

HEALTHY BALTIMORE 2015



2011 Neighborhood Health Profiles

What are they?

The Neighborhood Health Profiles (NHP) is a series of reports produced by the Baltimore City Health Department that look at demographic and major health outcome data for each of 55 Community Statistical Areas (CSAs) in the city of Baltimore. Community Statistical Areas are clusters of neighborhoods developed by the City's Planning Department based on recognizable city neighborhoods. Analysis of these data reinforce that where we live, learn, work and play have a powerful impact on our health.

The 2011 NHPs build upon the 2008 Profiles by focusing attention on the social determinants of health. Each NHP compares the CSA's health outcomes to the city as a whole. The first section provides an overview of demographic information including the total population, age, gender, and race and ethnicity of neighborhood residents. Sections two through six provide data on the social determinants of health, including socioeconomic factors, education, the built and social environment, housing, and the food environment. The seventh section provides data on health outcomes, including data on life expectancy, mortality and causes of death, and maternal and child health outcomes. The eighth section summarizes how each neighborhood compares to the other neighborhoods across all of the indicators. Technical notes in section nine provide details on how the data were collected and tabulated.

Why were they developed?

The 2011 Profiles were developed to support community health improvement efforts, with a particular emphasis on a wide range of health determinants that have not been traditionally discussed as a part of standard public health practice. The 2011 Profiles will allow the Baltimore City Health Department, residents and city officials to not only identify priority health issues, but also to identify underlying conditions that are more immediately actionable. Presentation of the 2011 Profiles will begin a process whereby BCHD senior staff will facilitate presentations with community groups interested in prioritizing and improving health outcomes. Additionally, the NHP will be made available on the BCHD [website](#) so that they may be used by a wide array of community stakeholders.

What can neighborhoods expect from BCHD?

The Health Department will be providing the reports to every community organization registered with the city's Office of Neighborhoods, as well as to elected officials (City Council, Mayor). Health Department staff will meet with stakeholders, loosely grouped by City Council districts, in December and January. During these meetings BCHD staff will share the data, facilitate discussion and answer questions. The first meeting will be followed by a facilitated prioritization process for those community members and groups interested in spearheading a health improvement project around one of the priority areas outlined in [Healthy Baltimore 2015](#), the city's health policy agenda.

How were they developed?

Data in the Profiles represents the most up-to-date information available through the following sources: the Maryland Vital Statistics Administration at the Department of Hygiene and Mental Health; the US Census Bureau; the Baltimore Neighborhood Indicators Alliance (BNIA); the Mayor's Office of Information Technology (MOIT); The Johns Hopkins Center for a Livable Future; Baltimore City Public Schools; and the Maryland Department of the Environment. Data have been combined across recent years to provide more reliable estimates, since estimates for areas as small as Community Statistical Areas can vary widely from year to year. Where appropriate, data are age-adjusted to assure that differences reflected are not due to age-specific issues such as related to the elderly population. Further information about data sources and methodology are available in the Technical Notes section.

What are the limitations of these reports?

Small numbers

Because some neighborhoods have small population sizes in certain age groups, there is the possibility that small differences could produce large differences in rates. We addressed this potential issue by grouping years together and thereby estimating rates using larger numbers. Despite this, there is some uncertainty associated with these estimates due to the small population sizes involved.

Data availability

These reports only contain data on a select set of health and social determinants indicators among many other possible indicators. Some of the indicators that are of interest, but unavailable at the CSA-level include: health behaviors such as smoking, diet, exercise, and healthcare-seeking; prevalence of chronic diseases, disability, drug addiction, and mental illness; air quality measures and stress; and other individual and community-level social determinants such as language ability, health literacy, social support, social capital, and social cohesion.