

MILBANK MEMORIAL FUND

QUARTERLY BULLETIN

NEW YORK HEALTH DEMONSTRATIONS

The State Charities Aid Association (New York) is the organizing and supervisory agency for the Cattaraugus County (rural) and Syracuse (urban) health demonstrations. Operating responsibilities in the demonstration districts are in the hands of local health and educational authorities and of voluntary health and welfare agencies



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THE METROPOLITAN HEALTH DEMONSTRATION

ANNOUNCEMENT has been made that the metropolitan health demonstration will be conducted in the Bellevue-Yorkville tuberculosis clinic districts in the City of New York. The selection of this area in the Borough of Manhattan, bounded by Fourteenth and Sixty-fourth Streets, Fourth Avenue and the East River is made public some months after Cattaraugus County was chosen for the rural demonstration and Syracuse for that in an urban community. It is expected that a director for the work will be chosen soon, and that the necessary preliminary organization will be undertaken immediately, so that actual demonstration operations may be begun early in 1925. Hon. Frank J. Monaghan, Commissioner of Health, and his assistants in the New York City Department of Health are co-operating in the undertaking, which has the approval of Mayor John F. Hylan.

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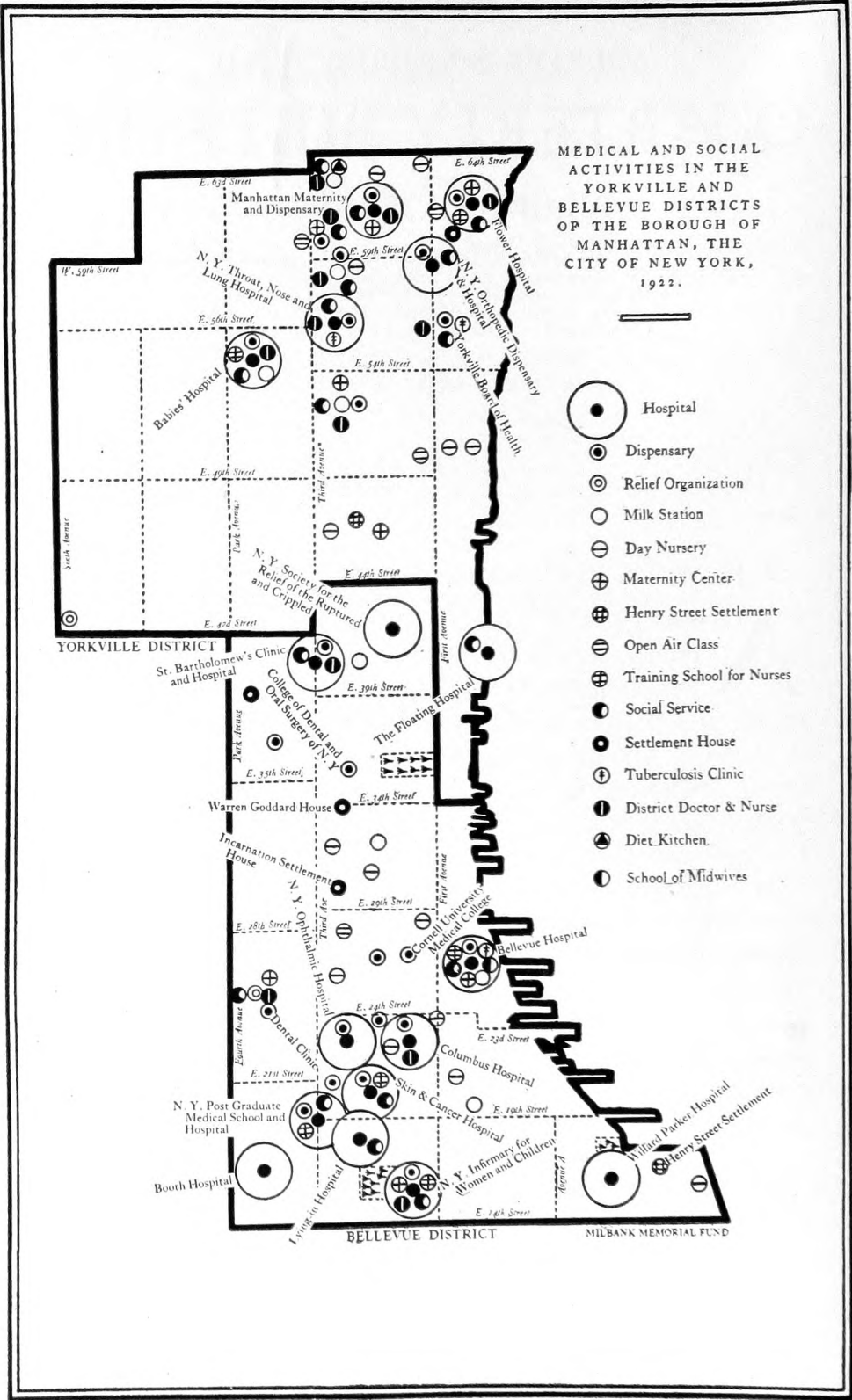


Fig. 1

Before determining upon the Bellevue-Yorkville district as the metropolitan demonstration center, extensive surveys were made there under the supervision of the Technical Board of the Milbank Memorial Fund, which had the co-operation of the New York State and the New York City Departments of Health, and of several voluntary agencies, including the New York Association for Improving the Condition of the Poor and the New York Tuberculosis Association. At the request of the Fund, the New York A. I. C. P. made inquiries into the health facilities of a number of tuberculosis clinic districts in the city to determine which seemed to offer the best opportunities in which to conduct an intensive health program. Statistical material regarding these districts, gathered under the immediate supervision of Godias J. Drolet, Statistician of the New York Tuberculosis Association and with the advice of the Statistical Committee of the Milbank Memorial Fund, included a comparative analysis of population statistics, the age distribution of the populations within tuberculosis clinic districts, a study of the general and infant mortality rates, tuberculosis mortality and morbidity, a standardization of

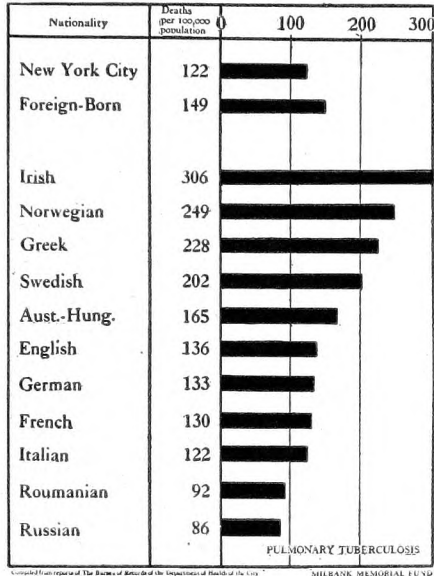


Fig. 2. Deaths from pulmonary tuberculosis among foreign born in the City of New York, per 100,000 population in each respective group, during the four-year period, 1918-1921

the death rate together with a very extensive study of tuberculosis by racial groups. (Fig. 2)

The Fund's Technical Board, on the advice of Dr. Haven Emerson, had previously agreed that certain determining factors should control the Board in selecting the district for the metropolitan health demonstration. There was a feeling that a satisfactory unit would be one of about 200,000 population and that the district should contain no dominant racial group. Among other things, consideration was also given to the presence in the area of existing educational facilities for training in public health work.

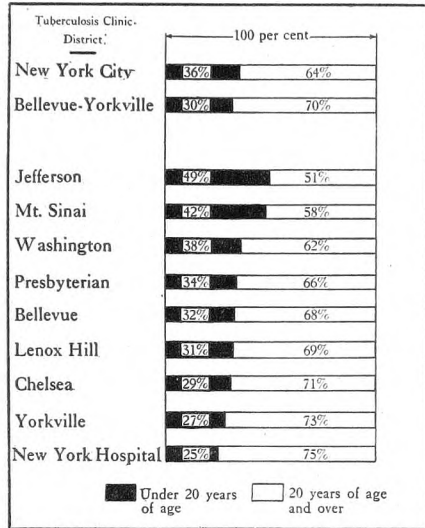
In 1922, the population of the Bellevue-Yorkville district was estimated to be 214,000. The tendency of the population there is to remain comparatively stationary, as the section is practically all built up. However, the steady development of business in the central part of New York City is gradually reducing the residential population, while at the same time increasing the working population present there during the day. As all of the census taking is done on the basis of residence, there is no exact knowledge as to the extent of the working day population. The building up of large apartments, especially along Park Avenue, where, of course, a greater number of people is accommodated, tends to restore the equilibrium of the total population residing in the district.

In a summary of the data considered in the selection of the Bellevue-Yorkville district, Mr. Drolet says that the population of the two sections is fairly equally divided, Bellevue having an estimated population of 114,000 and Yorkville, of 100,000. Of the 214,000 people estimated to be residing in the entire area during 1922, about one-half, or 102,416, were adults between the ages of twenty and

forty-five years. Eight per cent of the total were children under five; and 15 per cent were school children. Approximately 50,000 people residing in the district were forty-five years of age and over. (Fig. 3)

The comparison of the death rate of this district with that of the entire city shows the general death rate here to be one-third higher on the average than in the city at large. The standardized death rate in this district was 15.24, as compared with a standardized death rate for New York City of 12.11. During 1922, there were 3,541 deaths charged by the Department of Health against the Bellevue-Yorkville district. Of these, 3,241 were residents of the district and 300 were of out-of-town transients. The residential mortality included 116 deaths among residents of the several lodging houses in these neighborhoods.

The leading causes of death were in the following order: 585 from organic heart disease; 385 from various forms of pneumonia; 298 from tuberculosis; and 265 from cancer. There were during the period, 231 fatalities from accidents occurring within these localities, deaths from such causes being charged to the districts in which they occur, whether



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Fig. 3. Percentage of population under and over twenty years of age in the combined Bellevue-Yorkville tuberculosis clinic districts, in other districts, and in the City of New York, 1920.

the person killed be a resident or non-resident. The death rate from accidents in Bellevue-Yorkville, which is in a central and traffic-congested part of the Borough of Manhattan, is 74 per cent higher than the City rates, being 108 per 100,000, as against 62, in the greater city.

The death rate from non-pulmonary forms of tuberculosis is 69 per cent higher than the city rate, being 22 as against 13 per 100,000. The study also revealed that some children's diseases, like measles, diphtheria and scarlet fever, show greater frequency here as a cause of mortality.

"Running over the leading causes of death and the number occurring at various ages," says Mr. Drolet, "it is noted that typhoid, of course, took its main toll among adults in the district during 1922. Measles, whooping cough and diphtheria deaths practically all occurred in children under five years of age. Scarlet fever, though it killed four school children, found its greater number of victims in children of pre-school age, eleven such deaths having occurred.

"The deaths from tuberculosis were, of course, mostly among adults. They were more numerous among young girls than among boys of fifteen to nineteen years, but during the adult period the incidence of the disease was noticeably greater among men than among women. The non-pulmonary cases of tuberculosis were pretty well scattered among both children and adults.

"Cancer was more frequently the cause of death among women between twenty and forty-four, but after forty-five the two sexes furnished an equal number of deaths.

"Cerebral hemorrhage and arteriosclerosis took practically all of their victims after they were forty-five.

"The pneumonia deaths are, of course, grouped among young children and older adults.

"Diarrhea and enteritis deaths occurred practically all in children under five.

"Deaths from Bright's disease were mostly after the age of forty-five.

"The deaths from accidents were quite widely distributed among all ages.

"The maternal death rate in the Bellevue or poorer district was 26 per cent lower than the city average, but in the Yorkville section it was much higher than elsewhere.

"The general mortality of the district showed 1,481 deaths in the female sex and 1,760 among males."

There follows a summary of the major reasons which led to the selection of the Bellevue-Yorkville districts as the area for the metropolitan health demonstration:

1. It has a population of approximately 214,000, living in a fairly typical metropolitan environment.
2. There is no predominance of any racial group in the district, and particularly of those whose mortality rate are very directly influenced by their nationality. Of the total population there, 37 per cent are foreign born, while in the City of New York as a whole, 35 per cent are foreign born.
3. The density of the population in the area is 170 per acre, against 163, in the Borough of Manhattan.
4. The distribution of income ranges in the families living in this area is such that should allow the results of the demonstration to be generally applicable.
5. It is doubtful whether any other district in New York City provides more satisfactory clinical facilities than are found in the Bellevue-Yorkville section. More than twenty-five hospitals, dispensaries and public health institutions are located there, including Bellevue Hospital, the New York Infirmity for Women and Children, Lying-In Hospital, the New York Post Graduate Hospital, Flower Hospital, Babies Hospital, and the Skin and Cancer Hospital.

6. The distribution of the population there by age groupings is approximately the same as in the Borough of Manhattan.

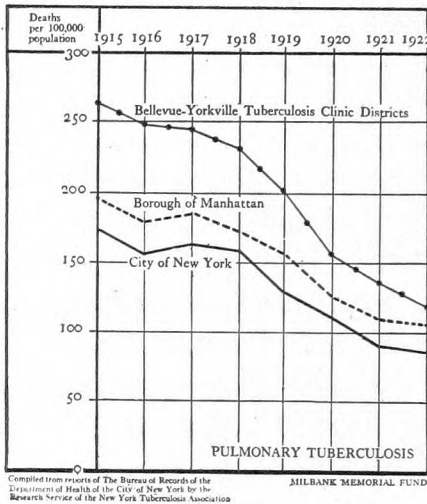


Fig. 4. Decrease in deaths from pulmonary tuberculosis in the combined Bellevue-Yorkville tuberculosis clinic districts, in the Borough of Manhattan, and in the City of New York, per 100,000 population in each respective region, 1915-1922

7. While the birth rate in the Bellevue district (24.4 per 1,000 population in 1922) is above the average for all of the tuberculosis clinic districts in New York City in the same year (22.2), that for the Yorkville district (16.8) is lower, and the rate for the two districts combined (20.8) compares favorably with the city average.

8. The standardized death rate in the combined districts was 15.24 in 1922, as against 12.11 in the entire city.

9. The infant mortality rate there (96 per 1,000 births in 1922) is high as compared with that for New York City in the same year (75), but not relatively as high as in a number of other districts in the city.

10. The death rate from tuberculosis (respiratory system) among the residential population of the combined Bellevue-Yorkville districts was 117 per 100,000 in 1922, as compared with the rate from this cause among the residential population of New York City (84). (Fig. 4)

11. There is in the combined districts a larger percentage of pre-natal and maternity cases under competent medical and nursing supervision than in other tuberculosis clinic districts in the city.

12. With the exception of two sanitary areas in the East Harlem tuberculosis clinic district of the Borough of

Manhattan, the nursing facilities of the combined Bellevue-Yorkville districts, while inadequate, are relatively as well developed as in the other districts studied.

13. Hospital social service is as well developed in the Bellevue district as in any other in the city.
14. The facilities of the city Department of Health do not vary materially in the different districts. Yorkville is not a conspicuously well-equipped tuberculosis clinic district, nor is its equipment less than that of many others. The Health Department's facilities for the promotion of general health and of infant and school hygiene in the combined districts, compare favorably with those in other parts of the city.
15. The facilities for the prevention and control of tuberculosis are relatively well developed in the Bellevue-Yorkville district.
16. The district presents exceptional opportunities for medical training.
17. Initial inquiry indicates a sympathetic interest on the part of volunteer organizations of the district in the plan for conducting a metropolitan health demonstration there.
18. The Milbank Memorial bath building, erected in 1904 at a cost of \$150,000, and presented to the New York A. I. C. P. by the late Elizabeth Milbank Anderson, is no longer used as a bath building, and might be made available as a headquarters for the demonstration. It is a substantial, fireproof, well lighted and well ventilated structure.
19. Finally, the district containing, as it now does around 42nd Street, the financial heart of New York City presents all of the complicated problems arising from its use by a dual population: one, the residential, mostly night and home population; and, the other, the tremendously large day working population pouring from other parts of the city and the suburbs into its offices, stores and factories.

The solution of their health problems, especially of the working day population, should prove of the greatest assistance to all authorities facing similar conditions which now exist in the heart of all big cities.