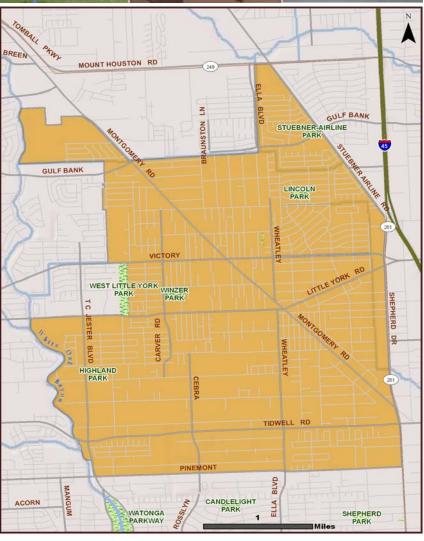
## **Community Health Profiles**

# Acres Home Super Neighborhood







Providing Health Information for Community Action

#### Introduction



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This community health profile highlights important health issues facing the residents of the Acres Home Super Neighborhood.

In Houston, a "super neighborhood" is a geographically defined area where residents, civic organizations, institutions and businesses work together to identify, plan, and set priorities to address the needs and concerns of their community. The boundaries of each super neighborhood rely on major physical features such as bayous or freeways to group together contiguous communities that share common physical characteristics, identity or infrastructure. Acres Home Super Neighborhood will hereinafter be referred to as "Acres Home."

It is the intention of the Houston Department of Health and Human Services (HDHHS), in developing health profiles such as this, to promote a better understanding by local residents, community-based organizations, community leaders, medical providers, and the public health community of the unique character and circumstances of our various communities, and to draw attention to those matters that contribute to the greatest of health disparities among the citizens of our growing, culturally and ethnically diverse city.

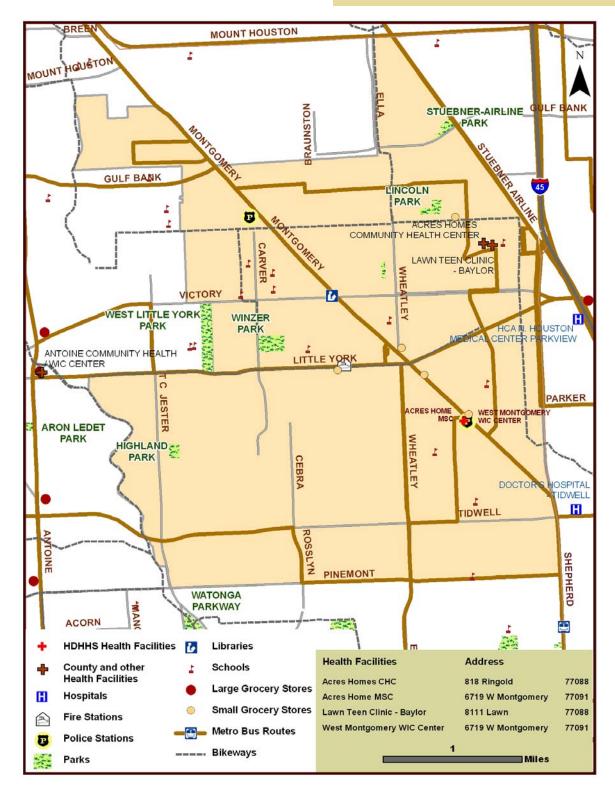
This profile also represents an effort on the part of HDHHS to provide a "baseline" of indicators of health in our communities, against which future trends in conditions can be measured and monitored, and appropriate public health actions, taken.

We hope that this health profile will support these efforts in Acres Home and across the city of Houston.

Stephen L. Williams, M.Ed., M.P.A. Director
Houston Department of Health and Human Services

### **Community Resources**

The health of a community depends to a great extent upon the availability and accessibility of its resources.

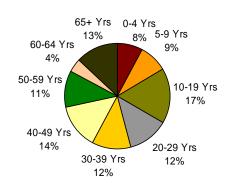


## Acres Home at a Glance

The total population of Acres Home was 23,256, according to the 2000 census.\*

#### Age

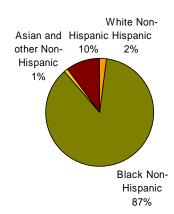
At the time of the 2000 census, more than one-third (34%) of Acres Home residents were under the age of 20. Slightly more than half (53%) were between 20 and 64 years of age, and the remaining 13% were 65 and older.



#### Race, Ethnicity, National Origin

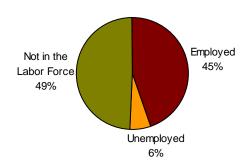
The majority of residents in Acres Home were Black. Hispanics were the second largest ethnic group, though they comprised only 10% of the population. Three percent of the population were of other races.

Of the total population, a majority (84%) were native Texans. Five percent were foreign born.



#### **Employment**

Fifty-five percent of Acres Home residents, ages 16 and over, were either unemployed or were not in the labor force in 1999.

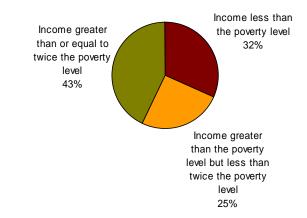


<sup>\*</sup> Data Source: U.S. Census 2000. Total population was calculated from census block-level data using Summary File 1. For purposes of describing demographics using Summary File 3, the super neighborhood is defined by the following census geographies: Tracts 5308, 5318, 5319, 5333; Tract 5330, Block Group 1; Tract 5331, Block Group 2; Tract 5332, Block Group 1; and Tract 5334, Block Groups 1, 2 and 4.

#### **Poverty**

Nearly one-third (32%) of the population in Acres Home lived below the poverty level in 1999. More than half (57%) had incomes less than twice the poverty level.

Of those living below the poverty level, 40% were children under 18 years of age; 11% were adults 65 and older.



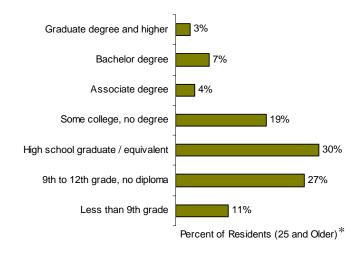
#### Education

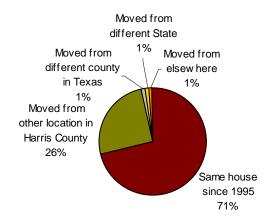
More than one-third (38%) of Acres Home residents, ages 25 and over, reported that they had not graduated from high school.

Thirty percent of residents reported that graduation from high school (or the equivalent) was their highest level of educational attainment.

One-third of residents had attained education beyond the high school level, with 14% earning a college degree.

\*Due to rounding, the total percentages may not be equal to 100.





#### Population Stability

The majority (71%) of the residents of Acres Home had lived in the same house since 1995. Approximately one-quarter (26%) moved to the super neighborhood from other locations in Harris County between 1995 and 1999.

Three percent of residents moved to the area from outside Harris County between 1995 and 1999.

Data Source: U.S. Census 2000, Summary File 3

## Major Causes of Death

During the years 1999-2003, the residents of the super neighborhood had higher overall and cause-specific annual average mortality rates than those of Houston as a whole.

#### Leading Causes of Mortality, Acres Home, Houston, Texas, 1999-2003

		Acres	Home	Houston	Acres Home- Houston
Rank	Cause of Death	Deaths	Rates*	Rates*	Rates
	All Causes	1527	1379.9	898.2	481.7
1	Heart Disease	444	401.4	262.0	139.3
2	Cancer	333	291.4	197.6	93.8
3	Stroke	114	104.9	76.0	28.9
4	HIV/AIDS	58	57.6	13.7	43.8
5	Accidents	55	50.2	34.8	15.4
6	Diabetes Mellitus	56	50.0	28.0	22.1
7	Septicemia	46	42.3	18.1	24.2
8	Chronic Lower Respiratory Disease	43	37.9	31.9	6.0
9	Kidney Disease	41	36.5	15.8	20.7
10	Homicide	35	31.5	11.1	20.3

#### Other Causes of Death of Particular Interest, Acres Home, Houston, Texas, 1999-2003

	Acres	Home	Houston	Acres Home- Houston
Cause of Death	Deaths	Rates*	Rates*	Rates
Coronary Heart Disease	291	262.9	174.1	88.8
Bronchus-Lung Cancer	111	93.8	52.8	41.0
Drug-Induced Cause	20		8.2	
Firearm Related	19		7.4	
Motor Vehicle Accident	18		13.2	
Cervical Cancer	7		2.2	

<sup>\*</sup>Age-adjusted mortality rates: annual average deaths per 100,000 population; census 2000 populations as the denominators; age-adjusted to the 2000 US Standard Million; deaths with known age and disease information.

<sup>--</sup> Numbers of deaths were too small for rate calculation.

# Years of Potential Life Lost (YPLL)

Years of Potential Life Lost (YPLL) is an indicator of premature mortality. This indicator suggests social and economic loss owing to premature death. It also gives information on the specific causes of deaths affecting younger age groups.

Leading Causes of Premature Death	YPLL Rate*	YPLL Rate**	Houston YPLL Rate**
Heart Disease	1786.9	1920.8	689.3
Cancer	1558.7	1634.6	816.3
HIV/AIDS	1402.7	1647.8	335.1
Homicide	1221.9	1248.5	407.5
Accidents	1126.1	1156.2	779.0
Conditions Originat- ing in the Perinatal Period	1057.9		-
Stroke	319.1	341.4	141.9
Suicide	314.1		-
Congenital Disorders	286.5		-
Septicemia	260.8		-
Specific Causes of In Coronary Heart	terest 724.1	700.0	270.4
Disease	. =	782.6	376.1
Firearm Related	668.7		-
Motor Vehicle Accident	533.4		-
Drug-Induced Cause Bronchus-Lung	451.4		-
Cancer	358.6	364.9	153.2

NOTE: Special cause of death categories may not be mutually exclusive.

## Differences in YPLL rates between Men and Women, 1999-2003

Premature deaths from homicide, accidents, HIV/ AIDS and heart disease had disproportionately higher impact on YPLL rates among males than females in this community.

## Rate of Years of Potential Life Lost (YPLL Rate)

At every age of death, there is a certain number of years of "expected life" that are not lived, and are therefore "lost". The amount of lost years of life often differ by cause of death. Many people consider death before the age of 65 years as premature. More years of life were lost prematurely due to heart disease, cancer, HIV/AIDS, homicide, and accidents in this community than any other causes.

The age-adjusted annual average YPLL rates for the above conditions were higher in the super neighborhood than those in Houston. Comparison of other age-adjusted YPLL rates is not possible because of the relatively small number of deaths occurring before age 65 in Acres Home. YPLL rates are not reported where fewer than 5 deaths occurred.

Leading Causes of Premature Death §	Male YPLL Rates (number of deaths)	Female YPLL Rates (number of deaths)
Heart Disease	2329.6(82)	1303.6(46)
Homicide	1918.6(25)	601.4(9)
HIV/AIDS	1904.0(36)	956.2(19)
Cancer	1740.4(75)	1397.0(56)
Accidents	1641.9(31)	666.7(9)

#### **Specific Causes of Interest**

Firearm Related	1153.3(15)	
Coronary Heart Disease	987.6(42)	489.3(24)
Motor Vehicle Accident	872.3(12)	

<sup>§</sup> Ranked by Male YPLL Rate

Note: YPLL rate might be unstable due to small number of premature deaths.

Data Sources: Texas Department of State Health Services, Vital Statistics; US Census, 2000

<sup>\*</sup> Crude annual average YPLL per 100,000 population under age 65 years.

\*\* Age-adjusted annual average YPLL per 100,000 population under age of 65, standardized for 2000 US Standard Million.

<sup>- -</sup> Number of deaths too small for age-adjustment.

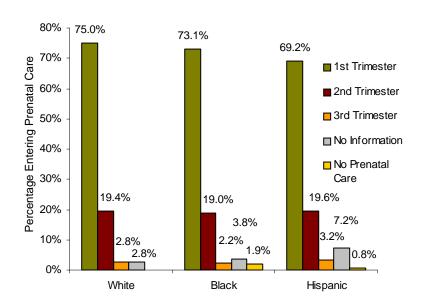
<sup>-</sup> Houston data not presented because comparison data were not available for the community.

## Maternal and Child Health

Prenatal care is the care a woman gets during pregnancy. Both prenatal care and birth weight are good indicators of a newborn's chances of survival, growth, long term health, and psycho-social development.

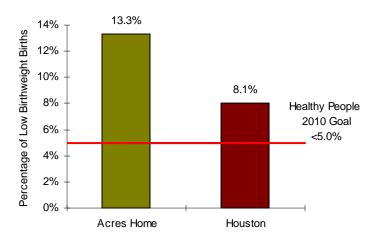
## Entry into Prenatal Care by Trimester of Pregnancy, 1999-2003

The percentages of Black and Hispanic women entering prenatal care in the first trimester were slightly less than that of White women. A small proportion of all women entered prenatal care very late in their pregnancy, or received no care at all.



## Low Birth Weight Births (LBWB),1999-2003

Approximately 13% of live births in Acres Home were of low birth weight (2500 grams or less), which was higher than that of Houston as a whole. Both were far higher than the Healthy People 2010 goal of reducing this outcome to less than 5% of live births.

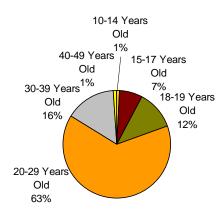


Low birth weight is a factor significantly related to infant mortality. Infants born with low birth weights are at increased risk for serious health problems and long term disabilities such as mental retardation, cerebral palsy, and respiratory, vision, and hearing problems. Low birth weight and infant mortality are therefore among the most important indicators of a community's health.

Data Source: Texas Department of State Health Services, Vital Statistics, 1999-2003

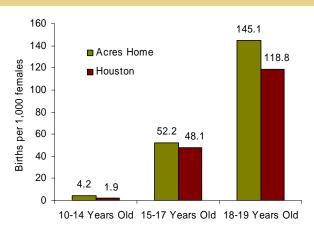
## Births to Teen Mothers

Teenage childbearing is associated with negative consequences for the children born of teen mothers. In addition, there are important social and economic costs to individuals as well as the society as a result of births to teenage mothers.



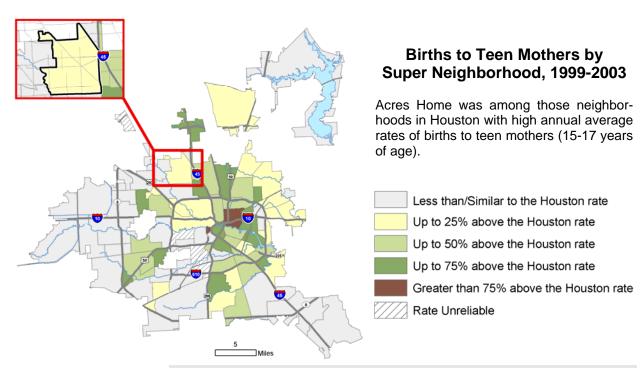
#### Births by Age of Mother, 1999-2003

A total of 2,252 births were recorded over the period among mothers in Acres Home. Approximately 1 out of every 5 of these births was to a young mother (10-19 years of age).



#### Births to Teen Mothers, 1999-2003

The annual average rate of births to 15-17 yearold teens in Acres Home (52.2 per 1,000 females aged 15 to 17 years) was 9% higher than that of teens the same age in Houston, overall. The rate among 18-19 year-old females in Acres Home was also 22% higher than that for the same age group in Houston.



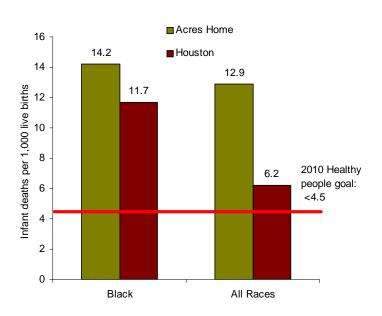
Data Sources: Texas Department of State Health Services, Vital Statistics; US Census 2000

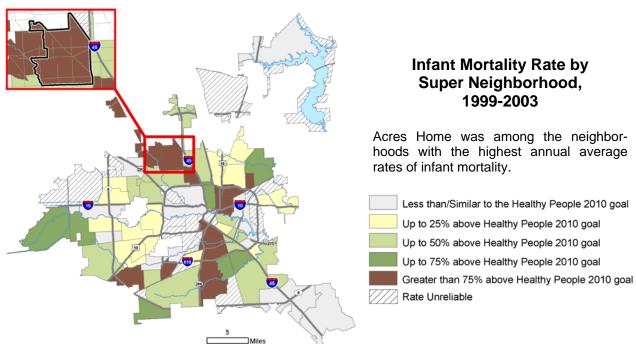
### **Infant Mortality**

Infant mortality is the death of infants in the first year of life. Infant mortality rate (IMR) is one of the most important indicators of the health of a community. The Healthy People 2010 goal is to eliminate disparities in infant mortality among racial and ethnic groups. The targeted groups are African American, American Indian, Alaskan Native and Puerto Rican populations.

#### Infant Mortality Rate, 1999-2003

The annual average mortality rate among infants in Acres Home was twice Houston's IMR and almost three times the 2010 goal (4.5 infant deaths per 1,000 live births). Ninety percent of infant deaths occurred among Blacks. The annual average IMR among Blacks in Acres Home was also 21% higher than in Houston as a whole.





Data Source: Texas Department of State Health Services, Vital Statistics

# Leading Causes of Hospitalization

Much information on the health issues the super neighborhood residents face on a daily basis is not readily available. The leading causes of hospitalization provide a partial picture of those conditions.

### Principal Diagnosis, Multiple Level Clinical Classification of ICD 9

Counts

#### 3303 Diseases of the circulatory system Diseases of the heart 2057 Cerebrovascular disease 583 376 Hypertension 2 Complications of pregnancy; childbirth; and the puerperium 1850 Complications mainly related to pregnancy 526 Indications for care in pregnancy; labor; and 382 delivery Normal pregnancy and/or delivery 336 3 Diseases of the respiratory system 1630 Respiratory infections 713 Chronic obstructive pulmonary disease and 376 bronchiectasis 228 Asthma Certain conditions originating in the perinatal 1620 Liveborn 1569 Other perinatal conditions 23 Short gestation; low birth weight; and fetal 13 growth retardation 1307 5 Diseases of the digestive system Lower gastrointestinal disorders 319 294 Upper gastrointestinal disorders Biliary tract disease 161 6 Injury and poisoning 1176 Complications 594 256 Fractures Poisoning 65 973 Neoplasms

Benign neoplasms

Secondary malignancies

Cancer of bronchus; lung

In Acres Home, during the years 1999-2002, the most common causes of hospitalization were related to cardiovascular and cerebrovascular diseases, perinatal period and childbirth conditions, diseases of respiratory system, and or diseases of digestive system.

Note that only the most common conditions are listed under each major category of diagnosis, and that the sum of these counts may not equal the total counts for the category.

8	Mental disorders	908
	Schizophrenia and related disorders	364
	Affective disorders	270
	Other psychoses	81
9	Endocrine; nutritional; and metabolic diseases and immunity disorders	757
	Diabetes mellitus with complications	405
	Fluid and electrolyte disorders	233
	Other nutritional; endocrine; and metabolic disorders	36
10	Diseases of the genitourinary system	685
	Diseases of the urinary system	420
	Diseases of female genital organs	210
	Diseases of male genital organs	55

Data Source: Texas Department of State Health Services, Texas Health Care Information Collection

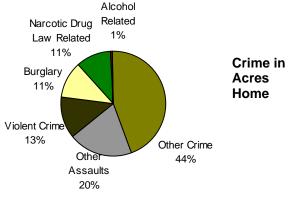
279

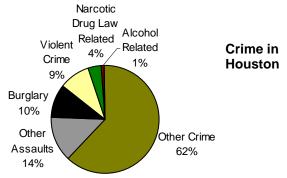
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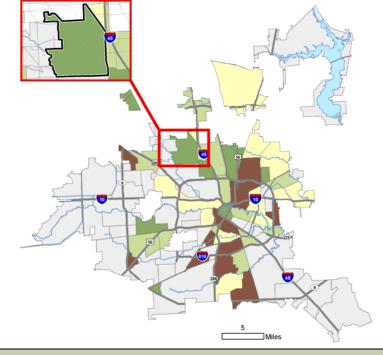
#### **Crime**

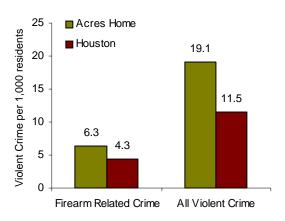
The crime rate in urban areas is of concern to the residents, law enforcement and the local government. Crimes place stress on the residents of neighborhoods and affect their well-being. Of particular concern are violent crimes that threaten residents' lives, such as those involving firearms.

#### Overview of Crime, 1999-2003







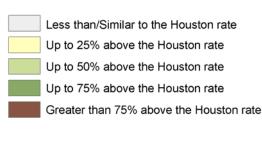


#### **Violent Crime, 1999-2003**

The annual average rate of violent crime in Acres Home was 19.1 per 1,000 population, 66% higher than Houston as a whole. The rate of firearm-related violent crime in Acres Home was also 47% higher than that of Houston.

#### Rate of Violent Crime by Super Neighborhood, 1999-2003

Acres Home was among those neighborhoods in Houston with high annual average rates of violent crime.



Data Source: Houston Police Department

#### **Tuberculosis**

Tuberculosis (TB) is caused by a specific type of bacteria that spreads from person to person through the air. TB typically affects the lungs but can also affect the brain and other organs. If this disease is left untreated it can be fatal.

From 1999 to 2003, 32 newly-acquired cases of tuberculosis were identified among residents of this super neighborhood, representing 2.4% of all cases diagnosed in Houston in that period. The annual average rate in Acres Home was 27.5 compared to 13.6 per 100,000 population in Houston as a whole. Both rates were far higher than the 2010 Healthy People target of 1 case per 100,000 population.

Adults between 20 and 64 years of age represented 69% of the cases. There were more male cases (59%) than female cases (41%), with the overwhelming majority (94%) of all cases being Black.

Data Source: HDHHS, Bureau of TB Control

## Drowning and Submersion

Drowning and submersion injuries are often unintentional and are preventable through increased awareness of precautions that can be taken in and around bodies of water.

There were fewer than 5 submersion injury events among residents of Acres Home reported from 1999-2003.

Data Source: HDHHS, Bureau of Epidemiology

# Food-borne Diseases

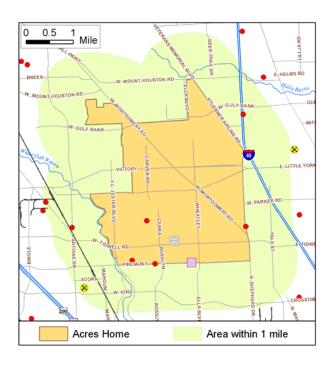
Many food-related diseases are easily preventable. Eating well-cooked foods, keeping cooking areas free of contamination by thoroughly cleaning surfaces touched by raw meats and poultry, hand washing before handling food, and avoiding unpasteurized products are some of the measures that people can take to lower their risk of food-related disease.

Food-related diseases are typically under-reported. It is likely that many more cases occurred from 1999 to 2003 than were actually reported to health officials.

Typically Reported Diseases	Number of Cases
Hepatitis A	11
Shigellosis	26
Salmonellosis	13
Campylobacteriosis	<5

# **Environmental Health and Safety**

Chemical emissions and waste released into the air, soil, and water can affect everyone. Knowing the locations and types of potential polluters allows residents to better monitor the potential environmental impact on their communities.



#### Regulated Facilities

The Environmental Protection Agency (EPA) and the Texas Commission on Environmental Quality (TCEQ) administer programs which monitor and regulate facilities with the potential to release significant amounts of hazardous chemicals to the environment.

Within one mile of Acres Home, there are 7 Toxic Release Inventory (TRI) reporting facilities, 1 Large Quantity Generator (LQG) of hazardous waste, 1 major storm water discharging facility, and 1 closed landfill.

These facilities are regulated under one or more of the following federal statutes: the Emergency Planning and Community Right-to-Know Act (EPCRA), the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA), the Resource Conservation and Recovery Act (RCRA), the Clean Air Act, and the Clean Water Act.

The EPA provides reports concerning federally regulated facilities through an online application called Envirofacts (www.epa.gov/enviro/index.html).

- Toxic Release Inventory (TRI) Facility
- Major Storm Water Runoff Facility
- Hazardous Waste Treatment, Storage, or Disposal (TSD) Facility
- Large Quantity Generator (LQG) of Hazardous Waste
- Major Discharger of Air Pollutants

Highway

Major Roadway

$\triangle$	Radioactive	Monto	Cito
•	Radioactive	vvasie	Sile

Current Superfund Site

Former Superfund Site

Active Landfill

Inactive Landfill

Closed Landfill

Railroad

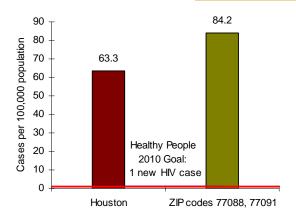
\_\_\_\_ Bayou

Type of Regulated Facility	Houston Count	Type of Regulated Facility	Houston Count
Toxic Release Inventory (TRI) Facilities	302	Major Dischargers of Air Pollutants	71
(all reporting years)		Radioactive Waste Sites	4
Major Storm Water Runoff Facilities	56	Current Superfund Sites	12
Hazardous Waste Treatment, Storage,	35	Former Superfund Sites	5
or Disposal (TSD) Facilities		Active Landfills	9
Large Quantity Generators (LQG) of	132	Inactive Landfills	2
Hazardous Waste		Closed Landfills	18

Data Sources: Environmental Protection Agency; Texas Commission on Environmental Quality

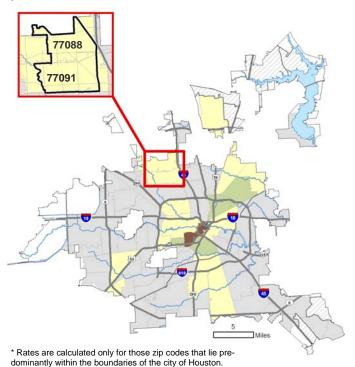
#### **HIV/AIDS**

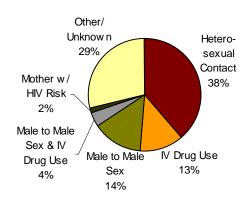
HIV (Human Immunodeficiency Virus) attacks the immune system and can progress to Acquired Immune Deficiency Syndrome (AIDS). HIV is primarily transmitted through unprotected sex or sharing needles with someone infected with the virus. It can also be transmitted from mother to child before or during birth and from breast milk. Many of those infected are unaware of their HIV status, and therefore can transmit the disease unknowingly.





The annual average rate of new HIV case diagnosis in zip codes 77088 and 77091 (which include Acres Home) was 33% higher than the Houstonwide rate during this period; it was far above the 2010 Healthy People Goal of reducing infections to less than 1 new case per 100,000 persons per year.



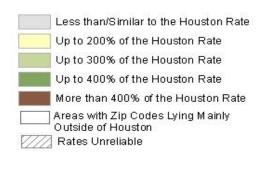


#### HIV Risk Factors, 1999-2003

Risk factors for 29% of all reported cases were unknown. Fourteen percent of cases reported male-to-male sexual contact as a risk factor; 38% of cases reported heterosexual contact; and 13% reported exposure to IV drug use.

## Rates of New HIV Diagnosis by Zip Code\*, 1999-2003

The annual average rates of new HIV diagnosis in zip codes 77088 and 77091, which overlap Acres Home, were higher than that of many other zip codes in the city.

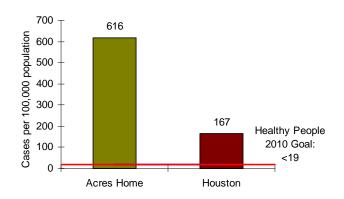


#### Gonorrhea

Gonorrhea is a sexually transmitted disease (STD) caused by bacteria. If untreated, it can cause serious and permanent health problems in both women and men. It also places infected persons at greater risk for HIV. Though rare, it can result in death if untreated.

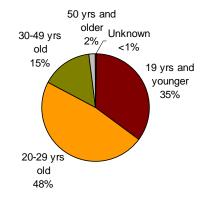
#### New Gonorrhea Infection, 1999-2003

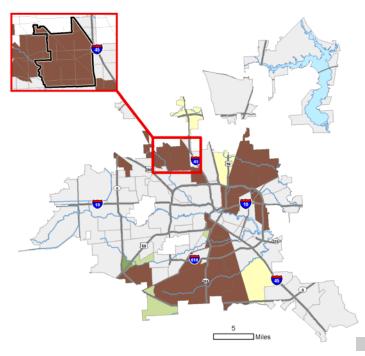
The annual average rate of new gonorrhea infection in Acres Home was more than three times that of Houston. Both rates were much higher than the 2010 Healthy People goal of less than 19 cases per 100,000 population.



#### Gonorrhea infection by Age, Sex, Race/ Ethnicity

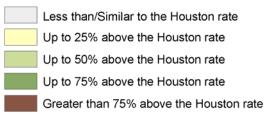
Blacks, who represented 87% of Acres Home residents, accounted for 95% of the new cases. Nearly half of all cases occurred among persons aged 20 to 29 years. Males and females were equally affected .





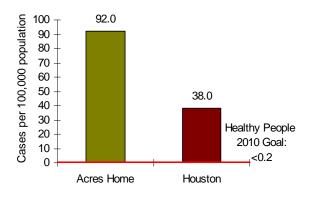
#### Rates of Gonorrhea Infection by Super Neighborhood, 1999-2003

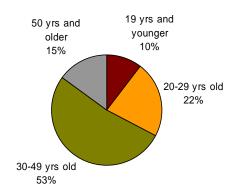
Acres Home was among those super neighborhoods with the highest annual average rates of infection in the city.



### **Syphilis**

Syphilis is a sexually transmitted disease (STD) and is passed from person to person through direct contact with a syphilis sore. Sores occur mainly on the external genitals, vagina, anus, or in the rectum. Transmission occurs due to unprotected sex. The sores may also occur in lips and mouth. Untreated syphilis can progress into more serious conditions affecting the nervous system, heart and other organs, seriously impairing health.



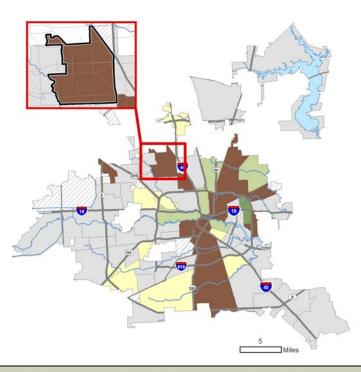


### Rates of New Syphilis Infection, 1999-2003

The annual average rate of infection in Acres Home was more than twice the overall Houston rate; both were far higher than the Healthy People 2010 goal.

## Syphilis Cases by Age, Sex, Race/Ethnicity

From 1999 to 2003, 97% of new cases in Acres Home occurred among Blacks. Adult males and females were almost equally affected by syphilis (males accounted for 49% of new cases, females 51%). Thirty to fortynine year olds were the most affected age group.



## Rates of Syphilis by Super Neighborhood, 1999-2003

Acres Home was among the neighborhoods with the highest annual average rates of syphilis in the city.

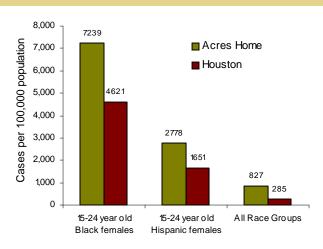
Less than/Similar to the Houston rate
Up to 25% above the Houston rate
Up to 50% above the Houston rate
Up to 75% above the Houston rate
Greater than 75% above the Houston rate
Rate Unreliable

### **Chlamydia**

Chlamydia is the most frequently reported sexually transmitted disease (STD) in the nation. Women are more commonly screened for the infection than are men, and those 15 to 24 years of age appear to be the most affected, nation-wide. The symptoms are usually mild and not easily recognized, causing many with the infection not to seek treatment. If untreated, chlamydia can cause infertility in women.

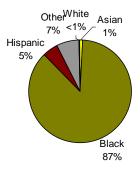
### Rates of Chlamydia, 1999-2003

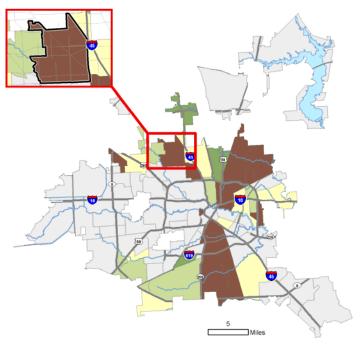
The annual average rate of chlamydia infection in Acres Home was 827 cases per 100,000 population, nearly three times the Houston rate. Among 15-24 year-old Black females, the rate of infection in Acres Home was 56% higher than that of Houston as a whole.



#### Chlamydia Infection By Age, Sex, and Race/Ethnicity, 1999-2003

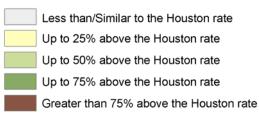
Blacks were most affected in Acres Home, accounting for 87% of new infections; 5% were Hispanic. Eighty-one percent of new cases were female.





## Rates of Chlamydia by Super Neighborhood.1999-2003

Acres Home was among the neighborhoods with the highest annual average rates of chlamydia in the city.



#### **Technical Notes**

The Community Health Profiles Project attempts to provide the most recent statistical information available on the health of communities. The 1999-2003 series represents a "baseline" against which changes in the health indicators of communities can be evaluated over time. Data used to compile this profile are derived from a variety of sources — local, state, and national. These data sources may collect information on different cycles and therefore gaps in available years of data may be observed within a single profile.

Except where noted otherwise, rates are calculated using 2000 census data for each community, including age, race, and sex distributions. Agreement between race/ethnicity classifications in the data used in this report and those derived from the census is imperfect; disease registries do not uniformly capture ethnicity along with race and categories of "Black", "White," "Asian," and "Other" may overlap with "Hispanic" ethnicity. Despite potential overlap, in this profile, "Black" is meant as "non-Hispanic Black," "White" as "non-Hispanic White," and "Hispanic" as being persons of any race and of Hispanic/Latino culture and origin. The profiles group a range of years of data and present them, where most appropriate, as annual average incidence of the indicator. If the total number of events is less than five, the associated rate is considered unreliable and is not reported; however for Leading Causes of Death, the minimum number of deaths for reporting age-adjusted rates is set at 25. Statistics presented in profiles of super neighborhoods, medically-underserved areas (MUAs), and other geographies are based upon successful geocoding of the residence of individual cases within the boundaries of those geographic entities. The denominator in all cases is the year 2000 census, as the estimated "average" population for each year of the analysis period. Background Houston rates and Healthy People 2010 goals have been used for most indicators as a standard for comparison.

**Mortality data**: Mortality data have been obtained at the address level from the Texas Department of State Health Services for 1999-2003. The YPLL statistics are computed using 65 years of age as the end point. **Crime data**: Data for 1999-2003 have been acquired from the Houston Police Department at the address level of the site of the incident. **HIV/AIDS data**: As of this report, data were only available at the zip code level.

#### Other notes

Data for a number of additional indicators considered important for a community's assessment of its health and health planning efforts were not available at the time of printing of this document. These indicators, including various injury indicators, and more community-specific behavioral data are being collected or researched for potential inclusion in the future published version of this report.

#### **Community Health Profiles**

Community-specific public health profiles on medically-underserved areas and the 88 super neighborhoods of Houston are available from the Houston Department of Health and Human Services at <a href="https://www.houstontx.gov/health">www.houstontx.gov/health</a>. Reports can also be requested by e-mail at <a href="mailto:we-badmin@cityofhouston.net">we-badmin@cityofhouston.net</a>, or by writing to:

#### **Community Health Statistics**

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#### **Community Health Profiles**

Produced by Community Health Statistics Office of Surveillance and Public Health Preparedness

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#### **About Community Health Statistics (CHS)**

Community Health Statistics (CHS) is a program within the division of the Office of Surveillance and Public Health Preparedness of the Houston Department of Health and Human Services (HDHHS). It is comprised of epidemiologists, statisticians, and GIS analysts who acquire data through collaboration with multiple partners within and outside the department for analysis, interpretation, and sharing of information on local health issues.

Our mission is to serve the needs of HDHHS, and the needs of the scientific community, and general public as a resource for data and information on the indicators and the determinants of the health and well-being of geographically-defined communities, as well as of other distinct population groups within the city of Houston, Texas.