, infants, children and adolescents
 - Early detection, intervention, prevention, and continued care throughout the lifespan
- Technology can also be a barrier as more young mothers leverage their phones and IT as an escape and the potential impacts this may have on the child
- There are silos in providing care, and there needs to be a more holistic care approach
 - Need better systemness, connections, care coordination, handoffs, transition among different care providers and institutions

- Access
 - Increasing service hours and access; lack of time with physician
 - Transportation for young teens/adolescents
 - E.g.: going to and from work
- There's opportunity with regards to cost of care and lack of or under funding of programs

ACTION ITEMS / SOLUTIONS

Maternal, Perinatal & Infant Health

- Offer caregivers and baby friendly programs and classes at local community centers
 - Recommend young mothers have access support groups, parenting classes, mommy & me group
 - Addressing early entry into pre-natal care
 - Post-partum & home visits
- Promote community campaigns and messaging on prenatal care (maternal, weight gain, blood pressure, blood sugar) and infant factors:
 - Sleep durations
 - Weight gains
 - Breastfeeding
- Promote breastfeeding programs offered through local hospitals
- Ensure that all eligible individuals are enrolled in the special supplemental nutrition program for Women, Infants, and children (WIC) and Supplemental Nutrition Assistance Program (SNAP)
 - Help patients advocate for themselves

Awareness & Education

- Provide, gather and maintain a resource directory (211)
 - Develop a single platform with integrated information
 - Healthify
 - Nowpow
 - 211
 - Cross-pollination of resources among local health agencies and local community-based organizations
- Develop an early literacy program targeting children and adolescents
- Provide consistent education to increase awareness
 - Use faith-based institutions, local schools, agencies, and community-based organizations for outreach and education
- Promote peer-educators and counseling services to engage, empower, and promote breastfeeding
- Utilize child mental health and substance use screenings
 - Deploy screenings for early detection, intervention, and referrals

Person-Centered Care & Provider Engagement

- Provide volunteer clinics to allow providers to offer access and treatment
 - Partner with providers to develop a direct primary care program that is not restricted to insurance
 - Faith-based institutions & community-based organizations opening their facilities to allow for patients to see and receive care
 - This allows clinicians to go out directly to the community and overall more affordable with lower overhead costs

Priority Area 4: Promote Well-Being and Prevent Mental and Substance Use Disorders

Focus Area 1: Promote Well Being

Focus Area 2: Prevent Mental & Substance Use Disorder

STRENGTHS & RESOURCES

- There is a collective passion for mental health and substance use disorder
- There are culturally and linguistically diverse services and expertise
- There are evidence-based treatments and philosophy to care
- The community is skilled at fostering connections, building coalitions, developing networks and collaboration
 - Drug free coalitions (new & existing)
- There are multiple community care partners
 - Solid foundation from which to integrate existing and launch new programs
 - Awareness, education, continuum of care, outreach/prevention
 - Home & community-based services
 - Drop boxes throughout the county
- There is integration of mental health into primary care
 - Integration of BH / PCP and SUD treatment
- Qualified field personnel can be scaled with additional support
- Provide education to the community that reduces the stigma associated with mental health

OPPORTUNITIES & GAPS

- There is a need to meet the basic needs for people, families and caregivers (Social Determinants of Health)
 - Affordable housing, jobs, food
- There is a limited focus on ‘family and caregivers’ and not just the person seeking treatment
- Promote and encourage early detection, intervention, prevention and treatment

- Opportunities with identification through the school system (guidance counselors)
- There is opportunity around treating co-occurring disorders
 - Adverse childhood events (ACEs)
 - Pediatric psychiatric care (inpatient and outpatient)
- Mental health tends to fall to the ‘back-burner’
- Promote fostering better relationships with faith-based organizations and civic organizations
- Create access to affordable mental health care and providers:
 - Providers available who are affordable (i.e. those that do not take insurance) but they’re difficult to locate
 - In some areas limited or no providers and many who are very costly
 - Barriers to providers ‘accepting’ certain patients
- Develop better engagement with providers
- Provide medication reconciliation 72-hours post ED discharge
- Promote early intervention while patient is admitted
- Improve transitional homes and finding appropriate housing post-hospitalization
 - Short term options sometimes available
 - Longer term options more challenging to secure (i.e. after 21 days)
 - Some communities with no short-term resources available
- Push to legalize recreational marijuana based on current opioid epidemic will intensify the issues and create challenges long term; limited or no evidence on medical marijuana treatment
- Push for immigration reform
 - Undocumented population fearful to identify and receive services / legal barriers
- There is a lack of agencies providing therapies for Spanish speaking demographics; long wait times to gain access

ACTION ITEMS / SOLUTIONS

Population Segmentation:

- Solutions should be inclusive - “Mental health affects **ALL** populations in Westchester County”
 - Mental health
 - Co-occurring
 - Substance Abuse Disorder
- Specifically address these sub-populations (if required to select):
 - Minorities
 - Undocumented
 - Families (not just the person seeking active treatment)

Awareness & Education:

- Employ a language that is person-centered and universal to all
 - No-stigma messaging
- Increase awareness
- Provide education and outreach broadly
- Deploy screenings for early detection
- Provide consistent education about prevention
 - Use county buildings and schools for outreach and education
- Utilize child mental health and substance use screenings

Communication & Collaboration Across Existing Community Assets:

- Connect the dots – break down silos vertically and horizontally within/across organizations through forums like the Summit
- Engage civic, community and faith-based organizations
 - Deploy reliable outreach strategies
 - Partner together to identify resources
 - Leverage resources such as 211
 - Strengthen wrap-around services
 - Address inconsistency among available community resources
 - Deploy crisis intervention at police departments
- Inform community about available services
 - Focus on homeless shelters
- Explore education and partnerships with schools
 - Target guidance counselors for education to help with early-identification
- Create partnerships with primary care providers
- Market to the private sector
- Leverage existing initiatives such as Trauma informed Care (TIC)

Person-Centered Care:

- Focus long-term treatment on sustainability
- Include family/caregivers in the treatment and care planning
- Treat all substances together
- Enhance focus on long-term treatment
- Offer group visits
- Identify trauma and build resilience

Provider Engagement and Treatment:

- Include providers in the conversation
- Partner with PCPs and providers to assist with endorsing the conversation
- Determine strategies to utilize ICD-10 codes to allow providers (primary care and specialty care) to bills for services; incentive alignment
- Embrace multiple pathways to recovery

- Enhance transitional housing availability

Resources & Team Development:

- Secure and livable wages for field staff
- Provide staff support / professional development & education
 - Training on psychological disorders available
- Provide appropriate funds (on the federal level) to address issues
- Allocate funds to focus on prevention services